



Children & Families  
Commission of Orange County

**Strategic Plan Update**

Presented to the Children & Families Commission of Orange County  
July 6, 2005

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## **I. Introduction**

### **A. Proposition 10**

The Children and Families Commission of Orange County was created as a result of Proposition 10, the California Children and Families Act of 1998. The proposition added a 50-cent sales tax on tobacco products sold in California and requires that funds raised be used to support education, health and child development programs for children from the prenatal stage through age five. Funds collected statewide are allocated to local county commissions based on each county's birth rate.

### **B. Children and Families Commission of Orange County**

Before Orange County could receive Proposition 10 tobacco tax revenues, the Board of Supervisors had to establish a County Children and Families Commission. The Orange County Board of Supervisors adopted ordinance #98-18 on December 15, 1998 establishing the Children and Families Commission of Orange County Trust Fund and Commission. The Children and Families Commission of Orange County took their oath of office and conducted their first meeting on September 15, 1999.

### **C. First Strategic Plan Adoption**

The Commission approved a process and budget for the development of the original Strategic Plan on November 3, 1999. A public hearing on the proposed Strategic Plan was held on February 2, 2000 and the first Strategic Plan was adopted by the Children and Families Commission of Orange County on February 16, 2000. Deemed an adequate and complete Strategic Plan for the support and improvement of early childhood education within the county, the Strategic Plan was submitted to the California Children and Families Commission in February 2000. Annually from 2001 through 2005, the Children and Families Commission of Orange County reviewed and re-approved the first Strategic Plan as current and consistent with their goals and objectives and those of the California Children and Families Act of 1998.

### **D. Annual Strategic Plan Review**

The Plan has been annually reviewed by the Commission pursuant to the Proposition 10 initiative requirements. This Strategic Plan is consistent with and in furtherance of the purposes of the California Children and Families Act of 1998 and subsequent amendments. It is in compliance with Act-related sections of the California Health and Safety Code, amended as of January 1, 2004.

## II. Strategic Plan Overview

### A. Purpose

The Children and Families Commission of Orange County Strategic Plan provides an overall framework guiding investment and resource decisions that the Commission will make over the next three- to -five years. It has been developed consistent with the Proposition 10 Strategic Plan Guidelines and includes the following mandatory components:

- A description of the goals and objectives proposed to be attained;
- A description of the programs, services, and projects proposed to be provided, sponsored or facilitated;
- A description of how measurable outcomes of such programs, services and projects will be determined by the County Commission using appropriate reliable indicators;
- A description of how programs, services and projects relating to early childhood development within the county will be integrated in a consumer-oriented and easily accessible system.

*Source: California Children and Families Commission Strategic Plan Guidelines (September 1999)*

### B. Link to Other Planning Efforts

While the Strategic Plan is the overall guiding document, several related programs and documents support the implementation of the goals and strategies identified in the Strategic Plan. Each of these documents is identified below and briefly described in terms of its connection to the Strategic Plan.

#### 1. Community Outreach and Education Programs

The Commission engages the community through partnerships with both funded programs and media to both provide input on key areas of childhood development and disseminate child development information to the public. The Commission also develops program-specific engagement strategies to effectively incorporate community input in the design and development of programs.

#### 2. Program Plans

Prior to launching major initiatives, the Commission prepares a program plan specifically identifying how the program will be implemented, identifying outcomes and indicators of success, and building on best practices. Program plans are developed for the Commission's major initiatives.

3. Ten Year Financial Planning Document

Recognizing that the Commission is operating within an environment of declining revenue, a Ten Year Financial Planning document was initially developed by the Commission in 2001 to develop funding strategies to maximize the funding potential of Proposition 10 revenues, identify leveraging strategies and promote program sustainability. The ten year financial projections are annually reviewed by the Commission prior to any budgetary action to ensure that annual budget decisions are considered with a long-term perspective.

4. Annual Budget and Business Plan

The Commission annually adopts a budget which provides budgetary authority and appropriations. The Commission follows a conservative approach for revenue and interest earning projections. The budget provides general appropriation authority; specific contract actions require separate, subsequent approval by the Commission.

In conjunction with the annual budget, the Commission annually reviews a business plan of management and organizational strategies governing the operations of the Commission. The business plan identifies staffing levels, organizational structure, major initiatives planned for the year, and implementing actions.

5. Performance Outcome Measurement System (POMS)

The Performance Outcome Measurement System (POMS) is designed to measure the results of the Commission funded programs and the overall impact on children and families that Proposition 10 funding is making in Orange County. Annually, the Commission approves a work plan of evaluation activities, considering prior year progress. POMS includes the investment the Commission has made in a program and client based Outcomes Collection, Evaluation, and Reporting System (OCERS) and program-specific evaluation reports. *(See Part IV, Section B: Performance Outcome Measurement System: The Evaluation Framework).*

The graphic on the following page displays the linkage of these planning efforts.

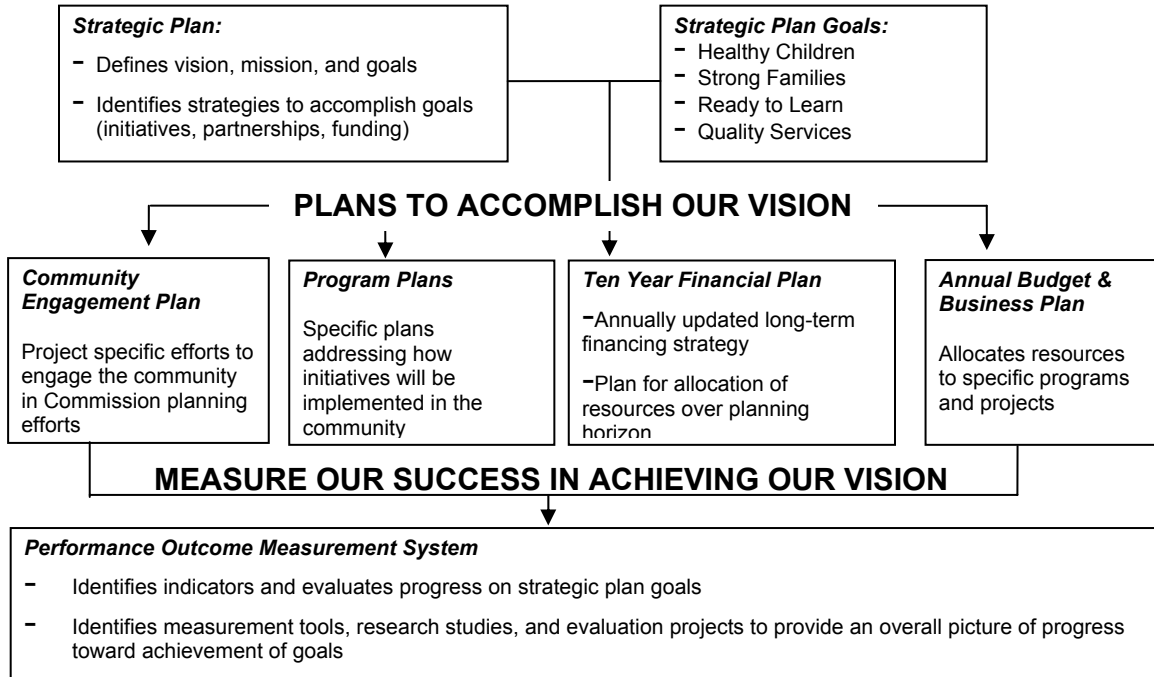
## Children and Families Commission of Orange County Strategic Planning Process

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### VISION

**All Children are Healthy and Ready to Succeed**



### **C. Reliance on Community Data**

The Commission supports the development of reliable community indicators and data both to provide comparison with program evaluation data and to discern the effects of Commission funded initiatives at the community level. Community reports are also critical input to the Commission in identifying areas of need and priorities for its investment in children and families in Orange County.

Following are examples of on-going, community-wide measurement efforts sponsored by the Commission:

1. [Annual Report on the Conditions of Children in Orange County](#)

This detailed compilation of key indicators of the wellbeing of children is sponsored by the Commission and the County of Orange Children's Services Coordination Committee. [www.ochealthinfo.com/cscc/report](http://www.ochealthinfo.com/cscc/report)

2. [Orange County Health Needs Assessment](#)

This community survey conducted every three years asks a wide range of questions relating to health and wellbeing and provides results in a variety of subsets such as age, geography and race/ethnicity. It has comparable results to similar statewide and national surveys. [www.ochna.org](http://www.ochna.org)

3. [Orange County Community Indicators Project](#)

This annual report provides a comprehensive set of indicators that measure the quality of life in Orange County. The indicators provide comparison with neighboring and "peer" regions (areas with similar demographics and economies) and track trends over time. [www.oc.ca.gov/ceocommunity.asp](http://www.oc.ca.gov/ceocommunity.asp)

### III. Vision, Mission and Goals

The following section describes the Commission’s vision, mission and goals for Orange County children. For each of the four strategic goal areas, programmatic initiatives critical to the achievement of the Commission’s goals are presented. Also discussed are common strategies used across all goal areas and an overall framework, *Pathways to School Readiness*, which charts a course for the Commission to follow in achieving its goals. This section also includes discussion of the communications strategy, Grow Up Great, used to convey to the public the Commission’s vision, mission and goals. This is followed by a presentation of the Commission’s guiding principles for all funding decisions. Finally, this section details the specific objectives the Commission will pursue to achieve its vision and goals and how these programs and services relating to early childhood development within the county will be integrated into a consumer-oriented and easily accessible system.

#### A. Vision

Orange County’s young children need safe, supportive and nurturing environments to be healthy and ready to succeed in life. The Commission’s vision statement reflects its unique position within Orange County to better the lives of young children and their families.

All children are healthy and ready to succeed

#### B. Mission

The Commission’s mission statement is a broad, comprehensive statement of its purpose and function in the community. The mission enables the Commission to act as an advocate for all young children in Orange County, serving roles as convener, planner, and program sponsor.

Provide leadership, funding and support for programs that achieve the vision that all children are healthy and ready to succeed when they enter school.

#### C. Goals

##### 1. Goals and Initiatives

The following four goals further refine and delineate the Commission’s desired results over the coming years. They provide the framework for the initiatives discussed under each goal. Many of the initiatives summarized are Commission directed initiatives, developed by the Commission to fill gaps in the existing service landscape.

### ***Healthy Children***

Ensure the overall physical, social, emotional and intellectual health of children during the prenatal period through age five.

Within this goal area, the Commission considers the following programmatic initiatives in reaching the goal:

**a. Early Intervention**

Each child should have a healthcare home where they receive regular, quality, preventative care and the foundation needed for optimal development. Early detection of health conditions or developmental delays is achieved through partnerships with health care and service providers that identify children at-risk and link caregivers to a network of family support services. Health access strategies that encourage maintenance of health coverage and promote appropriate utilization of pediatric care are essential to this strategic goal area. The Commission furthers its goals in these ways by educating parents of newborns about early childhood development.

**b. Child Health and Safety**

Through partnerships among physicians, public health professionals, and service providers, the Commission provides leadership to reduce deaths and disabilities due to preventable causes. Examples include: injury prevention and safety training; respite care, counseling, and therapy for families with disabled children; improved child passenger safety; and integrated approaches to prevent intentional and unintentional injuries.

**c. Fitness and Nutrition**

Programs that implement strategies specific to the prevention of obesity in children zero through five can improve children's long term health and well being.

**d. Dental Health**

Physical health includes dental health and the Commission plays a role in the reduction of oral health disease in children through support of education, prevention, access, and treatment services.

**e. Pediatric Primary and Specialty Care**

The Commission fosters a strong children's health care delivery system in Orange County. Programs targeted at assessing and treating conditions of increasing prevalence, such as asthma and autism, are an important component of the overall system of pediatric care.

**f. Health Access**

A child's health is heavily influenced by access to health care. Access is improved through the direct provision of health care to access and utilization of health access and coverage programs, and providing health education, in-home support services, parenting classes, and other services for pregnant women and families with young children. It is important to note that health access is emphasized in all programs related to the Healthy Children goal area.

**g. School Nurses**

School nurses provide services including general health and development screenings and ensure proper immunizations prior to a child's first day of school. They also can provide parent education to increase awareness about child health issues, access to health care and other available community resources. The Commission views funding and supporting school-based nurses for young children an essential element of this goal area.

***Strong Families***

Support and strengthen families in ways that promote good parenting for the optimal development of young children.
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Within this goal area, the Commission considers the following programmatic initiatives in reaching the goal:

**a. Community Partnerships**

The Commission leverages existing community resources by working with community organizations to use facilities during non-peak, school hours to offer child health and development programs to young children and their families.

**b. Community Outreach and Education**

The Commission partners with the media to provide child development information through the *Help Me Grow* community outreach programs to support and strengthen families.

**c. Homeless Prevention**

Children learn and succeed better when they have a strong, stable, nurturing environment – in other words, a home. The Commission works with local agencies to fund transitional shelters and support services for families with young children.

### ***Ready to Learn***

Provide early care and education opportunities for young children to maximize their potential to succeed in school.

Within this goal area, the Commission considers the following programmatic initiatives in reaching the goal:

**a. Early Literacy and Language Development**

Early literacy and language development are essential to success in school. Intensive in-home language development programs and the development of best practices and guidelines for early literacy are among Commission supported efforts to improve young children's literacy and language development.

**b. School Readiness**

Children should enter kindergarten with the skills and support they need to succeed. School readiness programs take a "whole child" approach by focusing on the emotional, physical and social well-being of each child. Both the locally sponsored, and State and county partnership funded school readiness programs encourage system change and build community capacity to prepare young children in their transition to kindergarten.

*Local School Readiness Program*

School readiness coordinators improve the transition to kindergarten by educating the community on best practices for early care; informing and training parents to prepare their children for entering school; promoting community collaboration; and coordinating the distribution of resource information and materials between the districts and local community agencies.

*State and County School Readiness Partnership*

The State program works to improve success among children at low-performing schools. Coordinators focus their services on the five key dimensions of school readiness: early care and education; parenting and family support; health and social services, school capacity and readiness for children; and program infrastructure and evaluation.

## **Quality Services**

Promote an effective delivery system for child and family services.

Within this goal area, the Commission considers the following programmatic initiatives in reaching the goal:

**a. Leveraging Strategies and National/State Foundation Programs**

The Commission seeks to leverage existing programs to serve the needs of young children. For example, Commission funded AmeriCorps/VISTA members serve with key community service organizations supporting programs for children and families.

**b. Commission Operations/Infrastructure**

Infrastructure includes expenditure requirements for general operations including staffing, professional and technical services, public outreach and communication, and fiscal and program oversight. The Commission operates with a small core staff and uses outside contractors to support the programs and grants as needed. Professional and technical services are contracted out for services including: legal counsel, auditors, financial consultants and other professional support. Public outreach and communication includes promoting early child development and strategies in the community.

**c. Technical Assistance**

The Commission provides training, technical assistance and administrative support to funded programs to ensure effective, efficient and quality services.

**d. Capacity Building Grants**

The Commission competitive grants are for existing or new organizations to deploy new services to children through age five and their families.

**e. Performance Outcomes Measurement System (POMS)**

All Commission programs are part of an integrated performance evaluation process that makes outcomes measurement part of the program operations. These programs are discussed in detail in Section IV, Part B.

**f. Program Grants**

The Commission allocates funding for a wide range of programs including local community groups and service organizations, social services partners, school districts, government organizations, faith-based groups, local hospitals and health clinics, family shelters, and neighborhood organizations to ensure that young children in Orange County are healthy and ready to succeed.

2. Common Strategies Across Goals

Across all four goals, the Commission employs the following common strategies:

a. **Outcomes Based Funding**

Programs are funded based on outcomes and results are tracked.

b. **Unique Partnerships**

The Commission has stimulated new partnerships to promote and address the needs of young children.

c. **Creating Multiple Ways to Access Care**

Programs include an access to care element among multiple service platforms such as schools, family resource centers, and community agencies.

d. **Family-based Services**

Services are geared at enriching the child within the context of the whole family, incorporating parents, other caregivers, and siblings in the service design.

e. **Prevention and Early Intervention**

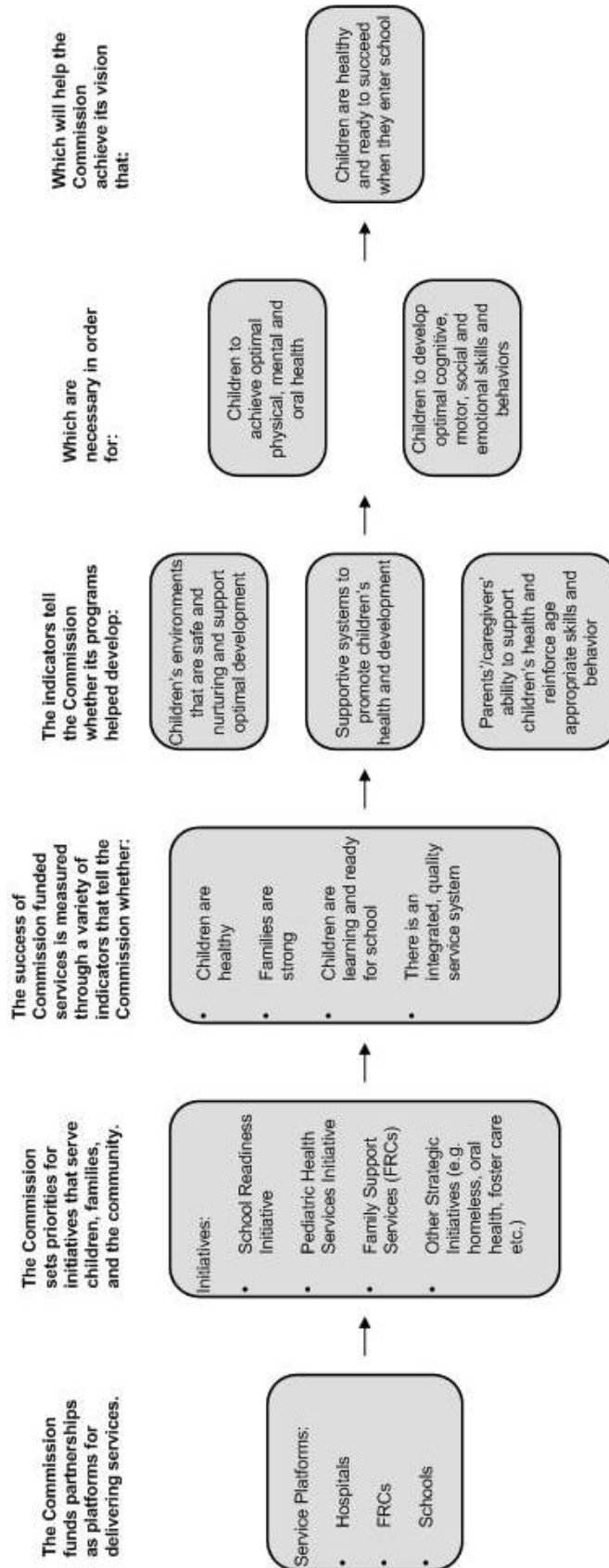
Programs emphasize addressing early identification and prevention.

3. Pathways to School Readiness: Measuring Progress

*Pathways to School Readiness* provides a clear framework for the Commission to follow to achieve its vision, mission and goals. *Pathways to School Readiness* begins by identifying the service platforms that will carry out Commission priorities and specific initiatives. It then takes the initiatives through implementation and evaluation of outcomes as a means of assessing success toward achieving the Commission's vision.

The graphic on the following page displays the *Pathways to School Readiness*.

## Pathways to School Readiness: Measuring Progress



4. Community Outreach & Communication

The Commission uses various outlets to communicate its vision and goals to the public, including partnerships with local media outlets, participation in community events, and the annual Orange County Fair.

**D. Guiding Principles**

In all of its operations the Commission is committed to the following core values and principles which guide its investments in early childhood health and development.

1. Promote and fund high quality services modeled after research-based, proven strategies which have planned, publicly accountable outcomes.
2. Maximize and leverage the existing system of public and private agencies concerned with young children and families and promote integration of services through local, convenient and family-friendly access points.
3. Create family-based, culturally and linguistically appropriate services which enrich the child within the context of the whole family by incorporating parents, other caregivers, and siblings in the service design.
4. Foster sustainability by building community capacity to support families and focusing on policy-level issues and decisions.
5. Engage in an open decision making process that makes funding decisions based on: Commission vision, goals, and outcomes; compelling community need, and positive data supported outcomes.

## IV. Implementing Strategies

Implementation of the Strategic Plan requires a unique combination of innovative strategies. Strategies to guide specific program implementation will be identified and developed as part of program plans. The following are six implementing programs for achieving the Strategic Plan goals and objectives.

### A. Funding

The Proposition 10 initiative specifies that revenue allocations from the tobacco tax “shall be used only to supplement existing levels of service and not fund existing levels of service. No moneys in the California Children and Families Trust Fund shall be used to supplant state or local General Fund money for any purpose.”

The Ten Year Financial Planning document guides the Commission’s long-term funding strategies and included plans to develop a sustainability fund to allow for continued program funding, despite declining revenues.

Four strategies are authorized by this Strategic Plan to direct Commission funding for programs benefiting the health and early education of young children:

#### 1. Commission Directed Initiatives

Commission directed initiatives reflect programs that community based and public agencies in partnership with the Commission use to design and implement new countywide programs to improve the outcomes for children 0-5 and their families. These may include capital projects, statewide initiatives, health and safety programs, school readiness programs, and others.

#### 2. Program Grants

Program grants are competitive grants or grant renewals in which agencies design programs they believe will serve a specific need either in a geographic or demographic segment of the 0-5 population and their families. Agencies apply for funding to execute proven and promising interventions within a targeted geographic area or population. This competitive process is used to fund organizations that establish essential new programs or services to meet the identified needs of young children and their families. The programs and strategies funded and contained in the Commission’s budget link directly back to the stated goals contained in this Strategic Plan. Funds are distributed through grants related to the Commission goals of Healthy Children, Strong Families, Ready to Learn and Quality Services.

3. Capital Improvement Projects

The Commission has used its funding authority to fill gaps in project needs. Gaps often arise because existing funders do not have flexibility to provide the necessary resources for a program to get started. The Commission will carefully balance its funding investments. As situations warrant, the Commission will also invest, but not be limited to capital improvement projects, human resources, planning grants, and consulting services to support program success. It is the Commission's intention to utilize the flexibility within Proposition 10 to maximize the potential for fund leveraging and available matching funds.

4. Capacity Building Grants

The Commission recognizes that some of the most innovative programs for children and families start as pilot efforts and that there continues to be tremendous gaps in providers that can adequately address the needs of young children. Capacity Building Grants are designed to usually provide a one time grant to agencies or collaboratives attempting to develop the organizational or service capacity to provide services to the 0-5 population in Orange County. Agencies eligible to apply have either (1) limited resources and need assistance in developing the organizational and institutional capacity to effectively plan for services or (2) are initiating a new needed service and require assistance to plan for service deployment, develop agency partners, or refine a service deployment plan. Agencies receiving these funds are required to prepare either a service or business plan. Capacity Building grants are awarded under the budget category and goal of Quality Services.

**B. Performance Outcome Measurement System: The Evaluation Framework**

The Commission adopted an overall approach to evaluation which includes evaluating both the impact of the services funded on the clients served and the method for providing those services to the community. This evaluation approach considers the results of services from the client perspective (outcome measures) and how services were provided (process measures) in terms of number of clients served, accessibility, quality, and cost-effectiveness of services. The purpose of the Commission-wide evaluation is to provide an overall picture of the Commission's accomplishments and progress toward achievement of their goals and objectives.

The Performance Outcome Measurement System (POMS) Evaluation Framework is presented in a matrix of the specific outcomes, indicators and measures that the Commission will track for evaluation purposes. This POMS Evaluation Framework includes (Appendix B) both Commission-wide and initiative-specific evaluations. In addition, the Commission participates in the development of community-wide indicator data. Evaluation results are communicated through reports that are presented to the Commission and posted on the Commission's website at [www.occhildrenandfamilies.com](http://www.occhildrenandfamilies.com).

The annual POMS reports describe the major projects for the Commission and the progress made that year, followed by the plans for the next year. The report focuses first on Commission-wide evaluation activities, then describes initiative-specific evaluations, and closes with a description of Commission participation in county, regional, and state evaluation efforts.

1. Process Measures

- *Aggregate Data* – Basic counts of how many children, families, and providers receive services funded by the Commission and how many services are provided to individuals by Commission funded programs.
- *Grantee Milestones* – Specific information about the accomplishments of individual grantees, which can be tabulated across grantees to provide more detail about the services provided by Commission funded programs (e.g. how many children received assistance with health insurance enrollment).

2. Outcome Measures

- *Core Data Elements* – A questionnaire covering the major goals and outcomes in the Commission’s Strategic Plan. All clients receiving Commission funded services are asked to complete this questionnaire when they begin to receive services and every six months as long as they continue to receive services.
- *Project Level Questions* – A series of questions that are directly linked to the objectives in the Commission’s Strategic Plan. These questions are asked about a client when service to the client ends to assess whether the client’s condition changed as a result of Commission funded services.

3. Outcomes Collection, Evaluation, and Reporting Service (OCERS)

The Commission relies on its Outcomes Collection, Evaluation, and Reporting Service (OCERS) described below to collect, compile and maintain client and program data.

OCERS is an internet-based data system that facilitates monitoring and reporting on project milestones and the Commission’s progress toward achieving its Strategic Plan objectives. Within OCERS are two modules: Orange County Administrative Management Module (OCAMM) and Core Data Outcome Module (CDOM). OCAMM is a module used for contract monitoring of Commission funded programs. All grantees use OCAMM to report their progress toward achieving their project milestones. CDOM is a confidential client-tracking module used to track data collected on clients who have received services. Only grantees providing service directly to clients use this module.

The system provides a way for grantees to link their project with the Commission's Strategic Plan, define the major milestones of their project, monitor their progress with accomplishing their major milestones, and report on the number of services provided and clients served by their project. The program allows Commission staff to easily evaluate contract compliance, review progress with achieving milestones, identify grantees that may need technical assistance, and identify grantees who are implementing successful strategies.

4. Program-Specific Evaluation

The Commission also evaluates specific programs or Commission-funded initiatives to learn more detailed information about the operations and outcomes of these initiatives and to guide program design. Typically, these evaluations are across several agencies participating in a single initiative.

5. State Commission Annual Report to the Legislature

On or before October 15 of each year the Children and Families Commission of Orange County is required to prepare and adopt an annual audit and report on the implementation and performance of its functions during the preceding fiscal year. This report includes the manner in which funds were expended, the progress toward and achievement of program goals and objectives, and measurement of specific outcomes through appropriate and reliable indicators. The Orange County Commission meets these requirements through the submission of a report that is included in the State Commission, First 5 California's annual report to the legislature.

### **C. Successful Partnerships**

The Commission continues to develop and nurture key community partnerships in order to build upon and not replicate existing systems of care. The Commission has developed several key partnerships:

1. Orange County Health Care System

The Commission has partnered with birthing hospitals in Orange County as part of its Bridges for Newborn Program. This partnership allows the Commission to make initial contact with newborns and families in Orange County annually. The Commission also partners with the leading pediatric hospitals to provide pediatric and specialty care programs.

2. Orange County School Districts

A primary program initiative of the Commission is school readiness. This includes working with children prior to kindergarten entry, and working with schools to develop a successful transition path from early care programs into elementary school.

3. Media Outlets

The Commission recognizes the importance of strong media partnership to promote community awareness and education on the importance of the first five years of life. The Commission has developed successful partnerships with Orange County media outlets. These media organizations have partnered with the Commission as part of an overall parent education effort under the “Help Me Grow” banner.

4. Business Community

The Commission is on the forefront of working with business leaders to promote the importance of school readiness for workforce development. The Commission maintains active involvement with the business community through participation in the Orange County Forum and working with business support groups, such as the Orange County Business Council.

5. Community Based Organizations

Local health and human service organizations throughout Orange County administer and execute the programs funded by the Commissions. Partnerships with these organizations are essential to reaching the diverse ethnic and geographic populations in Orange County.

6. Statewide Partnerships

Achievement of the goals and objectives set forth in this Strategic Plan requires statewide and regional partnerships with other county commissions or the state commission. The opportunity for multi-county plans and programs is specifically authorized in Proposition 10 and has been successfully utilized by Orange County. Authorized activities include multi-county programs, technical assistance activities, legislative and policy advocacy, and serving as fiscal sponsor for statewide programs such as AmeriCorps/VISTA which include activities that benefit Orange County.

Commission partnerships avoid duplication of effort and provide more efficient and targeted service delivery. Commission supported partnerships among health care providers, family resource centers, clinics, schools districts, and early childhood education providers form the foundation for service delivery to families with young children.

## **D. Commission Organization**

The Orange County Commission is comprised of nine representatives from public and private organizations with leadership and professional experience in the areas of health and education. Strong and consistent leadership combined with extensive knowledge and expertise are valuable for the success of the Commission.

The Commission benefits from the expertise of committees to provide input or in-depth review of specific issues as delegated by the Commission. The Technical Advisory Committee provides input and recommendations on programs and issues as directed by the Commission.

The Commission relies on an efficient and knowledgeable core staff to carry out its directives. The Commission contracts with independent consultants or firms for projects that require specialized skills or expertise.

The Commission develops an annual business plan which sets forth organizational and operational strategies for the upcoming fiscal year. The business plan is considered a part of the annual budget process.

## **E. Community Engagement**

Review of the Strategic Plan has been an ongoing process since the Commission's adoption of the First Strategic Plan in February 2000. Input to develop recommended changes has been received over the last five years from:

- Commission grantees as they have developed their program work plans and program evaluation programs.
- Commission representatives and technical experts who have contributed new knowledge related to outcomes evaluation as standards are developed in specialized areas such as in the early care and education arena.
- Commissioners, Technical Advisory Committee, and community members who have refined priorities through the development of program specific strategic plans.

## **F. Leveraging Existing Community Resources and Infrastructure**

The Commission works within the existing landscape to leverage services and resources. Following are the key ways in which the Commission leverages community assets and fills service gaps.

1. **Funding Mechanism for Capacity Building and New Programs**  
Through the funding and development of new programs, the Commission seeks to expand the scope and quality of the existing services and increase the numbers served. Capacity building grants seek to achieve similar objectives by strengthening and supporting service providers.
2. **Ensure Services are Available and Accessible through Commission-Directed Initiatives**  
Where significant gaps are observed in the service landscape, the Commission spearheads the development of initiatives to begin filling the gaps.

3. Policy Advocate and Convener

Within Orange County as well as statewide, the Commission furthers the welfare of children 0-5 by advocating for policies that benefit young children and their families and forming strategic partnerships with service providers, community indicator or evaluation efforts, and experts working to improve the wellbeing of young children.

4. Source of Information

The Commission has become a valued resource for information on the service needs of young children in Orange County and a conduit through which families can learn about and access services.

5. Fiscal Leveraging

A strategic operating principle is to focus on sustainability and fund leveraging to maximize community resources and sustain programs. Fiscal leveraging is the process of using Proposition 10 funds to match available Federal, State or grant funding. The entitlement to these funds is based on strict requirements, and administrative procedures, and is unique to each funding stream. To access these funds, a Fiscal Leveraging Plan has been developed through interagency cooperation. The Plan identifies a framework for implementation including resources and processes for developing key policy required for initial and future implementation. Current leveraging strategies include:

- Medi-Cal Administrative Activities (MAA)
- Targeted Case Management (TCM)
- Early and Periodic Screening, Diagnosis and Treatment
- California First 5 Commission Matching Fund Programs
- AmeriCorp/VISTA Service Corp
- California Nutrition Network Funds
- Foundation Grants

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- Appendix B: Performance Outcome Measurement System (POMS): The Evaluation Framework
- Appendix C: Commission Resolution Adopting the Strategic Plan Update

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## Community Indicator Resource List

### **Orange County Health Needs Assessment - Spring Report 2005**

Presents results of a community survey on health that is conducted every three years – the 2005 report includes data on children ages 0-5

[www.ochna.org](http://www.ochna.org)

### **10<sup>th</sup> Annual Report on the Conditions of Children in Orange County October 2004**

Provides data on health, economic status, safety, and education of children of all ages – some breakouts by age and ethnicity

[www.ochealthinfo.com/cscs/report](http://www.ochealthinfo.com/cscs/report)

### **Orange County Community Indicators - 2005**

Includes data on a variety of community indicators, including housing, health, public safety and the environment

[www.oc.ca.gov/ceo/Comm\\_Indicators/Comm\\_Indi.asp](http://www.oc.ca.gov/ceo/Comm_Indicators/Comm_Indi.asp)

### **Evaluation Reports of the Children and Families Commission of OC**

Data on the children and families receiving services funded by the Children and Families Commission of Orange County.

[www.occhildrenandfamilies.com](http://www.occhildrenandfamilies.com) – click on the Evaluations button

### **Early Care and Education Needs Assessment for Orange County October 2001**

Presents the findings from surveys, focus, groups, observations, and other data sources on early care and education of 0-5 year olds

[www.ecena.org](http://www.ecena.org)

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Healthy Children

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased percent of children born healthy	Prenatal Care	Increase to at least 90% the proportion of all pregnant women who begin prenatal care in the first trimester of pregnancy, and whose care is adequate	Develop a standard comprehensive newborn and family assessment protocol that includes attention to physical and mental health, social issues, ATOD, family functioning and resources	Develop comprehensive prenatal care programs that are available and accessible through community based sites/mobile vans	Develop and conduct annual prevalence survey related to drug/substance exposed births
	Low Birth Weight	Reduce low birth weight to an incidence of no more than 5% of live births and very low birth weight to no more than 1% of live births		Train relevant health care providers and their staff to identify and respond appropriately to alcohol, tobacco and other drug (ATOD) use among their patients	
	Substance Exposed Infants	Increase abstinence from alcohol / illicit drugs by pregnant women		Provide home visitation services to augment and support prenatal and maternal child health care	
		Increase abstinence from tobacco use by pregnant women by 75%		Develop strategies targeting high-risk populations, such as teen parents, substance abusing pregnant women, and women who fail to seek early prenatal care	
Infant Mortality	Reduce the infant mortality rate for live births				

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Healthy Children

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased access to early screening and assessments for developmental, behavioral, emotional, social, and other at risk conditions so chronic and disabling conditions are identified, assessed, and managed	Developmental Milestones	Increase the proportion of providers who are trained to routinely screen and refer infants and children for assessment of developmental delays, including vision, hearing, speech, language, psychosocial issues, and other special needs	Advocate for the development of a standard comprehensive child assessment protocol  Advocate for a system of care that facilitates connections between primary and specialty care	Train primary care providers in early detection/ intervention of chronic and disabling conditions related to physical & mental health  Make health and mental health consultation services available for child care providers  Provide screenings, assessments and case management at community based sites, including mobile vans, child care settings, and homes  Link with school based programs to provide screenings and assessments  Provide training and on-going support for teachers and child development specialists on child screening, assessment and intervention  Expand the availability of specialty care services	Develop a system to track the implementation and effectiveness of training  Develop a standard comprehensive child assessment instrument
		Increase the number of children who are screened and/or assessed for developmental milestones, including vision, hearing, speech, and language, psychosocial issues, and other special needs, and receive appropriate referrals			
	Mental Health Issues	Increase the proportion of providers who are trained to routinely screen and/or assess children for cognitive, emotional, behavioral, and parent/child functioning, and provide appropriate counseling, referral, and/or follow-up			
		Increase the number of children who are screened and/or assessed for cognitive, emotional, behavioral, and parent/child functioning, and receive appropriate counseling, referral, and follow-up			
Specialty Care	Increase the number of children with chronic and disabling conditions who receive specialty medical and/or mental health services				

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Healthy Children

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased percent of children who have and use a health home for comprehensive health services to include physical, dental, and mental health	Health Insurance	Increase to 100% the number of children with health coverage	<p>Advocate for universal access to health care from birth to five, regardless of insurance and immigration status</p> <p>Develop policies and procedures that allow for the sharing of appropriate information across systems and among service providers</p>	<p>Develop school and community based health care coordinators to link children with a health home, enroll children in insurance programs as needed, facilitate links with community based health care sites, family resource centers, and school based Healthy Start programs</p> <p>Provide culturally appropriate outreach to maximize number of eligible children enrolled into Medi-Cal, Healthy Families and other plans</p> <p>Create neighborhood based comprehensive health care and dental care sites/mobile vans</p> <p>Link with school based Healthy Start programs</p> <p>Provide discretionary funding to facilitate access to health services (i.e., childcare, transportation, translation)</p> <p>Expand hours and resources available at community clinics</p>	Develop an Immunization Registry
	Health Home	Increase to at least 95% the proportion of children who have a health care home			
	Well Child Care Visits	Increase the proportion of children ages 0-5 who receive recommended primary care services at the appropriate intervals			
	Immunization	Increase age appropriate immunization levels to at least 95%			
	Oral Health	Reduce dental caries so that the proportion of children with one or more caries is no more than 35% among children ages 0-5			

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Healthy Children

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Reduced number of child deaths and disabilities due to preventable causes	Safety In and Around Cars	Increase use of occupant protection systems, such as safety belts and child safety seats		Increase community based health promotion and education and disease and injury prevention programs	
	Preventable Injuries	Reduce nonfatal injuries so that hospitalizations for this condition			
	Child Mortality	Reduce the rate of child mortality for children aged 1-5			

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Healthy Children

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased percent of children growing up in healthy and safe environments	Breastfeeding	Increase to at least 75% the proportion of mothers who breastfeed their babies according to the recommendations of the American Academy of Pediatrics	Advocate for healthy and safe environments  Promote parent and community involvement in planning, design, and delivery of services	Increase community based health promotion and disease prevention programs  Increase community awareness of the impact of alcohol, tobacco and other drugs (ATOD) on children prenatal through early childhood  Improve safety in early care and education facilities and other environments where children are in group settings  Improve health and safety at home and in surrounding residential environments (e.g. radon, lead testing, fluoridated water, etc.)  Make breastfeeding information /education readily available at hospitals, community based health clinics and family resource centers  Increase community awareness of the impact of violence on children prenatal through early childhood	Participate in community research to identify social and environmental factors that influence children's health
	Fitness	Increase the availability and accessibility of nutrition education and physical activity opportunities			
	Parent Knowledge of Children's Health	Increase parents' knowledge and involvement in raising healthy children			
	Healthful Environments	Increase the health and safety of children's environments			
	Tobacco Exposure	Reduce to no more than 20% the proportion of children ages 0-5 who are regularly exposed to tobacco smoke at home			
	Alcohol and Other Drug Use and Abuse	Reduce the number of children who are exposed to alcohol and other drugs in their homes and communities			
	Domestic Violence	Decrease the number of reports of domestic violence that involve young children			
	Child Abuse	Decrease the number of child abuse reports involving young children and the number of young children removed from their homes due to child maltreatment			

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Strong Families

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased family self-sufficiency	Family Self-sufficiency	Improve the condition of Orange County families as gauged by the following socio-economic indicators: <ul style="list-style-type: none"> <li>• Homelessness</li> <li>• Hunger</li> <li>• Poverty</li> <li>• Environmental Stability</li> <li>• Formal Education of Parents</li> <li>• Employment</li> <li>• Social Capital/ Support</li> </ul>	Advocate for linkage between parenting programs and self-sufficiency programs such as housing and job training  Advocate for development of affordable housing	Provide emergency services to meet basic episodic needs (food, respite, rental assistance, utilities)  Develop homeless prevention and transition to permanent housing services  Promote family friendly practices among employers, such as flexible work schedules, child care, places to breastfeed, etc.  Conduct outreach activities to reach isolated populations <ul style="list-style-type: none"> <li>• homeless</li> <li>• immigrants</li> <li>• working poor</li> <li>• teen parents</li> </ul>	

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Strong Families

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased parenting knowledge and skills to support effective child rearing and healthy choices	Parent Education	Increase the proportion of parents who have and use good parenting skills	Recognize and support the role of parents as primary caregivers of their children	<p>Provide comprehensive, high quality, effective parent education programs covering a wide range of topics that are culturally appropriate and offered in multiple languages</p> <p>Provide home visitation services to support new and at risk families</p> <p>Expand pregnant and parenting teen programs</p> <p>Develop father involvement programs</p> <p>Develop parenting/peer support mentoring programs</p> <p>Provide parent education in high school</p> <p>Develop parenting education modules that can be incorporated into domestic violence and substance abuse treatment programs</p>	<p>Conduct in depth review of existing parenting programs and develop characteristics of successful programs</p> <p>Identify, evaluate and measure the impact of parent education</p>

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Strong Families

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased access to and availability of family support services and resources	Information and Referral	Increase community awareness of and linkage to available services	Promote responsive, convenient, strength based, and accessible services for parents	Support community based comprehensive support services e.g., Family Resource Centers, Healthy Start programs	Develop program specific plans to address the needs of high-risk populations, including teen parents, substance-abusing pregnant women, and homeless families.
	Program Availability	Increase number of services and service locations geographically dispersed around the county	Promote parent and community involvement in planning, design, and delivery of services	Provide home visitation and case management services to support new and at risk families  Link family education and support services with child care	
	Service Barriers/Access	Reduce barriers to services, such as cost, transportation, language, hours of operation, child care, and knowledge of how to access services	Advocate for centralized resource and information systems specific to families with children prenatal through five.	Develop specialized support services for foster care and relative caregivers and families with special needs children  Develop transportation services for low-income and special needs children  Develop coordinated case management for high risk populations <ul style="list-style-type: none"> <li>• Children with special needs</li> <li>• Homeless children/families</li> <li>• teen parents</li> <li>• family violence</li> </ul>	

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Ready to Learn

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased availability and access to quality early care and education	Program Quality	Increase the number and percentage of early care and education programs that meet nationally recognized quality standards	Promote accreditation of early care and education programs including family child care programs	Increase quality early care and education programs in under-served areas and for underserved populations	Track achievement in K-12 system of early care and education graduates
	Early Care and Education Availability	Increase the number of children receiving quality early care and education services so they are better prepared to succeed in school	Strengthen K-12/early care and education instructional coordination  Promote development of continuing early care and education resources for children and families so that families and children do not experience a gap in services when transitioning from one system to another	Develop programs that are responsive to family needs, including non-traditional hours, services for mildly ill children, etc.  Provide parent education that promotes informed parental choice in the selection of early care and education programs	Develop a criteria and assessment tool to determine quality early care and education programs  Develop a measurement tool to assess the progress of children as they transition to K-12 education
Increased school readiness of children with special needs*	Special Needs Children*	Increase the number of children with special needs* who are participating in inclusive early care and education programs	Promote inclusion of special needs children* in early care and education programs	Increase access to quality early care and education programs for children with special needs*  Provide training and support services for providers working with special needs children*	
	Resources	Increase available resources to support families with special needs children*			

\* Children with special needs: 1) are protected by the Americans with Disabilities Act (ADA); 2) are at-risk of a developmental disability as defined by the Early Intervention Services Act; or 3) do not have a specific diagnosis but whose behavior, development, and/or health affect their family's ability to find and maintain services, e.g. child care.

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Ready to Learn

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Increased caregiver knowledge and skills to promote children's readiness for school	Parent Knowledge of School Readiness	Increase parents' knowledge and involvement in preparing children for school	Recognize and support the role of parents as primary caregivers of their children	Provide education that promotes parental involvement and supports child development, early literacy, and learning  Develop public awareness campaigns to promote child development and early literacy	Develop a comprehensive needs assessment of early care and education programs and services to meet the needs of families  Develop a comprehensive plan to meet the early care and education needs of families identifying all public and private resources
	Provider Knowledge of School Readiness	Increase providers' knowledge and involvement in preparing children for school			
Improved transitions of children from preschool to kindergarten	Transition to Kindergarten	Increase the preparedness of schools for incoming kindergartners	Promote collaboration between the K-12 educational system and the early care and education system for the purpose of defining school readiness and a common mechanism for measurement	Develop transition plans between preschools and elementary schools	

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Quality Services

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
A consumer-oriented, easily accessible system of services that is responsive to local needs and achieves results	Service Planning	Develop service plans that are supported by data and responsive to local needs	Implement a continuous strategic planning and reporting process for the Commission enlisting participation from stakeholders	Develop, expand and support neighborhood-based, family-friendly services	
	Coordination and Collaboration	Support development of networks of care	Advocate at the federal, state and local level for actions that promote the Commission's mission	Develop a centralized resource and information system specific to families with children birth through five	
	Technical Assistance	Provide training, technical, and administrative support to funded programs to ensure quality and results	Seek state and federal waivers and authority to link systems	Provide training, technical, and administrative support to funded programs to ensure quality and results	
	Public Communication	Develop and implement public information and outreach campaigns	Support the development of collaborative efforts involving public, non-profit and for-profit organizations	Create and develop public information and outreach campaigns	
	Innovative Practices	Share successful program models with others	Strengthen planning linkages, communication, learning and referrals among all Commission funded programs	Develop protocols and uniform data standards to facilitate information sharing and best practices	
	Leadership Development	Increase long-term parent involvement in program design and implementation	Emphasize the participation of consumers and families in all service contracts		
Commission-funded projects are still in existence after five years	Leveraging	Percentage of Commission dollars invested that are matched by other government and private sources	Support multi-year funding for sustainability	Provide training and technical assistance to improve business practices and grant applications	
	Sustainability	Develop business plans, business practices, and/or grant applications to sustain programs	Fund development strategies that leverage public, private and non-profit funding sources		

## PERFORMANCE OUTCOME MEASUREMENT SYSTEM (POMS): THE EVALUATION FRAMEWORK

### GOAL: Quality Services

Outcome	Indicator	Objective	Strategy / Policy	Strategy / Program	Strategy / Research
Commission data supports decision making and program improvement	Program Evaluation	Develop evaluation reports using appropriate and reliable indicators and communicate the results to the Commission, its grantees, and the community	Fund services based on achievement of results		Implement protocols and uniform data standards to facilitate information sharing and “best practices”  Implement a comprehensive performance management system which includes <ul style="list-style-type: none"> <li>- County scorecard to track results</li> <li>- Annual program performance monitoring and auditing</li> <li>- Program results and Commission outcome monitoring</li> <li>- Operational reviews</li> <li>- Consumer satisfaction</li> </ul> Research best practices and service models for targeted population and goals  Investigate a variety of service models for the purpose of measuring efficiency and effectiveness
	Program Management	Monitor Commission and grantee program performance and contract compliance to ensure quality and results			

**ORANGE COUNTY CHILDREN & FAMILIES COMMISSION**

**RESOLUTION NO. 05-\_\_\_\_-C&FC**  
**July \_\_, 2005**

**A RESOLUTION OF THE CHILDREN & FAMILIES  
COMMISSION OF ORANGE COUNTY REGARDING PERIODIC  
REVIEW AND REVISION TO STRATEGIC PLAN**

**WHEREAS**, in order to facilitate the creation and implementation of an integrated, comprehensive, and collaborative system of information and services to enhance optimal early childhood development, the legislature adopted legislation set forth in the California Children and Families Act of 1998, Health and Safety Code Section 130100, *et seq.* (as amended, the “Act”) implementing the Children and Families First Initiative passed by the California electorate in November, 1998 and establishing the California Children and Families Commission and County Children and Families Commissions, including this Children and Families Commission of Orange County (the “Commission”); and

**WHEREAS**, pursuant to Section 130140(a)(1)(C) of the Act, the Commission must, as a condition of receiving funding, adopt and review annually “an adequate and complete strategic plan for the support and improvement of early childhood development within the county”; and

**WHEREAS**, the Commission has previously adopted its first Strategic Plan on February 16, 2000, and has annually reviewed the Strategic Plan in accordance with the Act; and

**WHEREAS**, the Commission has conducted a public hearing in connection with its periodic review and has duly considered all public, oral and written testimony offered in connection therewith; and

**WHEREAS**, the Commission has conducted at this meeting its periodic review of the Strategic Plan and has considered revisions to the Strategic Plan in accordance with the revised Strategic Plan presented at this meeting and appended to this Resolution; and

**WHEREAS**, the Strategic Plan must be consistent with the Act and any state guidelines and must include, at a minimum: a description of the programs, projects and services to be provided, sponsored or facilitated; a description of how measurable outcomes will be achieved and a description of how programs, services and projects relating to early childhood development will be integrated into a consumer-oriented and easily accessible system, all pursuant to Section 130140(a)(1)(C)(ii) of the Act; and

**WHEREAS**, pursuant to Section 130105 of the Act, the children and families trust fund administered by the Commission shall be expended only for the purposes authorized by the Act and in accordance with the Strategic Plan approved by the Commission; and

**WHEREAS**, pursuant to Section 130140.1, the powers, duties and responsibility of the Commission include, but are not limited to, the power to enter into any contracts necessary or appropriate to carryout the provisions of the Act, the power to acquire, possess and dispose of real or personal property and the power to engage in grant programs and other funding and loan guaranty programs; and

**WHEREAS**, revised Strategic Plan is intended to describe in broad categorical terms, programs, services and projects to be pursued, but not to act as an instrument by which specific funding decisions related to specific grants or programs are identified, it being the purpose and intent of

the Commission that these decisions are to be made in accordance with the Commission's general funding allocation processes in a manner consistent with the Strategic Plan, but separate from it; and

**WHEREAS**, the nature of the programs and services to be funded pursuant to the Strategic Plan is general in nature, and the County is a large county with multiple service providers, such that it is not foreseeable that the adoption of the revised Strategic Plan will require the funding for any particular entity, including the County, hospitals, or other service providers, it being the express purpose and intent of the Commission that specific funding decisions are not made by the adoption of the Strategic Plan; and

**WHEREAS**, pursuant to Section 130140 of the Act, county commissions must include a member of the board of supervisors of the county, two members selected from among persons responsible for management of certain county functions, but including the health officer, and additional members from among local recipients of services included in the county strategic plan, local educators, representatives of local child care agencies or coordinating groups, representatives of school districts, representatives of local medical associations and other early childhood development organizations; and

**WHEREAS**, the Commission is comprised of individuals meeting the requirements of the Act, all of whom are interested in the programs and services funded by the Strategic Plan; and

**WHEREAS**, the statute contemplates the application of the expertise of Commissioners to the development of the strategic plan in a manner that is central to the operation of the Act;

**WHEREAS**, the adoption of the Strategic Plan update has been determined to be statutorily exempt from the provisions of CEQA pursuant to CEQA guidelines section 15262

**NOW THEREFORE, BE IT RESOLVED BY THE COMMISSIONERS OF THE CHILDREN AND FAMILIES COMMISSION OF ORANGE COUNTY AS FOLLOWS:**

**Section 1.** This Commission finds that adoption of the revised Strategic Plan is statutorily exempt from the provisions of CEQA

**Section 2.** This Commission hereby finds that the recitals hereof are true and correct.

**Section 3.** The Commission hereby adopts the revised Strategic Plan presented at this meeting and attached hereto as its revised Strategic Plan for all purposes of the Act. The Commission hereby finds and determines that the Strategic Plan is consistent with and in furtherance of the purposes of the Act and the California Children and Families Commission Strategic Plan Guidelines applicable thereto, as in effect at the time this revised Strategic Plan is adopted. The Commission hereby further finds that (a) the revised Strategic Plan includes a description of the goals and objectives proposed to be obtained, descriptions of the programs, services and projects proposed to be provided, sponsored or facilitated, and a description of how measurable outcomes of such programs, services and projects will be determined by the Commission using appropriate reliable indicators, and (b) the Strategic Plan describes how programs, services and projects relating to early childhood development within the County will be integrated into a consumer-oriented and easily accessible system, and the Commission hereby so finds.

**Section 4.** The Commission hereby finds and determines that no funding decisions are made in the Strategic Plan itself, or by the Commission's adoption of this Strategic Plan; rather, the Strategic Plan provides a framework for the programs, services and projects which may be provided, sponsored or facilitated, from among which the Commission may select in making specific funding decisions. Specific funding decisions, and resultant expenditures of moneys in the Children and Families Trust Fund administered by the Commission shall be expended only as

subsequently as determined from time to time by the Commission in accordance with its funding allocations processes, independently of the consideration and adoption of this Strategic Plan, but in accordance with it.

**Section 5.** The Executive Director is hereby directed to transmit a copy of the revised Strategic Plan to the State Commission, to the County Board of Supervisors and others to the extent required to comply with the Act or the Ordinance of the County activating the Commission.

**Section 6.** This resolution shall take effect upon adoption.

**Section 7.** The Commission intends that the Strategic Plan shall be interpreted and implemented in a manner with the Act and applicable law. If so the strategic plan update is held to be in conflict with any applicable constitutional provision or statute or rule of law, or is otherwise held to be enadequate for any reason, the First Strategic Plan as approved on February 16, 2000 and as annually reviewed pursuant to the Act, shall remain in force until such time as it is further revised.

**PASSED, APPROVED and ADOPTED** this \_\_\_\_\_ day of July, 2005 by the following vote:

The foregoing resolution was passed and adopted by the following vote of the Children & Families Commission of Orange County on July \_\_, 2005 to wit:

AYES           Commissioners: \_\_\_\_\_

NOES:           Commissioner(s): \_\_\_\_\_

EXCUSED:    Commissioner(s): \_\_\_\_\_

ABSTAINED: Commissioner(s) \_\_\_\_\_

\_\_\_\_\_  
CHAIRMAN

STATE OF CALIFORNIA    )  
  )  
COUNTY OF ORANGE     )

**I, DARLENE J. BLOOM, Clerk of the Commission of Orange County, California, hereby certify that a copy of this document has been delivered to the Chairman of the Commission and that the above and foregoing Resolution was duly and regularly adopted by the Children & Families Commission of Orange County .  
IN WITNESS WHEREOF, I have hereto set my hand and seal.**

\_\_\_\_\_  
DARLENE J. BLOOM  
Clerk of the Commission, Children & Families Commission, County  
of Orange County, State of California

Resolution No: 05-\_\_\_\_-C&FC  
Agenda Date: July \_\_, 2005  
Item No. \_\_

I certify that the foregoing is a true and correct copy of the  
Resolution adopted by the

DARLENE J. BLOOM, Clerk of the Commission

By:\_\_\_\_\_  
Deputy

**EXHIBIT A  
STRATEGIC PLAN**