

COUNTY OF LOS ANGELES



CHILD CARE
PLANNING
COMMITTEE

POLICY • PLANNING • PRACTICE

MEMBERSHIP MANUAL

Fiscal Year 2021-22

Prepared by the Office for the Advancement of Early Care and Education
Los Angeles County Department of Public Health, Health Promotion Bureau

MEMBERSHIP MANUAL



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July 2021

Child Care Planning Committee Membership Manual

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CHILD CARE PLANNING COMMITTEE

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Fact Sheet

*The Child Care Planning Committee shares a unified vision and mission with the Policy Roundtable for Child Care and Development and the Office for the Advancement of Early Care and Education. **Vision Statement** – Children are healthy, thriving and have equitable opportunities to achieve optimal development and succeed in life. **Mission Statement** – Lead, build and strengthen an affordable and high-quality early care and education system for the children and families of Los Angeles County.*

History

In 1991 the Board of Supervisors authorized the convening of the Los Angeles County Child Care and Development Block Grant Planning Council in response to AB 2141 (Chapter 87; Approved July 31, 1991), which created local child care and development planning councils (LPCs) in each county. The Council's initial purpose was to establish priorities for the allocation of federal Child Care and Development Block Grant (CCDBG) funds. AB 2141 also authorized the LPCs to determine local child care needs, and to prepare a Countywide plan for child care and development. In July 1992, the Board of Supervisors delegated the responsibility for countywide child care planning to the Council. In response to this broader charge, the Council changed its name to the Child Care Planning Committee (Planning Committee) in January of 1993.

AB 1542 (Chapter 270; Approved: August 11, 1997) heralded the advent of welfare reform in California. While creating and defining California Work Opportunity and Responsibility to Kids (CalWORKs), the legislation also strengthened and broadened the role of the local planning councils.

Mandates of AB 1542

- Establish a local planning council.
- Identify priorities for State-funded early care and education services.
- Conduct a countywide needs assessment at least every five years.
- Conduct periodic review of early care and education programs funded by the California Department of Education (CDE) and California Department of Social Services (CDSS) related to meeting priorities.
- Collaborate with stakeholder groups to meet local needs.
- Develop a comprehensive countywide plan for early care and education services.
- Coordinate part-day Head Start and State Preschool programs with full-day services.

Planning Committee Membership

There are 50 members of the Planning Committee, 10 from each of the required categories stipulated in AB 1542. Each of the five County Board of Supervisors appoints one member from any one of the categories to represent his/her district. Each member may serve up to two three-year consecutive terms. A Chair and Vice Chair are elected to serve consecutive two-year terms.

The five membership categories are as follows:

Parent Consumers¹ (or guardians) who are using or have used early care and education services for their children within the past three years.

Early Educators, representing both center-based and family child care homes.

Community Representatives from organizations or programs that advocate for early care and education services, provide funds for the services, or serve populations who benefit from the services, but do not contract with CDE or CDSS to provide early care and education services.

Public Agency Representatives from city, County, or local education agencies.

Discretionary Members who may represent any of the above categories or may represent another type of stakeholder and include Board of Supervisor appointees.

Collaboration with Local Stakeholders

The Planning Committee works collaboratively with local stakeholder groups:

- Policy Roundtable for Child Care and Development
- First 5 LA
- Child Care Alliance of Los Angeles
- Quality Start Los Angeles
- Child360
- Advancement Project California
- Partnerships for Education, Articulation & Coordination through Higher Education (PEACH)
- Perinatal and Early Childhood Home Visitation Consortium
- Los Angeles County Office of Education
- And more

Staffing and Meeting Schedule

The Office for the Advancement of Early Care and Education, within the Department of Public Health, supports the work of the Planning Committee. Within this department of County government, the Planning Committee is positioned to contribute to the overall well-being of children, families and communities throughout Los Angeles County.

The Planning Committee meets on the first Wednesday of each month, except July and August, from 12:00 – 2:00 p.m. at various sites throughout the County. During the COVID-19 pandemic, the Planning Committee meets virtually using the Microsoft Teams platform. The public is welcome to attend all Planning Committee meetings and to participate in its Work Groups. Please contact the Office for the Advancement of Early Care and Education at (213) 639-6202 to verify the location of the meetings or visit the website at <https://childcare.lacounty.gov/>.

¹ A parent consumer, in addition to the birth or adoptive parent, may include a relative caregiver, legal guardian or foster parent.

Major Accomplishments – 2000-21

- Co-convened with the Quality Start Los Angeles (QSLA) Workforce Committee the Workforce Pathways LA Joint Committee on Workforce Systems Improvement to conduct an early care and education professional development landscape analysis for Los Angeles County; released *Learning from Today, Preparing for Tomorrow: An Early Care and Education Professional Development Landscape Analysis for Los Angeles County* at a public forum on June 28, 2021.
- Awarded Workforce Pathways LA stipends to over 1,200 early educators for either 1) completing 21 hours of professional development, 2) completing at least one college course, 3) obtaining a new Child Development Permit, or 4) earning a college degree. (2021)
- Convened the Task Force on Re-envisioning Early Care and Education During COVID-19 comprised of Planning Committee members, alternates, and early educators; the task force developed Tips for Best Practices in Early Care and Education During the COVID-19 Pandemic – Centers and Family Child Care Homes that were integrated into the website, “Child Care Heroes: LA County COVID-19 Information and Resources” (see <https://childcareheroes.org/>). (2020)
- Prepared, in partnership with the Policy Roundtable for Child Care and Development, A *Unified Strategic Plan for Early Care and Education – 2020-2025*, with four focus strategic areas: 1) access to early care and education, 2) early care and education quality, 3) early care and education workforce supports, and 4) family and community engagement in early care and education issues. (2020)
- Participated in the response to the COVID-19 pandemic to ensure that essential workers and high-risk populations had access to early care and education services and the programs that serve them had the necessary resources to keep children, families and staff safe and healthy. (2020-21)
- Developed geographic priorities for allocation of new early care and education subsidy funds. (2000-2021)
- Distributed approximately \$48.4 million in stipends to qualified early educators through the Investing in Early Educators Stipend Program (AB 212), which promotes higher levels of education. (2002-2020)
- Contributed to the Preschool Development Grant Needs Assessment led by the American Institutes for Research (AIR) by conducting seven focus group; four of which were with parents and three with center-based programs. (2019).
- Assessed county early care and education supply and demand (2000, 2003, 2006, 2011, 2013 and 2016); Launched the 2016 needs assessment at a public event on March 20, 2017.
- Developed countywide Centralized Eligibility List (LACEL) for families seeking subsidized early care and education services. (2003-2011)
- Facilitated transfer of nearly \$16 million among CDE-contractors, which allowed the funding to be used in Los Angeles County since 2009.
- Developed a Model Compensation Scale for center-based child development staff and for Program Directors. (2004-2009)

- Reviewed the amount of under-utilized funding and the underlying causes of under-earned child development contracts in Los Angeles County. (2007-08)
- Conducted an economic impact study of child care in Los Angeles County. (2007-08)

Contact Information

The Office for the Advancement of Early Care and Education provides staff support to the Planning Committee.

Address Office for the Advancement of Early Care and Education
 Department of Public Health
 County of Los Angeles
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 Los Angeles, California 90005

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 Child Care Planning Coordinator
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Mobile (323) 594-1244 | Mobile
Fax (213) 639-1034 | Facsimile
E-mail msartell@ph.lacounty.gov | E-mail

Website <https://childcare.lacounty.gov/>



Members – Program Year 2021-22

Ernesto Saldaña, Chair
Parent/Consumer

Ariana Oliva, Vice Chair
Unite-LA
Community Agency

Christina Acosta
Child Care Alliance of Los Angeles
Discretionary

Cathy Coddington
Parent/Consumer

Dominic Amendariz
Parent/Consumer

Kevin Dieterle
First 5 LA
Discretionary

Norma Amezcua
Mexican American Opportunity Foundation
Early Care and Education Provider

Dr. Melita E. Ferguson
Compton College Child Development Center
Public Agency

Rocio Bach
Catholic Charities
Early Care and Education Provider

Andrea Fernandez
California Children's Academy
Early Care and Education Provider

Anne Blackstock-Bernstein
UCLA Center for Improving Child Care Quality
Public Agency

Sandra Flores
Alma Preschool Center
Early Care and Education Provider

Genetric Brown
Educare Los Angeles at Long Beach
Public Agency

Mona Franco
Parent/Consumer

LaRae Cantley
Parent/Consumer

Nora Garcia-Rosales
LA County Department of Public Social Services
Public Agency

Eileen Carrillo-Lau
Pomona Unified School District
Public Agency

Samitha Givens
Learn4Life Charters
Community Agency

Jessica Chang
Parent/Consumer

Angela Gray
Culver City USD/Office of Child Development
Early Care and Education Provider

Jessica Guerra
2nd Supervisorial District

Gabriel Muñoz
Hacienda La Puente Unified School District
Public Agency

Scott Herring
CDSS Community Care Licensing Division - Palmdale
Community Agency

Kelly O'Connell
1st Supervisorial District Representative

La Tanga Hardy
Los Angeles Trade-Technical College
Discretionary

Dianne Philibosian, Ph.D.
5th Supervisorial District Representative

Losmeiya Huang
The Growing Place
Community Agency

Cherise Roper
LAUSD/Early Childhood Education Division
Public Agency

Toni Isaacs
Partnerships for Education, Articulation & Coordination
through Higher Education (PEACH)
Discretionary

Marisol Rosales
Parent/Consumer

Christopher Jefferson
YMCA of Los Angeles
Early Care and Education Provider

Sachin Sangani
Parent/Consumer

Crystal Jones
Parent/Consumer

Kathy Schreiner
ECE Workforce Advocate
Community Agency

Joelle Landazabal
Children's Home Society of Los Angeles
Community Agency

Edilma Serna
WestEd PITC
Community Agency

Ana Lopez
Baldwin Park Unified School District
Public Agency

JoAnn Shalhoub-Mejia
CA Federation of Family Child Care Association
Early Care and Education Provider

Nicole Lopez
Little Tokyo Service Center
Early Care and Education Provider

Sarah Soriano
4th Supervisorial District Representative

Tom McFadden
Monrovia Unified School District
Public Agency

Julie Taren
3rd Supervisorial District Representative

Micha Mims
City of Los Angeles Dept. of Recreation & Parks
Early Care and Education Provider

Veronica Torres
WeeCare
Community Agency

Christine Moore
Parent/Consumer

Cecelia Urrea
Special Education Professional
Discretionary

Shanna Warren
Boys & Girls Club of Burbank & Greater East Valley
Community Agency

Lisa Wilkin
Child Development Consortium of Los Angeles
Early Care and Education Provider

Tom Woodward
ABC Unified School District
Public Agency

Jana Wright
LA Babies Network
Community Agency

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Meeting Schedule – FY 2021-22

The Child Care Planning Committee (Planning Committee) generally meets the first Wednesday of the month from 12:00 – 2:00 p.m. The public is welcome to attend the meetings and participate in its work groups. To confirm the meeting schedule and verify meeting locations, check the Office for the Advancement of Early Care and Education website at <https://childcare.lacounty.gov/planning-committee/> or contact Erica Weiss by e-mail at eweiss@ph.lacounty.gov or by telephone at (213) 639-6418. The Planning Committee does not meet in July and August.

Wednesday, September 1, 2021 – New Member Orientation
10:30 – 11:45 a.m.

Wednesday, September 1, 2021 – General Meeting
12:00 – 2:00 p.m.

Wednesday, October 6, 2021

Wednesday, November 3, 2021

Wednesday, December 1, 2021

Wednesday, January 5, 2022

Wednesday, February 2, 2022 – General Meeting
12:00 – 12:40 p.m.

Wednesday, February 2, 2022 – Public Hearing: LPC Local Funding Priorities
12:50 – 2:00 p.m.

Wednesday, March 2, 2022

April 6, 2022

May 4, 2022

June 1, 2022

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POLICIES AND PROCEDURES

I. Standard Operating Procedures

Anything not covered by the following policies and procedures will revert to Robert's Rules of Order.

II. Membership

RECRUITMENT OF CHILD CARE PLANNING COMMITTEE MEMBERS

The Governance Work Group of the Child Care Planning Committee (Planning Committee) will conduct recruitment in support of the recommending/appointing bodies, and in compliance with the membership categories defined in the *Education Code Sections 8499 - 8499.7*. To ensure optimal representation and access to this process, recruitment and outreach will be undertaken no less than three (3) months prior to the selection of members. Recruitment and selection will take into consideration geographic and ethnic representation, and will ensure that there will be at least one (1) member from each of the Service Planning Areas:

- Diversity within each category will be a primary consideration in the selection of members. For example, in the "Child Care Providers" category, every effort will be made to include representatives of programs operated under a variety of auspices (public, non-profit, for-profit, church-related, cooperatives, family child care, resource and referral/alternative payment programs, etc.).
- Appropriate nominating groups will be designated for each of the membership slots. Each of the five Board of Supervisors will name one member. The Superintendent of the County Office of Education will recruit members through local School District Superintendents.
- Prospective members will be asked to identify any family members serving on the Planning Committee. In the event that multiple family members are seeking to serve on the Planning Committee, the Governance Work Group will consider the Planning Committee's commitment to diversity, the skills of each member, and ability of each individual to contribute to the mission of the Planning Committee.
- The Governance Work Group will review the membership applications in consultation with the Child Care Planning Coordinator and recommend a membership slate to the Planning Committee for action. Any participant of the Governance Work Group who is being considered for membership cannot participate in the discussion of a membership roster or the final recommendations for membership that will be forwarded to the full Planning Committee. This includes alternates who have applied to become members and members whose first three-year term is expiring and wish to extend their membership for another three-year term.
- Nominees will be presented for appointment before September of each year.

ALTERNATES

Each member will name an alternate to serve in his/her absence and will give Planning Committee staff the alternate's name and contact information (address, telephone number, e-mail address, etc.). Effective FY 2019-20, the alternate must represent the same category as the member. The member is responsible for maintaining communication with the alternate regarding the business of the Planning Committee and for ensuring that the alternate is available to attend meetings. Alternates are encouraged to attend and participate in discussions at all Planning Committee and Work Group meetings. In the absence of the member's attendance at a meeting, the alternate will be entitled to vote.

If a member chooses to identify different persons to serve as his/her alternate for the Planning Committee and for a Work Group, it is the member's responsibility to provide Planning Committee staff the appropriate information on both alternates.

TERMS OF OFFICE

Members will serve three-year terms and may serve for up to two (2) consecutive three-year terms without a break. Former members will be eligible for re-nomination after a one (1) year hiatus.

An individual's term of membership may be terminated prior to the end of three (3) years due to: changes in employment or residence; conflict of interest issues; excessive absence (see II. Attendance and Participation); or other changes in status that affect the member's representation on the Planning Committee. When this occurs, effective FY 2019-20 the individual designated as the member's alternate will continue to serve in this capacity through the end of the year.

Members designated by a Board Office serve at the discretion of the Board members who designated them and may do so beyond the six-year limit. A member designated by a Board office may be replaced under the following conditions: 1) the choice of the Supervisor; 2) the resignation or retirement of the Supervisor from the Board; or 3) the unsatisfactory participation of the designated member in which case the procedure described in Section III is implemented.

OFFICERS

There are two (2) Officers of the Planning Committee: Chair and Vice Chair.

The term of the Chair will be two (2) years. If the Chair's membership term expires during his or her term as Chair, the membership term will be extended through the completion of term of office.

The Chair of the Planning Committee shall: 1) Chair the Planning Committee meetings; 2) help develop the agenda for each meeting; 3) sign all documents related to contracts with the California Department of Education, Board letters related to Planning Committee business, and other correspondence deemed appropriate; 4) serve as the Committee's representative to the Chief Executive Office on matters related to staff selection; and 5) represent the Planning Committee on the Policy Roundtable for Child Care and Development.

Election of Chair

Every two years, or in any year in which the Chair position is vacant, at the time of new member recruitment, the nominating process will begin. Members will be given nomination forms describing the role, responsibilities, and qualifications for Chair. To qualify to be nominated for

Chair, a member must have served on the Planning Committee for at least one year within the last five (5) years and have been actively participating through attendance at both Planning Committee and Work Group meetings. Members may nominate themselves or other Planning Committee members.

Nominations will be open throughout the period of membership recruitment. All nominees will be contacted to ascertain their interest in serving as Chair. The names of all nominees who agree to have their names brought forward will be presented to the full membership prior to the meeting at which the membership slate is approved. The election of the Chair from among those nominated will take place at the same meeting as the approval of the membership slate.

Election of Vice Chair

The term of office for the Vice Chair will be one (1) year with a one-year renewable term upon election.

The Vice Chair shall chair the meetings in the absence of the Chair. In the event that the Chair cannot fulfill his/her term, the Vice Chair will step in to fulfill the role of Chair for the remainder of the Vice Chair's term. In his/her capacity as acting Chair, the Vice Chair may appoint, from among actively participating members, an interim Vice Chair for the remainder of the Vice Chair's term.

Every year, at the time of new member recruitment, members will be given nomination forms for the position of Vice Chair. To qualify to be nominated for Vice Chair, a member must have served on the Planning Committee for at least one year within the last five years and have been actively participating through attendance at both Planning Committee and Work Group meetings. Members may nominate themselves or other Planning Committee members.

Nominations will be open throughout the period of membership recruitment. All nominees will be contacted to ascertain their interest in serving as Vice Chair. The names of all nominees who agree to have their names brought forward will be presented to the full membership prior to the meeting at which the membership slate is approved. The election of the Vice Chair from among those nominated will take place at the same meeting as the approval of the membership slate.

III. Attendance and Participation

Although a quorum is constituted by 50 percent of the current membership, members are expected to attend all Planning Committee meetings, or arrange for an alternate to attend. All member(s) and their alternate(s) must sign the attendance roster provided for each Planning Committee meeting and each Work Group meeting.

ABSENCES

Members may be absent from no more than three (3) consecutive Planning Committee meetings or three (3) consecutive Work Group meetings. To be considered absent from a meeting, neither the member nor his/her alternate would be present. After the second consecutive absence, the Planning Committee staff may contact the absent member. After the third consecutive absence, a letter will be sent from staff to the appointee notifying him/her of his/her termination from the Planning Committee. Termination from the Planning Committee does not prohibit participation as a guest.

Exceptions to this termination process are members who have been specifically appointed by the Board of Supervisors or by the Los Angeles County Superintendent of Schools. In these cases,

Planning Committee staff will contact staff of the Board Office or the Los Angeles County Superintendent of Schools to recommend termination and to consult with them.

WORK GROUP PARTICIPATION

Participation in at least one (1) Work Group is required of all members. All members must choose their Work Group by the second Planning Committee meeting following the orientation of new members. Failure to attend any Work Group by the third Planning Committee meeting following the orientation meeting will be recorded as an absence. A member may change his/her Work Group by notifying the staff of the Planning Committee and the Chair(s) of the Work Group, which he/she is leaving.

In order to remain on the Planning Committee, a member or his/her alternate can miss no more than three (3) consecutive meetings of the Work Group. (Please see Absence provision.)

Work Group participation is open to any interested individuals regardless of membership status. However, the Governance Work Group is limited to only members and alternates.

IV. Voting

QUORUM

For the purposes of voting, a quorum will be deemed to be 50 percent of the current membership.

ACTION ITEMS

Action Items are routine or extraordinary actions or decisions related to the functions and purposes of the Planning Committee that require a vote of approval from the Planning Committee. Approval of Planning Committee minutes are action items at each meeting. Changes to Planning Committee structure or to the Policies and Procedures are action items.

A vote must be taken by the Planning Committee on items that are child care policy positions, or are related to the mandated functions of the Planning Committee. The Planning Committee will take action on the following mandated functions: 1) service priorities for State-funded child development services; 2) Countywide Needs Assessment; 3) Centralized Eligibility List;¹ and 4) a comprehensive countywide plan for child care and development services.

All action items must be listed on the publicly posted agenda at least three (3) days prior to the scheduled meeting date (see Brown Act Provision). Action items initiated by Work Groups must be forwarded to staff at least two (2) weeks before the date of the meeting on which agenda the action item should appear.

¹ Funding for countywide centralized waiting lists (CEL) was eliminated from the 2011-12 State budget. Nevertheless, references to the CEL remain in statute.

ROLE OF WORK GROUPS

Work Groups are formed to conduct the business of the Planning Committee, implement the Strategic Plan for Child Care and Development, and fulfill other mandates for Local Planning Councils as stated in the Education Code. In the course of its efforts, a Work Group of the Planning Committee may develop a policy, make a recommendation, plan an event requiring Planning Committee resources, or seek to ensure Planning Committee representation in other groups. The full Planning Committee must be informed of the decisions and recommendations of each Work Group. The full Planning Committee may request that a particular policy statement or activity be presented to the Planning Committee for approval. The following types of action, including but not limited to recommendations for positions on legislation, for changes in the Policies and Procedures, and for activities requiring substantial expenditure of Planning Committee funds, will be brought before the full Planning Committee for a vote. This applies to both standing and ad hoc Work Groups.

CONFLICT OF INTEREST

No member of the Planning Committee will participate in a vote if he/she has a proprietary interest in the outcome. For the purpose of this provision, a person with a proprietary interest is defined as one who may benefit financially from a decision of the Planning Committee; or who is employed by, acts as a paid consultant to, or functions in a decision-making capacity with any agency, which stands to gain directly and financially from an action of the Planning Committee. In case of a potential conflict, the member (or alternate) must refrain from participating in the discussion of the issue after they publicly identify their interest and must recuse themselves from any vote taken on the issue.

Before discussion and voting, members will be reminded of their responsibility to assess the potential for conflict of interest. Members are required to declare their affiliations on the membership application. In case of challenge, the membership applications will be reviewed.

VOTING ON MOTIONS

Each member of the Planning Committee shall be entitled to one vote on each action item before the Planning Committee. If the member is absent, the alternate to the Planning Committee may vote in the place of the member. There will be no secret ballots or absentee voting on any Planning Committee action items, including election of officers. The Chair, or any other member, may request a roll call vote on specific motions. A record of roll call votes shall be kept by Planning Committee staff and be included in the minutes.

A motion will be considered as “passed” when a simple majority of the members present vote in the affirmative. Abstentions are not considered votes and are therefore not counted as support for the motion. A motion which results in a tie vote does not pass.

V. Staff Selection

At the time that a new staff position opens or a current position becomes available in the Office for the Advancement of Early Care and Education, and these positions work directly with the Planning Committee, a representative of the Planning Committee will be part of the interview panel for each position. Members of the Governance Work Group will serve as the pool from which members will be called upon to serve on interview panels. The Chair of the Planning

Committee has the discretion to serve on interview panels or can call for additional or alternate representation as needed from among active Planning Committee members.

VI. Complaint Procedure

Any complaint by a member of the Planning Committee or any other person regarding any action, policy, or procedure of the Planning Committee may be addressed through the following steps:

- 1) The complaint/concern should be brought to the attention of the Planning Committee staff in writing. The staff will respond to the complaint and/or provide a response to the complaining party within 14 working days.
- 2) If the staff is unable to resolve the complaint, the written complaint will be forwarded to the Governance Work Group for review. The Work Group will review the complaint and may or may not, at the Work Group's discretion, meet with the complaining party. The Work Group will respond to the complaint within 30 calendar days from receipt of the written complaint.
- 3) If the Work Group's response is not satisfactory to the complaining party, he/she may submit the complaint to the Board of Supervisors and County Superintendent of Schools for a response.

VII. Amendments to the Policies and Procedures

Amendments to this document can be considered at any time by members of the Planning Committee or as the result of periodic review by the Governance Work Group. Members of the Planning Committee may submit a written inquiry regarding the Policies and Procedures to the Co-chairs of the Governance Work Group at any time. The Work Group will review each written inquiry and issue a written response within thirty (30) days of receipt of the inquiry. All written inquiries and their disposition will be recorded in the Governance Work Group's report to the full Planning Committee.

The Governance Work Group will review the Policy and Procedures every two years to determine if clarification or changes are required. The Governance Work Group may develop an amendment or new policy language and bring it forward to the full Planning Committee as an action item at any time.

VIII. Compliance with Brown Act

The Planning Committee will comply with the Brown Act. All Planning Committee meetings are open to the general public. Agendas for Planning Committee meetings will be posted publicly three (3) days prior to the meeting. No action item will be undertaken at any Planning Committee meeting unless it has been listed on the publicly posted agenda.

Adopted by the Committee:	July 1, 1998
Updated:	December 4, 2002
Updated:	April 4, 2003
Updated:	March 6, 2004
Updated:	March 11, 2005
Updated:	June 1, 2005
Updated:	May 3, 2006
Updated:	December 3, 2008
Updated:	December 1, 2010
Updated:	May 2, 2012
Updated:	November 5, 2014
Reviewed without changes:	September 20, 2016
Updated:	September 5, 2018
Reviewed without changes:	May 14, 2020

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County of Los Angeles

A Unified Strategic Plan for Early Care and Education

2020
-
2025



CHILD CARE
PLANNING
COMMITTEE



COUNTY OF LOS ANGELES
OFFICE FOR THE ADVANCEMENT OF
EARLY CARE AND EDUCATION



POLICY ROUNDTABLE
FOR CHILD CARE
AND DEVELOPMENT



COUNTY OF LOS ANGELES
Public Health



1ST LA
first 5 la
Giving kids the best start



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First District

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Mark Ridley-Thomas
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Kathryn Barger
Fifth District

Sheila Kuehl
Third District

Barbara Ferrer, Ph.D., M.P.H., M.Ed.
Director, Department of Public Health

Deborah Allen, ScD
Deputy Director, Health Promotion Bureau

Debra Colman, MSW
Director, Office for the Advancement of Early Care and Education

Michele P. Sartell, MSW
Child Care Planning Coordinator, Office for the Advancement of Early Care and Education

Office for the Advancement of Early Care and Education
Department of Public Health - Health Promotion Bureau

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childcare.lacounty.gov

January 2020

Dear Colleagues,

The early care and education system in Los Angeles County supports the optimal development of children aged birth to five years old, as well as children up to age 13 in before and after school programs. These services are critical to our economy, supporting parents and caregivers while they work, and preparing children for kindergarten entry with the skills and confidence they need to succeed in school and life.

Under the leadership of the Los Angeles County Department of Public Health (DPH), the Office for the Advancement of Early Care and Education (OAECE) convened the Policy Roundtable for Child Care and Development (Roundtable) and the Child Care Planning Committee (Planning Committee) to lead a collaborative planning process involving nearly 100 stakeholders. The result of this effort is the County's first unified plan for early care and education, which will guide the work of the OAECE, the Roundtable, and the Planning Committee under one vision, one mission, and with a single unified voice.

We are excited to present the 2020-2025 County of Los Angeles Unified Strategic Plan for Early Care and Education. The plan outlines four strategic priorities:

- **Access** - Increase access to early care and education services for children birth to five years of age and out of school care for children up to age thirteen.
- **Quality** - Strengthen the quality of early care and education services, especially for children and families most in need.
- **Workforce** - Improve the compensation and qualifications of the early care and education workforce.
- **Families and Communities** - Increase engagement of parents, caregivers and communities on early care and education issues.

Making progress on these strategic priorities will require continued collaboration among all aspects of the early care and education system as well as new partnerships with non-traditional partners and allies. By joining forces under this unified plan, we can achieve the vision that children are healthy, thriving and have equitable opportunities to achieve optimal development and succeed in life.



Dr. Barbara Ferrer, Director
Los Angeles County Department
to Public Health



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EXECUTIVE SUMMARY

Early care and education can be a cornerstone for a child's healthy development and future well-being. So they can thrive, all children deserve access to high-quality early learning environments to support their growth and development. Quality early care and education programs offer nurturing and stimulating environments that contribute to a child's optimal physical, social-emotional, linguistic, and cognitive development. For working families, child care is also an essential resource that enables parents and caregivers to remain in the workforce. To ensure that all children have access to high-quality early care and education, the Los Angeles County Office for the Advancement of Early Care and Education (OAECE), under the leadership of the Department of Public Health (DPH) and in partnership with the Policy Roundtable for Child Care and Development (Roundtable) and the Child Care Planning Committee (Planning Committee), presents the County of Los Angeles Unified Strategic Plan for Early Care and Education – 2020-2025 (the Plan).

A Unified Approach

Serving approximately 650,000 Los Angeles children under age 5, the early care and education system is a complex and disconnected matrix of services. Recently, support for our youngest children has risen as a priority issue with elevated political attention and increased public investment. This critical moment in time provides an opportunity to shift how early care and education is approached in Los Angeles County. The Plan was developed through



an innovative collaborative process involving almost 100 stakeholders including OAECE staff, Roundtable members, and Planning Committee members. The Plan documents shifts in the early care and education landscape, the history of each of three entities that developed the Plan, and the twelve-month process that brought unique perspectives together under a common vision. The Plan also uplifts OAECE as the Los Angeles County early care and education office and the transformative role it can serve as an educator, convener, data manager, strategist and advocate.

Strategic Priorities

As a north star for Los Angeles County early care and education efforts, the Plan offers a guiding framework for the OAECE, Roundtable, Planning Committee, and other stakeholders with four focus strategic areas: 1) access to early care and education, 2) early care and education quality, 3) early care and education workforce supports, and 4) family and community engagement in early care and education issues.

Implementation Planning

The four strategic priorities define a direction for early care and education systems and the Plan provides a starting place for collaborative work. A full implementation framework identifying specific activities in each of the four strategic areas, and the assumptions, tasks, roles, timeline, and resources required to achieve them will be completed by June 2020.

INTRODUCTION AND BACKGROUND

Early care and education programs support the care and development of children birth to five years old, as well as out of school care for children to age 12. Program providers may include school districts, early care and education centers, licensed family child care homes, and family, friends, and neighbors who provide care. Across Los Angeles County, many families struggle to find services for their children that are high-quality and affordable. The average annual cost of child care is \$10,303 per preschooler in center-based care and \$8,579 per preschooler in family child care². During the recession, early care and education programs subsidized by the State of California for low-income families experienced budget reductions totaling \$1.5 billion³ impacting families with the greatest need. Over the past few years, modest increases have restored some funds to the subsidized system, although a substantial gap between funding and need remains.

State and Local Priorities

Most recently, attention at state and local levels to the importance of the early years has generated new public investments. Contributing to this momentum, the California Assembly Blue Ribbon Commission on Early Childhood Education released its final report in April 2019 with a list of recommendations that called for significant funding and systems change. The 2019-2020 California Budget includes \$5 million for a Master Plan for Early Learning and Care, \$245 million for grants to child care and preschool providers for facilities expansions, and \$195 million for early learning and care workforce development grants.

Locally, the Los Angeles County Board of Supervisors (Board) lobbied successfully for State investment in the Emergency Child Care Bridge Program for Children in Foster Care. The Board also instructed the Chief Executive Office – Homeless Initiative to identify strategies to connect families experiencing homelessness with early care and education services and mandated the Chief Executive Office, in consultation with the Roundtable and the OAECE, to identify county-owned properties that could provide space for early care and education programming. Further local support is the identification of access to quality early care and education as a critical strategy for the prevention of child abuse and neglect as highlighted in the LA County’s Office for Child

Protection’s (OCP) *Countywide Child Protection Strategic Plan – 2016-21*⁴.

In Los Angeles County, responsibility for harnessing this new energy to create an early care and education system that meets child and family needs rests with three entities, the Planning Committee, the Roundtable and the OAECE housed within the DPH Health Promotion Bureau.

Office for the Advancement of Early Care and Education

In 2000, the Los Angeles County Office of Child Care (OCC), the predecessor of the OAECE, was established under the Chief Executive Office (CEO) to address the child care needs of Los Angeles County employees and to staff a state-mandated local child care and development planning council (Planning Committee). Soon after the establishment of the Planning Committee, the Board called for the founding of the Policy Roundtable for Child Care and Development to focus on early care and education policy and systems improvement. Management of both the Planning Committee and the Roundtable were assigned to OCC. In 2001, the role of the OCC expanded to workforce professional development with the Investing in the Early Educators Stipend Program, followed by the California Transitional Kindergarten Stipend Program (CTKSP). OCC developed and implemented the Steps to Excellence Program (STEP), a quality rating and improvement system (QRIS) in 2007. Although OCC no longer leads a QRIS program, it continues to influence quality practices as a part of Quality Start Los Angeles. OCC changed its name to OAECE in 2016 and transitioned to DPH in 2018. The move to DPH reflected recognition of the vital role that early care and education plays in child development, family well-being and community health.

² Child Care Planning Committee. *The State of Early Care and Education in Los Angeles County – Los Angeles County: Child Care Planning Committee 2017 Needs Assessment Executive Summary*. March 2017.

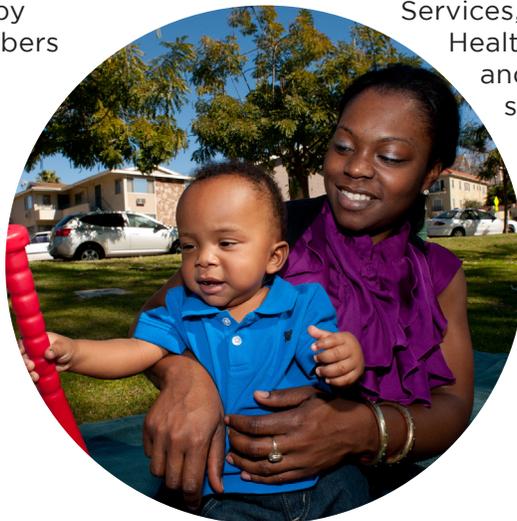
³ California Budget Project. (2012). *Falling Behind: The Impact of the Great Recession and the Budget Crisis on California’s Women and Their Families*.

⁴ See ocp.lacounty.gov/Portals/OCP/PDF/OCP%20Strategic%20Plan%20and%20Progress%20Updates/2016-10-20%20OCP%20Strategic%20Plan%202016-2021.pdf?ver=2018-10-23-170532-757.

INTRODUCTION AND BACKGROUND

Child Care Planning Committee

The Child Care Planning Committee is Los Angeles County's state mandated Local Child Care and Development Planning Council (LPC) funded by the California Department of Education (CDE). Established as the County's LPC in 1991, the Child Care Planning Committee is staffed by OAECE and is composed of 50 members including parents/consumers, early educators, board appointees and representatives of public agencies, community-based organizations, higher education, and resource and referral agencies. The State requires the Planning Committee to conduct county-wide planning to address access to quality, affordable early care and education.



Policy Roundtable for Child Care and Development

The Roundtable, established in 2000, is a Board of Supervisors appointed body composed of 25 community leaders in early childhood, education, business, economics, and research and representatives of County Departments including Child and Family Services, Mental Health, Probation, Public Health, Public Social Services, and Parks and Recreation. The Roundtable is staffed by OAECE and charged with developing policy recommendations for elevation to the Board of Supervisors, advising County departments on early care and education programs, and identifying strategies to secure, coordinate, and maximize funding for high quality services.

THE PLANNING PROCESS

Strategic planning was launched in the fall of 2018 by the OAECE in partnership with the Planning Committee and the Roundtable. Funding from First 5 LA supported the Center for Nonprofit Management to facilitate the planning process. The proposal to bring these entities together to develop a unified plan demonstrates a recognition across all participating bodies that working together is a tremendous step toward a more cohesive system in Los Angeles County.

Values and Guidelines

Early in their work together, the three participant entities articulated a set of values to inform the planning process. They agreed that the process would 1) embrace a deliberate focus on equity, 2) inspire collaboration and partnerships with community stakeholders and meaningful engagement of authentic family and parent voices, 3) be trauma-informed, 4) promote policy and systems change, and 5) use data to inform planning and advocacy. These values informed the development of a set of guidelines that were intentionally aligned with the Assembly Blue Ribbon Commission on Early Childhood Education's approved principles. The guidelines served as a framework for the identification of strategic priority

areas and strategies. These guidelines focus on access, equity, quality, workforce, families, financing, targeted investments, data and advocacy. Going forward, the guidelines will be used to evaluate potential tactics and the crafting of implementation activities. To learn more about the guidelines, please see Appendix A.

One Vision, One Mission

The strategic planning process entailed review of the intersecting mission statements of the OAECE, Planning Committee, and Roundtable to arrive at the following united vision and mission statements:

VISION

Children are healthy, thriving and have equitable opportunities to achieve optimal development and succeed in life.

MISSION

Lead, build, and strengthen an affordable and high-quality early care and education system for the children and families in Los Angeles County.

OFFICE FOR THE ADVANCEMENT OF EARLY CARE AND EDUCATION AS A CHANGE AGENT

With the shared vision and mission as the foundation, the OAECE, Roundtable and Planning Committee will implement the 2020-2025 strategic plan through a united effort managed by OAECE. As the Los Angeles County early care and education office, OAECE has a unique mandate to promote systems change through the advancement of new policy and program initiatives, based on the work of its collaborating partners. The strategic plan highlights the mandate of OAECE as an agent of policy and systems change through five primary roles.

Educator: It is the job of OAECE to inform partners, advise key stakeholders and publicly promote the importance of quality early care and education to support the well-being of children, strengthen families and help communities thrive.

Convener: The plan will require OAECE to convene and nurture committees, commissions and task forces to act as agents of change in early care and education policy and systems planning.

Data Manager: Reflecting the shared value noted above, it will be the task of OAECE to gather, organize, manage, and disseminate data related to family needs, system capacity, program quality and child and family outcomes to shape effective strategies and strengthen early childhood systems.

Strategist: Drawing on data, OAECE will be called upon to conceptualize, design, and implement innovative programmatic, policy, and systems change strategies.

Advocate: To assure implementation of system improvements, OAECE will need to mobilize and support advocacy for public policies (legislative and administrative) that build and strengthen the early care and education system in Los Angeles County.



STRATEGIC PRIORITIES

The 2020–2025 strategic priorities will guide collective efforts of the OAECE, Roundtable, and Planning Committee over the next five years. Grounded in the Planning Committee’s 2017 needs assessment entitled *The State of Early Care and Education in Los Angeles County*,⁵ the priorities focus on 1) access to early care and education, 2) early care and education quality, 3) early care and education workforce supports, and 4) family and community engagement on early care and education issues. The paragraphs that follow provide a brief preview of each of the priorities and one example of the kinds of activities under each strategy that will be expanded upon in the implementation stage of planning.

Priority 1: Access

The early years are a critical period in human development. The foundation that is built through a child’s participation in quality early care and education is associated with positive economic, educational and social impacts lasting well into adulthood⁶, benefitting both the individual child, family and larger community. Unfortunately, many families in Los Angeles County do not have access to affordable, quality early care and education. There are approximately 650,000 children under five in Los Angeles County, but only 206,830 spaces in licensed centers and family child care. The 2017 early care and education needs assessment highlighted challenges like a shortage of infant and toddler care, the decline in family child care homes, increased participation in transitional kindergarten, and the high cost of child care.

Goal 1: Increase access to early care and education services for children birth to five years of age and out of school care for children to age twelve.

Strategies:

1.1: Reduce barriers and maximize resources to expand early care and education services to centers and family child care homes, prioritizing infants and toddlers, high-need families, and under resourced communities.

- **Example Activity** - *Finalize and promote a toolkit that helps early care and education providers navigate the facility development system including licensing, zoning, fire, and public health.*

1.2: Advocate for funding to build or upgrade early care and education centers and family child care homes.

- **Example Activity** - *Develop a cross-sector advocacy strategy for facilities funding and for tackling barriers to facility development.*

1.3: Lead the analysis of data on the needs of Los Angeles County families for early care and education services and share with stakeholders to inform local planning and increased early learning investments.

- **Example Activity** - *Launch an on-line dashboard to inform the public about the supply and demand of Los Angeles County early care and education services.*



⁵ Child Care Planning Committee. *The State of Early Care and Education in Los Angeles County – Los Angeles County: Child Care Planning Committee 2017 Needs Assessment Executive Summary*. March 2017. See childcare.lacounty.gov/wp-content/uploads/2018/06/ECE-Needs-Assessment_Executive-Brief-03-30-2017.pdf.

⁶ Schweinhart, L.J., Montie, J., Zongping, X, Barnett, W.S., Belfield, C.R., & Nores, M. *Lifetime Effects: The High/Scope Perry Preschool Study Through Age 40* (pp. 194–215). Ypsilanti, MI:High/Scope Press. © 2005 by High/Scope® Educational Research Foundation.

STRATEGIC PRIORITIES

Priority 2: Quality

Every parent should have the opportunity to enroll their child in a high-quality early care and education program. Research shows that there is a relationship between early care and education quality and children's academic achievement, as well as language and cognitive development.⁷ To increase the quality of care, initiatives like Quality Rating and Improvement Systems (QRIS) have emerged across the country. Locally, Quality Start Los Angeles (QSLA)⁸ has led the way in strengthening a county-wide quality improvement system. While QRIS is an approach to incentivize and support quality improvement, it is just one strategy on a continuum of quality improvement supports which may include *teacher-focused* efforts like training; *setting-focused* efforts like facilities grants; *family-focused* efforts like educating parents about quality; and *systems level efforts* which focus on setting and meeting standards.⁹

Goal 2: Strengthen the quality of early care and education services, especially for children and families most in need.

Strategies:

2.1: Partner with local quality improvement efforts to provide input, inform and influence quality improvement efforts.

- **Example Activity** – Launch a campaign in partnership with the Quality Start LA to promote what quality looks like in a program.

2.2: Advocate for increased quality improvement investments for all providers including centers, family child care, and family, friends, and neighbor care.

- **Example Activity** – Elevate quality improvement policy recommendations to the Los Angeles County Board of Supervisors through the Roundtable.

2.3: Leverage data from local quality improvement efforts to publicly promote the importance of quality care.

- **Example Activity** – Release a “True Cost of Quality Care” infographic based on the Comprehensive Fiscal Analysis funding model.

2.4: Promote integration across early childhood services and develop strategies that connect early childhood education with other child/family support systems.

- **Example Activity** – Create a handbook that helps parents navigate early childhood services such as early care and education, home visitation, developmental screenings, early childhood mental health consultation, kindergarten transition, library services, and parks and recreation.



⁷ Jeon, L. & Buettner, C.K. (2014). *Quality rating and improvement systems and children's cognitive development*. Child Youth Care Forum, 44, 191-207. Doi: 10.1007/s10566-014-9277-7.

⁸ Quality Start Los Angeles (QSLA) is a voluntary quality rating and improvement system (QRIS) designed to help parents of children birth to five choose the best early childhood education for their family.

⁹ Boller, K., Tarrant, K. & Schaack, D.D. (2014). *Early Care and Education Quality Improvement: A Typology of Intervention Approaches*. OPRE Research Report #2014-36. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

STRATEGIC PRIORITIES

Priority 3: Workforce

The quality of early learning programs for children is intrinsically connected to the early care and education workforce. Given the importance of a workforce armed with the knowledge, skills and attitudes required to achieve quality care, the Plan elevates workforce as a separate priority, rather than just a component of the quality priority discussed above. Numerous studies indicate that a well-educated workforce provides children with better quality care resulting in increased developmental gains.¹⁰ A key to enhancing the quality of the early care and education system lies in the professionalization of the workforce and a comprehensive professional development pathway comprised of college coursework, training, coaching and mentoring. Unfortunately, the early care and education workforce faces multiple challenges inclusive of low wages, limited education, and barriers to accessing professional development that must be addressed to achieve improved system quality.

Goal 3: Improve the compensation and qualifications of the early care and education workforce.

Strategies:

3.1: Advocate for increased compensation for the early care and education workforce.

- **Example Activity** – Release a policy brief advocating for a single reimbursement rate that incentivizes and compensates for the true cost of quality care.

3.2: Advocate for an efficient, comprehensive statewide data system to track information on the workforce and provide a portal for early educators to access professional development opportunities and build their career profiles.

- **Example Activity** – Integrate the Investing in Early Educators Stipend Program with the Early Care and Education Workforce Registry to reduce duplicated work and increase efficiency in serving the early care and education workforce.

3.3: Reduce barriers to professional development opportunities.

- **Example Activity** – Build a one-stop website that seamlessly connects Los Angeles County early educators to training opportunities of all kinds.



¹⁰ Saracho, O.N. & Spodek, B. (2007). *Early childhood teachers' preparation and the quality of program outcomes*. *Early Child Development and Care*, 177 (1), 71-91. Doi: 10.1080/03004430500317366.

STRATEGIC PRIORITIES

Priority 4: Families and Communities

To build an effective early care and education system in Los Angeles County, it is essential to incorporate the voices of parents, primary caregivers,¹¹ and communities. Children learn and grow in the context of overlapping spheres of influence,¹² so it is critical to build effective and reciprocal partnerships among early care and education programs, families, and communities. A key component for effective systems changes lies in authentically engaging parents, understanding the early care and education issues they face day to day, and inviting them to be partners in developing solutions.

Goal 4: Increase engagement of parents, caregivers and communities on early care and education issues.

Strategies:

4.1: Assure parent and caregiver access to research findings on early care and education issues.

- **Example Activity** – Release family-friendly materials that promote the importance of early care and education by collaborating with allies like Resource and Referral agencies.

4.2: Empower and mobilize families as advocates for early care and education resources.

- **Example Activity** – Launch an early care and education campaign that advances the authentic parent voice through parent testimonials.

4.3: Engage parents, families and community members as thought partners on early care and education issues through events and committees.

- **Example Activity** – Establish a parent/caregiver workgroup as a part of the Planning Committee to inform and influence early care and education planning across Los Angeles County.



¹¹ Primary caregivers include legal guardians, foster parents, and relative caregivers.

¹² Epstein, J. L. (1987). *Toward a theory of family-school connections: Teacher practices and parent involvement*. In K. Hurrelmann, F. Kaufman and F. Loel (Eds.), *Social Intervention: Potential and Constraints* (pp. 121-136). New York: Walter de Gruyter.

IMPLEMENTATION PLANNING

While this initial strategic plan will guide the direction of OAECE, the Planning Committee and the Roundtable over the next five years, the plan is very broad. An implementation plan, to be completed by June 2020, will bring the strategic priorities to life. Throughout the strategic planning process, OAECE has garnered a wealth of information that will inform the development of a comprehensive implementation plan that will identify specific actions needed to accomplish targeted goals. The next phase of the planning process will launch in January 2020 through an all-day input session with parents, early care and education providers, community organizations, public agencies, supervisorial representatives and various Los Angeles County Departments.

The implementation plan will tackle critical issues to guide success including:

- **Assumptions:** Articulate a clear set of assumptions about factors that shape access, quality, the workforce and family engagement.
- **Objectives:** Establish clear, measurable objectives for each strategy area.
- **Implementation Activities:** Develop activities for each of the four priority areas and strategies.
- **Roles and Responsibilities:** Define the distinct roles and responsibilities of OAECE, the Planning Committee, the Roundtable and other stakeholders within each strategy.
- **Timeline:** Create an implementation timeline with annual targets for outcomes and milestones for success.
- **Resources and Budget:** Produce an inventory of fiscal and in-kind resources needed to execute the implementation plan effectively.

If you are interested in participating in implementation planning, please contact the Office for the Advancement of Early Care and Education at (213) 639-6202.



APPENDIX A

Guiding Principles

The guiding principles, intentionally aligned with the Assembly Blue Ribbon Commission on Early Childhood Education's approved principles,¹³ provide direction for the identification of strategic priority areas and preliminary action items. Going forward, the guiding principles will be used to evaluate potential tactics and the crafting of additional action items.

Access: All children and their families should have access to nurturing, educational, culturally, linguistically and developmentally appropriate high-quality early care and education opportunities with a commitment to social, behavioral, cognitive and physical development and continuity of care.

Equity: Equity must inform all decisions and systems and implicit bias must be acknowledged and managed. Policies and systems should affirmatively remove obstacles and barriers for families seeking access to early care and education.

Quality: All families should have access to a variety of high-quality early care and education settings that meet their needs and that are affordable.

Workforce: High quality early care and education requires a competent, effective and well-compensated and professionally supported workforce who reflect the racial, ethnic and linguistic diversity and needs of the children and the families they serve across the various roles and settings.

Families: Early care and education must be integrated with other supports and services that contribute to children's optimal development, engages and strengthens families, and builds upon the capacity of the workforce.

Financing: High quality early care and education requires leveraging financing that is adequate and sustainable with incentives for quality and targeted investments to ensure equity for children and families with the greatest needs.

Targeted Investments: Efforts are required to maintain services, prioritize areas of need by targeting investments, capitalize in what works, and build upon areas of success.

Data and Advocacy: The County of Los Angeles in partnership with its local stakeholders¹⁴ plays a significant role in advocating for legislative and administrative policies and investments informed by robust data and current research to meet the needs of our children and their families. Our work must be transparent, accountable, collaborative, and committed to equity, continuous improvement and responsive to emerging needs.

¹³ Adapted from the Assembly Blue Ribbon Commission on Early Childhood Education Principles approved on October 9, 2018. Their principles are posted at speaker.asmdc.org/sites/speaker.asmdc.org/files/pdf/BRC-Principles-Final-120318.pdf.

¹⁴ Local stakeholders are inclusive of parents and other primary caregivers (e.g. foster parents, legal guardians and relatives), early educators, institutions of higher education, child care resource and referral agencies, public agencies (i.e. County departments), philanthropy, advocacy organizations, businesses, and others concerned with the optimal well-being of children, families and communities.

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The State of Early Care and Education in Los Angeles County

Executive Summary

Los Angeles County Child Care Planning Committee 2017 Needs Assessment



OVERVIEW

The early years of a child's development lays the foundation for success in school. According to Harvard's Center on the Developing Child, 700 to 1,000 new neural connections form every second in the first few years of a child's life. To support this critical time in a child's early learning and development, it is essential for families to have access to high-quality early care and education programs. *The State of Early Care and Education in Los Angeles County: Los Angeles County Child Care Planning Committee 2017 Needs Assessment* explores the resources and gaps in the early care and education system that serves young children and their families in L.A. County. This report focuses on three essential components of the early care and education system: **Access** to early care and education; **Quality** in early care and education; and the early care and education **Workforce**.

The report was produced as a partnership between the Los Angeles County Child Care Planning Committee, the Los Angeles County Office for the Advancement of Early Care and Education (formerly known as the Los Angeles County Office of Child Care) and First 5 LA.

NEEDS ASSESSMENT PARTNERS

Los Angeles County Child Care Planning Committee:

To guide the early care and education field throughout California, every county has a local child care and planning development council. The Los Angeles County Child Care Planning Committee (Planning Committee) serves as the local child care and development planning council for Los Angeles County as mandated by state legislation (AB 2141; Chapter 1187, Statutes of 1991). One of the responsibilities of each Local Child Care and Development Planning Council is to conduct an assessment of child care needs in the county no less than once every five years. The mission of the Planning Committee is to engage parents, child care providers, allied organizations, community, and public agencies in collaborative planning efforts to improve the overall child care infrastructure of the County of Los Angeles, including the quality and continuity, affordability, and accessibility of child care and development services for all families.

Los Angeles County Office for the Advancement of Early Care and Education:

The Los Angeles County Office for the Advancement of Early Care and Education (the Office) envisions a high quality early care and education system accessible to all families that nurtures children's healthy growth and early learning, fosters protective factors in families, and strengthens communities. It shapes policy recommendations, facilitates planning, and provides a range of services aimed at improving the availability, quality and access to early care and education programs. As a part of its work, the Office staffs the Los Angeles County Child Care Planning Committee, as well as the Los Angeles County Policy Roundtable for Child Care and Development.

First 5 LA: First 5 LA is a leading early childhood advocate working collaboratively across L.A. County and was created in 1998 to invest L.A. County's allocation of funds from California's Proposition 10 tobacco tax. Since then, First 5 LA has invested more than \$1.2 billion in efforts aimed at providing the best start for children from prenatal to age five and their families. First 5 LA, in partnership with others, strengthens families, communities, and systems of services and supports so all children in L.A. County enter kindergarten ready to succeed in school and life.



FINDINGS AND RECOMMENDATIONS

Access to Early Care and Education

A child's early years are a critical period in a young person's development. The foundation that is built through a child's participation in quality early childhood education sets them on a path to positive economic and social impacts lasting well into adulthood, from higher educational attainment and less chance of involvement in criminal activity, to higher status employment and higher earnings (Schweinhart 2007; Sparling, Ramey & Ramey 2007). Early care and education benefits the children and families who participate and yields long lasting benefits for society as a whole. Nobel laureate in economics, James Heckman, found that the long-term, economic return on investment in high-quality early care and education programs can yield up to a 13% return (Heckman 2016).

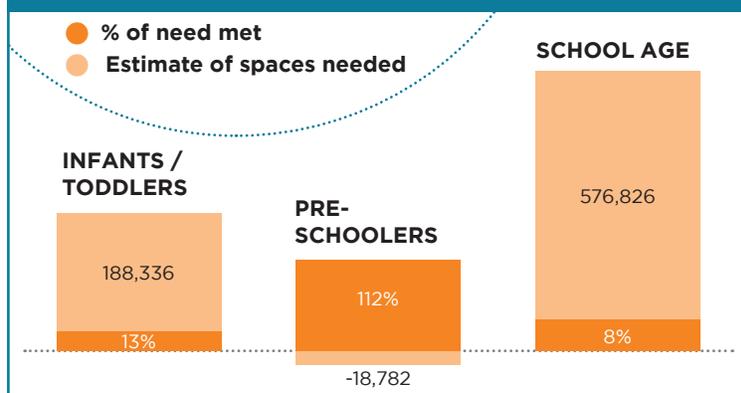
The 2017 Needs Assessment findings regarding early care and education access draw attention to the shortage of infant and toddler care, the decline in family child care homes, the increased participation in transitional kindergarten, and the high cost of child care.

1) There are not enough early care and education services for families with infants and toddlers.

There are approximately 650,000 children under the age of 5 in Los Angeles County, yet licensed centers and family child care homes only have the capacity to serve 13 percent of working parents with infants and toddlers. In stark contrast, there are 12 percent more licensed preschool spaces than there are preschool age children of working parents.

In addition to the overall lack of licensed spaces for infants and toddlers, subsidies to help low-income working parents cover the cost of infant and toddler care fall woefully short of the need. Subsidized early care and education programs help low-income working parents become financially stable, yet only 15 percent of eligible infants and toddlers are served, compared to 41 percent of eligible preschoolers and 53 percent of eligible school age children. A lack of care for our youngest children impacts not only working families but also affects our economy as a whole. With the extreme gap between the number of working families with infants and toddlers and the capacity of licensed early care and education providers to care for infants and toddlers, Los Angeles County faces a significant challenge.

The Need for Early Care and Education in Los Angeles County



- **Recommendation - Conduct a deeper analysis of the barriers to increasing the supply of infant/toddler care:**

Conduct in-depth analysis of the challenges and barriers for providers to serve infants and toddlers and identify potential solutions to those barriers. Key issues to be explored may include the financial burden of providing care to infants and toddlers; the challenge of providing the appropriate physical environment for infants and toddlers (e.g., city zoning, education code and licensing regulations, such as square footage and the requirement for napping area); the cost and need for staff professional development to appropriately care for infants and toddlers; and the low compensation of the workforce.

- **Recommendation - Increase investments to expand access for infant and toddler care:**

Increase State and federal investments in child care subsidy programs, especially for infants and



toddlers. Advocate for additional funding for subsidized infant/toddler care through increases in State programs like California Center Based Programs (CCTR) for Infants and Toddlers and Alternative Payment, as well as federal initiatives like Early Head Start.

2) The County continues to lose licensed family child care spaces for all age groups while licensed center capacity has grown.

Licensed family child care facilities, which are located in a provider’s home, offer parents an early care and education option that often has more flexible hours of operation and smaller provider-child ratios. In Los Angeles County, as of March 2016, there were 6,052 family child care providers compared to 7,623 in 2011. Over the past five years, family child care programs have experienced a decrease in their licensed capacity by 17 percent. In 2011, Los Angeles family child care providers had the capacity to serve 79,620 children, but that number dropped to 65,820 children by 2016. While it is likely that the economic recession had a major impact on this phenomenon, it is also possible that other factors such as changes in parent choice and the advent of transitional kindergarten may have had an impact.

• Recommendation - Conduct a study of family child care providers who have left the system:

Conduct a study with family child care providers who have decided not to renew their licenses to better understand the challenges they faced, the reasons behind their choices, the role that the economic downturn played, and other factors impacting their choice to leave the system. Family child care seems to be on the decline nationally due to low wages in the field and more career options for working women who make up the vast majority of the family child care workforce. This study would explore geographic differences in the density of family child care and factors that have led to successful family child care homes. Finally, the study would look at the dynamics between center-based care and family child care to better understand issues of access and parent choice.

3) Preschool age children are participating more and more in transitional kindergarten.

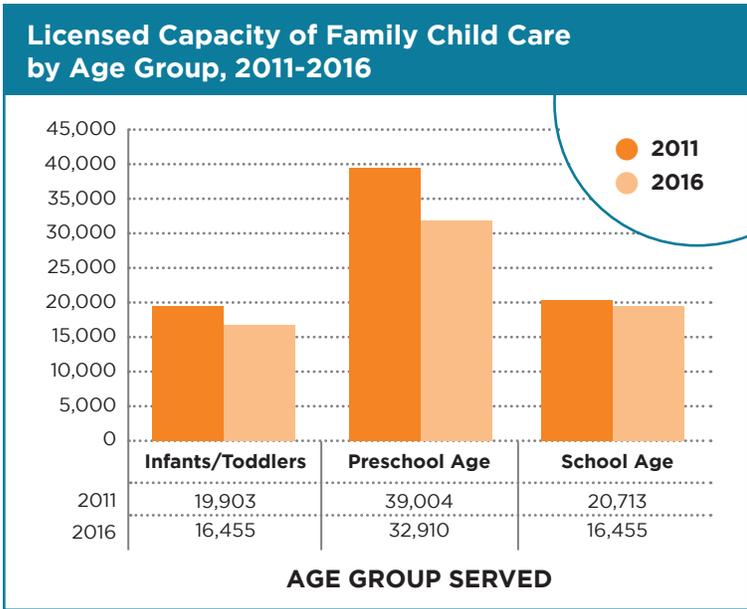
The most recent addition to the early care and education system in California is transitional kindergarten (TK), which was established by the School Readiness Act of 2010 (SB 1381). Transitional kindergarten (TK) is the first of a two-year kindergarten program. It uses a modified curriculum that is age and developmentally appropriate, is taught by a credentialed teacher, and is funded through Average Daily Attendance (ADA) funds.

Eligibility for transitional kindergarten is extended to children whose fifth birthday falls between September and December of the academic school year. In 2015, it was clarified that the School Readiness Act also allows school districts to enroll children who will turn 5-years-old after the December cutoff date. This option is called expanded transitional kindergarten (ETK) and is funded through a combination of local and ADA funding. In the 2014-2015 school year, 20,499 Los Angeles County children participated in transitional kindergarten—a 33 percent increase from the prior school year.

As more and more families become aware of this publicly funded option for their children, it is likely that the number of participating children will continue to grow. The arrival of transitional kindergarten has had, and will continue to have, a major impact on the early care and education system within California. As the field moves into this new era, it is essential that the entire early care and education system (inclusive of local education agencies) works together to meet the needs of young children in the County.

• Recommendation - Support family child care providers to provide quality care for infants and toddlers:

Develop support mechanisms for family child care providers to serve infants and toddlers, since there is a growing need for services for that age group. Strategies may include professional development, shared business services to support administrative functions, support for staff to pursue higher education opportunities, and capital improvement grants to improve family child care to accommodate infants and toddlers.



The Number of Students Participating in Transitional Kindergarten in Los Angeles County, 2013-2014 and 2014-2015

	2013-14 School Year	2014-15 School Year	Difference	Percent Change
Los Angeles County	14,680	20,499	5,819	33%
California	55,579	77,274	21,695	33%

- Recommendation - Establish a mixed-delivery system early care and education taskforce:**

Establish a mixed-delivery taskforce to assess the current birth-5 early care and education system, identify system best practices, explore alignment and coordination opportunities between local education agencies and licensed early care and education providers, discuss policy solutions, and propose recommendations. The taskforce would consist of leaders from various birth-5 early care and education sectors like Resource and Referral Agencies; federally funded programs like Head Start and Early Head Start; local school districts; Los Angeles County Office of Education; First 5 LA; Los Angeles County Office for the Advancement of ECE; Los Angeles County Department of Public Social Services (CalWORKS Stage 1); and California Department of Education funded programs like California State Preschool, California Center Based Programs, and Alternative Payment.

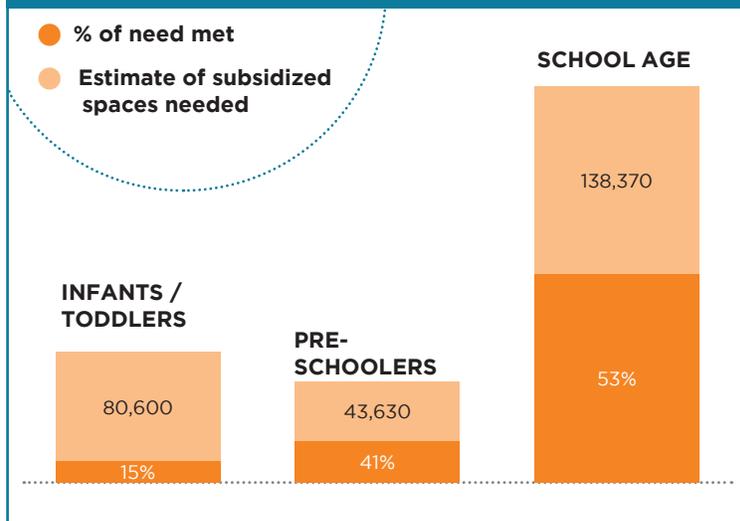
4) Early care and education is a costly expense for many families.

The cost of care for a young child is high. A family's average cost of care in Los Angeles County is \$10,303 a year per preschooler in center-based care and \$8,579 a year per preschooler in a family child care home. Care for infants and toddlers is even more expensive, with an annual cost of \$14,309 in an early care and education center and \$9,186 in a family child care home. Families earning the Los Angeles County median family income of \$54,194 pay 16-26 percent of their wages per child for early care and education services. If a family has two children, an infant and a preschooler in center-based care, they would need to spend nearly half of their income (45 percent) on care for their children.

For families with income below the poverty line, the situation is even more dire. According to a report published by the Public Policy Institute of California, in 2013, Los Angeles County had the highest rate of poverty in the State, with 21 percent of the residents living in or near poverty. It is estimated that 27 percent of children in our County under 18 years old live in poverty. Over 900,000 children live in households with earnings 70 percent below the State Median Income

(SMI). Even though the California minimum wage has increased, income eligibility for subsidized child care has not increased since 2011. According to the Child Care Law Center, income eligibility was frozen at 70 percent of the State Median Income used in Fiscal Year 2007-2008, which itself was based on 2005 income data. This barrier is encountered by many low-income working parents looking for subsidized care, since they often do not meet the income requirements for eligibility. With the minimum wage increasing to \$15 per hour by 2021, low income earning parents who receive slight wage increases may no longer be eligible for subsidized care.

Unmet Need for Subsidies Among Low Income Families in Los Angeles County by Age Group



- Recommendation - Support increasing the income eligibility cap for subsidized early care and education for low-income families:**

Update the eligibility guidelines to reflect the current State Median Income (SMI) and establish up to 12 months of income eligibility for families up to 85 percent of the SMI.



FINDINGS AND RECOMMENDATIONS

Quality in Early Care and Education

Every parent should be able to have their child participate in a high-quality early care and education program. After analyzing 20 studies on the impact of child care quality on children's outcomes, Burchinal et al. (2011) found that there is a relationship between child care quality and children's academic achievement, as well as language and cognitive development. To increase the quality of care, Quality Rating and Improvement Systems (QRIS) have emerged across the country. A first step for an early care and education program to participate in QRIS is to be licensed and in good standing. The core mission of the Child Care Licensing Program is to ensure the health and safety of children. With licensing being the entry level to QRIS, participating providers are then assessed on essentials of quality such as child development and social readiness, teacher qualifications and adult-child interactions, and program environment. QRIS assesses these elements and provides a rating on a five-point rating scale. Although the rating serves as a starting point, the most valuable component of QRIS lies in the ongoing quality improvement support. QRIS early care and education providers receive an abundance of tools, training and coaching to strengthen the quality of their program. Findings to take into consideration in this section of the report include the limited amount of QRIS rated sites in Los Angeles County, and the current QRIS focus on state-funded and center-based care.

1) While the number of QRIS rated sites has increased, only a limited percentage of Los Angeles County providers have been QRIS rated.

Over the last 10 years, Los Angeles County has been building its QRIS system from both local funding from First 5 LA and First 5 CA, as well as federal investments like the Race to the Top- Early Learning Challenge. Although this funding has laid a foundation for a county-wide QRIS system, and there has been substantial progress in reaching more and more providers, there is still a long way to go to reach all providers. As of June 30, 2016, when federal funding for QRIS through the Race to the Top Early Learning Challenge grants ended, 252 family child care homes were rated, and 619 early care and education centers were rated. This represents a mere 4 percent of family child care homes and 18 percent of center-based programs in Los Angeles County.

While the federal funding for QRIS has ended, the California Department of Education is currently providing QRIS on-going funding for California State Preschool Programs and a one-time QRIS block grant for programs that serve infants and toddlers that is slated to end in September 30, 2017. In addition, First 5 California has invested in QRIS across the State through First 5 IMPACT (Improve and Maximize Programs so All Children Thrive), and First 5 LA continues to be committed to QRIS.



Number of Rated QRIS Sites		
Type of QRIS Sites in Los Angeles County	As of June 30, 2016	
	Number	Percent of Total Numbers of Programs
Center-Based Programs	619	18%
Family Child Care Homes	252	4%

- **Recommendation - Increase On-Going QRIS Funding:**

Expand on-going investments in QRIS, especially for programs that serve infants and toddlers. Strategies may include expanding funding for the California State Preschool Program (CSPP) Quality Rating and Improvement System (QRIS) Block Grant, continuing the Infant/Toddler Quality Rating and Improvement System (QRIS) Grant Program, and expanding QRIS support to include additional programs in the early care and education care system.

2) To date, QRIS has been primarily focused on state-funded and center-based care.

Every community has different strengths, challenges and needs. Early care and education in Los Angeles County is a complex tapestry of various funding streams, curriculums and structures. Low-income children, emergent bilinguals, children in the child welfare system and children with special needs all have unique requirements that providers need the skills and resources to meet. As of June 30, 2016, 59 percent of the licensed early care and education centers and family child care homes that participated in QRIS were rated in the higher tiers of three, four, or five. To ensure the needs of Los Angeles County's children can be served by high-quality early care and education programs, public funding to support local QRIS efforts has to be reasonably flexible. By providing more flexibility for QRIS, funding could be braided, and QRIS could more easily target providers who serve the children most at risk of not being prepared for school success.

Number of QRIS Sites by Rating Tier	
Quality Tier	Los Angeles County Rated QRIS Sites
	As of June 30, 2016
	Percent
Sites in Tier 1	< 1%
Sites in Tier 2	41%
Sites in Tier 3	32%
Sites in Tier 4	26%
Sites in Tier 5	< 1%
TOTAL	100%

- **Recommendation - Promote flexibility in the use of QRIS funds to best meet the needs of local communities:**

Advocate for Los Angeles County to have local control over how to spend QRIS dollars to support the diverse needs of its community. Funders should provide the local QRIS system with the flexibility to allocate money where it is most needed in the county.

- **Recommendation - Continue building a single QRIS model in Los Angeles County through the QRIS Architects:**

Refine QRIS to best serve Los Angeles' children through the QRIS Architects. The QRIS Architects is a collaborative of seven organizations working collectively to develop a countywide QRIS that addresses the quality improvement needs of different licensed provider types; strengthens relationships between QRIS participants for successful implementation; and enhances the QRIS infrastructure, so that it is efficient and able to be expanded.

Members of the QRIS Architects include the Child Care Alliance of Los Angeles, the County of Los Angeles Child Care Planning Committee, First 5 LA, Los Angeles County Office of Education, Los Angeles Universal Preschool (LAUP), County of Los Angeles Office for the Advancement of Early Care and Education, and Partnerships for Education Articulation and Coordination through Higher Education (PEACH).

FINDINGS AND RECOMMENDATIONS

The Early Care and Education Workforce

The quality of early learning programs for children is intrinsically connected to the early care and education workforce. Numerous studies (e.g. Shonkoff & Phillips, 2000; Whitebook, 2003; Tout, Zaslow & Berry, 2006; Kelley & Camilli, 2007) have cited how members of the ECE workforce who are more educated and have specialized training not only provide children with better quality care, but the children in their care have been found to make greater developmental gains than their counterparts. The key to enhancing the quality of the early care and education system lies in the professionalization of the workforce. In this early care and education workforce section of the report, findings highlight challenges faced by the ECE workforce including low wages, the limited education of the workforce, and barriers to accessing professional development.

1) **The early care and education workforce earn low wages.**

Although there is a growing public awareness about the critical importance of the early years of a child's life, and many families rely on the early care and education workforce to nurture the early learning of our youngest children, these professionals are often paid close to minimum wage and dramatically less than teachers of older children. In California, child care professionals earn a median hourly wage of \$11.61, and preschool teachers earn a median hourly wage of \$15.25, compared to kindergarten teachers who earn a median hourly wage of \$30.74. Teaching infants, toddlers and preschool age children requires the equivalent level of skills and knowledge as teaching older children, yet the pay is over 50 percent lower. In Los Angeles County, early care and education professionals make an average of \$14.65 per hour. More specifically, in Los Angeles County, center-based early educators make an average of \$14.75 per hour, whereas those who work in family child care make \$11.73 per hour.

California has a dual subsidized child care system, and subsidized licensed early care and education providers are paid by two separate and different reimbursement rates depending on the source of funding. The current system is split into two distinct reimbursement structures: the Standard Reimbursement Rate (SRR) for Title 5 Contracted Center Based Programs, and the Regional Market Rate (RMR) for Alternative Payment and CalWORKs child care programs. Early care and education providers serving a child enrolled in the Alternative Payment and/or CalWORKs programs are reimbursed at their established rate up to the



Regional Market Rate (RMR) ceilings established by the State. Effective January 1, 2017, the Regional Market Rate (RMR) ceilings were established at the 75th percentile of the 2014 regional market rate survey. Establishing the ceiling at the 75th percentile means that low-income families enrolled in these programs have access to approximately 75 percent of the providers in their community. However, since the current RMR is out of date and is based on the 2014 regional market rate study, families enrolled in these programs have fewer choices, which can impact the quality of care they are able to choose for their children. The current daily RMR ceilings for full-time care at a center-based program in Los Angeles County is \$90.68 per infant/toddler and \$64.21 per preschooler, while at a family child care, the daily rate for full time care is \$51.77 per infant/toddler and \$50.44 per preschooler.

Title 5 contracted providers who have General Child Care and the California State Preschool Program contracts with the Department of Education receive a Standard Reimbursement Rate. In January 2017, the Standard Reimbursement Rate (SRR) increased by 10 percent bringing the daily rates per child to \$42.12 for general child care programs, \$26.26 for part-day state preschool, and \$42.38 for full-day state preschool programs. Existing rates simply do not cover the providers' full costs, particularly for high quality child care. In addition, recent increases to the minimum

wage have increased provider costs further and will continue to do so as minimum wages rise over the next four years. Without additional increases to the SRR, programs will find it difficult to raise employee wages to meet the new requirements. Any increases to the minimum wage should automatically trigger comparable increases to the reimbursement rate.

The next step toward building a better reimbursement system for child care and early learning programs throughout California would be to merge the two existing rate structures into a single reimbursement system that maintains both child care options and reflects the actual current cost of care in each region/county with a base at the 85th percentile level.

Los Angeles County Regional Market Rates		
Age Group	Full-time Daily Child Care Center	Full-time Daily Family Child Care
Birth to 24 months	90.68	51.77
2 through 5 years	64.21	50.44

Standard Reimbursement Rate	
Program	Approved 10% Increase Effective 1/1/2017
Full-day State Preschool Programs	\$42.38

- Recommendation - Raise the Regional Market Rate for early care and education providers:**
 Increase the Regional Market rate for reimbursements to subsidized early care and education providers to 85th percentile of the most recent market rate.
- Recommendation - Maintain the Standard Reimbursement Rate for early care and education providers:**
 Maintain the Standard Reimbursement Rate increase of 10% approved in the 2016-2017 California State Budget.
- Recommendation - Adopt a single reimbursement rate for all California early care and education providers:**
 Advocate to the State legislature and administration to adopt and implement a new, single reimbursement rate that covers the actual cost of infant/toddler and preschool care and education in each region/county with a base at the 85th percentile level.

2) Early care and education staff have limited education.

High quality early care and education for young children is inherently linked to a highly-qualified workforce, yet approximately half of the local workforce does not possess a college degree. In a 2015 report, the Institute of Medicine and the National Research Council concluded that all lead teachers in the nation’s preschools should have a bachelor’s degree in early childhood development or early education. Higher education is one of the most important pathways needed to professionalize the field. Based on a recent study of ECE providers who participated in First 5 LA funded professional development programs, only 24 percent of early care and education professionals had an associate’s degree, 21 percent had a bachelor’s degree, and 5 percent had an advanced degree. Family child care providers in the study had lower education levels than the center based as a whole, 17 percent had an associate’s degree, 13 percent had a bachelor’s degree and 6 percent had an advanced degree. California does not have a teaching credential for early childhood educators, but instead has a Child Development Permit. Currently, only 63 percent of Los Angeles County’s Early Care and Education workforce has a California Child Development permit.

Educational Attainment of Los Angeles County Center-Based and Family Child Care Providers		
Educational Attainment	Los Angeles County Center-based Providers ¹	Los Angeles County Family Child Care Providers
High School or Less	9%	29%
Some College	31%	36%
Associates Degree	30%	17%
Bachelor’s Degree	27%	13%
Advanced Degree	3%	6%

¹ Data Source: LA Advance baseline early educator survey and Consortium program registry data (LA Advance Baseline Analysis Memo - August 2015).

- Recommendation - Expand pathways and supports for the early care and education workforce to pursue higher education:**
 Increase accessibility for programs that support higher education for early care and education professionals. Supports may include college tuition support; education advisors; flexible class times; and the availability of courses, books, and technology in languages in addition to English. Strategies for institutions of higher education include identifying ways to support degree-granting institutions, strengthening the articulation of coursework from community colleges to 4-year universities, and funding college faculty to map and align their courses with the Early Childhood Education Competencies.

- **Recommendation - Establish a formal teaching credential in California that prepares educators to work with children 0-8 year olds:**

Advocate for a 0-8 teaching credential in California. Credentialed teachers strengthen the Early Care and Education system by increasing the quality of education and care given to children, lowering teacher turnover rates, providing a smoother transition for children, and increasing the capacity of all teachers to work with diverse families.

3) Cost is a barrier to early care and education providers accessing professional development.

When asked about professional development, early educators reported that their number one reason to participate in professional development is to increase their knowledge, yet the top barrier they shared is not having enough money for tuition or training expenses. It is essential to connect members of the early care and education workforce to free and low-cost training opportunities.

Recently, the California Early Care and Education Workforce Registry was launched in both San Francisco and Los Angeles County with funding from the Mimi and Peter Haas Fund, the David and Lucile Packard Foundation and First 5 LA. The online database is designed to track and promote the education, training and experience of the early care and education workforce to improve professionalism and workforce quality and positively impact children. After an early educator signs-up for the registry, he/she can access and sign up for the most up-to-date trainings. With all the requisite available trainings in one place, the registry serves as an efficient tool in assisting members of the ECE workforce to accelerate their professional development. Although this system has made significant gains, it needs to garner on-going funding to be able to include all members of the workforce.



Barriers to Participating in ECE Professional Development in Los Angeles County²

Barriers to Participating in Professional Development	Percentage of Los Angeles County ECE Providers Who Marked that Barrier
I don't have enough money for tuition or training expenses	55%
I don't have enough time	42%
I am not able to get into the courses or trainings that I need	25%
I don't have the math skills I need	20%
I don't have the English language skills I need	17%
I don't have support from my employer	16%
I don't have reliable transportation	16%
I don't have support from my family	14%
I don't have childcare or dependent care	13%
I don't have access to a reliable computer or internet connection	13%

² Data Source: LA Advance spring 2016 early educator survey -- From Table D.4 Barriers for Consortium program participants' participation in PD: Spring 2016 (LA Advance Spring 2016 Analysis).

- **Recommendation - Expand free and low-cost professional development opportunities:**

Increase funding for free and low/cost training, coaching, and mentoring for early care and education providers. It is important that strategies considered are provided in languages in addition to English including training instruction and program curricula.

- **Recommendation - Improve information systems to support professional development through the California Early Care and Education Workforce Registry:**

Advocate for on-going public funding to support the California Early Care and Education Workforce Registry.

As a professional development strategy, the registry would increase access to professional development, monitor the impact of professional development supports, and standardize data collection practices to track the movement of the workforce.

ADDITIONAL INFORMATION

For more information about *The State of Early Care and Education in Los Angeles County: Los Angeles County Child Care Planning Committee 2017 Needs Assessment*, please contact Michele Sartell at msartell@ceo.lacounty.gov. The full report may be downloaded at www.childcare.lacounty.gov.



PUBLIC POLICY PLATFORM 2021-22 Legislative Session

Introduction

The Child Care Planning Committee (Planning Committee) and Policy Roundtable for Child Care and Development (Roundtable) promote policies designed to increase the availability of and access to affordable, high quality early care and education programs for all children and their families of Los Angeles County. This public policy platform presents current and emerging policy issues in early care and education that are consistent with the County of Los Angeles State Legislative Agenda for the 2021-22 Legislative Session. The platform delineates each of the County's legislative agenda items in **bold** followed by examples of efforts that may be addressed by proposed legislation and/or the proposed state budget.

Platform Issues

1. Support efforts to enhance the quality of early care and education that set high standards for all services and program types and address the needs of all children, including those with disabilities and other special needs, and their families.

Such efforts should include, but not be limited to:

- Addressing the early care and education needs of children from birth through age 12, including infants and toddlers, preschool and school age children, and children with disabilities and other special needs up to age 22, and their families.
- Enhancing the quality of centers, family child care homes, and license-exempt care providers.
- Promoting a strengthening families approach to meet the needs of children at risk for abuse, neglect or sexual exploitation or under the supervision of the child welfare system and children of families under the supervision of Probation.
- Integrating early identification and intervention systems that recognize and respond early to young children who may be at risk for disabilities and other special needs.
- Developing policies that encourage collaboration between early care and education programs and locally funded projects and public agencies that foster child and family well-being through the provision of coordinated services.
- Incorporating optimal health promotion policies and procedures as an integral component that contributes to the overall quality of early care and education services and programs.
- Engaging parents as their child's first teachers and partners in promoting their child's optimal growth and development.



2. Support efforts to develop and implement a statewide quality rating and improvement system and a system to adjust reimbursement rates based on demonstrated quality.

Such efforts should include, but not be limited to:

- Providing parents with clear, concise information on the quality of early care and education settings.
- Fostering the engagement of parents that promotes their child’s optimal healthy growth and development and learning through a variety of modalities including virtual supports as well as in person meetings and may also be comprised of counseling and referrals.
- Incorporating early learning standards that are research-based, culturally responsive to children from diverse cultural and linguistic backgrounds, aligned with existing regulatory systems and local quality initiatives, recognize and respond to the individual needs of children in group settings, and attend to families’ needs for comprehensive services.
- Building an infrastructure of technical assistance, financial supports and training, all of which are tied to defined quality standards, to help early care and education programs achieve and maintain high quality services.

3. Support efforts to develop and sustain a well-educated and highly skilled professional workforce prepared to serve the culturally and linguistically diverse child and family populations of Los Angeles County.

Such efforts should include, but not be limited to:

- Focusing on teachers and other members of the workforce gaining skills and demonstrating competencies in the following areas: forming relationships and interacting with children, how to provide instructional support to children, best practices in working with dual language learners, proficiency in recognition and response to children with disabilities and other special needs, health and nutrition best practices, trauma-informed practices, engaging parents and guardians, and expertise on the spectrum of child development from birth through early adolescence. Workforce practice must be based on established early care and education research.
- Offering coursework and instruction responsive to a multi-lingual, multicultural workforce, including but not limited to providing content in students’ home language and offering classes during non-traditional hours.
- Integrating early childhood mental health consultation into early care and education programs to support the workforce in meeting the social, emotional, and mental health needs of children.
- Expanding early childhood educators’ access to higher education through stipend programs, grant funds and loan forgiveness programs, higher compensation when they attain post-secondary degrees, and benefits (i.e. health insurance and retirement plans).

- Facilitating child development or early childhood education coursework coordination and articulation between the community colleges and California State University (CSU) and University of California (UC) systems.
- Supporting efforts to enhance the quality of the license-exempt care workforce and facilitating connections between license-exempt care and the larger system of early care and education.
- Supporting alignment of teacher requirements under Title 22 with teacher requirements under Title 5 and with the California Commission on Teacher Credentialing.
- Facilitating support of license-exempt (family, friend, and neighbor) providers serving children subsidized with federal Child Care and Development Block Grant funds.
- Training and supporting teachers and other professionals through distance learning strategies.

4. Support efforts to ensure the health and safety of all children cared for in licensed early care and education facilities as afforded by timely, regular, and frequent on-site monitoring by the California Department of Social Services, Community Care Licensing Division (CCLD).

Such efforts should include, but not be limited to:

- Increasing to, at a minimum, annual inspections of centers and family child care homes.
- Advocating for, at a minimum, annual unannounced inspections of all licensed facilities.
- Providing that CCLD is sufficiently funded, staffed and held accountable to meet the standards, conduct timely reviews of licensing applications and responses to complaints, and provide technical assistance and resources to current and future licensees.
- Ensuring that costs of obtaining and renewing the license (or licenses for programs with multiple sites) is reasonable and not an extraordinary burden to the licensee's cost of doing business.

5. Support efforts to adequately fund high quality early care and education services for all children from low- and moderate-income families.

Such efforts should include, but not be limited to:

- Expanding access to high quality subsidized services for all eligible children, including infants and toddlers and children with disabilities and other special needs as well as preschool and school age children.
- Increasing levels of reimbursement in the Standard Reimbursement Rate (SRR) and the Regional Market Rate (RMR) to compensate providers for the true cost of high-quality services.

- Streamlining and reforming the dual reimbursement systems into a single, regionalized reimbursement system that incentivizes quality and supports the cost of program operations.
- Prioritizing funds targeted to infants and toddlers to meet the growing demand for high quality services.
- Increasing funds for expansion of high quality full-day, full-year services for all ages.
- Offering tax incentives to businesses to provide or subsidize employee's early care and education services.
- Ensuring that the income ceiling for eligibility for State subsidized care reflects the current State Median Income (SMI), adjusted by region if appropriate.
- Opposing proposals that would reduce subsidized rates based on geographic location.

6. Support the streamlining of California Department of Education and Social Services administrative processes to expand access for low-income families, ensure continuity of care, and promote flexible use of early care and education funding to meet the needs of families.

Such efforts should include, but not be limited to:

- Allowing administrative efficiencies such as multi-year contracting, grant-based funding, and waivers on program rules and regulations to allow flexibility of services based on community and family needs.
- Maintaining a 12-month annual eligibility redetermination to allow for more stable enrollments for early care and education programs and continuous services for children and their families while exploring implementation of 24-month annual eligibility.
- Ensuring agencies have the capacity to connect with and serve the most vulnerable and the most difficult-to-serve families.
- Maintaining affordable family fees that do not exceed eight percent of gross family income.
- Maintaining part-day State Preschool as a free, comprehensive early care and education program.
- Allowing for various systems that serve vulnerable and low-income children and families to streamline administrative functions and share information in order to facilitate the enrollment of children in subsidized early care and education programs and to participate in joint data collection efforts.

- Expanding the role of the local child care and development planning councils to augment and strengthen the preparation of the needs assessment to capture and report on data relating, but not limited, to workforce, quality and facilities as well as access.

7. Support proposals designed to prevent, detect, investigate and, when appropriate, prosecute fraud in subsidized child care and development programs.

8. Support efforts to ensure that vulnerable children and their families have access to consistent, uninterrupted subsidized early care and education services.

Such efforts should include, but not be limited to:

- Making sure that California Work Opportunity and Responsibility to Kids (CalWORKs) families have access to child care and education services, ensure that participating families are afforded the time and information needed to evaluate their child care and education options and make sound choices, and that allow parents to pursue or maintain employment.
- Maintaining 12-months annual eligibility for CalWORKs Stage 1 Child Care for welfare-to-work participants or until the participant is transferred to CalWORKs Stage 2 Child Care.
- Promoting, facilitating and supporting consistent and continuous participation of children under the supervision of the child welfare system and Probation and their families in high quality programs that promote healthy child development and support effective parenting.
- Ensuring that all subsidized children – infants and toddlers, preschool age, and school age children – and their families have access to consistent and continuous high quality early care and education services that partner with parents to promote children’s healthy growth and development and prepare them for school and life, and meet the needs of families.
- Addressing the needs of pregnant and parenting teens to ensure their access to high quality early care and education services that support their academic goals, promote positive and effective parenting skills, and contribute to their child’s healthy growth and development.
- Facilitating access to high quality early care and education programs that are responsive to the unique needs of children and families experiencing homelessness.

9. Support efforts to expand the supply of appropriate early care and education services through facility development in communities with a significant shortage of these services.

Such efforts should include, but not be limited to:

- Facilitating the cost and technical assistance of effective construction or renovation of early care and education – centers and family child care homes – facilities in communities with unmet needs for these services.

- Integrating early care and education inclusive of centers and family child care homes in specific plans for land use, housing, transportation, economic, workforce, and community development.

10. Support efforts to ensure that children and their families have timely access to early care and education services during a local, state and/or national emergency.

Such efforts may include:

- Increasing and extending funds ongoing to subsidize early care and education services of the essential workforce and at-risk populations.
- Enhancing child care resource and referral services to directly connect families impacted by the emergency with early care and education programs with the capacity to serve them.
- Waiving liability due to damages relating to COVID-19 infection, transmission, or other related conditions due to the COVID-19 pandemic.



CHILD CARE PLANNING COMMITTEE AND POLICY ROUNDTABLE FOR CHILD CARE AND DEVELOPMENT

Overview

	Child Care Planning Committee	Policy Roundtable for Child Care and Development
Vision	Children are healthy, thriving and have equitable opportunities to achieve optimal development and succeed in life.	
Mission	Lead, build and strengthen an affordable and high-quality early care and education system for the children and families of Los Angeles County.	
Enabling Authority	State Legislation; reports to the California Department of Education/Early Learning and Support Division (CDE/ELCD). As of July 1, 2021, will report directly to the California Department of Social Services (CDSS) as part of the shift of most early care and education programs inclusive of the LPCs from the CDE to the CDSS.	County Ordinance
Established	1991 in response to legislation, strengthened by welfare reform legislation in 1997	By the Board of Supervisors in 2000 based on recommendation of the Child Care Futures Committee
Number of Members	50	25



	Child Care Planning Committee	Policy Roundtable for Child Care and Development
Membership Composition	20% per category per California Education Code: <ul style="list-style-type: none"> ▪ Parents/consumers ▪ Early Educators ▪ Public Agencies ▪ Community Agencies ▪ Discretionary 	Per Los Angeles County Ordinance <i>Organizational representatives:</i> <ul style="list-style-type: none"> ▪ Child Care Planning Committee ▪ County departments – Chief Executive Office, Children & Family Services, County Office of Education, Mental Health, Office of Education Parks & Recreation, Probation, Public Health, Public Social Services ▪ Los Angeles Unified School District ▪ Child Care Alliance of Los Angeles ▪ Southern CA Association for the Education of Young Children ▪ First 5 LA ▪ Child360 <i>Each Supervisor nominates one from expert categories:</i> <ul style="list-style-type: none"> ▪ Academia ▪ Private business sector ▪ Philanthropy ▪ Community or legal advocacy ▪ Child care <i>Each Supervisor nominates on from expert categories:</i> <ul style="list-style-type: none"> ▪ Five members nominated by each member of the Board from among the following categories: faith-based center operator, employer-supported center operator, family child care providers, private or public center operator, child care advocate, parent, demographer, facilities finance expert, economist, labor, CalWORKs participant
Alternates	Each member has an alternate	Alternates allowed for organizational representatives only
Board of Supervisor Direct Appointees	1 per Supervisor (Discretionary)	2 per Supervisor, selecting one each from the categories highlighted in yellow
How Appointed	<ol style="list-style-type: none"> 1. Annual recruitment; application process 2. Certification of Membership¹ by Planning Committee 3. Certification of Membership by County Superintendent of Schools 4. Certification of Membership by Board of Supervisors 5. Certification of Membership submitted to the CDE/ELCD and CDSS 	<ul style="list-style-type: none"> ▪ Organizational Representatives submit nominee ▪ Board members nominate one from each of expert categories ▪ Each nominee submits application to Board Executive Office ▪ All nominations subject to Board approval

¹ Certification of Membership is the name of the California Department of Education (CDE) form required for listing all members by the five categories and signed by the Chair of the Planning Committee, County Superintendent of Schools and Board of Supervisors. Upon “approvals”, the form is submitted to the CDE and California Department of Social Services (CDSS).

	Child Care Planning Committee	Policy Roundtable for Child Care and Development
Terms of Service	Two consecutive three-year terms	<i>Supervisory Reps</i> – no more than two consecutive 4 year terms <i>Organizational Reps</i> – requires affirmation of status with nominating organization every four years
Current Membership Composition	<ul style="list-style-type: none"> ▪ Advocacy organizations ▪ Child care resource and referral agencies ▪ Community Care Licensing ▪ Community colleges and higher education ▪ ECE centers (private, non-profit inclusive of programs working primarily with children with special needs, County employees, community colleges, CDE and CDSS-contracted programs, Early Head State/Head Start) ▪ Family child care homes ▪ Home visitation ▪ Quality rating and improvement system supports ▪ Parents/consumers ▪ School district early childhood programs ▪ Supportive services (administrative, parent engagement, professional development) 	<ul style="list-style-type: none"> ▪ Advancement Project California ▪ Board of Supervisor Appointees ▪ Bresee Foundation ▪ Child360 ▪ Child Care Planning Committee ▪ Child Care Alliance of Los Angeles ▪ Child Care Resource Center ▪ Commission for Children and Families ▪ County departments (Children & Family Services, Office of Education, Mental Health, Parks & Recreation, Probation, Public Health, Public Social Services) ▪ First 5 LA ▪ Infant Development Association of Southern California ▪ Los Angeles Unified School District ▪ Southern Chapter – Southern California Association for the Advancement of Early Care and Education ▪ USC School of Marshall School of Business ▪ USC School of Social Work
Scope of Work/Mandates	<p>Per California Education Code:</p> <ul style="list-style-type: none"> ▪ Conduct countywide needs assessment every five years, addressing early care and education services for children birth through 12 years of age ▪ Develop countywide plan to meet identified needs ▪ Identify service gaps for subsidized early care and education services ▪ Facilitate voluntary, temporary transfer of funds 	<p>Per Roundtable By-laws:</p> <ul style="list-style-type: none"> ▪ Develop policy recommendations related to child care and development based on research, economic forecasts, projected demographic shifts and trends, and federal and state policies, taking into account all forms of child care ▪ Advise and assist County department in developing and implementing strategies to connect clients and/or employee to high quality child care and development services ▪ Develop recommendations for consideration by the Board on County, state and federal legislative and budget issues related to child care and development. Work with community stakeholders to understand the impact of the issues on the supply, quality and demand for services. ▪ Identify strategies to secure and leverage, coordinate, monitor and maximize funding for and access to high quality services ▪ Develop, distribute in electronic format and post on County website annual report summarizing key issues, Roundtable recommendations and Board actions

	Child Care Planning Committee	Policy Roundtable for Child Care and Development
Examples of Wins	<ul style="list-style-type: none"> ▪ Released <i>Learning from Today, Preparing for Tomorrow: An Early Care and Education Professional Development Landscape Analysis for Los Angeles County</i> at a public forum on June 28, 2021 in partnership with Quality Start Los Angeles ▪ Developed Tips for Best Practices in Early Care and Education During the COVID-19 Pandemic – Centers and Family Child Care Homes that were integrated into the website, “Child Care Heroes: LA County COVID-19 Information and Resources” (see https://childcareheroes.org/) ▪ Completed and publicly launched Needs Assessment in partnership with First 5 LA in March 2017 ▪ “According to a recent LPI [Learning Policy Institute] report, of 10 counties studied, only four had completed the needs assessments within the past five years, and only Los Angeles and Sacramento had made the data available to the public.”² ▪ Facilitated voluntary, temporary transfer of funds between CDE-contracted agencies to ensure that funding remains in LA County to serve children of income eligible families ▪ Produced community level data documents to illustrate gaps in subsidized services using LPC Local Funding Priorities data ▪ Provided representation on community coalitions and work groups (Help Me Grow-LA, QRIS Architects, Quality Start LA and Los Angeles County Prevention Plan ECE Work Group) 	<ul style="list-style-type: none"> ▪ Contributed to recommendations for implementation plan on early care and education recommendations listed in Pathways to Economic Resiliency report ▪ Adopted an equity statement. ▪ Elevated ECE Coalition budget asks and SB 246 (Leyva) pertaining to reimbursement rate reform and rate increases to Third Supervisorial District ▪ Advocated for the Emergency Child Care Bridge Fund for Children in Foster Care ▪ Informed the development of the Department of Mental Health’s Early Childhood Mental Health Consultation Pilot ▪ Provided input to the Measure H – Homeless Initiative – Child Care ▪ Elevated public policy recommendation to increase the adjustment factor to the reimbursement rate for infants and toddlers served by CDE-contracted programs (2018) and to provide 12 months of continuous eligibility for children receiving early care and education services subsidized by the CDE (2017)

² Stipek, D. & Colleagues. *Getting Down to Facts II Technical Report – Early Care and Education in California*. Stanford University: September 2018.

COUNTY OF LOS ANGELES



CHILD CARE
PLANNING
COMMITTEE

POLICY • PLANNING • PRACTICE

REFERENCE MATERIALS

Title	Subject	Location
BASIC CHILD CARE PLANNING COMMITTEE (PLANNING COMMITTEE) MATERIALS		
<i>Membership Manual</i>		
Membership Manual	Packet of materials comprised of background information on the Planning Committee, membership policies and procedures, current list of members and meeting schedule, work products (needs assessment, strategic plan), and public policy platform. In addition, includes information on the Office for the Advancement of Early Care and Education as well as items of interest pertaining to the functions of the County of Los Angeles.	https://childcare.lacounty.gov/planning-committee/
<i>General Membership and Meeting Resources</i>		
<i>Membership Roster</i>	List of all current members, affiliations and category of representation.	https://childcare.lacounty.gov/planning-committee/
<i>Meeting Schedule</i>	A list of meeting dates and locations (as they are determined).	
OFFICE FOR THE ADVANCEMENT OF EARLY CARE AND EDUCATION AND PLANNING COMMITTEE PROGRAMS AND PROJECTS		
<i>Workforce Pathways LA</i>	Funded by the California Department of Education and implemented in partnership with Quality Start Los Angeles (QSLA), focuses on workforce needs across all early learning and care setting types. Supports participants along the career lattice in three areas: licensing/health and safety; professional development, permits, and degrees; and workforce systems improvement.	Stipend Program: https://childcare.lacounty.gov/child-care-early-educators-stipend/ Workforce Systems Improvement/Learning from Today, Preparing for Tomorrow: An ECE Professional Development Landscape Analysis: https://childcare.lacounty.gov/publications/
<i>Request to Change Service Area Priorities</i>	Guidelines for requesting and reviewing requests from CDE/ Early Learning and Care Division (ELCD)-contracted agencies.	https://childcare.lacounty.gov/planning-committee/#1556031975116-fc4acc99-8be0



Title	Subject	Location
<i>Voluntary, Temporary Transfer of Funds (VTTF)</i>	Description of process for transfer of funds among CDE/ELCD - contracted agencies and request forms.	https://childcare.lacounty.gov/planning-committee/#1556031975116-fc4acc99-8be0
RESOURCES FOR PARENTS AND COMMUNITIES		
<i>Navigating Subsidized Early Care and Education Systems and Subsidy Programs</i>	Fact sheets and guidance in identifying family need, resources, eligibility, and required documentation for subsidized child care and development services.	https://childcare.lacounty.gov/resources-for-families-and-communities/
<i>For Pregnant and Parenting Teens</i>	Guide on child care and development resources for pregnant and parenting teens.	https://childcare.lacounty.gov/wp-content/uploads/2016/09/Pregnant_and_Parenting_Teens.pdf
<i>Children with Special Needs</i>	Targeted to parents and professionals, directories of resources relating to children at risk for or with disabilities and other special needs.	https://childcare.lacounty.gov/wp-content/uploads/2018/06/ChildrenSpecialNeeds_-_CCPCInclusionWorkGroup_30Sept15_Updated_28June18.pdf
LEGAL AND CONTRACTUAL REQUIREMENTS		
<i>Brown Act</i>	Introductory description and complete text of law regulating open public meetings.	https://leginfo.ca.gov/faces/codes_displayText.xhtml?division=2.&chapter=9.&part=1.&lawCode=GOV&title=5
<i>Roberts Rules of Order</i>	Provides common rules and procedures for deliberation and debate in order to place the whole membership on the same footing and speaking the same language.	http://www.robertsrules.org/
<i>LPC Program Requirements</i>	A description of the basic functions and mandates for each local planning council.	http://www.cde.ca.gov/sp/cd/re/lpc.asp
PLANNING COMMITTEE REPORTS AND PUBLICATIONS		
<i>A Unified Strategic Plan for Early Care and Education – 2020-2025</i>	Developed under the leadership of the Office for the Advancement of Early Care and Education and in partnership with the Policy Roundtable for Child Care and Development, contains four priority areas of focus for action: access, quality, workforce supports, and family and community engagement.	https://childcare.lacounty.gov/wp-content/uploads/2021/05/OAECE-Strategic-Plan_2020-2025.pdf
<i>2017 Needs Assessment Executive Summary</i>	The report focuses on three essential components of the early care and education system: access, quality and workforce.	https://childcare.lacounty.gov/wp-content/uploads/2018/06/ECE-Needs-Assessment_Executive-Brief-03-30-2017.pdf
<i>Los Angeles County 2017 Needs Assessment – Technical Report</i>		https://childcare.lacounty.gov/wp-content/uploads/2018/11/TechRptState201711July18.pdf
<i>Needs Assessment 2016 Backup Data</i>	A listing a zip codes with priorities for funding for general center-based (all ages) and preschool programs (3 and 4-year old children).	https://childcare.lacounty.gov/publications/

Title	Subject	Location
<i>LPC Local Funding Priorities – 2018-19</i>	The priorities – organized by three age groups – infants and toddlers, preschoolers and school age children – are prepared annually and submitted to the CDE to inform funding allocations for subsidized early care and education as new money is made available in the annual state budget.	https://childcare.lacounty.gov/publications/
<i>Flow Chart – Public Investments for Early Care and Education</i>	Flow chart indicating the sources and pathways for the flow of government funding supporting direct services and quality initiatives.	https://childcare.lacounty.gov/wp-content/uploads/2018/06/Matrix_PubliclyFund edECE_wCitations_29Aug17.pdf
COUNTY OF LOS ANGELES INFORMATION AND RESOURCES		
<i>Board of Supervisors</i>	Governing body of the County of Los Angeles, a charter county. Serves as the executive and legislative head of the largest and most complex county government in the entire United States. A civil service staff which performs the duties for the County departments and agencies serves the needs of the County's population of more than 10 million people	http://bos.lacounty.gov/
<i>Supervisory Districts</i>	District maps, community listings, and contact information.	
OTHER RESOURCES		
<i>Child Care Alliance of Los Angeles</i>	Website with contact information, service areas and links to individual Child Care Resource and Referral Agency websites and information on training opportunities targeted to early care and education programs.	www.ccala.net
<i>Quality Start Los Angeles (QSLA)</i>	A consortium of early childhood education agencies in Los Angeles County – Los Angeles County Office of Education, First 5 LA, Partnerships for Education, Articulation, and Coordination through Higher Education (PEACH), Child Care Alliance of Los Angeles, Child360, and the Los Angeles County Office for the Advancement of Early Care and Education – shaping and implementing the voluntary quality rating and improvement system (QRIS) designed to help parents of children birth to five years old choose the best early care and education program for their family and support centers and family child care homes with ongoing program enhancements.	http://qualitystartla.org
<i>Helpful Links and Resources</i>	Hosted by the Office for the Advancement of Early Care and Education, links to an array of resources on topics relevant to early care and education programs and the children and families they serve.	https://childcare.lacounty.gov/wp-content/uploads/2018/06/HelpfulLinksResources_1Aug16_Updated_28June18.pdf
<i>Department of Social Services, Community Care Licensing Division</i>	A list of offices and contact numbers; licensing guidelines, etc.	http://www.cdss.ca.gov/inforesources/Child-Care-Licensing

Title	Subject	Location
PUBLIC POLICY		
County		
<i>County Legislative Agenda</i>	County of Los Angeles Board of Supervisors adopted State and Federal Legislative Agenda for the upcoming session; contains child care and development items submitted by the Planning Committee and Policy Roundtable for Child Care and Development.	https://ceo.lacounty.gov/legislative-affairs-and-intergovernmental-relations/
<i>Public Policy Platform</i>	Planning Committee and Roundtable public policy platform for the current legislative session.	https://childcare.lacounty.gov/ece-public-policy/
State		
<i>Official CA Legislative Information</i>	Search for bills as introduced and amended, committee analyses and status updates.	http://leginfo.legislature.ca.gov/faces/home.xhtml
<i>Legislative Analyst's Office</i>	Provides fiscal and policy advice to the legislature; prepares reports publications on various policy areas inclusive of early care and education.	https://lao.ca.gov/Policy-Areas?areald=4
Federal		
<i>Federal Legislative Districts</i>	Maps and links to Legislators' websites.	www.house.gov www.senate.gov
<i>Federal Legislation - Thomas</i>	Legislative information from The Library of Congress, including access to bills.	http://thomas.loc.gov

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EDUCATION CODE - EDC

TITLE 1 GENERAL EDUCATION CODE PROVISIONS [1. - 32500] (*Title 1 enacted by Stats. 1976, Ch. 1010.*)

DIVISION 1 GENERAL EDUCATION CODE PROVISIONS [1. - 32500] (*Division 1 enacted by Stats. 1976, Ch. 1010.*)

PART 6. EDUCATION PROGRAMS—STATE MASTER PLANS [8006 - 9004] (*Part 6 enacted by Stats. 1976, Ch. 1010.*)

CHAPTER 2. Child Care and Development Services Act [8200 - 8498] (*Heading of Chapter 2 amended by Stats. 1980, Ch. 798, Sec. 1.*)

ARTICLE 12. Allocations and Expenditures [8275 - 8279.7] (*Article 12 added by Stats. 1980, Ch. 798, Sec. 17.*)

8279.3. (a) The department shall disburse augmentations to the base allocation for the expansion of child care and development programs to promote equal access to child development services across the state.

(b) The Superintendent of Public Instruction shall use the formula developed pursuant to subdivision (c) and the priorities identified by local child care and development planning councils, unless those priorities do not meet the requirements of state or federal law, as a guide in disbursing augmentations pursuant to subdivision (a).

(c) The Superintendent of Public Instruction shall develop a formula for prioritizing the disbursement of augmentations pursuant to this section. The formula shall give priority to allocating funds to underserved areas. The Superintendent of Public Instruction shall develop the formula by using the definition of "underserved area" in subdivision (af) of Section 8208 and direct impact indicators of need for child care and development services in the county or subcounty areas. For purposes of this section, "subcounty areas" include, but are not limited to, school districts, census tracts, or ZIP Code areas that are deemed by the Superintendent of Public Instruction to be most appropriate to the type of program receiving an augmentation. Direct impact indicators of need may include, but are not limited to, the teenage pregnancy rate, the unemployment rate, area household income, or the number or percentage of families receiving public assistance, eligible for Medi-Cal, or eligible for free or reduced-price school meals, and any unique characteristics of the population served by the type of program receiving an augmentation.

(d) To promote equal access to services, the Superintendent of Public Instruction shall include in guidelines developed for use by local planning councils pursuant to subdivision (d) of Section 8499.5 guidance on identifying underserved areas and populations within counties. This guidance shall include reference to the direct impact indicators of need described in subdivision (c).

(*Added by renumbering Section 8289 by Stats. 2004, Ch. 896, Sec. 20. Effective September 29, 2004.*)


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EDUCATION CODE - EDC

TITLE 1 GENERAL EDUCATION CODE PROVISIONS [1. - 32500] (Title 1 enacted by Stats. 1976, Ch. 1010.)

DIVISION 1 GENERAL EDUCATION CODE PROVISIONS [1. - 32500] (Division 1 enacted by Stats. 1976, Ch. 1010.)

PART 6. EDUCATION PROGRAMS—STATE MASTER PLANS [8006 - 9004] (Part 6 enacted by Stats. 1976, Ch. 1010.)

CHAPTER 2.3. Local Planning Councils [8499 - 8499.7] (Chapter 2.3 added by Stats. 1997, Ch. 270, Sec. 13.)

ARTICLE 2. Membership and Funding of Local Child Care and Development Planning Councils [8499.3 - 8499.7] (Article 2 added by Stats. 1997, Ch. 270, Sec. 13.)

8499.3. (a) It is the intent of the Legislature that local child care and development planning councils shall provide a forum for the identification of local priorities for child care and the development of policies to meet the needs identified within those priorities.

(b) The county board of supervisors and the county superintendent of schools shall do both of the following:

(1) Select the members of the local planning council. Before making selections pursuant to this subdivision, the board of supervisors and the county superintendent of schools shall publicize their intention to select the members and shall invite local organizations to submit nominations. In counties in which the superintendent is appointed by the county board of education, the county board of education may make the appointment or may delegate that responsibility to the superintendent.

(2) Establish the term of appointment for the members of the local planning council.

(c) (1) The local planning council shall be comprised as follows:

(A) Twenty percent of the membership shall be consumers.

(B) Twenty percent of the membership shall be child care providers, reflective of the range of child care providers in the county.

(C) Twenty percent of the membership shall be public agency representatives.

(D) Twenty percent of the membership shall be community representatives, who shall not be child care providers or agencies that contract with the department to provide child care and development services.

(E) The remaining 20 percent shall be appointed at the discretion of the appointing agencies.

(2) The board of supervisors and the superintendent of schools shall each appoint one-half of the members. In the case of uneven membership, both appointing entities shall agree on the odd-numbered appointee.

(d) Every effort shall be made to ensure that the ethnic, racial, and geographic composition of the local planning council is reflective of the ethnic, racial, and geographic distribution of the population of the county.

(e) The board of supervisors and county superintendent of schools may designate an existing child care planning council or coordinated child and family services council as the local planning council, as long as it has or can achieve the representation set forth in this section.

(f) Upon establishment of a local planning council, the local planning council shall elect a chair and select a staff.

(g) Each local planning council shall develop and implement a training plan to provide increased efficiency, productivity, and facilitation of local planning council meetings. This may include developing a training manual, hiring facilitators, and identifying strategies to meet the objectives of the council.

(h) No member of a local planning council shall participate in a vote if he or she has a proprietary interest in the outcome of the matter being voted upon.

(Amended by Stats. 2002, Ch. 435, Sec. 8. Effective January 1, 2003.)

8499.5. (a) The department shall allocate child care funding pursuant to Chapter 2 (commencing with Section 8200) based on the amount of state and federal funding that is available.

(b) By May 30 of each year, upon approval by the county board of supervisors and the county superintendent of schools, a local planning council shall submit to the department the local priorities it has identified that reflect all child care needs in the county. To accomplish this, a local planning council shall do all of the following:

(1) Conduct an assessment of child care needs in the county no less frequently than once every five years. The department shall define and prescribe data elements to be included in the needs assessment and shall specify the format for the data reporting. The needs assessment shall also include all factors deemed appropriate by the local planning council in order to obtain an accurate picture of the comprehensive child care needs in the county. The factors include, but are not limited to, all of the following:

(A) The needs of families eligible for subsidized child care.

(B) The needs of families not eligible for subsidized child care.

(C) The waiting lists for programs funded by the department and the State Department of Social Services.

(D) The need for child care for children determined by the child protective services agency to be neglected, abused, or exploited, or at risk of being neglected, abused, or exploited.

(E) The number of children in families receiving public assistance, including CalFresh benefits, housing support, and Medi-Cal, and assistance from the Healthy Families Program and the Temporary Assistance for Needy Families (TANF) program.

(F) Family income among families with preschool or schoolage children.

(G) The number of children in migrant agricultural families who move from place to place for work or who are currently dependent for their income on agricultural employment in accordance with subdivision (a) of, and paragraphs (1) and (2) of subdivision (b) of, Section 8231.

(H) The number of children who have been determined by a regional center to require services pursuant to an individualized family service plan, or by a local educational agency to require services pursuant to an individualized education program or an individualized family service plan.

(I) The number of children in the county by primary language spoken pursuant to the department's language survey.

(J) Special needs based on geographic considerations, including rural areas.

(K) The number of children needing child care services by age cohort.

(2) Document information gathered during the needs assessment that shall include, but need not be limited to, data on supply, demand, cost, and market rates for each category of child care in the county.

(3) Encourage public input in the development of the priorities. Opportunities for public input shall include at least one public hearing during which members of the public can comment on the proposed priorities.

(4) Prepare a comprehensive countywide child care plan designed to mobilize public and private resources to address identified needs.

(5) Conduct a periodic review of child care programs funded by the department and the State Department of Social Services to determine if identified priorities are being met.

(6) Collaborate with subsidized and nonsubsidized child care providers, county welfare departments, human service agencies, regional centers, job training programs, employers, integrated child and family service councils, local and state children and families commissions, parent organizations, early start family resource centers, family empowerment centers on disability, local child care resource and referral programs, and other interested parties to foster partnerships designed to meet local child care needs.

(7) Design a system to consolidate local child care waiting lists, if a centralized eligibility list is not already in existence.

(8) Coordinate part-day programs, including state preschool and Head Start, with other child care and development services to provide full-day child care.

(9) Submit the results of the needs assessment and the local priorities identified by the local planning council to the board of supervisors and the county superintendent of schools for approval before submitting them to the department.

(10) Identify at least one, but not more than two, members to serve as part of the department team that reviews and scores proposals for the provision of services funded through contracts with the department. Local planning

council representatives may not review and score proposals from the geographic area covered by their own local planning council. The department shall notify each local planning council whenever this opportunity is available.

(c) The needs assessment data shall be made available to counties implementing individualized county child care subsidy plans pursuant to Article 15.5 (commencing with Section 8332).

(d) The department shall, in conjunction with the State Department of Social Services and all appropriate statewide agencies and associations, develop guidelines for use by local planning councils to assist them in conducting needs assessments that are reliable and accurate. The guidelines shall include acceptable sources of demographic and child care data, and methodologies for assessing child care supply and demand.

(e) Except as otherwise required by subdivision (c) of Section 8236, the department shall allocate funding within each county in accordance with the priorities identified by the local planning council of that county and submitted to the department pursuant to this section, unless the priorities do not meet the requirements of state or federal law.

(Amended by Stats. 2018, Ch. 7, Sec. 25. (AB 108) Effective March 13, 2018.)

8499.7. It is the intent of the Legislature that any additional conditions imposed upon local planning councils shall be funded from available federal funds to the greatest extent legally possible.

(Added by Stats. 1997, Ch. 270, Sec. 13. Effective August 11, 1997. Operative January 1, 1998, by Sec. 183 of Ch. 270.)



**COUNTY COUNSEL
GUIDE TO BROWN ACT
REQUIREMENTS**

BROWN ACT BASICS

BY

**Barbara Goul
Principal Deputy**

Bgoul@counsel.lacounty.gov



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Legal and Procedural Matters

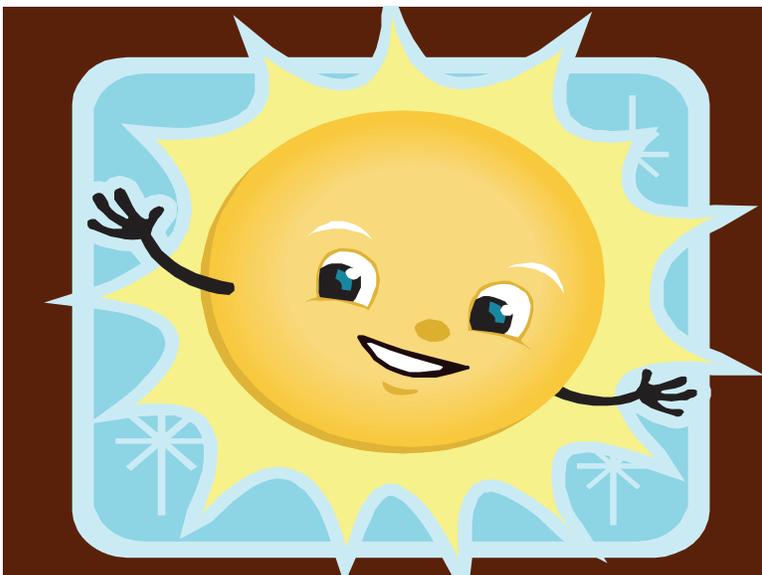
County Counsel

Ms. Barbara Goul
Principal Deputy

Summary of the Brown Act, prepared by County Counsel

Summary of Procedural Rules for County Commissions and Committees
based on Robert's Rules of Order, prepared by County Counsel

County Counsel Opinion on Commissioner Liability



What is the Brown Act?

- AKA Sunshine Law or Open Meetings Law
- Enacted by legislature in 1953
- Codified in Government Code §§ 54950 et seq.
- Guarantees the public's right to attend and participate in government
- Promotes accountability of public officers
- Allows for public oversight and understanding

Overview of Brown Act Issues

- Applicability
- Requirements
 - Agenda Posting Requirements
 - How meetings are conducted
 - Exceptions or items that may be handled in closed sessions
- Remedies and penalties for violations

Who Does the Brown Act Apply To?

- Public commissions, boards and councils
- Commissions created by the Board of Supervisors
 - Committees created by legislative bodies
 - Standing versus ad hoc committees

What is a meeting?

- A gathering of a quorum of the legislative body
 - 50% of members plus one (rounded up)
 - Serial meetings
 - Teleconferencing
- Where public business is transacted or discussed
 - Not purely ceremonial or social occasions
 - *Sacramento Newspaper Guild v Board of Supervisors*
263 Cal. App 2d 41 (1968)

Teleconferencing

- Different locations connected by audio and/or video
- Must be fully accessible to the public
- Voting must be by roll call

Agenda Requirements

- Posting
- Notice
- Public Comment
- Public Availability of Agenda Materials

Agenda Content

- Description must be sufficient to give the public a reasonable idea of what will be discussed
 - Vague general language is not sufficient
 - Allows public to decide whether to attend
- Generally 20 words or less
- Public comment entry
- Meeting is limited to agenda items
 - 2/3 vote for special circumstance when immediate action is required

Agenda Notice Requirements Vary for Different Meetings

- Regular is posted at the site of the meeting 72 hours in advance.
- Special is posted at the site of the meeting 24 hours in advance.
- Emergency is one hour telephonic notice
- For Dire Emergencies notice may be contemporaneous with the meeting

Public Availability of Agenda Materials

- Public entitled to copies of agenda packet/documents associated with the agenda items
- Public can make standing request for copies of agenda materials
 - Writing
 - Effective for one year
 - Subject to fees for copying and postage
 - Failure to send packet can invalidate action

Place of Meeting

- Must be held within agency's geographical jurisdiction
 - Limited exceptions
- Can not be held in a place that discriminates or charges a fee or requires a purchase
- ADA compliant

Conducting the Meeting

- Can not require a person to sign in as a condition of attendance
- Can not prohibit use of cameras, tape recorders or broadcasting
- Any tape or film made by the legislative body must be available for inspection

Public Comment

- Opportunity to speak on agenda items before or during the body's consideration of the item
- Opportunity to speak on any item within the body's subject matter jurisdiction
- Reasonable rules can be adopted
- Chair may clear room in the event of public disruption and proceed with press present

Closed Session

- All items must be listed on the agenda
- Must publicly announce item to be discussed in closed session
- Must publicly announce action taken in closed session

Closed Session Major Exceptions

- Personnel matters (§ 54957)
- Public security threat (§ 54957)
- Anticipated or pending litigation (§ 54956.9)
- Initiation of litigation (§54956.9)
- Labor negotiations (§54957.6)
- Real estate negotiations (§ 54956.8)
 - *Shapiro v San Diego City Council*
96 Cal. App.4th 904 (2002)

Confidentiality of Closed Session

- May not disclose information obtained in closed sessions to any person not entitled to receive it
 - Unless disclosure is authorized by legislative body
- Injunctive relief to prevent disclosure
- Penalties for improper disclosure
 - Disciplinary action for willful disclosure
 - Require prior training or notice
 - Referral to Grand Jury
- Exceptions

Closed Session Minutes

- Keeping a minute book is discretionary (Government Code § 54957.2)
 - Confidential
 - Members may review minutes but cannot have copies
- Minutes of improper closed session are not confidential.

Penalties & Remedies

- Civil action to stop or prevent violations
 - Notice of corrective action is prerequisite
- Civil action to declare action null and void
- Court costs including reasonable attorney fees
 - *L.A. Times v Board of Supervisors*
112 Cal. App. 4th 1313 (2003)
- Misdemeanor for knowing violations

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COUNTY OF LOS ANGELES
OFFICE OF THE COUNTY COUNSEL

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JOHN F. KRATTLI
County Counsel

December 31, 2013

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CONFIDENTIAL

THIS MATERIAL IS SUBJECT TO THE
ATTORNEY-CLIENT AND/OR THE ATTORNEY
WORK PRODUCT PRIVILEGES

TO: ALL DEPARTMENT HEADS
FROM: JOHN F. KRATTLI 
County Counsel
RE: **New Brown Act Change - SB 751**

This is to notify you of a change to the Brown Act that may have an impact on the commissions that your departments staff.

Effective January 1, 2014, Senate Bill ("SB") 751 amended the Brown Act to require all Brown Act bodies to "publicly report any action taken and the vote or abstention on that action of each member present for the action." (Government Code section 54953(c)(2).) Enclosed is a copy of SB 751. Currently, the Brown Act only requires such reporting for actions taken in closed session. (Government Code section 54957.1(a).)

SB 751 requires that when a Brown Act body takes an action, *the vote or abstention of each member present at the meeting must be publicly reported*. This new Brown Act requirement can be complied with by:

- A roll call vote for each action taken; OR
- An oral announcement by the chair or clerk after a vote is taken, such as:
 - "The motion passes, with Commissioner Jones, Smith, and Davis voting in favor and Commissioner Johnson voting in opposition," or
 - "The motion unanimously passes with all members present and voting"; OR

- The vote or abstention of each member could be included in the commission's minutes which are publicly approved by the commission at a future meeting.

If you have any questions concerning this matter, please contact me, or Assistant County Counsel Judy Whitehurst at (213) 974-1921, or Principal Deputy County Counsel Barbara Goul at (213) 974-1834.

JFK:am

Enclosure

Senate Bill No. 751

CHAPTER 257

An act to amend Section 54953 of the Government Code, relating to local government.

[Approved by Governor September 6, 2013. Filed with Secretary of State September 6, 2013.]

LEGISLATIVE COUNSEL'S DIGEST

SB 751, Yee. Meetings: publication of action taken.

The Ralph M. Brown Act requires all meetings of the legislative body of a local agency, as defined, to be open and public and prohibits the legislative body from taking action by secret ballot, whether preliminary or final.

This bill would additionally require the legislative body of a local agency to publicly report any action taken and the vote or abstention on that action of each member present for the action, thereby imposing a state-mandated local program.

The California Constitution requires the state to reimburse local agencies and school districts for certain costs mandated by the state. Statutory provisions establish procedures for making that reimbursement.

This bill would provide that no reimbursement is required by this act for a specified reason.

The people of the State of California do enact as follows:

SECTION 1. Section 54953 of the *Government Code* is amended to read:

54953. (a) All meetings of the legislative body of a local agency shall be open and public, and all persons shall be permitted to attend any meeting of the legislative body of a local agency, except as otherwise provided in this chapter.

(b) (1) Notwithstanding any other provision of law, the legislative body of a local agency may use teleconferencing for the benefit of the public and the legislative body of a local agency in connection with any meeting or proceeding authorized by law. The teleconferenced meeting or proceeding shall comply with all requirements of this chapter and all otherwise applicable provisions of law relating to a specific type of meeting or proceeding.

(2) Teleconferencing, as authorized by this section, may be used for all purposes in connection with any meeting within the subject matter jurisdiction of the legislative body. All votes taken during a teleconferenced meeting shall be by rollcall.

(3) If the legislative body of a local agency elects to use teleconferencing, it shall post agendas at all teleconference locations and conduct teleconference meetings in a manner that protects the statutory and constitutional rights of the parties or the public appearing before the legislative body of a local agency. Each teleconference location shall be identified in the notice and agenda of the meeting or proceeding, and each teleconference location shall be accessible to the public. During the teleconference, at least a quorum of the members of the legislative body shall participate from locations within the boundaries of the territory over which the local agency exercises jurisdiction, except as provided in subdivision (d). The agenda shall provide an opportunity for members of the public to address the legislative body directly pursuant to Section 54954.3 at each teleconference location.

(4) For the purposes of this section, "teleconference" means a meeting of a legislative body, the members of which are in different locations, connected by electronic means, through either audio or video, or both. Nothing in this section shall prohibit a local agency from providing the public with additional teleconference locations.

(c) (1) No legislative body shall take action by secret ballot, whether preliminary or final.

(2) The legislative body of a local agency shall publicly report any action taken and the vote or abstention on that action of each member present for the action.

(d) (1) Notwithstanding the provisions relating to a quorum in paragraph (3) of subdivision (b), when a health authority conducts a teleconference meeting, members who are outside the jurisdiction of the authority may be counted toward the establishment of a quorum when participating in the teleconference if at least 50 percent of the number of members that would establish a quorum are present within the boundaries of the territory over which the authority exercises jurisdiction, and the health authority provides a teleconference number, and associated access codes, if any, that allows any person to call in to participate in the meeting and that number and access codes are identified in the notice and agenda of the meeting.

(2) Nothing in this subdivision shall be construed as discouraging health authority members from regularly meeting at a common physical site within the jurisdiction of the authority or from using teleconference locations within or near the jurisdiction of the authority. A teleconference meeting for which a quorum is established pursuant to this subdivision shall be subject to all other requirements of this section.

(3) For purposes of this subdivision, a health authority means any entity created pursuant to Sections 14018.7, 14087.31, 14087.35, 14087.36, 14087.38, and 14087.9605 of the Welfare and Institutions Code, any joint powers authority created pursuant to Article 1 (commencing with Section 6500) of Chapter 5 of Division 7 for the purpose of contracting pursuant to Section 14087.3 of the Welfare and Institutions Code, and any advisory committee to a county sponsored health plan licensed pursuant to Chapter 2.2 (commencing with Section 1340) of Division 2 of the Health and Safety Code if the advisory committee has 12 or more members.

(4) This subdivision shall remain in effect only until January 1, 2018.

SEC. 2. No reimbursement is required by this act under Section 6 of Article XIII B of the California Constitution because the only costs that may be incurred by a local agency or school district under this act are the costs of complying with Chapter 9 (commencing with Section 54950) of Part 1 of Division 3 of Title 5 of the Government Code. Subdivision (c) of Section 36 of Article XIII of the California Constitution provides that costs of this type are not reimbursable.

CORRECTIONS:
Date--Page 1.

RobertsRules.org | Robert's Rules of Order - Summary Version

For Fair and Orderly Meetings & Conventions

Provides common rules and procedures for deliberation and debate in order to place the whole membership on the same footing and speaking the same language. The conduct of ALL business is controlled by the general will of the whole membership - the right of the deliberate majority to decide. Complementary is the right of at least a strong minority to require the majority to be deliberate - to act according to its considered judgment AFTER a full and fair "working through" of the issues involved. Robert's Rules provides for constructive and democratic meetings, to help, not hinder, the business of the assembly. Under no circumstances should "undue strictness" be allowed to intimidate members or limit full participation.

The fundamental right of deliberative assemblies require all questions to be thoroughly discussed before taking action!

The assembly rules - they have the final say on everything!
Silence means consent!

- Obtain the floor (the right to speak) by being the first to stand when the person speaking has finished; state Mr./Madam Chairman. Raising your hand means nothing, and standing while another has the floor is out of order! Must be recognized by the Chair before speaking!
- Debate can not begin until the Chair has stated the motion or resolution and asked "are you ready for the question?" If no one rises, the chair calls for the vote!
- Before the motion is stated by the Chair (the question) members may suggest modification of the motion; the mover can modify as he pleases, or even withdraw the motion without consent of the seconder; if mover modifies, the seconder can withdraw the second.
- The "immediately pending question" is the last question stated by the Chair! Motion/Resolution - Amendment - Motion to Postpone
- The member moving the "immediately pending question" is entitled to preference to the floor!
- No member can speak twice to the same issue until everyone else wishing to speak has spoken to it once!
- All remarks must be directed to the Chair. Remarks must be courteous in language and deportment - avoid all personalities, never allude to others by name or to motives!
- The agenda and all committee reports are merely recommendations! When presented to the assembly and the question is stated, debate begins and changes occur!

The Rules

- **Point of Privilege:** Pertains to noise, personal comfort, etc. - may interrupt only if necessary!
- **Parliamentary Inquiry:** Inquire as to the correct motion - to accomplish a desired result, or raise a point of order
- **Point of Information:** Generally applies to information desired from the speaker: "I should like to ask the (speaker) a question."
- **Orders of the Day (Agenda):** A call to adhere to the agenda (a deviation from the agenda requires Suspending the Rules)

- **Point of Order:** Infraction of the rules, or improper decorum in speaking. Must be raised immediately after the error is made
- **Main Motion:** Brings new business (the next item on the agenda) before the assembly
- **Divide the Question:** Divides a motion into two or more separate motions (must be able to stand on their own)
- **Consider by Paragraph:** Adoption of paper is held until all paragraphs are debated and amended and entire paper is satisfactory; after all paragraphs are considered, the entire paper is then open to amendment, and paragraphs may be further amended. Any Preamble can not be considered until debate on the body of the paper has ceased.
- **Amend:** Inserting or striking out words or paragraphs, or substituting whole paragraphs or resolutions
- **Withdraw/Modify Motion:** Applies only after question is stated; mover can accept an amendment without obtaining the floor
- **Commit /Refer/Recommit to Committee:** State the committee to receive the question or resolution; if no committee exists include size of committee desired and method of selecting the members (election or appointment).
- **Extend Debate:** Applies only to the immediately pending question; extends until a certain time or for a certain period of time
- **Limit Debate:** Closing debate at a certain time, or limiting to a certain period of time
- **Postpone to a Certain Time:** State the time the motion or agenda item will be resumed
- **Object to Consideration:** Objection must be stated before discussion or another motion is stated
- **Lay on the Table:** Temporarily suspends further consideration/action on pending question; may be made after motion to close debate has carried or is pending
- **Take from the Table:** Resumes consideration of item previously "laid on the table" - state the motion to take from the table
- **Reconsider:** Can be made only by one on the prevailing side who has changed position or view
- **Postpone Indefinitely:** Kills the question/resolution for this session - exception: the motion to reconsider can be made this session
- **Previous Question:** Closes debate if successful - may be moved to "**Close Debate**" if preferred
- **Informal Consideration:** Move that the assembly go into "**Committee of the Whole**" - informal debate as if in committee; this committee may limit number or length of speeches or close debate by other means by a 2/3 vote. All votes, however, are formal.
- **Appeal Decision of the Chair:** Appeal for the assembly to decide - must be made before other business is resumed; NOT debatable if relates to decorum, violation of rules or order of business
- **Suspend the Rules:** Allows a violation of the assembly's own rules (except Constitution); the object of the suspension must be specified

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**OFFICE FOR THE ADVANCEMENT OF
EARLY CARE AND EDUCATION**

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OVERVIEW

The Office for the Advancement of Early Care and Education (OAECE) envisions a high-quality early care and education system accessible to all families that nurtures children's healthy growth and early learning, fosters protective factors in families, and strengthens communities. Programs and activities include:

Child Care Planning Committee (Planning Committee), Los Angeles County's Local Child Care and Development Planning Council, engages parents/consumers, early educators, community and public agencies, institutions of higher education, resource and referral agencies and other community stakeholders in collaborative planning efforts to improve the overall early care and education infrastructure of Los Angeles County, including the quality and continuity, affordability, and accessibility of services for all families.

Policy Roundtable for Child Care and Development (Roundtable) builds and strengthens early care and education by providing recommendations on policy, systems, and infrastructure to the Board of Supervisors.

Joint Committee on Legislation is a combined committee of the Planning Committee and Roundtable that identifies and tracks bills each legislative session, prepares analyses, and makes recommendations to the Department of Public Health Government Affairs, the Chief Executive Office Legislative Affairs & Intergovernmental Relations, and the Board of Supervisors.

Workforce Pathways LA increases the qualifications of early educators working in child development centers and family child care homes in which most of the children are subsidized by the California Departments of Education and Social Services.

County Employee Child Care and Development Centers receive technical assistance and advisement from the OAECE. In addition, the OAECE manages the contract for the Van Nuys Child Development Center.

Systems Strengthening is the role the OAECE undertakes when it represents County interests and leadership regarding the advancement of early care and education on various countywide initiatives. Examples include participating on the Quality Start Los Angeles (QSLA) Leadership Council, supporting the Comprehensive Financial Landscape Analysis led by the Office of Child Protection, responding to Board motions, and leading the COVID-19 response for early care and education.

For more information on the work of the Office for the Advancement of Early Care and Education, located within the Health Promotion Bureau of the Los Angeles County Department of Public Health, and on behalf of the Roundtable and Planning Committee, call (213) 639-6202 or visit our website at <https://childcare.lacounty.gov/>.



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LOS ANGELES COUNTY

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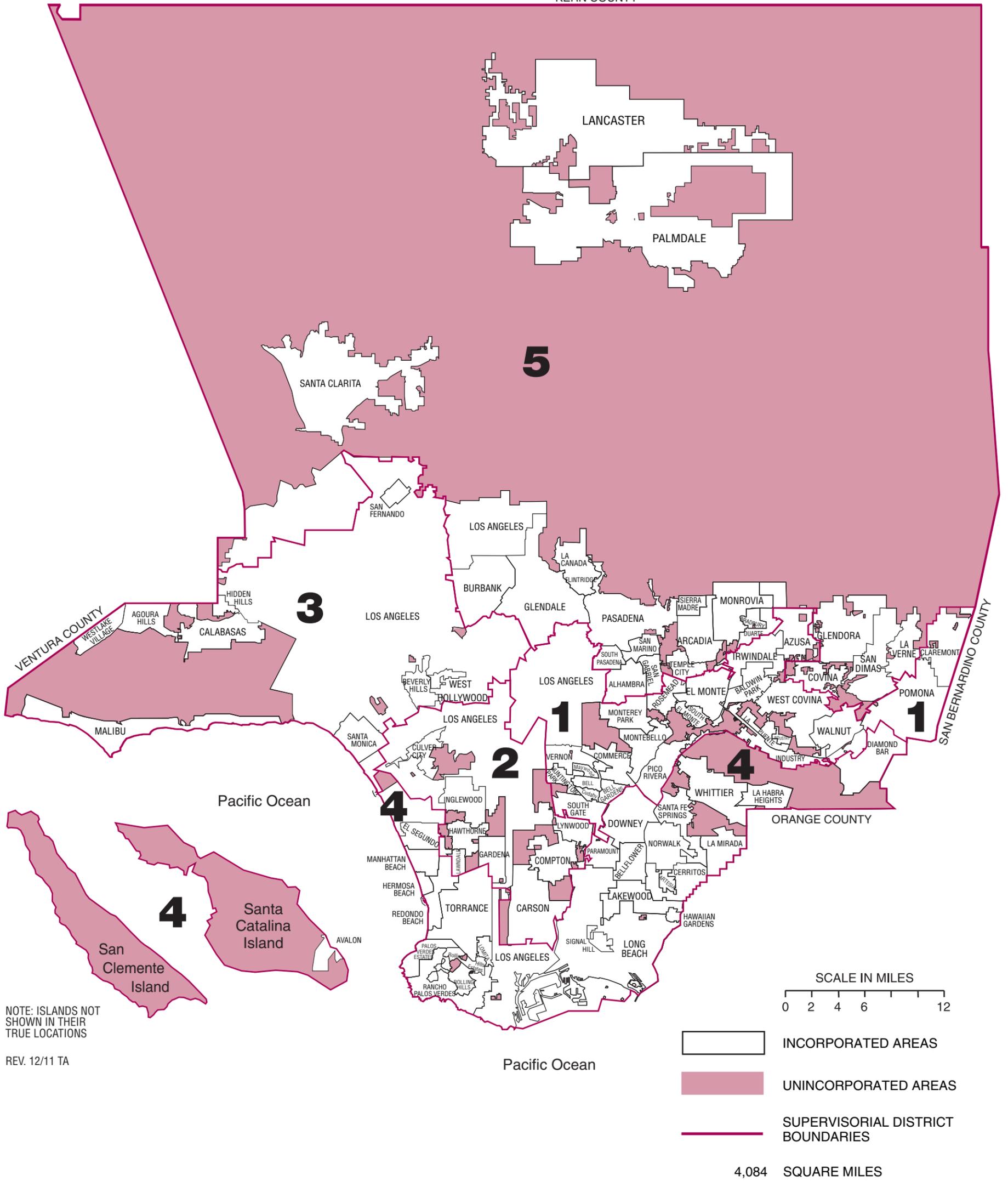
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KERN COUNTY



NOTE: ISLANDS NOT SHOWN IN THEIR TRUE LOCATIONS

REV. 12/11 TA

SCALE IN MILES
0 2 4 6 8 10 12

- INCORPORATED AREAS
- UNINCORPORATED AREAS
- SUPERVISORIAL DISTRICT BOUNDARIES

4,084 SQUARE MILES

County of Los Angeles Department of Public Health

STRATEGIC PLAN

2018-2023



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Letter from the Director

Dear Colleagues,

Health equity means that everyone has the opportunities and resources needed for optimal health. Access to a quality education, full-time employment, a livable wage, social support, and community safety is linked to well-being. Specifically, these social and economic factors are associated with 40% of all death and disability.¹ Right now, many low-income residents and people of color face unfair health burdens due to the unjust distribution of these social and economic opportunities.



At the Los Angeles County Department of Public Health (DPH) we are working to fundamentally change how we think about and approach our work to systematically address the unjust policies, practices, and attitudes that consistently produce negative health outcomes for communities across our County.

I am excited to present the 2018-2023 Strategic Plan that anchors health equity as a priority for the Department, and charts a course for us to...

- Support engagement and mobilization efforts to address community concerns, amplify authentic stories, and strengthen capacity to spur policy and systems change
- Collaborate with partners to find innovative ways to protect and promote health in places where people live, learn, work, worship, and play
- Continue to use science to inform and refine our strategies
- Prepare our workforce and create a culture of learning and respect across the department

We all have a role to play in implementing this plan. By working together, we will ensure that everyone in Los Angeles County has the opportunities, resources, and protections in their communities and beyond that support optimal health and well-being.

Sincerely,

A handwritten signature in black ink that reads "Barbara Ferrer". The script is fluid and cursive.

Dr. Barbara Ferrer, Director
LOS ANGELES COUNTY DEPARTMENT OF PUBLIC HEALTH

¹ County Health Rankings & Roadmaps. "Our Approach." <http://www.countyhealthrankings.org/our-approach>. Accessed 11/14/2017.

Introduction and Purpose

The Los Angeles County Department of Public Health Strategic Plan for 2018 to 2023 presents a blueprint for organizational advancement that will accelerate the Department's impact on building optimal and equitable health and well-being for the people of Los Angeles County. Based on a thorough self-examination, as well as suggestions and candid feedback from partners, the plan identifies key improvements to strengthen our ability to achieve the community conditions necessary to realize health and equity.

We know that social factors such as access to care and prevention services, safe communities, access to quality housing, education and jobs, and others – i.e., the social determinants of health – have an outsized impact on community members' health and well-being. For too long, many people of color and those living in or near poverty in Los Angeles County have suffered from systemic disadvantages, such as unequal access to healthy foods, green spaces, and quality educational opportunities, and disproportionate involvement with our criminal justice system, resulting in poorer health outcomes. To make meaningful and just improvements in population health and achieve racial, social and economic justice, we must work with our community partners to eliminate the institutional and environmental barriers that have impeded the path to wellness, and build communities that foster health for everyone.

About the Plan's Five Strategic Priorities

This plan puts in place critical measures to advance the Department's capacity to narrow these longstanding inequities. First, community health improvement efforts must start with a foundation of accurate, timely and actionable data on health and factors influencing health in the many communities of LA County, and the best available scientific information to inform decisions on how to most effectively improve community health and achieve health equity. Thus, one strategic priority focuses on **Data Accessibility, Science Excellence, and Innovation**. Second, understanding that the Department is but one player working to improve public health, the Department has a responsibility to make health information more easily accessible to community members and stakeholders to facilitate their work in their own community; accordingly, forging **Communication Channels that Inform, Educate, and Empower Los Angeles County Residents** will be critical. Third, the Department can directly influence some social determinants, such as access to high-quality, integrated health and mental health services, through **Health Agency Integration that Fosters Healthy People and Healthy Environments**. We can achieve community conditions that foster good health for all through nurturing cross-sector partnerships to promote policies that lead to equitable health outcomes, and prioritizing the importance of community voices to deepen our understanding of the causes of health inequities. This priority focuses on **Policy and Institutional Change to Ensure Equitable and Just Distribution of Resources and Opportunities**. Finally, the key to success in all these areas is an empowered, motivated and skilled Department workforce, which is why our final strategic priority will make **Investments in Our Staff**. The achievable set of goals, objectives and strategies in this plan will sharpen our skills, abilities and infrastructure in these five areas, and will augment our effectiveness in meaningfully impacting population health.

Aligning Our Strategic Plan with County, Health Agency and DPH Priorities

In crafting our new Strategic Plan, DPH considered the priorities of the Health Agency and the County of Los Angeles. By design, the plan reflects and aligns with the County's strategic goals, including supporting community wellness, driving economic development, and fostering environmental sustainability. The plan will advance Health Agency priorities by improving data systems to better coordinate consumer services across departments; improving DPH's ability to work across sectors to address social determinants of health; making upstream policy recommendations; and strengthening workforce capabilities. Improvements set out in this Strategic Plan also parallel the priorities set forth in DPH's Quality Improvement and Workforce Development Plans.

The Strategic Plan is a key tool in our efforts to narrow health inequities in collaboration with partners across sectors and will facilitate DPH's Community Health Assessment (CHA) and the Community Health Improvement Plan (CHIP). The CHA lays out the stark inequities across our diverse population in LA County, and the CHIP proposes bold strategies that multiple stakeholders in the County can employ to reduce these inequities. The Strategic Plan envisions critical institutional advancements that deepen DPH's ability to produce community health data for our CHA and achieve the health outcomes we seek in our CHIP, and in our departmental programs.

Vision, Mission, Values

Vision

Healthy People in Healthy Communities

Mission

To protect health, prevent disease and injury, and promote health and well-being for everyone in Los Angeles County

Values

- *Leadership*: We are recognized throughout the field for our innovative and effective approach to public health.
- *Service Excellence*: We provide exceptional service with professionalism and respect.
- *Quality*: We utilize state-of-the-art science, evidence-based best practices, and performance monitoring to maintain and improve program efficiency and efficacy.
- *Collaboration*: We develop, nurture, and leverage key partnerships.
- *Accountability*: We act with transparency and integrity as responsible stewards of public funds.
- *Diversity*: We respect people of all cultures, communities, ethnicities, and perspectives.
- *Professionalism*: We maintain a well-trained, high-performing workforce.
- *Compassion*: We treat each other and those we serve with kindness and empathy.

The Planning Process

DPH undertook a comprehensive planning process that involved engaging department staff at all levels ranging from leadership to line staff; interviewing community partners and public health experts; and reviewing public health literature and other health department strategic plans. Our executive leadership offered preliminary strategic priorities and suggested areas for improvement and innovation. Staff at all levels gave input by Bureau, and each Bureau's leadership chose how their staff would provide suggestions: approximately 150 Health Promotion Bureau staff participated in two facilitated, "town hall" style meetings where they rotated through stations corresponding to the different strategic priorities and offered ideas in small groups; the Health Protection Bureau and the Bureau of Disease Control conducted presentations and surveys with their staff to identify potential innovations and improvements, and then participated in facilitated meetings to discuss the ideas that emerged; and the Operations Support Bureau surveyed their staff via their internal teams, and summarized their staff's input. This process allowed hundreds of DPH staff to contribute. Once all input was gathered, a comprehensive set of ideas was presented at a Program Directors' meeting, where directors discussed them and voted on the improvement strategies they thought would best increase DPH's effectiveness.

To turn the ideas into goals, objectives, and strategies, workgroups were formed for each strategic priority area, consisting of three to five representatives from each Bureau with expertise in that strategic priority. The workgroups met four times, and began by reviewing the information collected. Once they had discussed the ideas generated from staff, they prioritized them and narrowed the list according to feasibility and impact, considered what if anything was missing, and grouped ideas into content areas. As goals emerged from the content areas, the groups crafted measurable objectives and strategies to achieve each goal. Staff from the Office of Planning and Quality Improvement & Accreditation Program reviewed goals, objectives and strategies in the five strategic priorities for overlap and merged some areas that had similar strategy ideas. To create a final draft of recommended goals, objectives and strategies to be presented to Department executive leadership, the Office of Planning collaborated with department "leads" for each strategy. The leads were selected based on their area of expertise to fine-tune the language and ensure that the goals, objectives and strategies are feasible, relevant, and likely to have the desired impact.

Strategic Priority I: Policy and Institutional Change to Ensure Equitable and Just Distribution of Resources and Opportunities

What We Intend to Accomplish

DPH recognizes the tremendous power of policy and systems change to affect community well-being, racial equity and the social determinants of health. As the Department moves towards broader involvement in the policy arena, we are aware that "policies" and "systems" take many forms, including city and county ordinances, state legislation, Health Officer orders, government procedures, regulations, and budgetary decisions.

Beyond the critical policy work that DPH programs currently conduct, this plan sets the course for DPH to deepen our involvement in local and state policy, alongside community partners.

By working closely with community partners, we can identify and prioritize local and state policies and systems changes, as well as changes to DPH that may be needed to further operationalize our commitment to racial, social and economic equity. Once we have selected priority policies and systems changes, we will build the collective capacity of DPH staff and our partners to achieve policy change, via trainings and other opportunities. Ultimately, these steps will position DPH to work jointly with the Board of Supervisors and our partners to effectively carry out policy change efforts. This might involve developing new local or state legislation, commenting on pending bills and ordinances, or providing input on the implementation of policies already adopted, to ensure that all policies maximize the benefit to public health.

Goal 1: Collaborate with Community Partners to Support Policies that Achieve Racial Equity, and Social and Economic Justice

Objective 1.1: By December 31, 2020, collaborate with community partners to identify priority DPH-wide, local, and state policy and systems changes that promote equity.

Strategies

1.1.a: By March 31, 2018, launch the Center for Health Equity to serve Health Agency efforts that build health equity across the County by addressing the root causes of disparate health outcomes; and convene five listening sessions across the County to gather input about the goals of the Center from residents and community organizations.

Lead: Center for Health Equity

1.1.b: By March 31, 2018, and annually thereafter, employ a new policy planning approach that convenes community partners and DPH staff with policy expertise to identify proposed DPH annual high-priority local and state policy opportunities.

Lead: Policy and Legislative Affairs; Office of Planning

1.1.c: By December 31, 2020, collaborate with community partners to identify priority policies and/or systems changes for inclusion in the next Community Health Improvement Plan.

Lead: Office of Planning

Goal 2: Transform Departmental Capacity, Culture, and Practice to Promote Health Equity

Objective 2.1: By June 30, 2023, implement at least three new or modified administrative practices and three new or modified DPH programmatic activities to achieve racial equity.

Strategies

2.1.a: By June 30, 2018, conduct at least one department-wide event to raise employee awareness about implicit bias; and ensure all department employees complete implicit bias and cultural competency training.

Note: Implicit bias refers to the attitudes or stereotypes that affect our understanding, actions, and decisions in an unconscious manner.

Lead: Center for Health Equity

2.1.b: By June 30, 2018, develop a framework for assessing departmental policies using an equity and "just culture" frame (see Goal 11), and initiate a process for reviewing and proposing revisions to existing policies to ensure alignment with the framework.

Lead: Chief of Staff

2.1.c: By December 31, 2019, revise policies and procedures to ensure that internal structures and practices support equal opportunity for all DPH staff.

Lead: Chief Deputy Director

2.1.d: By December 31, 2018, develop a race equity team of champions from across the Health Agency dedicated to racial equity learning, planning and practice: for example, creating safe spaces to discuss current racial justice issues and health inequalities, establishing common language and collective understanding.

Lead: Chief of Staff; Center for Health Equity

2.1.e: By March 30, 2020, secure DPH leadership approval and initiate implementation of a Race Equity Action Plan that integrates direction from community partners for new and/or modified administrative practices and DPH programmatic activities to achieve racial equity.

Lead: Chief of Staff; Center for Health Equity

Objective 2.2: By June 30, 2022, implement a minimum of four new capacity building strategies for DPH staff and community partners to achieve policy and systems change.

Strategies

2.2.a: Each year, provide capacity building opportunities, as needed, for DPH staff and collaborating partners pursuing DPH's annual high-priority policies.

Lead: Office of Planning; Policy and Legislative Affairs; DPH Programs leading policy efforts

2.2.b: By July 31, 2018, develop and offer a training for local health care providers to support DPH's policy priorities by serving as advocates for public health policies at the local and state level.

Lead: Medical Affairs Program

2.2.c: By December 31, 2018, develop and offer a training course for DPH staff to build and/or deepen their skills to engage in public health policy change efforts.

Lead: Policy and Legislative Affairs

2.2.d: By June 30, 2019, develop and offer a revised training course for DPH staff and their community partners to learn essential skills for leading multi-stakeholder collaborations.

Lead: Organizational Development and Training; Office of Planning

Goal 3: Work Jointly with Partners to Support Bold Local and State Policies that Accelerate Equity and Justice in Our Communities

Objective 3.1: Each year, collaborate with partners on policy teams to actively advance a minimum of two high priority policies on DPH's annual list and/or in the CHIP.

Strategies

3.1.a: Each year, use data-driven tools to support the policy change work led by DPH policy teams and/or CHIP collaborations, including participatory action research, health impact assessment (HIA), systems modeling, economic analysis, policy evaluation, and DPH publications/reports on relevant topics.

Lead: Center for Health Impact Evaluation; Office of Health Assessment and Epidemiology

3.1.b: Each year, develop communication tools as needed (for example, press releases, social media, etc.) to support the efforts of major DPH policy initiatives.

Lead: Office of Communications and Public Affairs

3.1.c: By June 30, 2018, and annually thereafter, form “policy teams” of DPH staff from multiple programs to collaborate with partners to advance DPH’s annual prioritized local and state policy opportunities.

Lead: Policy and Legislative Affairs, with strong support from DPH Programs

3.1.d: By June 30, 2018, strengthen coordination within DPH by enhancing centralized mechanisms that track and disseminate information on DPH’s policy-related activities.

Lead: Policy and Legislative Affairs

3.1.e: By June 30, 2023, participate in at least three multi-stakeholder collaborations to achieve priority CHIP strategies.

Lead: DPH program (depending on CHIP strategy selected); Office of Planning

Strategic Priority II: Health Agency Integration that Fosters Healthy People and Healthy Environments

What We Intend to Accomplish

The Los Angeles County Health Agency brings together three Los Angeles County health departments — the Departments of Health Services, Mental Health, and Public Health. The vision of the Health Agency is to provide integrated and enhanced services to Los Angeles County residents.

Aligning efforts across our sister departments is a top priority. A critical step to streamlining access to care and enhancing customer experience will entail putting referral mechanisms in place for patients who need services from more than one department or specialty area. To expand access to care beyond Health Agency programs, DPH will work with external partners to create a network of community resources, such as housing options and substance use treatment.

Goal 4: Forge Robust Partnerships among Health Agency Departments and Staff

Objective 4.1: By June 30, 2020, connect Health Agency patients to the services they need by creating a mechanism for the three Health Agency Departments to refer patients: to community resources for chronic disease management and other supportive services; and from the Department of Public Health to the Department of Health Services for permanent medical homes.

Strategies

4.1.a: By March, 2018, all DPH clinic sites will use the same Electronic Health Record system as the Department of Health Services (referred to as ORCHID - Online Real-time Centralized Health Information Database).

Lead: Community Health Services

4.1.b: By June 30, 2019, create or strengthen quality referral and coordination mechanisms for connecting Health Agency patients to community-based chronic disease management and prevention services.

Lead: Chronic Disease and Injury Prevention

4.1.c: By June 30, 2019, pursue the possibility of expanding the use of the Department of Health Services' (DHS) Nurse Referral Form, to refer patients in any DPH clinic or those working with Public Health Nurses in a community setting, to DHS for a permanent medical home.

Lead: Community Health Services

Objective 4.2: By June 30, 2022, identify and address at least three gaps or needed improvements in services for the target populations served by the Whole Person Care initiative.

Note: Whole Person Care is a Health Agency initiative that provides comprehensive and coordinated services to the sickest and most marginalized people in LA County, including individuals who are homeless, justice-involved, or have serious mental illness, severe and/or persistent substance use disorder or medical issues.

Strategies

4.2.a: By January 31, 2018, coordinate monthly community engagement meetings at each Service Planning Area (SPA) Whole Person Care Regional Coordinating Center to identify and address gaps in the services provided to key target populations as part of the Whole Person Care program.

Lead: Community Health Services Area Health Officers

Goal 5: Conduct Initiatives with Health Agency Departments to Achieve the Goals of the Center for Health Equity

Objective 5.1: By December 30, 2018, at least two action plans will be developed and implemented collaboratively across the Health Agency.

Strategies

5.1.a: By December 30, 2018, collaborate with community partners and Health Agency staff to develop at least two action plans for the Health Agency that advance health equity.

Lead: Center for Health Equity

Objective 5.2: By June 30, 2018, support Health Neighborhood coalitions in 11 communities.

Strategies

5.2.a: By June 30, 2018, at least two DPH staff persons will attend each of the 11 Health Neighborhood Coalitions and contribute to coalition efforts as needed.

Lead: Center for Health Equity

Strategic Priority III: Data Accessibility, Science Excellence, and Innovation

What We Intend to Accomplish

Data and science are the cornerstone on which public health is built. To keep pace with and take advantage of technology advances while expanding our ability to rapidly address an evolving health landscape, DPH will refine and improve the way we gather, use, and communicate data and scientific information.

To streamline DPH's response to communicable disease, we will integrate surveillance data and case management systems, housing all the information needed to manage communicable disease in one data system. Because residents and a wide variety of community partners look to the Department for accurate and timely health information, DPH must harness new communication technologies and channels to reach audiences with messages that are easily understood, useful and relevant.

Goal 6: Augment the Quality, Breadth, Timeliness, and Utility of Surveillance Data

Objective 6.1: By December 31, 2022, implement an integrated communicable disease reporting, investigation, surveillance, and case management system.

Strategies

6.1.a: By December 31, 2019, make modifications to the Visual Confidential Morbidity Reporting (vCMR) System to become the integrated reporting, investigation, and surveillance (IRIS) system that includes sexually transmitted disease, tuberculosis, and other communicable disease reporting.

Lead: Division of Communicable Disease Control and Prevention

6.1.b: By December 31, 2020, enable data exchange between the integrated reporting, investigation, and surveillance system and the California Department of Public Health's California Reportable Disease Information Exchange (CalREDIE) disease reporting and surveillance system.

Lead: Division of Communicable Disease Control and Prevention

6.1.c: By December 31, 2020, incorporate case management functionality into the integrated reporting, investigation, and surveillance system that allows DPH staff to document and track all case follow-up activities and communications.

Lead: Division of Communicable Disease Control and Prevention

Objective 6.2: By December 31, 2020, utilize data from one or more healthcare systems to produce at least three analyses or reports with recommendations for lowering disease rates and reducing health inequities.

Strategies

6.2.a: By December 31, 2018, establish partnerships with one or more large healthcare systems to share priority data that will augment surveillance data on communicable disease, chronic disease, injury and violence, and other priority health outcomes and health determinants, including social determinants of health.

Lead: Office of Health Assessment and Epidemiology

Goal 7: Strengthen the Department's Collection and Dissemination of Information that Connects Determinants of Health with Health Outcomes

Objective 7.1: By December 31, 2022, produce at least ten products (publications, presentations, etc.) using infographics, videos and/or storytelling to bring data to life by connecting it to community members' experiences.

Strategies

7.1.a: By December 31, 2018, provide technical support to DPH programs to ensure that publications and presentations utilize new techniques of presenting data, for example personal vignettes, storytelling, and infographics; and connect the social determinants of health to health outcomes.

Lead: Office of Communications and Public Affairs; Office of Health Assessment and Epidemiology

7.1.b: By December 31, 2018, develop a plan to improve the quality, collection, and dissemination of social determinants of health and racial equity data.

Lead: Office of Health Assessment and Epidemiology

Objective 7.2: By June 30, 2018, create neighborhood reports for 50 communities that will comprise a key component of the next Community Health Assessment (CHA).

Strategies

7.2.a: By June 30, 2018, develop community profiles for 50 cities in the county that include information about the social determinants of relevant health outcomes.

Lead: Chief Science Officer; Office of Health Assessment and Epidemiology

Objective 7.3: By December 31, 2020, expand the public's access to user-friendly health data by making improvements to the ThinkHealthLA website (www.thinkhealthla.org), which will result in increased volume of activity from 450 average users per month to 1500 average users per month.

Strategies

7.3.a: By June 30, 2018, add key data from DPH to the ThinkHealthLA.org website to make DPH data more accessible to the public.

Lead: Office of Planning; Chief Science Officer

7.3.b: By December 31, 2019, offer tools on ThinkHealthLA.org that allow for easier display of information and creation of user-friendly reports.

Lead: Office of Planning

7.3.c: By December 31, 2020, increase promotion of the ThinkHealthLA.org website to external partners and the general public.

Lead: Office of Planning

Goal 8: Evaluate DPH Program Activities to Assess Impact and Increase Transparency

Objective 8.1: By December 2023, increase by 10% the proportion of large-scale DPH interventions that have been evaluated (baseline to be established).

Strategies

8.1.a: By December 2018, where appropriate, include a provision in DPH contracts that requires contractors to conduct baseline and follow-up measurement to evaluate the impact of program services and public health policy changes.

Lead: Contracts and Grants; Chief Science Officer

8.1.b: By December 2019, establish partnerships with local universities to provide support on evaluation methods.

Lead: Chief Science Officer

8.1.c: By January 2019, encourage grant funded programs in DPH to allocate 5-10% of their budget for evaluation, contingent on approval by the funding organization.

Lead: Chief Science Officer; Finance

8.1.d: By June 2019, establish an in-house group of evaluation specialists to lend technical assistance in evaluating large scale DPH interventions, including policy change initiatives.

Lead: Chief Science Officer; Office of Health Assessment and Epidemiology

Strategic Priority IV: Communication Channels that Inform, Educate, and Empower Los Angeles County Residents

What We Intend to Accomplish

In any organization, but especially a large one like DPH, strong communication is vital to keeping staff informed about each other's work, and ensuring that critical information reaches staff at all levels and in all locations. Further, how DPH communicates with the public is key to successfully sharing salient information that can be used to protect and promote individual health and health equity in communities. The enhancements that DPH will make internally, and when communicating with the public, capitalize on advances in technology and social media trends.

Goal 9: Revitalize and Modernize DPH's Public Communication Channels and Messaging, Including a Mix of "Bottom-up" Process and Feedback Loops

Objective 9.1: By June 30, 2022, increase DPH's capacity to raise Los Angeles County residents' awareness about community-wide health threats and promote practices for building equitable communities, by implementing at least three new communication strategies.

Strategies

9.1.a: By June 30, 2018, develop an approach and process to rapidly and systematically disseminate health information directly with Los Angeles County residents and other stakeholders.

Lead: Community Health Services; Emergency Preparedness and Response Division

9.1.b: By June 30, 2018, ensure every Bureau has a tool kit with accessible information for residents about their programs, services, and ways to get involved; program materials should identify and convey specific health equity objectives.

Lead: Office of Communications and Public Affairs; Bureau Directors

9.1.c: By June 30, 2018, develop a mechanism to request translation of key documents and to produce translated documents.

Lead: Office of Communications and Public Affairs

9.1.d: By December 31, 2020, create a platform for collecting and sharing information from community members and partners regarding health-related concerns and community health issues.

Lead: Public Health Information Systems; Office of Communications and Public Affairs

Goal 10: Expand Internal Communication and Coordination within DPH

Objective 10.1: By June 30, 2020, at least 80% of DPH Staff Satisfaction Survey respondents will agree or strongly agree that the management team at their work location effectively communicates new policies, updates and changes within DPH (baseline is 56%).

Strategies

10.1.a: By June 30, 2018, within each Bureau, ensure use of regularly scheduled communication methods to disseminate and review information; for example, standing Bureau staff meetings, Division and Program Directors' meetings, and/or regular Bureau Director visits to programs.

Lead: Bureau Directors

10.1.b: By June 30, 2018, implement at least two strategies for staff to provide suggestions to Bureau management; for example, a suggestion box in each Bureau, and a mechanism within each Bureau for Bureau management to report back to staff on the status of suggestions.

Lead: Bureau Directors

10.1.c: By December 31, 2019, redesign the intranet by implementing a new web platform that is more accessible, and ensure that all DPH Programs regularly update their information.

Lead: Public Health Information Systems; Office of Communications and Public Affairs; Bureau Directors

Objective 10.2: By December 31, 2018, in order to strengthen coordination among DPH programs, at least 90% of programs that conduct community-based activities will enter information about community-based projects into an internal database (baseline to be established).

Strategies

10.2.a: By June 30, 2018, develop and disseminate instructions for DPH programs to enter content into a shared internal database (SmartSheet) on a regular basis to strengthen internal knowledge of programmatic activities and foster coordination among DPH programs.

Lead: Office of Planning

Strategic Priority V: Investments in Our Staff

What We Intend to Accomplish

DPH conducted a Department-wide staff satisfaction survey in 2016 to understand employees' priorities relating to their work environment, advancement, and professional development. The survey gives DPH staff a crucial role in identifying how individuals, teams, and DPH as an organization can better function in order to achieve our public health mission.

Rather than create a separate action plan to capture the solutions proposed through the staff satisfaction survey, this section of DPH's Strategic plan serves that role. Additional ideas that were generated by staff in town hall meetings, workgroups, and surveys to shape the Strategic Plan are woven into the goals, objectives and strategies below.

The new approaches that DPH will institutionalize over the next five years aim to strengthen workplace safety and supervisor-employee relationships, boost professional development opportunities, and expand our internal efficiency, as we strive to make the Department the public health employer of choice.

Goal 11: Fully Integrate "Just Culture" and Create a Work Environment Valuing Safety and Physical & Emotional Wellness

Objective 11.1: By June 30, 2023, achieve department-wide success resulting from DPH's Just Culture initiative by increasing by 20% the number of DPH staff who agree or strongly agree that they can speak up about errors and mistakes without fear of retaliation (baseline to be established).

Strategies

11.1.a: By June 30, 2018, develop and implement a DPH Just Culture policy and department-wide mandatory training program to apply Just Culture principles in DPH's work environment.

Note: The Health Agency is leading an agency-wide initiative to promote a Just Culture, defined as "shared attitudes, values and practices that stand for and foster dignity, trust, fairness, and kindness."

Lead: Organizational Development and Training

Objective 11.2: By June 30, 2022, increase by 15% the number of DPH staff who agree or strongly agree that they benefit from DPH's Employee Wellness program (baseline to be established).

Strategies

11.2.a: By December 31, 2018, develop new or modify existing DPH policies and practices to create an environment accommodating parental needs, including but not limited to expanded access to lactation rooms.

Lead: Maternal, Child and Adolescent Health Programs

11.2.b: By June 30, 2019, develop a comprehensive DPH Employee Wellness Program plan that provides opportunities for staff to improve their physical and mental wellbeing.

Lead: Organizational Development and Training

Objective 11.3: By June 30, 2021, at least 80% of DPH Staff Satisfaction Survey respondents will report that they agree or strongly agree that they work in a safe environment (baseline is 68%).

Strategies

11.3.a: By June 30, 2020 (DPH-owned facilities) and June 30, 2021 (DPH-leased facilities), conduct assessments at DPH staff worksites and make necessary safety and security improvements.

Lead: Risk Management

Goal 12: Bolster Recruitment and Retention of Employees to Attract and Maintain a Talented and Diverse Workforce

Objective 12.1: By January 1, 2019, institutionalize improvements in our hiring process to effect a 15% reduction in hiring time for new County employees, and implement a minimum of three new retention strategies to encourage quality staff to remain at DPH (baseline to be established).

Strategies

12.1.a: In order to hire new staff for the most critical job openings throughout the Department, every three months, prioritize which job examinations the Bureaus would like DPH Human Resources to open.

Lead: DPH Director; Bureau Directors

12.1.b: To assist Bureaus with hiring, create a Human Resources dashboard that:
1) By June 30, 2018, announces current open exams and eligibility hiring lists as well as target dates for upcoming examinations and release dates for eligibility lists; and 2) By June 30, 2019, analyzes key hiring data for each Bureau including racial/ethnic data on new hires and promotions, the vacancy rate, the average number of days that positions have been vacant, and the length of time to complete Personnel Action Requests (PAR) for new hires and internal transfers.

Lead: Human Resources

12.1.c: By December 31, 2018, expand the existing on-boarding practices throughout DPH to deepen the welcoming environment for new staff and standardize the off-boarding process to learn from departing employees.

Lead: Human Resources

12.1.d: By June 30, 2019, create a family-friendly workplace and an expanded set of employment options, by pursuing the possibility of allowing job sharing (one job and benefits split between two half-time employees) and part-time jobs (with prorated benefits).

Lead: Human Resources

12.1.e: By June 30, 2019, in order to increase staff retention, strategize with internal and external partners how DPH could provide financial compensation to employees who obtain academic degrees, advanced educational training, and/or certifications that are relevant, but not required, for their current job description.

Lead: Human Resources; Organizational Development and Training

Goal 13: Spur Career Growth by Offering Innovative Leadership and Professional Development Opportunities

Objective 13.1: By June 30, 2022, at least 55% of the DPH Staff Satisfaction Survey respondents will report that they have career advancement opportunities within DPH (baseline is 50%).

Strategies

13.1.a: By December 31, 2018, develop a comprehensive program (a DPH "University") that will promote continuous learning for professional growth and development.

Lead: Organizational Development and Training

Goal 14: Drive Workforce Efficiency by Modernizing and Streamlining Administrative Processes

Objective 14.1: By June 30, 2022, implement at least three new or modified administrative practices to achieve a higher level of efficiency.

Strategies

14.1.a: By June 30, 2018, increase use of modern technology in everyday business practices; for example, expanded use of videoconferencing/web-based conferencing and electronic forms.

Lead: Public Health Information Systems

14.1.b: By June 30, 2022, to facilitate and accelerate purchasing, hiring, budgeting, contracting, and various other administrative functions that DPH programs carry out, develop and disseminate to all DPH program staff, procedural manuals that detail the correct processes to follow.

Lead: Materials Management; Human Resources; Finance; Contracts and Grants

Implementation and Evaluation

The Strategic Plan is meant to be a document that sets a course for the future, but too frequently plans such as this one can get lost in the day-to-day challenges that public health departments face. We felt it was essential to develop measurable objectives and time-bound strategies in order to hold ourselves accountable for achieving specific results. To ensure the plan remains relevant, dynamic, and responsive to Department needs, DPH will coordinate a systematic implementation and evaluation framework. This plan allots six years for implementation of the strategies; the sixth year will also be used to evaluate progress and develop the next plan. Staff leads for the strategies will recruit a team of internal colleagues, as needed, to collaboratively develop yearly action plans, carry out the strategies, collect data to measure achievements, and report on progress annually. A mid-term review will be held after completion of the plan's first two years, to examine progress towards goals, identify barriers, consider mid-course adjustments due to changes in priorities, resources, or opportunities, and plan for the remaining implementation years. A final report will outline DPH achievements due to the Strategic Plan, challenges and barriers encountered, and lessons learned, to inform the development of DPH's 2024 Strategic Plan.



Acknowledgments

Key Informant Interviews

Many thanks to the following public health and community leaders who offered candid feedback to DPH and shared big picture ideas for spurring innovation and health equity in Los Angeles County.

- Heidi M. Bauer**, MD, MS, MPH, Chief, STD Control Branch, California Department of Public Health
- Georges Benjamin**, MD, Executive Director, American Public Health Association
- Patrick Burns**, Senior Researcher, Economic Roundtable
- Kelly Colopy**, MPP, Director, Long Beach Department of Health & Human Services
- Muntu Davis**, MD, MPH, Public Health Director and County Health Officer, Alameda County Public Health Department
- Daniel Flaming**, PhD, President, Economic Roundtable
- Patty Hayes**, RN, MN, Director of Public Health, Public Health - Seattle & King County, Washington
- Nancy Halpern Ibrahim**, MPH, Executive Director, Esperanza Community Housing; Community Prevention & Population Health Task Force
- Michael Johnson**, MPA, Director, Pasadena Public Health Department
- Lauren Nakano**, Blue Zones Project Director, Beach Cities Health District; Community Prevention & Population Health Task Force
- Luis Pardo**, Executive Director, Worksite Wellness LA; Community Prevention & Population Health Task Force
- Maryjane Puffer**, MPA, Executive Director, The LA Trust for Children's Health; Community Prevention & Population Health Task Force
- Marguerite Ro**, DrPH, Chief, Public Health Assessment, Planning, Development and Evaluation, Public Health - Seattle & King County, Washington
- Beatriz Solis**, PhD, MPH, Director, Healthy Communities South Region, The California Endowment
- Rosa Soto**, Executive Director, LAC+USC Medical Center Foundation – The Wellness Center; Community Prevention & Population Health Task Force
- Rosemary C. Veniegas**, PhD, Senior Program Officer, Health, California Community Foundation
- Dennis Worsham**, Prevention Division Director, Public Health - Seattle & King County, Washington

In addition to our DPH colleagues listed below, we would like to recognize the hundreds of DPH staff who shared their ideas for this strategic plan by participating in town hall meetings, special convenings and surveys. We are also grateful to the many DPH staff who helped along the way in various organizational capacities, from assistance soliciting staff input throughout the Department to facilitating and chart writing at large town halls.

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NOTES

NOTES



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A Brief Guide to County-Related Bodies Addressing Children's Issues in Los Angeles County

Los Angeles County encompasses over 4,000 square miles, includes 88 incorporated cities, and is home to over 10 million people. The Los Angeles County Office of Education reports that 90 different languages are spoken by students enrolled in the 80 K-12 school districts within the County. Families living in Los Angeles County cover the spectrum from the wealthiest and the poorest in the country.

The size, density and diversity of the County tend to complicate how services are developed and accessed by families. As a result, a number of County-related committees and commissions have evolved to address both service specific and service integration issues. The following information offers the reader a very brief description of groups that are currently working on children's issues.

Child Care Planning Committee (Planning Committee)

Enabling Authority: State legislation AB 2141 (Chapter 1187, Approved July 9, 1991), adopted in 1991 and AB 1542 (Chapter 290, Approved August 11, 1997) adopted in 1997.

Established: June 1991

Membership: Per the California Education Code Section, the 50 members are appointed by the Board of Supervisors and the County Superintendent of Schools, and represent five categories: child care consumers; child care providers; community representatives; public agency representatives; and discretionary. Each category accounts for 20 percent of the membership.

Focus: The Planning Committee implements the mandates described in the California Education Code. As of July 2021, the Planning Committee will work closely with the California Departments of Social Services and Education on issues related to early care and education services funded by the State. Mandates include:

- Conduct a countywide needs assessment every five years, addressing early care and education services for children birth through 12 years of age;
- Develop a countywide plan to meet identified needs; and
- Identify service gaps for subsidized early care and education services.

Contact: Michele Sartell
Child Care Planning Coordinator
Office for the Advancement of Early Care and Education

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Mobile Phone: (323) 594-1244
E-mail: msartell@ph.lacounty.gov
Website: childcare.lacounty.gov

Commission for Children and Families

Enabling Authority: County Ordinance

Established: May 1984

Membership: The Commission consists of 15 persons, three appointed by each member of the Board of Supervisors. Members have knowledge and experience in the area of children's services.

Focus: The Commission for Children and Families reviews all programs administered by County departments that provide services to children at risk, receives input from persons and community groups related to County administered services, and makes recommendations to the Board of Supervisors and County departments.

Contact: Tamara Hunter, Executive Director
Telephone: (213) 974-1558
E-mail: thunter@bos.lacounty.gov
Website: <http://ccf.lacounty.gov>

Education Coordinating Council (ECC)

Enabling Authority: Action of the Board of Supervisors

Established: November 2004

Membership: Twenty-four members drawn from school districts, County departments, juvenile court, city and County commissions, advocacy groups, community agencies, and youth and their caregivers.

Focus: To raise the educational achievement of foster and probation youth throughout Los Angeles County to equal that of other youth.

Contact: Stephanie Gluckman
Telephone: (213) 974- 5950
E-mail: sgluckman@ocp.lacounty.gov
Website: www.educationcoordinatingcouncil.org

First 5 LA Commission

Enabling Authority: Proposition 10, which was approved by California voters in November 1998

Established: December 1998

Membership: Thirteen members are appointed by the Board of Supervisors, including the Directors of the Departments of Children and Family Services, Public Health and Mental Health, an expert on early childhood education, and five members, each nominated by a member of the Board of Supervisors. Ex officio members include representatives of the Commission for Children and Family Services, the Los Angeles County Office of Education, the Interagency Council on Child Abuse and Neglect, and the Policy Roundtable for Child Care and Development. The Chair of the Board of Supervisors or the Chair's appointee serves as the Commission Chair.

Focus: The First 5 LA Commission has embraced a more intensive approach by increasing its emphasis on systems change, collaboration and public policy. This transition supports the organization's goal of maximizing positive outcomes for children prenatal to age 5.

Contact: Kim Belshé, Executive Director
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Inter-Agency Council on Child Abuse and Neglect (ICAN)

Enabling Authority: County Ordinance

Established: 1977

Membership: ICAN membership includes 32 County, City, State and Federal agency heads, five private members appointed by the Board of Supervisors, and a representative from UCLA.

Focus: ICAN is dedicated to improving the lives of abused, neglected, and at-risk children through multi-disciplinary efforts that support the identification, prevention, and treatment of child abuse and neglect. ICAN provides advocacy at the County, State and Federal levels.

Contact: Deanne Tilton, Executive Director
Telephone: (626) 455-4585
Web: www.ican4kids.org
E-mail: admin@ican4kids.org

Perinatal and Early Childhood Home Visitation Consortium

Enabling Authority: Launched by the Department of Public Health, Maternal, Child and Adolescent Health Programs and co-led in partnership with Los Angeles Best Babies Network

Established: Fall 2012

Membership: A network of approximately 50 perinatal and early childhood home visitation programs, maternal and child health organizations, advocacy groups, and stakeholders. Membership is open to organizations willing to sign on to the Charter and Strategic Plan to confirm their commitment to shared ownership and accomplishments in Consortium activities.

Focus: Supports Los Angeles County's home visitation programs by sharing training and educational resources, researching best practice standards, supporting enhanced referral systems between programs, conducting research and collecting data on home visiting outcomes, and advocating for systems and policies that recognize the tremendous value of home visitation services.

Contact: LACPECHVC Coordinator
Telephone: (213) 378-1967
E-mail: LACPECHVC_Coordinator@labestbabies.org
Web: <http://homevisitingla.org/>

Policy Roundtable for Child Care and Development (Roundtable)

Enabling Authority: County Ordinance

Established: March 2000

Membership: The 25 members are appointed by the Board of Supervisors and represent a variety of backgrounds such as business, education, early childhood, research, and economics.

Focus: The Roundtable is charged with reviewing and developing policies that affect the supply, affordability and quality of local early care and education services for the purpose of advising the Board of Supervisors.

Contact: Leanne Drogin
Senior Analyst, Office for the Advancement of Early Care and Education/Department of Public Health
Mobile Phone: (310) 869-9292
E-mail: LDrogin@ph.lacounty.gov
Web: <https://childcare.lacounty.gov/>

Quality Start Los Angeles (QSLA)

Established:2012

Membership: QSLA is led by a consortium of key early childhood education agencies in Los Angeles County, including Los Angeles County Office of Education (LACOE), First 5 LA, Child360, Child Care Alliance of Los Angeles (CCALA), Partnerships for Education, Articulation and Coordination through Higher Education (PEACH) and Los Angeles County Office for the Advancement of Early Care and Education.

Focus: QSLA is a voluntary quality rating and improvement system (QRIS) designed to help parents of children birth to five choose the best early childhood education for their family. QSLA also supports centers and family child care providers with ongoing program enhancements.

Contact: Liz Guerra, Program Manager
LACOE Head Start and Early Learning
Telephone: (562) 922-8781
E-mail: Guerra_Liz@lacoedu
Web: <http://qualitystartla.org/>

COUNTY OF LOS ANGELES



**CHILD CARE
PLANNING
COMMITTEE**

POLICY • PLANNING • PRACTICE