Proposal Snapshot
Project: Everychild Foundation
Zero to Five Comprehensive Care Center
Agency: Foothill Family Service

Executive Summary
Foothill Family Service (FFS) is seeking $1MM (100% of project total) in capital and program support to build and launch the Everychild Foundation Zero to Five Comprehensive Care Center, a one stop service center for children ages zero to five with psychological and developmental needs (including autism) and their families. The Care Center will be housed in the agency’s West Covina Family Center and will serve families throughout the San Gabriel and Pomona Valleys. The center will provide a new model of on-site comprehensive care and coordinated treatment that will include: case management, psychosocial assessment/testing, parent education/socialization for high-risk children with special needs and their families, individual/family therapy, occupational/speech/physical therapy, sensory integration, art/music therapy, nutrition and feeding programs, health/dental/vision services, literacy programs, and an indoor therapeutic playground.

Of the clients that FFS currently serves in its zero to five programs, it is estimated that 25% could use the more intensive support services to be offered in the Care Center. The daily struggles of caring for children with special needs can take an incredible toll on a family. Factor in additional hardships, such as poverty and lack of transportation, and the challenges can be insurmountable. Clients coming to the Care Center will, for the first time, receive a single access point to comprehensive resources and services, with all service providers delivering coordinated care from a single individualized treatment plan developed specifically to address the unique needs of each family.

Capital or Program
This is a capital and program request, with Everychild funds supporting the design and build-out of a therapeutic playground, facility reconfiguration, purchase of two customized vans, as well as teaching toys/supplies, and community outreach. Funding will also support year-one staffing costs.

Children Served
The renovated facility and expanded program will provide comprehensive services to an estimated 500 current and new clients and their families in the first year of operations. This program is an expansion of FFS’s early childhood development services.
I. AGENCY INFORMATION

A. Overview: Foothill Family Service (FFS) is a non-profit, community-based organization providing comprehensive services to vulnerable children and families to help them develop the necessary skills to lead healthy, productive lives. The agency was founded in 1926 by a group of Pasadena volunteers who began passing a hat around to friends and family, raising money to help local families in need. Today, the agency operates six family centers (five are owned by FFS) that provide effective education, mental health, social service, and outreach programs. Efforts are focused on **high-risk children and families in high-need communities** across the San Gabriel and Pomona Valleys, Glendale, and Burbank in Los Angeles County. The mission of FFS is to build brighter futures—empowering children and families in our communities to overcome challenges and achieve success in relationships, school, and work.

B. Programs: Services are provided in five key programmatic areas: Early Childhood Development – providing early detection and intervention for developmental delays, emotional / mental health issues, and child abuse, increasing the capacity of parents to maintain a safe environment for their children, and increasing children’s school readiness; Mental Health Services – helping clients address emotional / mental health issues early in order to find success at home, school, or work; Domestic Violence Prevention and Treatment – assisting domestic violence survivors to overcome the trauma of abuse, end the cycle of violence, and move toward financial independence; Child Abuse Prevention and Treatment – supporting children in recovering from exposure to trauma / abuse and learning new coping skills, stabilizing families at risk of abuse / neglect, and aiding families to end the cycle of violence; and Teen Parent Families and Youth Development – supporting teen parents to attend school and graduate, ensuring they have healthy babies and are receiving good health care for themselves and their babies, and providing case management support and linkages to community resources.

C. Population Served: During fiscal year 2014, the agency provided direct services to 14,240 unduplicated individuals and provided outreach services to an additional 8,212 individuals. (Please note that client data is currently being collected and analyzed for fiscal year 2015.) Client ethnic breakdown is: 73% Latino, 11% Caucasian, 6% Asian / Pacific Islander, 5% African American, and 5% mixed or other ethnicity. Nearly 63% of families served have a monthly income of less than $2,500, only 32% of primary caregivers consider English to be their primary language, and in FFS’s program areas for children ages zero to five, it is estimated that up to 80% of clients live in single parent households.

D. Accomplishments: In the nearly 90 years since its founding, FFS has grown, changed, and adapted to meet the ongoing and emerging needs of the region’s vulnerable and high-risk children. Noteworthy accomplishments from the past five years include: securing new funding in 2010 to provide home-based services to high-need children ages zero to three and their parents; implementing a school readiness program in 2010 to help at-risk children transition successfully into kindergarten; significantly expanding the provision of evidence-based practices in 2010 to improve mental health outcomes and maximize resources; securing additional funding to expand Early Head Start services in 2013; and in 2014, securing a $1.7 million (annually over a three-year period) Early Head Start award to support new childcare partnerships.
II. PROJECT DESCRIPTION

A. Summary: FFS is seeking capital and programmatic grant support to build, launch, and house its pioneering Everychild Foundation Zero to Five Comprehensive Care Center (Care Center). This new “one-stop” service center for children ages zero to five with psychological and developmental needs—including autism—and their families, will be located in the agency’s West Covina Family Center and will serve families throughout the San Gabriel and Pomona Valleys. On-site comprehensive care and coordinated treatment will include: case management, care coordination, psychosocial assessment / testing, developmental assessment / testing, support / parent education / socialization for high-risk and special needs children and their families, individual / family therapy, occupational / speech / physical therapy, sensory integration, art / music therapy, nutrition and feeding, health / dental / vision services, and literacy programs—surrounding an indoor therapeutic playground. The proposed funding period will be January 2016 to October 2017. The Care Center will commence services in November 2016 and will provide comprehensive services to 500 current and new clients and their families in the first year of operations. This new program will be an expansion of FFS’s vast early childhood development services. The Care Center will be a core programmatic component of the agency’s new five-year strategic plan.

B. Critical Unmet Need: Of the clients FFS currently serves in its zero to five programs, it is estimated that 25% need the intensive support services to be offered in the Care Center. All too often, children struggle with emotional, behavioral, or mental health problems during ages zero to five when 85% of the brain’s development occurs. FFS’s services maximize the potential of infants and toddlers with special needs, increasing their potential to live their lives to the fullest. The daily struggles in caring for children with special needs can take an incredible toll on a family. Factor in additional hardships, such as poverty and lack of transportation, and the challenges can be insurmountable. Furthermore, clients coming to FFS rarely, if ever, require only one type of service.

Christina, her husband, and their four children are one example of a family who recently benefited from FFS’s services. Their eldest has bipolar disorder, and their youngest, two-year-old Gracelynn, shows delays in all areas of development, and is being evaluated for autism. Gracelynn receives an array of support—an infant teacher, speech and occupational therapists, and group play time to strengthen her social skills. While grateful for the resources, coordinating multiple therapy appointments and different therapies is a constant struggle for Christina and her family. “With three other children, one of whom is bipolar, getting Gracelynn all the services she needs is very difficult,” said Christina. “Being able to get multiple services in one place, where I could also bring other family members with me if needed, would be an incredible help.”

C. Description of Project:
1. Activities to be Undertaken: To aid FFS in achieving its core objective of advancing service delivery and improving client accessibility to quality programming, the Everychild Foundation Zero to Five Comprehensive Care Center will provide the community with a single access point to comprehensive resources and services with all service providers delivering coordinated care from a single individualized treatment plan developed specifically to
address the unique needs of each family. The Care Center will have as a centerpiece an indoor therapeutic playground, serving a dual purpose of providing space for both therapy and social/recreational uses, with five new dedicated, holistic treatment rooms surrounding it. The existing facility offers 21 therapy rooms to be used as needed. In the Care Center, FFS will provide case management, full psychosocial and developmental assessment / testing, sensory integration, individual and family therapy, care coordination, support / parent education / socialization groups for high-risk special needs children and their families, and home visitation. On-site strategic partners will provide physical / speech / occupational therapy, nutrition and feeding, health / dental / vision services, art / music therapy, and literacy programs. FFS has an extensive history in working with numerous partners; and partners specific to the Care Center are actively being engaged. Multiple partners have been confirmed to provide physical, speech, and occupational therapy as well as parent education. Care Center partners are already Regional Center vendors and therefore have been approved as reliable experts in their field of service.

When a family comes to the Care Center for the first time, the parent / caregiver will meet with a clinician in a private office surrounding the playground, or in the play area itself, while the child, and any siblings, either play in the playground or sit with their caregiver. Staff will conduct a needs assessment, gather information on existing services and diagnostic data, and create a treatment plan. Depending on assessment results, the family may meet with specialists for further evaluation / testing. The family will then be able to stay in the play area as long as they want. Child-activity staff will provide support and supervision as well as lead activities to engage the children. Depending on the type of service and the family’s preference, specialists may work with the client in one of the private offices facing the play area or in the sensory playground itself. The open concept of the space will allow children to see others working with specialists and doing physical therapy or other skill building exercises. For both the child and family, this will normalize the work that the client will be doing at the Care Center. Families will be encouraged to interact with each other stress-free and have opportunities to develop a natural community of support with one another.

The Care Center will be a multidisciplinary clinic that coordinates and integrates various zero to five treatments to maximize efficiency, treatment outcomes, and family support. By offering services with all providers utilizing one treatment plan, this coordinated model will result in improved outcomes for children and families while eliminating the added stress that families with special needs children often shoulder by traveling from one service to another.

FFS has experience in seeing multiple renovation projects successfully completed under compressed schedules and has an extensive list of qualified vendors with whom services have been previously contracted. Architect / contractor selection and plan checks will occur in the first quarter of 2016. Construction will commence in April and conclude in September. Staff recruitment / hiring will occur in the third quarter with the exception of the Program Manager (to be hired in January 2016) and the Program Assistant (March 2016). Clients will be enrolled and services will start in November 2016.

2. How Will Grant Funds Be Used? Grant funding will support the design and build-out of a therapeutic playground, facility reconfiguration, purchase of two customized vans as well as teaching toys / supplies, and community outreach. Funding will also support year-one staffing
start-up costs (new hires) including the Program Manager (to administer program design, identify key metrics and outcome measures, facilitate evaluation, secure partners, and hire / train staff) and the Program Assistant (to provide clerical support such as the creation of procedures, forms, and reporting structures).

D. Goals and Objectives – What Will Be Achieved? Without early intervention, children experiencing mental health, emotional, developmental, or behavioral issues will start school with significant barriers to learning that will become more difficult and costly to resolve as they become older. Knowing this, the Care Center seeks to achieve what all FFS programming does: family well-being and school readiness. Moreover, the Care Center will assist in cultivating nurturing parent-child relationships, promoting healthy childhood growth and development, strengthening caregiver and family resilience, and enhancing family functioning. As such, it is expected that: (1) the Care Center will provide services to at least 500 children and their families in the first year of operations; (2) 100% of families will achieve the Five Protective Factors: parental resilience, social connections, concrete support in times of need, knowledge of parenting and child development, and social / emotional competence of children (this will be measured using the Protective Factors Survey—a pre-post self-administered survey); (3) 75% of children will achieve goals as outlined in their treatment plan; and (4) annually, a service provider roundtable will be hosted to share best practices and other critical programming insight with the community.

E. Evaluation: Impact of the Care Center and achievement of program goals will be determined through the analysis and evaluation of key data using structure, process, and outcome measures. Collection and dissemination of evaluation data will use a third party (CCR Analytics, which specializes in early education program data analysis) to gather and analyze data into a detailed annual program report that can be shared with community stakeholders. This process will be facilitated by the Program Manager and overseen by the Chief of Clinical Services, who will develop an action plan to implement interventions based on evaluation findings.

F. Replication: FFS will document each step in the project’s process to create a strategic roadmap detailing FFS’s collaborative approach to services and how partnerships are developed. This roadmap will serve as a manual for program replication. Furthermore, FFS aims to scale the “one-stop” care center model to be appropriately applied to the agency’s remaining family centers; and envisions participation at other “one-stop” centers as they are developed by partner agencies.

G. Recognition: FFS will be pleased to recognize the Everychild Foundation’s generosity by naming the project the Everychild Foundation Zero to Five Comprehensive Care Center. In addition, FFS proposes to recognize the Everychild Foundation on a donor wall, in its annual report, with social media, on its website (currently being redesigned), in diverse collateral materials, via press releases to significant media outlets and community stakeholders, and on the vehicles purchased with grant funds. Furthermore, in early 2016, FFS will celebrate its 90th Anniversary. A gift from the Everychild Foundation will serve as a catalyst to this momentous event, creating visibility for the Care Center, building awareness of the need for services, and helping to attract other potential donors.
IV. BUDGET NARRATIVE

A. Budget Issues: In addition to renovation and build-out, grant funding will pay for the first twelve months of Care Center personnel. The Program Manager will be hired in January 2016 (a highly qualified internal candidate has already been identified); the Program Assistant in March 2016; the Outreach and Engagement Specialist in September 2016; and all remaining positions in October 2016.

B. Sources of Funding for Budget Amounts Not Covered by Everychild Funds: Not applicable.

C. Sustainability: FFS anticipates an ongoing annual program budget for the Care Center of approximately $700,000. Plans for project sustainability are diverse and include becoming a Regional Center vendor to bill for non-Medi-Cal services, and billing Medi-Cal services to the agency’s Los Angeles Department of Mental Health contract (FFS’s largest funding source; they have expressed considerable interest in the proposed project and an eagerness to see FFS expand zero to five services). In addition, FFS has contract funding from First 5 LA to provide services for autism spectrum disorder clients (First 5 LA has written a letter of support for the project and there is potential for expansion of this funding source). Additional funding includes fee-for-service clients and clients paying via insurance (a new funding mechanism with the onset of healthcare reform). Beyond these revenue sources, there is potential for FFS to sell a portion of the West Covina Family Center parking lot for a proposed $1.2 million (an offer in-hand is contingent on city approval) as the existing parking spaces far exceed the quantity needed for both staff and clients.

Another critical source of funding is private fundraising, which currently accounts for 10% of the agency’s budget. In November 2013, FFS restructured its development department hiring a team with expertise in strategic planning and budgeting, individual giving, marketing and communications, and foundation partnerships. Following this reorganization, FFS created and actively employed a wide-ranging fundraising plan to secure new sources of revenue; build relationships with new partners and promote relationships with lapsed donors; and ensure sustainable, diverse funds for programs and special projects. As a result, significant growth has occurred in all areas of private fundraising.

It is anticipated that private fundraising needs for the Care Center, over and above expected revenue sources mentioned previously, will be approximately $140,000 annually. Current foundation supporters of FFS’s zero to five services, the most comprehensive programming of its kind in the area, include, but are not limited to, the Atlas Family Foundation, Carl and Roberta Deutsch Foundation, Rose Hills Foundation, and WHH Foundation—funders who have provided enthusiastic feedback on the proposed Care Center. In addition to the likelihood of expanded support from these donors, FFS has strategically identified, and begun engaging, multiple new prospects in anticipation of future growth for its zero to five programming. This annual increase of $140,000 represents a 5% increase from the fundraising success that FFS experienced last fiscal year. FFS will continue to seek out new funding to ensure that its clients have the comprehensive services that they and the community have come to rely on; and will continue to think creatively and use its history of quality services, fiscal responsibility and viability, and pool of committed donors and volunteers to leverage additional private and public dollars.