

**Riverside County Children and Families Commission
Special Meeting of the Commission
Monday, December 10, 2007
9:00 a.m. – Special Joint Meeting
Riverside County Children and Families Commission
and Advisory Committee
Business Office
2002 Iowa Avenue, Suite 100
Riverside, California 92507**

**Morning Session
9:00 a.m. – 12:30 p.m.**

I. Call to Order

The special meeting of the Commission was called to order at 9:05 a.m. by Chair Jean Benson

Commissioners Present: Chair Jean Benson, Vice Chair Jerry Wengerd, Connie Beasley, Jay Hoffman, Vicki Oltean (arrived at 9:13 am), Yolanda Carrillo, Eric Frykman (arrived at 9:15 a.m.), Susan Loew (arrived at 9:32)

Commissioners Absent: Supervisor Marion Ashley

Staff Present: Harry Freedman, Executive Director; Stella Smith, Deputy Director; Lynn Stephens, Executive Assistant/Commission Secretary; Elizabeth Watt, Office Assistant III; Johnathan McDannell, Administrator, Outcomes Management; Michelle Burroughs, Administrator, Health & Community Programs; Ginette Lillibridge, Administrator, Fiscal Services; Eugene Furnace, Facilities and Operations Specialists; Laurie Schoenberg, Administrator, Early Care & Education; Cindy Brandon, Administrative Secretary; Arrin Banks, Administrator, Grants & Contracts; Anabel Bolanos, Office Assistant III; Nancy Maich, Program Coordinator.

Advisory Committee Present: Dr. Carla Lidner (arrived at 9:38), Dr. Donna Johnston, Donna Greene (left at 10:30), Lynne Craig, Dr. Shafai

Lucy Furuta, Deputy County Counsel was in attendance as legal counsel for the Commission. (Arrived at 10:13)

II. Policy Workshop

A. Commission Member Comments

No Commissioner comments

B. Executive Director Comments

Mr. Freedman welcomed everyone to the meeting and provided the Commission with a brief overview of the special meeting content which was scheduled to include:

➤ Policy Workshop

Fiscal issues:

1. Allocation Plan
2. 10% Set Aside for Initiative Response
3. Sustainability Fund
4. Definition of Terms in Fund Balance

➤ Role of the Advisory Committee

Mr. Freedman noted that the broad policy issues that surfaced during the previous meeting requiring further discussion in the future include whether Commission wants to devote funds to fund service gaps, system change or some combination, and State direction versus local and other overriding issues that effect future Commission decisions.

C. Policy Planning Workshop

Mr. Freedman outlined that the intent of this follow-up to last month's policy retreat was to allocate specific time to review the five specific items requested by the Commission, and determine the Commissions direction for further action items in the future.

Allocation Plan –Ms. Lillibridge presented clarification of Allocation fund.

The Commission and staff continued in a detailed discussion regarding the specific allocation of funds and expenditures of the 5 year Allocation plan and then moved forward to discuss the current status of expenditures. Mr. Freedman indicated that an Executive Summary and Staff recommendations were prepared for three of the four fiscal issues, with back up information included as well.

1) **Financial Overview –**

Ginette Lillibridge, Fiscal Administrator reviewed the Executive Summary and supporting documentation regarding this issue.

5 Year Plan for First 5 Awards

Staff Recommendation:

When a contract under expends the award amount, the unspent funds will be held and committed to the RFP area of the original award until the next RFP cycle. In the next RFP the unspent amounts from the prior contract awards will be added to the amount available for award as determined in the 5 year spending plan.

Discussion

The Commission recommended acceptance of this recommendation, with the modification that funds will remain in the general goal area rather than the RFP area.

10% Set Aside

Staff Recommendation:

Recognizing the value in the ability to provide for cash match requirements for future initiatives, and taking into consideration that it is unknown how the projected decline in State funds will impact new State initiative funding opportunities, it is recommended that F5R continue to reserve \$10,736,786 over the 5 year period in the annual amounts outlined in the 5 year plan.

Discussion

Clarification was provided that these funds are set aside to respond to new initiatives State initiatives that our local First 5 wants to match. At the end of five years the money would be available for the Commission to decide what to do. Mr. Wengerd stated that he prefers not to set aside these funds. He recommended that the Commission act on each State initiative opportunity at the time they are issued. Dr. Frykman supported the idea of setting aside funds for this purpose, but suggested setting a cap. He suggested discussing other topics at a later time to continue with the agenda. Ms. Carrillo questioned how many agencies were not funded during the last funding cycle, as a result of funding not being available. Mr. Freedman indicated that staff would find out that information. Noting that we are number 58 in the state in the ability to meet child care demand, he indicated that if the state issued a capacity development initiative and we would not be able to respond to this issue if funds are not available to do so. Dr. Hoffman preferred not to set aside and expressed concern about F5R not expending enough dollars. Dr. Frykman suggested setting the

cap to 3 million and put the remaining dollars into programs. Ms. Beasley and Ms. Carrillo supported Dr. Frykman's recommendation and emphasized their concern with F5R not expending these funds. Mr. Wengerd suggested discussing all fiscal issues before making any decisions on each staff recommendation.

Sustainability Fund – Mr. Freedman gave re-cap of the Sustainability Fund. He reminded the Commission that they have modified the Sustainability Fund over time. The Sustainability Fund currently contains \$27,187,995. These funds are to help maintain funding levels as Proposition 10 funds decline, and to maintain funds for agencies for a year if Proposition 10 no longer exists. It was noted that funds provided for Proposition 10 services will continue to be needed. The original Commission action was to take 12 ½% of all Proposition 10 Revenues and put them in an Endowment fund. It was later named Sustainability Fund. The intent was that only the interest would be drawn to assist with funding services as state funds diminish. A few years later the Commission decided to place any surplus funds into a Sustainability Fund. A stop gap measure was to cap the funds at one years operating expense. The Commission's intent was to maintain service funding at 20 million dollars on an ongoing basis regardless of declines in State funding Shortfalls in Prop. 10 revenues would be compensated with the sustainability interest and other revenues generated.

Executive Director posed the following question, "is the Commission still committed to having monies available in the future to compensate for reduced state revenues and if so at what level?"

Staff Recommendation:

- 1) Clarify the definition of excess revenues over expenses to accommodate unexpended funding commitments.
- 2) Review goal and establish desired funding level to be generated by Sustainability Fund revenues.
- 3) Direct staff to provide financial modeling information reflecting anticipated reduction in Proposition 10 revenue, and resulting supplemental funds needed.

Ms. Benson added that the Sustainability Fund would be used if Proposition 10 no longer exists and would provide funded agencies with a year find other funding. Mr. Wengerd agreed with Ms. Benson's thought. Ms. Loew asked if there was a State model projecting the anticipated revenue decline Mr. Freedman reported that First 5 California is in the process of revising their sustainability model. Ms. Beasley asked about status of Cox bill. Mr. Freedman reported the Cox Bill is now part of the Health Reform package and there are no hearings scheduled at this time. He noted that passage of this bill would be an example of a catastrophic

statewide event that is not easy to predict. New initiatives of this nature or legislation that increase tobacco taxes will diminish Proposition 10 revenue at a greater rate.

Ms. Loew asked to discuss the political risk of growing Sustainability Fund. Would risk be reduced if we spent the money and/or would there be less criticism? Mr. Freedman noted that state staff was very concerned about the political aspects a few years ago. At this time it is not as much of an issue. The state response acknowledges that Proposition 10 from the beginning to be a different funding source that the people voted for it for that reason.

Mr. Wengerd asked for information regarding other county Commission sustainability policies. Mr. Freedman advised that staff would provide this information. Ms. Benson noted that our allotment is always high due to having more children born in the county. Mr. Freedman added that most policies are built on a threshold of money that the Commissioners want to accrue by a certain time.

Dr. Hoffman agreed that it would be a good idea to have a years worth of budget put away. He suggested that adjusting the maximum to one year's revenue (adding or letting sit) based on needs.

Ms. Beasley added that a nonprofit will not be able to get other funding even after a year if the money goes away. It may be that the big agencies can. Mr. Wengerd and Ms. Benson added that it is beneficial to give programs a year to find alternate funding or wind down services if necessary. Ms. Benson agreed that there should be a cap on the fund. Mr. Wengerd added that Prop 63 (Mental Health Services Act) and Mental Health state policy is to provide 6 months notice to program when funds are no longer available.

Ms. Carla Lidner, Advisory Committee Chair spoke from the perspective of a grantee and stated that her staff has never felt their job was secure past time of renewal. Staff has always been made aware that every year is subject to either renewal or not. Staff did the job they love and did the job the best they could knowing funds could be cut for any reason. She agreed with Ms. Beasley that in nonprofit services would cease after the 1 year sustained.

Every year that First 5 is not fully funded is one year lost out of childrens' lives who could benefit from the funds. Dr. Linder respects the thoughts of trying keep the programs going, however, any money that could be spent would possibly be making a difference in a child's life during what might be the window of opportunity when the child needs it most.

Mr. Wengerd asked Dr. Lidner how much is too much? She replied that she would take it all but would let the Commission make that decision. Over past five years the average has been a 2% statewide decline.

Riverside County allotment is growing due to increased birth rate. Mr. Freedman added that the issue for previous Commissioners was deciding “dollars for today’s kids versus dollars for tomorrow’s kids.”

Ms. Lynne Craig, Advisory Committee member made a public comment, that F5R should spend the funds available on a yearly basis. Public views of watching the bank balance grow means needs aren’t being met. When there is a lot of money sitting, there are a lot of needs not being met.

Dr. Frykman suggested motion to cap at dollars at the end of this calendar year and have staff come back with a report the funds available for the rest fiscal year and projection for the future. This would respond to previous and current concerns. Ms. Beasley and Ms. Carrillo thought was a good idea. Ms. Benson added it was Commission’s intention to cap at a certain level.

Dr. Frykman made motion for a resolution to be brought back at the next meeting. Ms. Beasley seconded the motion. Ms. Loew stated she was inclined to reduce Sustainability Funds and make more available to services. She suggested reducing the fund to \$15-20 million knowing we have capacity to allow to grow gradually back up to the higher level if Commission wanted to. This would allow funding for additional services one time or ongoing.

Dr. Hoffman requested staff recommendations on scenarios of the implications of reducing the Sustainability Fund to \$15-20 million. How many dollars would be freed up? Would the decision to not add additional dollars to sustainability generate dollars? If so how many? Where might they go?

Ms. Carrillo would like to know how many programs and amount of dollars were not funded that could have been funded during the last funding cycle?

Mr. Wengerd suggested \$27 is too high for the Sustainability Fund. Ms. Carrillo was very concerned in realizing that \$5 million was deposited into the fund last year. It was pointed out that this action was based on the Commission’s current Sustainability Policy.

Eric Frykman withdrew his motion and Ms. Beasley withdrew her second to allow further discussion of the issue.

Definition of Terms in Fund Balance – Executive Summary, Ms. Ginette Lillibridge

Background

At the Commission meeting held on Oct. 22, 2007, fiscal staff presented an overview of the current 5 year spending plan for F5R. There was some

discussion on the definition of Fund Balance and a request was made to define Fund balance and clarify the meaning of terms used in reporting Fund balance.

- The function of reserved fund balance is simply to isolate the portion of fund balance that is not available for the following period's budget, so that the unreserved fund balance can serve as a measure of current available financial resources. The reservation of fund balance is necessary for two reasons.
 - Resources not available for spending
 - Legal restrictions
- Unreserved fund balance may, in turn, be subdivided into designated and undesignated portions. Designations essentially reflect a government's self-imposed limitation of the use of otherwise available current financial resources.

General Discussion on all Financial items

Ms. Loew suggested that the Commission make plans now to decide how to spend dollars instead of setting funds aside.

The question was posed whether to keep three separate funding categories or to combine. Ms. Beasley added that most of the needs fall within the current funding categories. Mr. Wengerd supported making the division year to year instead of setting aside. Ms. Loew added that if F5R could set the stage to have agencies ready to be awarded funds if money materialized it would shorten the gap between when funds are available and when they are awarded.

Ms. Oltean suggested F5R take the initiative to create their own RFP for initiatives. Instead of waiting for the state. Mr. Freedman added any new initiative requires a new match.

Mr. Frykman suggested reviewing staff recommendations. Ms. Benson added that Commission cannot change 5 year plan in mid stream. This was a starting point to see if all agencies could be funded. Commission can revisit reallocating funds when the 5 years is up.

Commission agreed with staff recommendation regarding 5 year allocation plan with one addition: allowing unspent funds to be spent in general goal areas rather than RFP areas. Staff will include financial information in quarterly reports to Commission to assess contract spending and availability of unspent funding. Commission will look at what new programs need funding. Mr. Freedman added that the previous Commission set up two RFP cycles with multiple areas of service. Ms. Carrillo commented that members of the public have indicated that F5R is not flexible. Mr. Freedman asked for clarification regarding a lack of

flexibility. He pointed out that F5R, unlike most funders, provides funds prior to expenditure rather than in arrears. Ms. Benson reminded that agencies that were not previously funded should be revisited to see who can now be funded. Dr. Hoffman made a request that the Commission not lower standards of approving funding. He also recommended that new ideas be explored.

For clarification Mr. Freedman added that in the Health allotment there is a preventative health RFP area that funds several agencies. If at the end of the contract period there is money left the current recommendation states that these funds go in the Health Area in the five year plan. There are three goal areas Health, Child Care, and Early Education. Under these goal areas there are seven goal areas. Areas were reviewed. Dr. Frykman supported Ms. Carrillo's idea of having money remain in "Goal" allotment rather than "RFP" allotment.

Ms. Loew further clarified that the current RFP cycle ends June 2009, with new RFPs anticipated for July 2009-June 2011. Mr. Freedman indicated that this is correct for response funds. Initiative funds were awarded for the period ending June 2011. He also pointed out that the Commission can change the timeline of the RFP cycle.

Mr. Freedman further added contracts are not modified; Agencies are given the full term of their contract to expend their money. F5R gives an advance the first quarter. Payments for subsequent quarters are based on prior expenditure history, as well as anticipated needs for the upcoming quarter. The primary reason for not expending funding is personnel due to vacant positions.

****Commissioners reiterated the suggestion of Advisory Committee visiting outside agencies for input on flexibility ideas. Ms. Craig added being in the first grant process, her main concern is why the money is not being spent. She suggested conducting needs assessments.

Mr. Wengerd approved of the staff recommendation with the modification of goal area rather than RFP area. Ms. Benson asked about flexibility in budgets. Mr. Freedman added currently any contractor can request budget modifications. Dr Hoffman added from a funded agency standpoint he has been tremendously pleased with First 5 staff service and responses to the needs of the agency.

Mr. Johnathan McDannell added a grantee satisfaction survey was sent out. Feed back from the survey will be available at January 2008 meeting for discussion.

Dr. Shafai, Advisory Committee member, added there is a great need for education classes on breastfeeding in the community.

The following Motions were presented:

1.) 5 Year Plan for First 5 Riverside Awards FY 2006/2007-2010/2011

Susan Loew made motion to approve accepting staff recommendation for Five Year allocation Awards funding with the modification that available funds be allocated by goal area rather than RFP categories. Mr. Wengerd seconded the motion. The motion carried on a vote of the Commission members present: [Eight (8) in favor, (Benson, Wengerd, Ashley, Carrillo, Frykman, Hoffman, Oltean, Lowe), one (1) absent (Ashley), zero (0) opposed]. A resolution will be drafted by staff for the next Commission meeting.

2.) 10% Set Aside for Response to State Commission Initiatives

Susan Loew made motion to oppose continuing to set aside 10% for response to State initiatives, and to place current funds in the undesignated, unreserved account. Dr. Jay Hoffman seconded the motion. Following is the vote of the Commission members present: [Seven (7) in favor (Benson, Wengerd, Ashley, Carrillo, Hoffman, Oltean, Lowe), abstain, one (1) (Frykman), one (1) absent (Ashley).

Mr. Freedman requested that the Commission make a decision about allocation of money in the fund before June 30, 2008 (before audit). Dr. Lidner volunteered to help staff figure out the quickest way to disperse funds. She requested that a time limit be set for the decision of the disbursement of funds so children in need can be helped. Staff will bring back a resolution at January 28, 2008 meeting to ratify the Commissioners decision.

Dr. Shafai added that breastfeeding grants that had been previously approved but not funded should be revisited.

(Dr. Frykman and Mr. Wengerd stepped out of meeting at 11:10, Mr. Wengerd returned during 11:15 break)

Commission Break at 11:15, Resumed @ 11:30 am

3.) Sustainability Fund

Susan Lowe moved to approve following motion. Dr. Hoffman seconded the motion. **a.** Suspend any additional contributions to the Sustainability Fund, effective July 1, 2007. The balance of Sustainability Fund at July 1, 2007 was \$26,734,998. **b.** Staff directed to return with scenarios as to the various levels of sustainability models; Following is the vote of the Commission members present: [Seven (7) in favor (Benson, Wengerd,

Beasley, Carrillo, Hoffman, Loew, Oltean) Two (2) absent (Frykman out of the room, Ashley absent)

2.) Role of the Advisory Committee - Ms. Stella Smith, Deputy Director

Ms. Smith reported on draft changes made to the RCCFC Advisory Committee bylaws as recommended by Ms. Benson and Dr. Lidner per consensus at the previous Commission meeting. Original Bylaws and changes were reviewed. Item 8 that is highlighted was noted to be the same as previous bylaws. A resolution will be brought back to the Commission to approve the recommended changes after review and final input by the Advisory Committee members.

Further items were discussed relative to the changes to the Advisory Committee role. Advisory Committee member recommended a protocol for site visits to funded agencies. This is to help the committee take a more active role in advising Commission on agenda items regarding funded agencies.

Advisory Committee Roster was distributed. Clarification was provided regarding Board of Supervisor appointments to the Committee and it was noted that there is one appointment by Chancellor of UCR Riverside.

(Dr. Frykman returned to meeting at 11:40)

Dr. Frykman requested a matrix of advisory expertise.

Commission Adjourned at 11:50 a.m. to the Closed Session

(Dr. Shafai left at 11:50)

III. Closed Session

Commissioners Present: Chair, Jean Benson, Vice Chair, Jerry Wengerd, Connie Beasley, Vicki Oltean, Yolanda Carrillo, Eric Frykman, Susan Loew, Jay Hoffman.

Lucy Furuta, Deputy County Counsel present.

With respect to every item of business to be discussed in closed session pursuant to Section 54957:

PUBLIC EMPLOYEE PERFORMANCE EVALUATION
Title: Executive Director

The closed session adjourned at 1:40 p.m.

**Afternoon Session
1:40 p.m.**

IV. Call To Order

The regular business portion of the meeting was called to order at 1:40 p.m. by Chair Jean Benson.

Commissioners Present: Chair Jean Benson, Vice Chair Jerry Wengerd, Connie Beasley, Vicki Oltean, Yolanda Carrillo, Eric Frykman (arrived at 1:43), Susan Loew, Jay Hoffman Marion Ashley (arrived at 1:55)

Commissioners Absent: none

Advisory Committee Present: Dr. Carla Lidner, Dr. Donna Johnston, Lynne Craig

Staff Present: Harry Freedman, Executive Director; Stella Smith, Deputy Director; Lynn Stephens, Executive Assistant/Commission Secretary; Elizabeth Watt, Office Assistant III; Johnathan McDannell, Administrator, Outcomes Management; Michelle Burroughs, Administrator, Health & Community Programs; Ginette Lillibridge, Administrator, Fiscal Services; Eugene Furnace, Facilities and Operations Specialists; Laurie Schoenberg, Administrator, Early Care & Education; Cindy Brandon, Administrative Secretary; Arrin Banks, Administrator, Grants & Contracts; Anabel Bolanos, Office Assistant III; Nancy Maich, Program Coordinator.

Facilitator: Dr. Todd Sosna

**III. Closed Session – Public Employee Performance Evaluation
Title: Executive Director**

Ms. Benson announced the Commission met in closed session to evaluate the job performance of the Executive Director, Harry Freedman. The decision of the Commission is to grant Mr. Freedman an increase in salary, to bring him to step 11 of his current salary range at \$128,400.27 annually.

Commissioner Comments:

Ms. Beasley reported on the Grand Opening at the new Cypress Springs Apartments complex. The Carolyn E. Wylie Center will have an open house for their new child care center that will be located in the new apartment complex at a time to be announced in the near future.

V. Approval of Advisory Committee 2007 Meeting Minutes was tabled due to lack of quorum.

Dr. Lidner, Chair reported the Advisory Committee will be visiting more agencies. Ms. Craig gave report on low income seniors center and the Grandparents Raising Grandchildren program. She provided materials on the Riverside County Office on Aging programs.

VI. Approval of October 22, 2007 and October 16, 2007 Commission Meeting Minutes

Susan Loew moved to approve the minutes from the October 22, 2007 and October 16, 2007 meeting of the Commission. Jean Benson seconded the motion. Following is the vote of the Commission members present: [Nine (9) in favor (Benson, Wengerd, Ashley, Beasley Carrillo, Frykman, Hoffman, Loew, Oltean), zero (0) absent, zero (0) opposed]

Draft of 2008 Commission Schedule of Meetings

Susan Loew moved to approve the draft of the 2008 Commission schedule of meetings Jean Benson seconded the motion. Following is the vote of the Commission members present: [Nine (9) in favor (Benson, Wengerd, Ashley, Beasley Carrillo, Frykman, Hoffman, Loew, Oltean,), zero (0) absent), zero (0) opposed]

VII. Mental Health Early Intervention Initiative Recommendation (taken out of original agenda order schedule of consultant, Dr. Sosna)

A. Mental Health Early Intervention Initiative Recommendation – Dr. Todd Sosna

Michelle Burroughs provided an update on Mental Health Initiative response. On November 5, 2007, a Mental Health overview meeting was conducted for all interested providers. An outline of the eight interested agencies was reviewed. Staff recommended that the Commission RFP to agencies who were represented at the meeting and expressed interest in applying.

Dr. Todd Sosna highlighted characteristics of an optimal RFP

Target high-risk communities—The Commission is cognizant of the limitations of the funding allocated relative to the scope of the initiative's goals and the level of need evident throughout Riverside County. Consequently, a successful proposal will target one or more high-risk communities.

Given the central role of schools in child development, it is recommended that *communities* for the purposes of the mental health initiative correspond to the geographic boundaries of a local educational agency (LEA), for example an individual elementary or secondary school, a group of elementary or secondary schools, or an elementary or secondary school district.

It is also recommended that high-risk be defined as communities in which families are disproportionately impacted by poverty, inadequate parenting or maltreatment, domestic violence, or parental mental illness or substance abuse. Community risk level should be quantified by reliable indicators of one or more risk factors, for example poverty may be quantified by free and reduced lunch eligibility levels or Cal-WORKs recipient levels, and child maltreatment may be quantified by child welfare mal-treatment reporting rates or foster care levels.

The number of high-risk communities to be targeted will depend on the size of the communities and the level of need; however, in all cases the financial resources available to the project need to correspond to the level of need across the targeted communities such that all of the initiative's goals can realistically be achieved.

Inclusion of Evidence-Based Practices—The Commission expects the mental health initiative to significantly improve social competence and prevent disruptive disorders. As a consequence, a successful proposal will include evidence-based practices that have the highest levels of demonstrated effectiveness. Levels of effectiveness should be based on the application of research methodology as articulated in nationally recognized effectiveness rating criteria¹. Numerous relevant evidence-based practices with demonstrated effectiveness are currently available including primary prevention programs (targeting parents and teachers/childcare providers), early intervention programs (targeting parents, teachers/childcare workers, and social service/medical providers) and treatment programs (targeting parents and children), and as a consequence, must be included in the continuum of proposed interventions.

Provide a full continuum of primary prevention, screening and early intervention, and treatment services—The Commission is interested supporting a mental health initiative that will significantly promote social competence by preventing and treating disruptive behavior disorders. A successful proposal will include a full continuum of primary prevention, screening and early intervention, and treatment services as follows:

A primary prevention strategy needs to be incorporated in the continuum of care. The primary prevention strategy needs to involve either a multimedia educational campaign targeting parents/caregivers, or a

preschool/childcare curriculum for teachers and children. Specifically, the continuum of care must include either Triple P level 1, Incredible Years Child Training Programs or another program with comparable levels of demonstrated effectiveness.

Early identification strategies need to be incorporated in the continuum of care. These strategies must include more than one approach to screening and early identification specific to a variety of settings, and must include the capacity to manage referrals directly from parents/caregivers. For example, one screening tool may be used in a Head Start program, while another tool is used in a pediatric/family medical center. And a marketing campaign that reduces stigma and cultural barriers and encourages parents to independently seek assistance for their children may be used.

An early intervention strategy needs to be incorporated in the continuum of care. This strategy may, and likely should, include more than one type of intervention, depending on setting. For example, brief assistance with parenting provided by diverse practitioners in multiple settings, or training for preschool teachers and childcare providers. Specifically, the continuum of care must include Incredible Years Parenting or Teacher Classroom Management Programs, Triple P levels 2 and 3, or another program with comparable levels of demonstrated effectiveness.

At least two treatment strategies need to be incorporated in the continuum of care. For example, parenting skills training in a group, individual or parent-child dyadic format, or child skills interventions in a group or individual format. Specifically, the continuum of care must include Parent-Child Interaction Therapy, Incredible Years Parenting or Child Treatment Programs, Triple P level 4, or another program with comparable levels of demonstrated effectiveness.

Interagency collaboration—The Commission expects that the scope of the mental health initiative’s programmatic requirements and goals will require a collaborative of providers working in concert to be successful.

A collaborative will likely need to include the following agencies:

- Community-based mental health organization(s), for example County Mental Health or private providers, responsible for, among other things, treatment interventions.
- School district(s), responsible for, among other things, supporting primary prevention activities.
- Preschool/childcare provider(s), for example Head Start/Early Head Start, State preschool, private childcare centers, responsible for, among other things, supporting primary prevention activities targeting parents and/or teachers, screening and early intervention.

A collaborative may also want to include the following agencies:

- Health clinics, medical groups or physician's offices, responsible for, among other things, supporting primary prevention activities targeting parents, screening and early intervention.
- County child welfare, responsible for, among other things, supporting screening and early intervention.
- Other county agencies, for example, Cal-WORKs, probation, or County Mental Health (adult programs), responsible for, among other things, supporting screening and early intervention.

It is assumed that there will be a strong correspondence between the mental health initiative goals and the mission of the individual agencies that form a proposed collaborative such that each agency will bring expertise and resources to the project independent of and in addition to funding from the Commission.

Provisions to Maximize and Align Resources—The Commission recognizes that it is one of number of community-based organizations committed to promoting social-emotional competence and preventing/treating disruptive behavior disorders. As a consequence, a successful proposal will align areas of common responsibility and corresponding resources, across the collaborating agencies, such that state and federal funding is maximized, whenever relevant and feasible, and the Commission's funding is reserved for those activities that cannot otherwise be funded.

At a minimum, community-based mental health organizations will need to be Medi-Cal Early Periodic Screening Diagnosis and Treatment (EPSDT) providers, and participating Head Start/Early Head Start centers, childcare providers, and schools would be expected to align their existing screening and early intervention activities.

Outcome Evaluation—The Commission expects the mental health initiative to result in observable, quantifiable improvement in social competence and corresponding reduction in disruptive behavior disorders. As a consequence, a successful proposal will include strategies for demonstrating program outcomes.

At a minimum, information on basic demographics and services provided must be routinely collected on all recipients of screening, early intervention and treatment activities.

At a minimum, one or more measures of child behavior and parenting success must be routinely collected prior to and following treatment activities.

Collection of information on child behavior and welfare, for example child maltreatment reports, or rates of expulsion from preschool/child care, is encouraged.

A willingness to participate in other evaluation activities, as specified by the Commission, is required.

(*As noted in Characteristics of an Ideal Proposal)

Mr. Freedman thanked Michelle Burroughs and Dr. Sosna for their hard work on this initiative. Staff suggested July 1, 2008 for implementation date. Staff also, suggested that an RFP be developed based on presented concepts. An RFP will go to providers who expressed interest. A four to six week response will be requested. A review panel will be developed and recommendations for awards will be presented to Commissioners. This RFP is in the \$2.8 million range per year with a 5% increase annually.

The Commission supported the staff recommendations outlined above.

VIII. Resolution Report (Action) – Stella Smith

Ms. Smith provided the Commissioners with a brief background and detail of each of the resolution contained in the resolution report. A copy of the entire report is on file at the Commission business office.

Following is a record of action(s) taken by Commission on Resolution 07-50

Resolution 07-50 is presented for approval. Riverside County Children and Families Commission members have the option of excluding discussion items from a master motion.

07-50: Approving an Increase in the Spending Authority of the Executive Director for Riverside Personnel Services, Inc. for Temporary Personnel Services to the Commission

Recommended Action: That the Commission approve an Increase in the Spending Authority of the Executive Director for Riverside Personnel Services, Inc. for Temporary Personnel Services to the Commission.

Eric Frykman moved to approve Resolution 07-50. Susan Loew seconded the motion. Following is the vote of the Commission members present: all (9) in favor [Nine (9) in favor (Benson, Wengerd, Ashley, Beasley Carrillo, Frykman, Hoffman, Loew, Oltean,), zero (0) absent), zero (0) opposed]

IX. Presentations

A. First 5 Riverside Revised State Annual Report for Fiscal Year 2006/2007

An overview of the Revised Annual Report (a copy of the complete report is on file as part of the Official Meeting Minutes) was presented by Johnathan McDannell, Administrator, Outcomes Management.

1. Public Hearing on Revised Annual Report for the Riverside County Children and Families Commission for Fiscal Year 2006/2007

Commission Chair Benson opened the public hearing concerning the revised report on the Annual Report of the Commission for fiscal year 2006/2007. There being no public comment, Commission Chair Benson closed the public hearing.

2. Resolution 07-51: Adoption of the Revised Annual Report of the Riverside County Children and Families Commission for Fiscal Year 2006/2007.

Results in nine programs changed. Narrative and profile figures were changed. Playground initiative was added. One variance on clinical reporting was corrected. It was noted that 6 months of reporting was on the previous database system. Due to the stability issues of the previous system, calculations for this report were complicated. Clarification was provided regarding the format of the Annual Report. In state annual report results are cumulative and not by agency. The change in numbers was not enough to generate a significant change.

Recommended Action: That the Commission approve Adoption of the Revised Annual Report of the Riverside County Children and Families Commission for Fiscal Year 2006/2007.

(Carla Lidner out at 2:24 pm, returned at 2:35)

Dr. Hoffman moved to approve Resolution 07-51. Vicki Oltean seconded the motion. Following is the vote of the Commission members present: [Nine (9) in favor (Benson, Wengerd, Ashley, Beasley Carrillo, Frykman, Hoffman, Loew, Oltean), zero (0) absent, zero (0) opposed]

Mr. Freedman acknowledged evaluation staff efforts (Johnathan McDannell and Piera Causley) in putting together the report and making the necessary revisions.

X. Discussion/Action Items (continued from VII.)

• ***Commission Member Term Expirations***

Commissioners Chair, Jean Benson, Connie Beasley and Yolanda Carrillo's terms expire January 22, 2008. All agreed to serve another three year term. Staff will submit a Form 11 to the Board of Supervisors to reappoint them for another term.

- **Evaluation Report**

Johnathan McDannell provided an overview of the Target Report Data collected June 30, 2007. He discussed agencies who did not meet targets and provided clarification of agencies who met versus those who are progressing toward meeting (emerging).

Ms. Loew suggested incorporating agency spending in report. Staff is requested to provide spending report on current system until new reports are ready in July.

XI. Information Items

A. Executive Director Report – Harry Freedman

Mr. Freedman highlighted several items from his Executive Director report.

Supervisor Ashley reported that the Cox Bill may be heard as part of the Special Session's Health Reform package.

(A copy of Mr. Freedman's complete report is on file at the Commission business office).

B. October and November Financial Statements

The draft October and November financial statements were distributed for review and a copy of same is on file at the Commission business office.

There were no questions or comments on the Financial Statement Report

(Dr. Hoffman left meeting at 2:55 pm)

C. October and November Investment Report

The October and November investment report was distributed for review and a copy of the same is on file at the Commission business office. Not reinvesting, letting funds remain in the county pool due to the low return on investment.

There were no questions or comments on the Financial Statement Report

D. School Readiness Annual Report

There were no questions or comments on the School Readiness Annual Report.

XII. Public Comment

No Public Comment

Dr. Lidner asked how costs of screening in Mental Health Initiative would be evaluated. Mr. Freedman indicated that there are multiple avenues for screening as described by Dr. Sosna, and part of the role of the Application Readers is to evaluate costs. Dr. Lidner requested that a member of the Mental Health Committee be involved as staff drafts the RFP. Mr. Freedman indicated this is a good idea, as long as the representative has no conflicts with potential responses to the RFP

XIII. Future Agenda Items

XIV. Advisory Committee Adjournment

Adjourned at 3:08 p.m. to the meeting scheduled for Wednesday, January 16, 2008 at 1:30 p.m.

Riverside County Children and Families Commission Office
2002 Iowa Avenue, Suite 100, Conference Room A
Riverside, California 92507

XV. Commission Adjournment

Adjourned at 3:08 p.m. to the Meeting scheduled for Monday, January 28, 2008 at 1:30 p.m.

Riverside County Children and Families Commission Office
2002 Iowa Avenue, Suite 100, Conference Room A
Riverside, California 92507