COMMISSIONERS PRESENT:
Commissioners:
Nancy Au
Jonathan Fielding
Neal Kaufman
Don Knabe (Chair)
Evangelina Stockwell
Corina Villaraigosa
Carolyn Wilder

Ex-Officio Commissioners:
Duane Dennis
Jacquelyn McCroskey
Deanne Tilton
Harriette Williams

COMMISSIONERS ABSENT:
Commissioners:
Jane Boeckmann (Excused)
Marvin Southard [Vice Chair] (Excused)

STAFF PRESENT:
Evelyn V. Martinez, Executive Director
Carol Baker, Director of Public Affairs
Yolanda Bosch, Director of Grants Management & Legal Compliance
Tracey Hause, Finance Director
Armando Jimenez, Director of Research & Evaluation
Teresa Nuno, Director of Planning & Development
Maria Romero, Executive Assistant

LEGAL COUNSEL:
Craig Steele, Attorney-at-Law

CALL TO ORDER / ROLL CALL:
1. Chair Knabe called the meeting to order at 1:40 pm.

CONSENT CALENDAR: (Items 2 – 3)
2. Approval of Commission Meeting Minutes – Thursday, June 11, 2009
   M/S (Nancy Au / Corina Villaraigosa) APPROVED AS RECOMMENDED
   M/S (Nancy Au / Corina Villaraigosa) APPROVED AS RECOMMENDED

COMMISSION: (Items 4 – 11)
4. Announcements by the Commission Chair
   RECEIVED
5. Executive Director’s Report
   RECEIVED AND FILED
In addition to the written report, the following items were highlighted:

- **State Budget:** This year has been one of the most challenging budget years for the State. Since February 2009, over $60 billion has been cut from the State's general fund. Approximately $24 billion was cut during the recent budget correction in July with significant cuts to safety net programs, including the Healthy Families Program.

As President of the First 5 Association of California, Executive Director Martinez attended a meeting with the Governor’s staff and executive leadership from First 5 Association and First 5 California to discuss how safety net gaps could be filled by local First 5 County Commissions. To this end, First 5 California has committed funding for the State Healthy Families Program through the allocation of $81.4 million for one year. This allocation will ensure health care coverage for children 0-5 across the State including in Los Angeles County. Nonetheless, the forecast for the upcoming year’s State budget continues to anticipate severe budget cuts.

A lawsuit was filed by Senate Pro Tempore Darrell Steinberg against Governor Schwarzenegger’s line item cuts. Senator Steinberg believes that $500 million in cuts made by the Governor after the leadership agreed upon a budget is not within the Governor’s legal authority.

- **Assembly Bill (AB) 1422:** The state legislature has passed AB 1422 authored by Speaker Karen Bass on an urgency basis. AB 1422 extends the sunset date on a tax paid by State MediCal managed care plans until January, 2011. The tax will draw down federal dollars, which will be used to administer the Healthy Families Program. AB 1422 also raises premiums and co-payments, based on family income levels, for children receiving services in the Healthy Families Program. In addition, AB 1422 allows for First 5 California to move funds from specific spending accounts to an unallocated funding account.

- **The Children’s Council:** Commissioner Au reported that she attended the Strengthening Communities Capacity Committee meeting of The Children’s Council earlier in the day where a discussion took place on continuing the work funded by First 5 LA. The Children’s Council has obtained 501©3 status and is considering reconstituting the partnerships with funders, supporters and County departments under their new organizational structure to continue relationship-based community organizing.

- **ICAN Nexus XIV Conference:** Commissioner Tilton reminded everyone about the upcoming ICAN Annual Conference on October 21, 2009 at the Universal Sheraton Hotel. She distributed conference materials to all Commissioners.

**NOTE: At the request of Chair Knabe, Item 7 was discussed out of order; after Item 5 and prior to Item 6.**

7. Funding of Black Infant Health Program in an Amount Not-to-Exceed $1,111,986 from Last Year’s Unallocated Revenue

**NOTE:** Due to a conflict of interest, Commissioner Fielding recused himself from participating in the discussion and subsequent vote of this agenda item.
Chair Knabe presented the motion previously passed by the Board of Supervisors to request that First 5 LA provide funding for the Black Infant Health Program for one year to offset State budget cuts to the program.

AMENDMENT:

Chair Knabe introduced an amendment to increase the recommended funding level by $50,000 to include services in the Antelope Valley. The new funding amount being requested for the Black Infant Program totaled $1,161,986 from unallocated revenue in FY 2008-09.

M/S (Don Knabe / Nancy Au) APPROVED AS RECOMMENDED

Commissioner Kaufman inquired if funding should exceed one year. Chair Knabe commented that the Board of Supervisors was only assessing the Black Infant Health Program’s financial crisis for the current year. The effective date of the motion would be October 1, 2009. Executive Director Martinez also commented that if the lawsuit filed by Senator Steinberg prevailed, the State funding that was cut by the Governor would be reinstated.

Commissioner Stockwell inquired about how the funding of the Black Infant Program fit into the First 5 LA’s future strategic plan. Executive Director Martinez commented that funding the Black Infant Program did not necessarily fit into the new strategic plan. The current action being taken by Commissioners was an exception and in response to the emergency request made by the Board of Supervisors given the State budget crisis.

Executive Director Martinez also commented that staff would work with the Los Angeles County Department of Public Health’s Maternal, Child & Adolescent Health Programs to develop an appropriate scope of work for First 5 LA’s financial support of the Black Infant Health Program to avoid supplanting issues.

AMENDED MOTION:

Direct First 5 LA to provide $1,161,986 from last year’s unallocated revenue to support the Black Infant Health Program for one year; and direct First 5 LA staff to work with Los Angeles County Department of Public Health’s Maternal, Child & Adolescent Health Programs to develop appropriate criteria for First 5 LA’s financial support of the BIH program.

M/S (Don Knabe / Neal Kaufman) APPROVED AS AMENDED

6. PRESENTATION: Implementing a Place-Based Funding Approach

Chair Knabe welcomed Robert K. Ross, M.D., President and CEO of The California Endowment.

Dr. Ross was invited to speak before the Commission to offer the foundation’s experience and his insight in relation to place-based efforts underway at a time when our strategic plan implementation planning activities are also in progress. Some of the themes Dr. Ross included in his presentation were:
1. Challenges and lessons learned in moving towards a place-based funding approach.
2. TCE’s process for selecting communities, including effective communication strategies used to inform communities and potential partners.
3. Considerations related to supporting and building the capacity of organizations and communities.
4. The internal supports necessary for TCE to put in place to support the Building Healthy Communities Initiative.

The California Endowment recently made a bold and aggressive decision to create a 10-year Building Healthy Communities Initiative and applied a place-based funding approach. The California Endowment is starting from the concept that environments in which people live have profound and lasting effects on the health of individuals, families and communities and that prevention is the key to meaningful and sustainable health improvement.

Earlier this year, The California Endowment selected and announced the 14 communities throughout California where it will focus the foundation’s work on the Building Healthy Communities Initiative. Three of these communities are within Los Angeles County (South Figueroa Corridor /Vermont-Manchester, Boyle Heights, Central Long Beach). Similar to The California Endowment, the Commissioners made a decision in the newly approved FY 2009-2015 Strategic Plan, to shift from initiative-based funding to a place-based funding approach with a one year strategic plan implementation period.

NOTE: Chronological order of agenda items resumes with Item 8.

8. Approval of an Amount Not-to-Exceed $1.5 Million From the Unallocated Research & Evaluation Funds to Continue the PFF Initiative Evaluation through July 31, 2011, and Authorize Staff to Negotiate a Contract with UCLA

NOTE: Due to a conflict of interest, Commissioner Kaufman recused himself from participating in the discussion and subsequent vote of this agenda item.

Director Jimenez commented that in June 2005, the Commission approved the implementation plan for Partnerships for Families (PFF), a $50 million, five-year child abuse prevention initiative. In implementing Partnerships for Families, First 5 LA partnered with the Department of Children and Family Services (DCFS) and community-based agencies to improve the safety and well-being of children and families in Los Angeles County. The initiative began funding as of February 2006, with a five month planning period and implementation of services as of July 1, 2006. The initiative is scheduled to end in January 2011.

Director Jimenez also reported that in October 2004, First 5 LA contracted with an evaluation team led by UCLA Center for Healthier Children, Families, and Communities to design and conduct an evaluation of the PFF Initiative. The evaluator was hired early in the process so that the grantee data collection and evaluation approach would be built-into the program’s implementation from the beginning. For the first two years of the initiative’s implementation, the evaluation focused primarily on describing the PFF collaboratives, the families, the referral and family engagement process, and organization and network members’ capacities to serve families. More recently, the evaluation has shifted to focus on outcomes for families.
In a presentation to the Commission in May 2009 as well as a special Commission presentation on August 31, 2009, UCLA presented findings from the evaluation thus far. Highlights of those findings included the following:

- As of June 30, 2008, PFF grantees have served over 500 high risk pregnant women. DCFS Regional offices have referred a total of 2,075 families to the eight PFF Collaboratives;
- The average rate of engagement of DCFS referred families across Los Angeles County is 78%;
- Of the 1,612 engaged families, whose cases are closed or current, 13% or 212 families were re-referred to the DCFS hotline. In comparison, those families who refused services or could not be reached had a re-referral rate of 29% (136 families);
- PFF appears to be making a difference by reducing the re-referral rate of those families who engage by 44%. According to data presented by DCFS in their Structured Decision Making Tool training, the national average rate of re-referral for high-risk families who do not receive support services of any kind is 60% and 30% for families receiving intervention services;
- In addition to being less likely to have a DCFS hotline call made after participating in PFF, PFF service recipients are also less likely to have a case opened by DCFS. Of the families reported to DCFS subsequent to PFF referral, DCFS ultimately opened a case on 3% (53 of 1,612) of the families who received PFF services, contrasted with 10% of those who were referred to PFF, but did not receive services (47 of 463 families).

To date, the PFF evaluation has uncovered some promising findings regarding outcomes for participating families. As the initiative moves into its final year (2010-2011), it will be critical to learn more about the long term impact of the initiative on participating families and to determine if improvements are being maintained over time. Upon approval of the proposed recommendation, the focus of the remaining evaluation efforts will be on following-up with families who have participated in PFF in previous years to identify how their lives have been changed, the strategies that were most effective in bringing about those changes, and the implications for First 5 LA’s future, place-based investments under the new strategic plan.

Commissioner Fielding commented that although he was supportive of continuing to fund the PFF Initiative evaluation program, albeit very expensive, he did express his concern about this being a non-sustainable program.

M/S  (Jonathan Fielding / Nancy Au)  APPROVED AS RECOMMENDED

Chair Knabe commented that 74 babies have been saved through the Safe Surrender Law and commended First 5 LA for its work in advocating for the safe surrender of newborn babies.

NOTE:  Chair Knabe excused himself from the meeting. As Vice Chair Southard was not in attendance, Commissioner Fielding was designated by Chair Knabe to continue the meeting as Acting Chair for the remaining agenda items.

9. Approval of First 5 LA’s Specifically Invested Portfolio Investment Policy

Finance Director Hause reported that annually the Specifically Invested Portfolio Investment Policy must be reviewed and any modifications shall be approved by the
Board of Commissioners. The last review occurred on July 10, 2008, however no changes were made at that time. Finance Director Hause is not recommending any changes to the current policy.

Commissioner Fielding asked how investment percentages were being allocated. He was not clear if the investment allocations were made by First 5 LA or the County Treasurer’s Office. Finance Director Hause commented that investment percentages were recommended by the County Treasurer’s Office in accordance with their adopted investment policy.

Commissioner Fielding commented that his question related to the allocation of investment percentage and not the percentage limits referenced in the policy.

Commissioner Fielding inquired about First 5 LA’s annualized rate of return and asked how it compared to the surplus funds of the County in terms of their annual return. Finance Director Hause responded that the annualized rate of return was similar since most of the investment funds were with the County pool.

Commissioner Fielding asked if First 5 LA was excluded from investing in California funds as there were none listed in the staff report. Finance Director Hause confirmed that First 5 LA was precluded from such type of investments by State law. Legal Counsel Steele reaffirmed that State allocated funds could not be reinvested in State investment holdings.

Commissioner Stockwell asked for a status update on the consultants who were previously retained to perform an assessment of First 5 LA’s investments. Executive Director Martinez commented that given the volatility of the financial market, the Commissioners had previously decided to delay the assessment until the market became stabilized. In fact, one of the consultants was not willing to give any kind of advice because of the crisis the market was experiencing. At the time, the recommendation was to take money from the investment pool and hire an Investment Manager to assess First 5 LA’s investment portfolio.

Commissioner Fielding suggested revisiting this issue given that the market has stabilized. As an example, Commissioner Fielding cited equities being up by 50 percent from prior low levels.

Executive Director Martinez commented that this issue was brought before the Commissioners prior to the hiring of Finance Director Hause. She would be reviewing this issue with her.

Commissioner Fielding asked that staff come back perhaps with a different recommendation or identified trade-offs.

M/S (Evangelina Stockwell / Corina Villaraigosa) APPROVED AS RECOMMENDED

10. PRESENTATION: Preliminary Findings of the Los Angeles County Oral Health Needs Assessment Project

Commissioner Fielding welcomed Roseann Mulligan, D.D.S., the Principal Investigator for the Oral Health Needs Project. Dr. Mulligan is the Associate Dean for Community Health Programs at USC School of Dentistry and Director of Special Patient Care Clinic. She holds the Charles M. Goldstein Endowed Professorship in Community Dentistry.
The intent of the Oral Health Needs Assessment Project is to provide a benchmark for better understanding of the oral health status and needs of underprivileged children in Los Angeles County and to provide recommendations to inform future efforts.

The project recruited children from three age groups: 2-5 years old, 6-8 years old and 14-16 years old. The sampling frame included Women, Infants and Children centers (WIC), Head Start schools, elementary schools and high schools. To ensure that underprivileged children were included, only sites that were either a WIC center, a Head Start school, or for the school age children, at least 50 percent of the student enrollment in the elementary and high schools had to be from a minority race or ethnic group with at least 62 percent of the enrollment receiving the reduced or free breakfast/lunch program. Two calibrated dentists served as the examiners using an established protocol developed by the Association of State and Territorial Dental Directors. Determinations of untreated caries (cavities), past cavities, early childhood cavities, sealants, and treatment needs were made with age-appropriate oral health education provided and written recommendations about the child’s clinical findings sent/given to the parents.

For the capacity aspect of the study all dental clinics and offices in Los Angeles County with addresses listed in the yellow pages were compiled into one database and mailed a questionnaire. Additionally a community promotor a contacted all of the Los Angeles County community dental clinics and completed a phone interview. Additional databases were researched and included as appropriate into the final result. The total number of children examined equaled 2,313 from 59 sites. The project found that there is clear evidence of dental caries among underprivileged children in Los Angeles County with 44 percent of the children 2-5 years old having frank cavities and another 28 percent having white lesions that are the precursors of cavities. In this age group, the highest prevalence of frank cavities was among Asians (56%) and the highest prevalence of white lesions was among non-white Hispanics (31%).

The project found also that there may be an access to dental care issue among underprivileged children. The study found that 71 percent of the children 2-5 years old needed dental care (within 15 days) and another seven percent needed immediate care (within 24 hours). Furthermore 10 percent of the children 2-5 years suffered from toothache in the last 6 months and 15 percent were not able to access needed dental care in the last year. Almost 14 percent of the children 2-5 years old had no insurance and 12 percent were covered by Healthy Families. Despite that 43 percent of all the children were covered by Denti-Cal, 15 percent of the parents of those children with Denti-Cal reported not being able to access needed dental care in the last year because the dentist did not accept their insurance.

Other barriers to dental care reported by the parents were affordability and not knowing where to go. Additionally underprivileged children may lack age-appropriate dental preventive measures. Only six percent of the children 2-5 years old considered their main source of water to be tap water, which is a major free source of fluoride in Los Angeles County. About 14 percent of the sample used non-fluoridated toothpaste with a higher percentage in the age group (19%) 2-5 years old not availing themselves of this form of fluoride. The project identified 5,790 dental offices in Los Angeles County with 49 percent of them providing some Denti-Cal services. The average waiting time for an appointment was 3.7 days for new child patients and 3.5 days for child patients of record in the participating clinic. The average age of children seen for the first time was 40 months and only 44 percent of the clinics treated children two years of age or younger.
The project investigators suggested that in order to advance the agenda to improve the oral health of underprivileged children in Los Angeles County, intervention strategies should include: partnering with the Community Health Centers to establish dental homes in conjunction with medical homes; preparing doctors, physician assistants and nurse practitioners to examine the mouths of infants and toddlers, apply preventive modalities, detect early signs of oral disease and refer for treatment; develop community oral health promotora programs to help parents and other caregivers learn the facts about oral disease and how to prevent it; include the importance of drinking fluoridated tap water in public relations campaigns; and collaborate and build on the professional development and community access activities already established as part of First 5 LA's nutrition project to advance an oral health agenda.

The Oral Health Needs Assessment Project will produce critically needed data to inform the OHN Project's policy, public education, and direct services objectives. Furthermore, the data produced through this strategic partnership will help inform other county-wide planning and policy development efforts as they relate to improving the oral health status of children and families.

12. Public Comment

Yodit Abraha, Mission City Community Network
Eupora Butts, Member of the General Public
Bishop Hearn, Black Infant Health
Gwendolyn Robison, Black Infant Health Program
Takashi Wada, Public Health Department of Pasadena
Geraldine Williams, Public Health Department of Pasadena

ADJOURNMENT

The meeting adjourned at 4:31 pm.

The next regularly scheduled Commission meeting will be on:

October 8, 2009 at 1:30 p.m.
Multi-Purpose Room
750 N. Alameda Street
Los Angeles, CA  90012

Meeting minutes were recorded by Maria Romero.