

# FIRST 5 SACRAMENTO COMMISSION

2750 Gateway Oaks Dr., Suite 330  
Sacramento, CA 95833

## Computer Link:

<https://saccounty-net.zoomgov.com/j/1609583204?pwd=MkdaSEk3WjdmclJVaEZjREMyZENTZz09>

Meeting ID: 160 958 3204

Passcode: 311339

## EVALUATION COMMITTEE

### AGENDA

Friday, April 19, 2024 – 10:00 PM to 12:00 PM



**Members:** Steve Wirtz (Chair), David Gordon (Vice Chair), Olivia Kasirye

**Advisory Committee Member(s):** Robin Blanks, Tony Smith, Jennifer Mohammed (Alt.)

**Staff:** Julie Gallelo, Carmen Garcia-Gomez

**Consultant:** Applied Survey Research



1. Call to order and Roll Call
2. Public Comments on Off-Agenda Items
3. Approve Draft Action Summary of March 18, 2024
4. Staff Update
5. Review and Discuss: Evaluation Plans
  - UC Davis MIND Institute Developmental Playgroups
  - School Districts/Playgroups & Parent Cafes
  - Her Health First/Black Mothers United
  - Safe Sleep Baby
6. Committee Member Comments
  - a. Miscellaneous
  - b. Future Agenda Items/Presentations

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# FIRST 5 SACRAMENTO COMMISSION

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## EVALUATION COMMITTEE

### DRAFT ACTION SUMMARY

Monday, March 18, 2024 – 1:00 PM - 3:00 PM



**Members:** Steve Wirtz (Chair), David Gordon (Vice Chair), Dr. Olivia Kasirye  
**Advisory Committee Member(s):** Robin Blanks, Tony Smith, Jennifer Mohammed (Alt.), Kairis Chiaji (Alt.)  
**Staff Present:** Julie Gallelo, Carmen Garcia-Gomez, Kris Clinton, Elena Enriquez  
**Attendance:** In-person: S. Wirtz, D. Gordon, J. Mohammed, R. Blanks, T. Smith, R. Blanks, K. Chiaji  
**Via Zoom:** Dr. O. Kasirye  
**Consultant:** Applied Survey Research



1. Call to order and Roll Call  
**Action:** Meeting was called to order at 1:00 PM.
2. Public Comments on Off-Agenda Items  
**Action:** None.
3. Approve Draft Action Summary of January 22, 2024  
**Action:** Mohammed/Smith.
4. Evaluation Staff Report  
**Action:** None.

Commission staff provided an update on the following items:

- **Evaluation Staff Update:** Elena Enriquez joined the commission on February 13, 2024.
- **Evaluation Planning:** Staff and ASR have been meeting with contractors to update Results Based Accountability tables and surveys to be implemented in July 2024.

In addition, the evaluation team will update the Family Information Form and Consent forms which will be presented to the Evaluation Committee in May.

- **Child Health, Education, and Care Summit:** First 5 staff will participate at the F5CA sponsored event later this month as part of a panel presenting on RBAs.
- **Special Study:** Crisis Nursery, exploring client return rate and how clients define “better-off” after utilizing crisis nursery services.
- **Referral Portal:**
  - i. Referral Agencies: 100 agencies in the referral portal
  - ii. # of contractors using the Referral Portal: 13 F5 contractors (out of 17)
  - iii. # of clients with at least 1 referral: 928
  - iv. # of referrals sent: 1710 (it may be lower)
  - v. # of referrals with outcome data: 988
    - a. Received services: 488
    - b. Pending: 315
    - c. Parent declined: 90
    - d. Unable to contact family: 70
    - e. On waitlist: 21
    - f. Not eligible: 4

Discussion:

- Staff to send special study proposal to Evaluation Committee.
- Committee members discussed the various outcomes and reasons for a client not being eligible for services and for declining them. Staff explained that it could be for various reasons such as not meeting the eligibility criteria, or the client is already receiving services. When parents decline, it may be that they don’t need the service or are just not interested.
- Staff added that the commission is considering incorporating the questions, “If you received a referral, did you receive services, and what was the outcome?” into the follow-up process or including it in the Family Information Form.

5. General Evaluation Update – Applied Survey Research

**Action:** None.

ASR staff provided a summary of activities for the months of February and March.

6. Approve April Evaluation Committee Meeting

**Action:** Writz/Gordon.

Commission staff requested an additional meeting in April to allow time for this committee to review the evaluation plans and provide input. Staff will follow-up with an email to the committee and post the date on the website to give the public plenty of notice.

7. Approve Updated Evaluation Policy

**Action:** Committee would like to review and approve an updated policy.

Discussion: Staff explained the reason for the policy, an update from the 2016 approved policy. Staff recommends that the updated policy is included in the contracts and that it is widely distributed to data entry staff.

D. Gordon shared concerns regarding having the policy as part of the contract, as it may need to be reviewed on an annual basis and may need to be approved on an annual basis by the committee. Rather include the requirements in the contract.

Chair S. Wirtz asked for clarification on how non-F5 Funded participants are entered and handled in the system. Staff explained how the services are assigned the funding source for the specific service received by the individual/

Chair S. Wirtz asked staff to clarify services to families of children ages over the age of 6, it is not clear. Staff will update the information in the policy.

D. Gordon recommended a data entry guide and a high-level policy.

The Committee recommended the title of the document is also changed to "Data Management Requirements", a policy would not allow the flexibility to make changes or edits without the approval of the committee.

8. Received and Discuss: Evaluation Plans

**Action:** Reviewed and Discussed.

Committee members provided input and discussed in detail.

- WIC
- Help Me Grow

Discussion: Staff explained the evaluation procedures will be included in each contract. The evaluation procedures specify specific requirements for each contractor.

D. Gordon asked what the difference is between the policy shared in the earlier item and the evaluation procedures. Staff explained the policy is a high-level document and the evaluation procedures are specific to each contractors.

R. Blanks asked for clarification regarding the evaluation procedures. Staff explained the uniqueness of the indicators and forms are created for each individual agency depending on the scope and strategies.

S. Biegler provided a perspective from the contractor and recommended that some of the language is changed to include that the RBA was created in partnership with the contractor. Dr. Kasirye expressed a concern regarding making the change to the language as an evaluation should be objective and independent. Partnership should be clarified. S. Wirtz explained that getting the provider's input is critical part of establishing what is the objective measure.

S. Wirtz further explained that the community indicators are the best indicators for program success because they are too distal. He urges us to continue to have a participatory process.

J. Katti explained that the partnership was to ensure we were all in understanding of what was being proposed in the scope.

Dr. Kasirye urged that we have an objective evaluation as to ensure we are not picking and choosing what is being evaluated and reported.

S. Wirtz recommends that the consent is changed; the participants should first consent to allow for the coordination of their care, then allowing the use of data for the participation in the evaluation.

ASR presented the RBA for WIC and HMG.

9. Received and Discuss: Family Strength Builder  
Action: Reviewed and Discussed.

S. Wirtz wants to ensure the Family Strength Builder is as good as the previous tool. There is concern that the tool is not measuring reality, the crises families are experiencing.

ASR explained that the tool was created in partnership with B&B, B&B staff were concerned that the previous tool was not trauma informed. B&B is in the process of building a protocol tool on how to use the tool with families.

S. Wirtz suggested that ASR review literature of other tools and identify a way on how to implement. He feels the tool is not serving our needs.

K. Clinton explained the training B&B staff has participated in to learn how to administer the tool.

10. Committee Members Comments

a. Miscellaneous

a. J. Mohammed expressed her gratitude to WIC for the services she's received.

b. Future Agenda Items/Presentations

Adjourned: 3:29 p.m.

Respectfully submitted,

Carmen Garcia-Gomez, Evaluation Manager  
First 5 Sacramento Commission

Evaluation Committee  
Staff Report  
April 19, 2024

1. **Evaluation Planning:**

- RBAs in process
  - B&B (Empowered Families, RAACD, CalWORKs)
  - Crisis Nursery
  - Preschool Bridging Model
- Consent Form
- Family Information Form

2. **Special Study:** Update on Crisis Nursery special study. Staff has decided to put this work on hold until July.

## Detailed Evaluation Plan: UC Davis MIND Institute Developmental Playgroups

This evaluation plan only includes the objectives and activities relevant to First 5 Evaluation goals and is not necessarily comprehensive of all objectives and activities to be performed by the contracted partner. Activities shown here may be abridged from the description provided in the program scope/contract.

UC Davis MIND Institute		
RBA	Indicator(s)	Data Source/Method
How Much?	<b>Total number and characteristics of playgroups held</b>	<b>Performance Measures – Milestone #TBD</b>
	<b>Overall Participant Reach</b>	<b>Persimmony Service Records</b>
	Total # of children	Service: Playgroup – Parent
	Total # of caregivers	Service: Playgroup - Child
How Well?	<b>Attendance</b>	<b>Persimmony Service Records</b>
	Total/Average number of sessions attended	Count of Playgroup services
	<b>Perceived Helpfulness of Early Intervention</b>	<b>Family Outcomes Survey Section B</b>
	% of participants who found early intervention “very” or “extremely helpful” in helping their child develop and learn	e.g., “How helpful has early intervention been in... giving you useful information about how to help your child learn new skills.”
Better off?	<b>Support Systems/Social Connection</b>	<b>Family Outcomes Survey Section A</b>
	% of participants who “almost” or “completely” have social systems related to their child’s needs	e.g., “We are able to talk with other families who have a child with similar needs.”; “We have friends or family members we can rely on when we need help.”
	<b>Ability to Help Child Develop and Learn/Access the Community</b>	<b>Family Outcomes Survey Section A</b>
	% of participants who are “almost” or “completely” able to involve their child in activities	e.g., “Our child participates in social, recreational, or religious activities that we want.”; “We are able to work on our child’s goals during everyday routines.”

## Detailed Evaluation Plan: School Districts – Playgroups

This evaluation plan only includes the objectives and activities relevant to First 5 Evaluation goals and is not necessarily comprehensive of all objectives and activities to be performed by the contracted partner. Activities shown here may be abridged from the description provided in the program scope/contract.

School Districts – Playgroups (8 of 9 districts)		
RBA	Indicator(s)	Data Source/Method
How Much?	<b>Total Reach</b>	<b>Service Records - Unduplicated Clients</b>
	Number of caregivers served	Service Records - Unduplicated by service
	Number of children served	Service Records - Unduplicated by service
	Children (ages 0-3) (Calculated age, not client type)	Service Records - Unduplicated by service
	Children (ages 4-5) (Calculated age, not client type)	Service Records - Unduplicated by service
	Number of children identified as having a special need	<b>Family Information Form – Child (New Indicator)</b>
How Well?	<b>Attendance</b>	<b>Service Records</b>
	Average # of sessions attended	Calculations from service count/duration
	<b>Parent Satisfaction</b>	<b>Playgroup Follow Up Survey</b>
	Playgroups gave me new ideas of activities to do with my child	Playgroup Follow Up Survey
	I would recommend this playgroup	Playgroup Follow Up Survey
	My language and/or culture was respected at the playgroup.	Playgroup Follow Up Survey
Better Off?	<b>Parent-Child Interactions</b>	<b>FIF/Post-FIF Matched Set</b>
	% reading 10+ minutes at least five days per week (pre/post)	FIF/Post-FIF Matched Set
	% singing songs/telling stories at least five days per week (pre/post)	FIF/Post-FIF Matched Set
	% playing one-on-one with their child at least five days per week (pre/post)	FIF/Post-FIF Matched Set
	<b>Perceived Impact of Playgroups</b>	<b>Playgroup Follow Up Survey</b>
	I have used activities from the playgroup at home with my child(ren).	Playgroup Follow Up Survey
	Playgroups helped me feel connected to other parents.	Playgroup Follow Up Survey
	I have gotten together with other participants outside of the playgroup	Playgroup Follow Up Survey



## Detailed Evaluation Plan: School Districts – Parent Support & Connections

This evaluation plan only includes the objectives and activities relevant to First 5 Evaluation goals and is not necessarily comprehensive of all objectives and activities to be performed by the contracted partner. Activities shown here may be abridged from the description provided in the program scope/contract.

School Districts – Parent Cafés (6 of 9 districts)		
RBA	Indicator(s)	Data Source/Method
How Much?	<b>Total Reach</b>	<b>Service Records – Unduplicated Clients</b>
	Number of caregivers served	Service Record - <b>NEW</b>
How Well?	<b>Attendance</b>	<b>Service Records – Unduplicated Clients/Duplicated Services</b>
	Average # of sessions attended	Service Records - Calculations from service count/duration
	% who attend more than one session	Service Records - Calculations from service count/duration
	% who attend 4+ sessions	Service Records - Calculations from service count/duration
	<b>Parent Leadership Development</b>	<b>Performance Measures Narratives</b>
	Number of parents serving as Table Hosts (unduplicated)	Performance Measure TBD
<b>Participant satisfaction</b>	Participant perceptions of the Café environment	<b>Parent Café Follow Up Survey (to be developed)</b>
		<i>Examples: I felt the café was a safe space to share ...; I met other parents I plan to stay in touch with</i>
Better Off?	<b>Parent connection to their community (%)</b>	<b>FIF/Post-FIF Matched Set</b>
	I know what program to contact in my community when I need help for basic needs (e.g., housing, food, employment).	FIF/Post-FIF Matched Set
	I know what program to contact in my community when I need advice on how to raise my child.	FIF/Post-FIF Matched Set
	<b>Parent Leadership Development</b>	<b>Parent Café Follow Up Survey (to be developed)</b>
	Impact of Parent Café on participant behaviors	<i>Examples: I want to get more involved with my district; As a result of your Café experience(s), what changes have you made for yourself, your children, and/or your family?</i>

## Detailed Evaluation Plan: Her Health First – Black Mothers United (BMU)

This evaluation plan only includes the objectives and activities relevant to First 5 Evaluation goals and is not necessarily comprehensive of all objectives and activities to be performed by the contracted partner. Activities shown here may be abridged from the description provided in the program scope/contract.

RBA	Indicator(s)	Data Source/Method
<b>How Much?</b>	<b>Number and characteristics of participants served (Total Served)</b>	<b>Service Records &amp; Initial Health Assessment</b>
	Total # served, by trimester at program entry	Initial Health Assessment
	Protective Factors at Intake (#/% by indicator)	Initial Health Assessment
	Socioeconomic & Health Risk Factors at Intake (#/% by indicator)	Initial Health Assessment
	Infant Safety Preparedness (Car seat, crib, sleep position)	Initial Health Assessment
	<b>Number and characteristics of participants (by service)</b>	<b>Service Records</b>
	#/% served who received doula support	Service Records - 21b_Doula
	# participants who received transportation support (unduplicated)	Service Records - 14a_Transportation
	# of transportation services/vouchers provided (duplicated)	Service Records - 14a_Transportation
	# participants who attend support groups	Service Records - 19_Support Group
	# participants who attend breastfeeding support groups	Service Records - 22_Breastfeeding Support Group
	# participants who attend a tour of B&B FRC	Service Records - <b>NEW</b>
	<b>Most Common Outgoing Referrals by Referral Category (All Participants)</b>	<b>Service Referral Log / Referral Portal</b>
<b>How Well?</b>	<b>Program Completion (Exited Clients)</b>	<b>Client Exit Form &amp; Service Records</b>
	Average # of visits by trimester of entry	Client Exit Form & Count of 13_Weekly Check-In Service
	#/% who completed minimum number of visits by trimester of entry	Client Exit Form
	#/% who completed postpartum visit with BMU advocate	Client Exit Form
	#/% by exit reason/status (e.g., completed both minimum requirements)	Client Exit Form
	<b>Outgoing Referrals with Follow Up (Exited Clients)</b>	<b>Service Referral Log / Referral Portal + Client Exit Form</b>
	<b>Individualized Care &amp; Support Groups</b>	<b>Service Records</b>
	#/% who created a Pregnancy Care Plan with Coach	Service Records - 11_Client Care Plan
	#/% who created a Postpartum Plan with Coach	Service Records - <b>NEW</b>
	# participants who [receive] Mental Health Tool Kit with Postpartum Specialist	Service Records - <b>NEW</b>
<b>Better Off?</b>	<b>Outgoing Referrals Resulting in “Services Received” (Exited Clients)</b>	<b>Service Referral Log / Referral Portal + Client Exit Form</b>
	<b>Reduction in Risk Factors/Increased Protective Factors (Post-Delivery)</b>	<b>Initial &amp; Post-Delivery Health Assessments (Matched Set)</b>
	<b>Increase in Preparedness for Infant Safety (Post-Delivery)</b>	<b>Initial &amp; Post-Delivery Health Assessments (Matched Set)</b>
	<b>Birth Outcomes (Overall, by Birth Type, and among those receiving doula services)</b>	<b>Pregnancy Outcomes Forms</b>
	<b>Program Completion</b>	<b>Pregnancy Outcomes Forms &amp; Client Exit Form</b>
	% with well-baby visit with pediatrician at program exit	Pregnancy Outcomes - Baby
	Breastfeeding status in hospital (% exclusive, % any)	Pregnancy Outcomes – Baby
	Breastfeeding status at program exit (% exclusive, % any)	Client Exit Form
	<b>Statistical Exploration of Factors Associated with Adverse Birth Outcomes</b>	<b>Regression Analysis on all Relevant Measures</b>
	<b>Participant Infant Mortality - Longitudinal Outcomes of BMU Participants</b>	<b>Public Health Data Request &amp; Client Consent</b>

## Detailed Evaluation Plan: Safe Sleep Baby (SSB)

This evaluation plan only includes the objectives and activities relevant to First 5 Evaluation goals and is not necessarily comprehensive of all objectives and activities to be performed by the contracted partner. Activities shown here may be abridged from the description provided in the program scope/contract.

RBA	Indicator(s)	Data Source/Method
How Much?	<b>Provider Trainings</b>	<b>Service Records</b>
	# community-based service organizations providers trained	Service Records: 6_CBO Training
	# of medical providers trained	Service Records: 7_Hospital Provider Training + 8_Clinic Provider Training
	<b>Parent/Caregiver Trainings</b>	<b>Service Records</b>
	# of parent/caregivers who completed one-hour SSB workshop	Service Records - 17_Safe Sleep Training
	# parents/caregivers who received a crib (unduplicated)	Service Records - 19_Crib
How Well?	# of cribs received by all Cribs4Kids partners) (duplicated)	Service Records - 19_Crib
	<b>Reach to Focus Populations</b>	<b>Service Records &amp; Client Demographics</b>
	# (%) of caregivers trained who are African American	Service Records - 17_Safe Sleep Training + Ethnicity
	# (%) of caregivers in six focal neighborhoods	Service Records - 17_Safe Sleep Training + Zip Code
Better Off?	# (%) of caregivers who received cribs who are African American	Service Records - 19_Crib + Ethnicity
	<b>Knowledge improvements by group (Black/AA and All Others)</b>	<b>SSB Pre &amp; Post Test</b>
	Report indicators with the largest improvements by total population	SSB Pre & Post Test
	<b>Safe sleep practices (#/% intake and follow-up) by group (Black/AA and All Others)</b>	<b>SSB Intake &amp; Exit Surveys</b>
	Always sleeps baby in crib	SSB Intake & Exit Surveys <i>II. Introduction B = Crib (no other options selected)</i>
	Always put to sleep on back	SSB Intake & Exit Surveys <i>II. Sleeping Practices C = Always</i>
	Never put to sleep with blankets, pillows or stuffed animals	SSB Intake & Exit Surveys <i>II. Sleeping Practices D + E = Never</i>
	Always put to sleep alone	SSB Intake & Exit Surveys <i>II. Sleeping Practices A + B = Never</i>
<b>ABCs of Safe Sleep</b>		
Always sleeps baby Alone + on Back + Crib <i>(Alone is defined as no other person)</i>	SSB Exit Surveys <i>II. Introduction B = Crib (no other options selected) + II. Sleeping Practices C = Always + II. Sleeping Practices A + B = Never</i>	