

# Evaluation Plan

## 2021-2022



## Table of Contents

Table of Contents .....	i
Background .....	1
First 5 El Dorado .....	1
Focus of Commission Investments.....	2
Community Hubs.....	2
Evaluation Plan.....	4
Evaluation Framework .....	4
Evaluation Matrix.....	5
Evaluation Reports and Timelines.....	12
Data Collection Efforts .....	13
Data Collection Responsibilities .....	13



Social Entrepreneurs Incorporated (SEI), as the contracted evaluation consultant to the Commission, has established this document to ensure a transparent and explicit approach to conducting evaluation activities in 2021-2022. This plan represents changes in the direction of Commission efforts as detailed in their updated strategic plan.

## Background

### First 5 El Dorado

---

The First 5 El Dorado Children and Families Commission was formed following the passage of California Proposition 10 (Prop 10). The Prop 10 initiative added taxes on cigarette and other tobacco products to fund programs promoting early childhood development for children birth through 5 and their families. First 5 El Dorado receives slightly less than \$1 million annually through revenues generated by Proposition 10.

First 5 El Dorado works closely with county agencies and community-based partners, leveraging local resources to increase the value of its investments.

Because First 5 El Dorado funds are declining annually, it is important for the Commission to continually evaluate and align its strategic approach to best meet community needs using the resources available. Evaluation permits the Commission and the community to track progress towards goals and to continuously improve efforts to impact the community.

The Commission is guided by its strategic plan, as well as its vision and mission.

### Mission

First 5 El Dorado Children and Families Commission is committed to strengthening children birth through 5 and their families by promoting and enhancing comprehensive early childhood systems.

### Vision

All children will live in nurturing families and enter school ready to learn.



## Focus of Commission Investments

---

The Commission has chosen to invest the bulk of its resources into the establishment of Community Hubs through local libraries and with schools as a mechanism to facilitate comprehensive community services. The focus for Community Hubs is prevention— through early identification of developmental issues, targeted assistance, and efficient service delivery for families.

### Community Hubs

“Community Hubs” have been implemented in countries across the world. There is no single definition because Community Hubs are locally driven and vary in function and structure. However, most share common attributes that set them apart from other traditional models for service delivery and coordination.

Most Community Hubs are:

- **Collaborative.** Built into the concept of the Hub is community – people get together to work, learn, and grow through supportive relationships. Foundational to the community must be a belief and understanding that people can help and serve one another in both formal and informal ways. Knowing that one person, leader, or organization cannot solve all social problems in a community, relationships are key at every level, from partnerships among organizations to individual relationships formed by participants.
- **Relevantly Placed.** Examples of Community Hubs include schools, libraries, hospitals, and neighborhood centers. While less common, a Community Hub can also be virtual – lacking a physical space but providing an online network of people and resources. When a Hub has a physical space, it should be centrally located or convenient for people in the community to access via public transportation.
- **Reflective of the Community Served.** Language, culture, and circumstances should be considered in all aspects of planning and may influence the makeup of leadership, staffing, programming, space design, communications, and service strategy.
- **Responsive to Local Needs.** Within governmental boundaries (e.g., counties and cities) there can be major differences in the opportunities, conditions, and experiences of sub-populations and within neighborhoods. Hubs are local and provide for consideration of the unique assets and needs of the being served.
- **Person Centered.** People are at the heart of the Community Hub. Community Hubs differ from single services in that they foster more effective, accessible, and coordinated services and actively work to take down silos. While many service systems have been designed to meet a specific need using narrowly defined service criteria, a Hub offers an opportunity to understand and support individual and family strengths and needs comprehensively.
- **Adaptive.** Community Hubs must be able to continually address their own strengths and challenges. In the startup phase, this requires piloting approaches, assessing successes and failures, and quickly making changes toward improvements. Longer term, commitment to change is also important so that the Hub reflects emerging community needs. Prescribing the results, or “what” to be achieved, and guiding principles is important, however, it can be useful to avoid prescribing a specific method for service delivery so that sites have the flexibility to experiment with strategies and firmly establish those with the most meaningful results.

The table on the following page describes how each of these attributes are present in the model implemented in El Dorado County.

### Collaborative

Community Hubs in El Dorado County rely upon the shared leadership of core human service providers to direct and lead Community Hub Services. Hub Leadership includes representatives from the El Dorado County Office of Education, the El Dorado County Health and Human Services Agency, Public Health Nursing, and the El Dorado County Library Department.

Hub Leadership understands that at the core of the Hub's success is the relationships that are built between one another, with other service providers and ultimately with community participants. It is this core belief that drives all Hub programming and advocacy.

### Relevantly Placed

Community Hubs in El Dorado County are implemented through local libraries and schools as a mechanism to facilitate community services that align with the needs of each unique EL Dorado community. While libraries and schools are central places where Hub activities occur, **any place** where Community Hub partners serve families within a community is considered a Hub.

### Reflective of the Community Served

Community Hubs in El Dorado County understand that all environments, interactions, and collateral materials should be established within a culturally competent framework. Hub Community Navigators outreach to support connection and trust specifically within Spanish speaking communities. They have also been intentional in hiring bilingual staff and providing services in Spanish to support increased participation among this targeted population.

### Responsive to Local Needs

Community Hubs will implement rapid cycle of improvement practices to ensure that they are continually examining the needs of the communities they serve and adjust services and practices to ensure that all supports are responsive to local needs.

### Person-Centered

Community Hubs in El Dorado County are structured to support access to a variety of services through a single access point. This is to support a person-centered approach to care where multiple needs are identified, and community members are connected to a variety of services to meet such needs.

### Adaptive

El Dorado Community Hubs have demonstrated a unique ability to adapt their services and practices during the COVID pandemic, moving from in-person service delivery to virtual, remote, and more crisis focused supports. Hubs will continue to rely upon its adaptive nature as it transitions from a model focused on direct literacy, health, and family support services to one that focuses on service connection and coordination.

## Evaluation Plan

As a component of Prop 10 funding, First 5 El Dorado is required to demonstrate results. The results-based accountability model as adopted by the state First 5 Commission requires the collection and analysis of data, and the reporting of findings in order to evaluate the effectiveness of programs.

### Evaluation Framework

---

The Commission has established the following overarching objective to which all other efforts should contribute:

---

***Systems of care effectively support communities through individual and family functioning, health, and development.***

---

To evaluate whether the Commission is making progress in achieving this overarching goal, the following systems components will be tracked and monitored through a process evaluation for FY 2021-2022.

- Systems are person-centered, coordinated, responsive to community needs, and aligned.
- Services are adjusted based on information from service recipients and Community Advisories that allows for a rapid cycle of improvement.
- Systems are organized to provide outreach, intake, screening, referral, and disposition with high levels of satisfaction for recipients, Community Advisories, and the community.
- Systems are sustainable.



### Process Evaluation

Process evaluation is a formative approach that compares objectives developed at the outset of a project with actual inputs, activities, and outputs to determine whether objectives have or have not been met.

As an iterative approach, process evaluation allows the Commission to identify areas of Hubs 2.0 implementation that can be improved or strengthened to increase success at meeting outcomes and objectives.

This evaluation method is sensitive to changes in implementation and is responsive to system users – both professionals working within the system as well as families.

Quantitative data will be utilized when possible, but for the most part this evaluation plan will rely on the collection and analysis of qualitative data.

Collaboration between SEI, First 5 staff, the Early Learning Lab, Unite Us, and other stakeholders in each aspect of the evaluation, from design to data gathering and reporting, is critical for success when utilizing this approach.

## Evaluation Matrix

The following framework outlines the evaluation plan for FY 2021-2022.

# Improved Systems

<b>Objective:</b> Systems are person-centered, coordinated, responsive to community needs, and aligned.			
<b>Input</b>	<b>Activities</b>	<b>Outputs</b>	<b>Outcomes</b>
<ul style="list-style-type: none"> <li>• First 5 staff time to negotiate contract with consultant.</li> <li>• Fiscal resources necessary to secure consultant.</li> </ul>	<ul style="list-style-type: none"> <li>• Secure consultant with expertise in human centered design to support Hub redesign.</li> <li>• Meet with consultant at project launch to clarify project objectives and success measures.</li> </ul>	<ul style="list-style-type: none"> <li>• Executed contract with Early Learning Lab.</li> </ul>	<ul style="list-style-type: none"> <li>• Communities have increased social capital and are equipped to direct systems to work on their behalf.</li> <li>• Hubs have an identified structure for the establishment and use of Community Advisory Teams.</li> </ul>
<ul style="list-style-type: none"> <li>• First 5 staff, Hub Teams, and ELL contractor time to identify key stakeholders (community partners, service providers, and families) that should be interviewed.</li> <li>• ELL time to conduct and document results of interviews with key stakeholders.</li> </ul>	<ul style="list-style-type: none"> <li>• Identify and reach out to key stakeholders to introduce ELL and request participation in the process to establish Community Advisory Teams (CATs).</li> <li>• Schedule and conduct key stakeholder interviews.</li> <li>• Document results of interviews including suggestions regarding process and set of conditions necessary for success.</li> </ul>	<ul style="list-style-type: none"> <li>• Summary report detailing community experience with Hubs, including families who are marginalized.</li> </ul>	

**Objective:** Systems are person-centered, coordinated, responsive to community needs, and aligned.

Input	Activities	Outputs	Outcomes
<ul style="list-style-type: none"> <li>• CAT Development Committees and Hub staff time to meet and participate in trainings/coaching.</li> <li>• Technology to support virtual engagement(s).</li> <li>• Evaluation team time to develop tools.</li> </ul>	<ul style="list-style-type: none"> <li>• Facilitate capacity building trainings which focus on human centered design+ (HCD+) methodologies.</li> <li>• Develop tools for assessing increased CAT Development Committee and Hub staff knowledge and comfort with HCD.</li> </ul>	<ul style="list-style-type: none"> <li>• Completion of HCD+ trainings.</li> <li>• CAT Development Committee and Hub staff confidence and comfort in utilizing HCD as a framework for guiding Hub 2.0 development.</li> </ul>	
<ul style="list-style-type: none"> <li>• Hub team members, community partners, and CAT Development Committees time to meet and participate in collective gatherings.</li> <li>• Technology to support virtual gathering(s).</li> </ul>	<ul style="list-style-type: none"> <li>• Provision of Collective Sensemaking gatherings within each Hub.</li> <li>• Document results of gatherings into CAT plans for each Hub.</li> </ul>	<ul style="list-style-type: none"> <li>• Development of plan for future use of CATs.</li> </ul>	



**Objective:** Services are adjusted based on information from service recipients and Community Advisories that allows for a rapid cycle of improvement.

Input	Activities	Outputs	Outcomes
<ul style="list-style-type: none"> <li>County/First 5 staff time to update community hub characteristics and demographics.</li> </ul>	<ul style="list-style-type: none"> <li>Census data is separated by Hub to develop a profile of service population by Hub.</li> </ul>	<ul style="list-style-type: none"> <li>Number of meetings held between First 5 and Hub teams to review and determine community needs.</li> <li>Establishment of service needs particular to each community Hub.</li> </ul>	<ul style="list-style-type: none"> <li>Each Hub will understand the characteristics of individuals living within their service area.</li> <li>Hub Teams are positioned to utilize rapid cycles of improvement.</li> </ul>
<ul style="list-style-type: none"> <li>First 5 and Hub Team time to participate in trainings/coaching.</li> <li>Evaluation team time to develop necessary tools.</li> </ul>	<ul style="list-style-type: none"> <li>First 5 staff to work with Hub Teams to provide training on rapid cycles of improvement.</li> <li>Develop tools to assess increased Hub team knowledge and comfort with the rapid cycle of improvement process.</li> </ul>	<ul style="list-style-type: none"> <li>Completion of rapid cycles of improvement trainings.</li> <li>Hub Team confidence and comfort in utilizing rapid cycles of improvement process for service adjustments.</li> </ul>	

**Objective:** Systems are organized to provide outreach, intake, screening, referral, and disposition with high levels of satisfaction for recipients, Community Advisories, and the community.

Input	Activities	Outputs	Outcomes
<ul style="list-style-type: none"> <li>• First 5 staff time to issue and contract with a communications consultant.</li> <li>• Fiscal resources necessary to secure consultant.</li> </ul>	<ul style="list-style-type: none"> <li>• Secure consultant with expertise in communications.</li> <li>• Meet with consultant at project launch to clarify project objectives and success measures.</li> </ul>	<ul style="list-style-type: none"> <li>• Executed contract with Communications Consultant.</li> <li>• Communications collateral.</li> </ul>	<ul style="list-style-type: none"> <li>• Communities understand what services are available and can get connected to the care that is needed.</li> <li>• Services are provided in a manner that meets community needs.</li> </ul>
<ul style="list-style-type: none"> <li>• First 5 staff time and Hub Team members time to participate in rapid cycle of improvement process.</li> </ul>	<ul style="list-style-type: none"> <li>• Define marginalized populations for each Hub.</li> <li>• Ongoing identification, implementation, and modification of Hub specific strategies for outreach efforts.</li> </ul>	<ul style="list-style-type: none"> <li>• Definition of marginalized populations for each Hub.</li> <li>• Description of outreach and awareness activities as determined through the rapid cycle of improvement processes.</li> <li>• Analysis of entry points into the Unite Us system. *</li> </ul>	
<ul style="list-style-type: none"> <li>• First 5 staff time to research and identify data management system.</li> <li>• First 5 staff time to secure community service partners.</li> </ul>	<ul style="list-style-type: none"> <li>• Navigators are equipped to conduct intake, screening, and referral within each Hub.</li> <li>• Establish a data management process and a corresponding tool to track intake, screening,</li> </ul>	<ul style="list-style-type: none"> <li>• Data management system in place for tracking intake, screenings, referral, and disposition.</li> <li>• Number and demographic profile of individuals accessing Hub navigational services. *</li> </ul>	

**Objective:** Systems are organized to provide outreach, intake, screening, referral, and disposition with high levels of satisfaction for recipients, Community Advisories, and the community.

Input	Activities	Outputs	Outcomes
<ul style="list-style-type: none"> <li>Financial resources to secure data management platform.</li> <li>Hub team time to be trained on and implement Hub 2.0 service approach, and to generate necessary data reports.</li> </ul>	<ul style="list-style-type: none"> <li>referral, and disposition via the Unite Us platform.</li> <li>Secure partners that will participate in data management platform for referral purposes.</li> </ul>	<ul style="list-style-type: none"> <li>Number and results of social determinants of health screenings conducted on adults accessing Hub navigational services. *</li> <li>Number and children ages 0-5 that were referred for a developmental screening as a result of their participation in Hub navigational services.</li> <li>Number and results of health insurance screenings conducted on individuals (adults and children) accessing Hub navigational services. *</li> <li>Number and disposition results of individuals receiving referrals through Hubs via the Unite Us system. *</li> <li>Number of partners participating in the Unite Us platform. *</li> </ul>	

*\* These outputs are dependent on data that is expected to come from the Unite Us referral platform. If this data is not available, it may not be possible to report on these outputs as described.*

**Objective:** Systems are sustainable.

Input	Activities	Outputs	Outcomes
<ul style="list-style-type: none"> <li>First 5 staff time to identify and meet with community service partners.</li> </ul>	<ul style="list-style-type: none"> <li>Identify community service providers that are key stakeholders and potential partners in the implementation of Hub 2.0 model of service delivery.</li> <li>Meet with key stakeholders to solidify partnership in Hub 2.0 model of service delivery.</li> </ul>	<ul style="list-style-type: none"> <li>Agreements are established with service partners through the Unite Us system.</li> <li>Agreements are established between First 5 and service partners which demonstrate the value and responsibilities of the collaboration.</li> </ul>	<ul style="list-style-type: none"> <li>Shared understanding of the value and contribution of each Hub service partner.</li> <li>Hubs are supported through a diversified funding stream.</li> <li>The Community and key stakeholders understand the outcomes associated with the Hub model of care.</li> </ul>
<ul style="list-style-type: none"> <li>First 5 staff time to research and pursue funding opportunities.</li> </ul>	<ul style="list-style-type: none"> <li>Identify resources to leverage in support of the Hub 2.0 model of service delivery.</li> <li>Identify and pursue funding opportunities that are aligned with the Hub 2.0 model of service delivery.</li> </ul>	<ul style="list-style-type: none"> <li>Number of external funding proposals pursued and success rates.</li> <li>Amount of funding by source available to support Hub 2.0 model of care.</li> </ul>	
<ul style="list-style-type: none"> <li>First 5 staff, Hub leadership, and evaluation team members' time.</li> <li>Financial resources to implement FY 2021-2022 evaluation efforts.</li> </ul>	<ul style="list-style-type: none"> <li>Implement a process evaluation to demonstrate how Hubs are transitioning to the 2.0 model of service delivery.</li> </ul>	<ul style="list-style-type: none"> <li>FY 2021-2022 Evaluation Mid-Year Report</li> <li>FY 2021-2022 Annual Evaluation Report</li> </ul>	

**Objective:** Systems are sustainable.

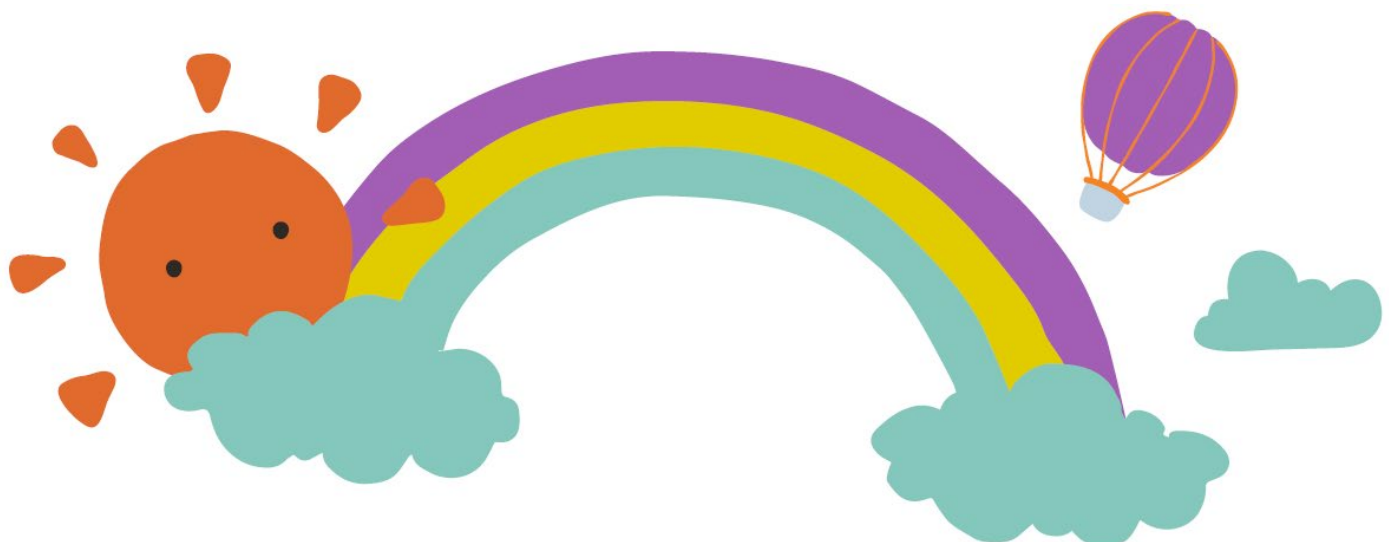
Input	Activities	Outputs	Outcomes
<ul style="list-style-type: none"> <li>• First 5 staff, Hub leadership, and CAT(s) time to develop an evaluation approach.</li> <li>• First 5 staff time to develop, issue, and execute a contracting process for evaluation.</li> </ul>	<ul style="list-style-type: none"> <li>• Establish an evaluation approach for FY2021 and beyond that is situated within a collective impact framework.</li> <li>• Develop and issue an RFA/RFP for evaluation services, if deemed necessary.</li> <li>• Contract with evaluation consultant to implement revised evaluation approach, consistent with Hub 2.0 model of service delivery, if deemed necessary.</li> </ul>	<ul style="list-style-type: none"> <li>• Executed contract with evaluation consultant.</li> </ul>	

## Evaluation Reports and Timelines

The proposed schedule provides evaluation activities to be conducted on an annual basis.

Deliverable	Description	Timing
<b>Improved Systems of Care Mid-Year Brief</b>	<p>This report will synthesize information from the first six months of Hubs 2.0 implementation efforts. Findings will be used to further refine Hub outreach, operations, quality improvement efforts, community engagement activities, and sustainability practices.</p> <p>The audience for this report is the Executive Director, the Commission, Community Hub Implementation Partners, School Districts, Community Members, and Supervisorial District Stakeholders.</p>	<p>March 2022</p>
<b>First 5 California Annual Report*</b>	<p>Each year, County Commissions are required to submit data to the State Commission. This report is completed online and approved by the Commission.</p>	<p>October 2022 (recurring annually)</p>
<b>Improved System of Care Annual Report*</b>	<p>This report will provide a detailed analysis of Commission Hubs 2.0 objective achievement. The audience for this report is the Executive Director, the Commission, Community Hub Implementation Partners, School Districts, Community Members, and Supervisorial District Stakeholders.</p>	<p>October 2022 (recurring annually)</p>

*\* These reports will be produced by First 5 El Dorado Commission staff or another contractor. It is not currently expected that SEI will produce these reports.*



## Data Collection Efforts

Data collection is required to effectively implement evaluation activities as described in this plan. The following table demonstrates the data collection tools, responsible entities, and timeline for data submission to SEI to ensure that all evaluation reports are produced on time.

### Data Collection Responsibilities

Data Collection	Responsible Entity	Due to SEI
<p><b>Hub Stakeholder Interviews:</b> Early Learning Lab (ELL) will conduct interviews with community stakeholders to explore the communities experience with Hubs, including families who are marginalized.</p>	<p>ELL will produce a summary report detailing community experience with Hubs, including families who are marginalized.</p> <p>ELL will provide the summary report to First 5 El Dorado which will in turn provide that information to SEI.</p>	<p>September 1, 2021</p>
<p><b>Human Centered Design Trainings and Participants:</b> ELL will provide HCD+ training modules to Hub teams and community stakeholders.</p>	<p>ELL will provide a schedule of when trainings occurred for each Hub, and who participated in each training module.</p> <p>ELL will provide the training schedules and participation records to First 5 El Dorado which will in turn provide that information to SEI.</p>	<p>January 31, 2022</p>
<p><b>HCD Training Participant Survey:</b> Hub team and community stakeholders who completed the HCD trainings will be issued a survey to indicate their knowledge and comfort in utilization of HCD within the implementation of Community Hubs 2.0.</p>	<p>SEI will work with ELL and First 5 staff to develop an HCD Training Participant Survey.</p> <p>The survey will be collected by First 5 staff and the results will be forwarded to SEI.</p>	<p>February 15, 2022</p>
<p><b>Move Forward Plan:</b> ELL will develop a plan for each Hub in regard to how community members will be engaged to provide input and direction regarding the Hub service approach.</p>	<p>ELL will produce a Move Forward plan and provide it to First 5 staff.</p>	<p>N/A</p> <p>This report may be produced following the conclusion of the contract with SEI.</p>

Data Collection	Responsible Entity	Due to SEI
<p><b>Rapid Cycle of Improvement Efforts:</b> Each Hub team will participate in monthly Plan, Do, Study, Act (PDSA) meetings.</p>	<p>Rapid Cycle of Improvement efforts will be documented by First 5 and shared with SEI for review on a quarterly basis.</p> <p>SEI will observe one rapid cycle of improvement meeting per Hub, per quarter, to stay abreast of changes to the process in anticipation of incorporating information into the mid-year brief.</p> <p>All PDSA meeting discussion and decisions will be documented and retained by First 5 staff.</p>	<p>Monthly PDSA documentation is requested to be provided to SEI within two weeks of the end of each month during which a PDSA meeting was held.</p>
<p><b>Monthly Meetings with First 5 Staff:</b> First 5 staff will meet with SEI on a monthly basis to discuss implementation efforts.</p>	<p>SEI will document discussions and decisions that inform implementation efforts being tracked and monitored as a component of this evaluation.</p>	<p>N/A</p> <p>Documentation will be completed by SEI.</p>
<p><b>Hub Participant Data:</b> Hub staff will collect user data to include profile information, assessment information, referral, and referral disposition information.</p>	<p>Hub staff will collect data and input it into the Unite Us platform.</p> <p>Hub staff will ensure that data is collected and put into the necessary platform/database on a regular basis. Data associated with each month's activities should be input into said platform/database by no later than five days following the end of each month.</p> <p>First 5 staff will forward all data to SEI on a quarterly basis.</p>	<p>Hub client data will be provided to SEI at least quarterly, on or before the following dates:</p> <ul style="list-style-type: none"> <li>• Q1: October 15<sup>th</sup></li> <li>• Q2: January 15<sup>th</sup></li> <li>• Q3: April 15<sup>th</sup></li> <li>• Q4: May 15<sup>th</sup>*</li> </ul> <p>*Review of available Q4 data will be conducted in conjunction with First 5 staff.</p>
<p><b>Hub Participant Survey:</b> Adult Hub participants will be issued a survey to indicate their satisfaction with Hub services.</p>	<p>SEI will work with First 5 staff to develop a Hub participant Survey.</p> <p>Specifics around when and how the survey is issued and collected will be determined in conjunction with Unite Us.</p>	<p>To be determined.</p>