
Best Start LA Pilot Community Evaluation Case Study Report 3

Implementing Best Start LA: Continued Commitment in the Midst of Persistent Challenges

Prepared for: First 5 LA



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For more information about First 5 LA and its initiatives, go to <http://www.first5la.org>. For more information about Best Start LA, go to <http://www.beststartla.org>.

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Executive Summary

Best Start LA (BSLA) in *Metro LA* has made good progress during its second year of implementation—the investment has gained momentum and its services have become more firmly established in the downtown Los Angeles pilot community. Home visiting through *Welcome Baby!* has emerged as a very strong intervention that could serve as a model throughout Los Angeles County. Community strategies have begun through the funding of two rounds of collaborative partner grants with a variety of local agencies. Systems-level work has been deemphasized in this past year, taking a back seat to promising community and child/family level investments.

These are the primary findings from the third case study conducted by the Urban Institute under its evaluation of BSLA in the *Metro LA* pilot community. Under contract with First 5 Los Angeles (FIRST 5 LA), the Institute and its partner—the University of California, Los Angeles—are conducting a broad range of evaluation activities over the course of the six-year study, including annual case studies of implementation; focus groups with home visiting clients, home visiting staff, and community stakeholders; a longitudinal household survey of parents; and analysis of secondary data to monitor community change.

Key Findings

As described in the evaluation’s first case study, BSLA is composed of multiple interwoven strategies designed to strengthen both the capacity of families to raise children and the capacity of communities and broader systems to support families (Hill, Benatar, Adams, and Sandstrom 2011). While BSLA will ultimately be implemented in 14 communities across Los Angeles County, FIRST 5 LA launched the model first, as a pilot, in a seven-square-mile neighborhood designated as *Metro LA*. FIRST 5 LA has contracted with a variety of community-based organizations and service providers in *Metro LA* to implement the following core strategies:

- ***Welcome Baby! Home Visiting:*** This family-level activity brings home visitors to visit families prenatally, at birth, and postpartum.
- ***Community Mobilization and Place-Based Strategies:*** This community-level activity aims to mobilize community members and facilitate identification of community needs and strategies and services to address those needs.
- ***Systems Change Activities:*** Investments at the systems level promote the development of family-friendly services, policies, and systems at the community and county levels.

Based on analysis of information collected through interviews with approximately 15 key informants during a site visit conducted in April 2012, we provide the following key findings:

CHILD AND FAMILY

- ***Welcome Baby! home visiting provides a strong and highly valued service for BSLA in Metro LA.*** As preliminary data from the Child and Family survey suggests, and focus group input reaffirms, *Welcome Baby!* is a highly valued service in the community, providing families with much needed support and resources. Maternal and Child Health (MCH) Access deserves recognition for its continued commitment to improving the protocol, and serving families to the greatest extent they are able; *Welcome Baby!* nurses and parent coaches have now served nearly 3,000 clients and show every indication that they will continue to expand their services to eligible families.
- ***First 5 LA will be well served by deploying the Welcome Baby! model in the 13 new Best Start LA communities.*** This year we learned that this recommendation, which we made last year, will be implemented. Our Year 3 case study has reaffirmed our belief that the home visiting component of BSLA, as implemented by MCH Access, has already shown itself to be a well-designed, adaptable, and highly valued service for mothers with new infants. As such, it represents the most tangible component of the BSLA investment. This distinguishes it from other parts of the BSLA model (such as community mobilization) which are more conceptual and less concrete, and thus more challenging to convey to community members and other stakeholders. To help BSLA launch in the additional 13 communities identified in First 5 LA's current strategic plan, a *Welcome Baby!* home visiting component could similarly ground the efforts and provide community members with a similarly tangible benefit. To build a stronger BSLA brand identity, First 5 LA should consider requiring other communities to adopt the same (or at least a similar) model, and to employ the *Welcome Baby!* moniker.

COMMUNITY

- ***While few tangible community-level changes were observed in Metro LA, Para Los Niños (PLN) continues to support the progress of the CGB.*** As discussed in this report, PLN continues to encounter staffing challenges, yet has remained committed to supporting the CGB and task forces as they continue to make progress establishing community strategies for *Metro LA*.
- ***Striking the right balance between agency leadership and community ownership is a key challenge for the Best Start Metro LA community.*** Engaged residents are an extremely valuable resource to place-based investments, but at times require the support of an agency to execute stated goals. Keeping this balance in mind while implementing BSLA in subsequent communities may help to facilitate the smooth rollout of the Best Start brand and foster good relationships.

- ***The Collaborative Partner Grants, while imperfect, have succeeded in getting the community to take action and build promising relationships in advance of the establishment of community strategies.*** Faced with the difficult challenge of what to do with unspent monies, First 5 LA and PLN responded creatively by devising a process that effectively, albeit hurriedly, pushed nearly a half-million dollars out the door in support of community projects. This sudden development, after two years of process that was not leading to clear action, was received positively overall, but not without its challenges. First and foremost, the tight turnaround for execution was challenging and not well-understood. The five months allocated for the second round of grants is an improvement, but remains challenging for busy organizations. First 5 LA's plans to implement this in the 13 new BSLA communities, remains a wise idea and should help these communities make tangible progress more quickly, but also more pragmatically.
- ***Metro LA's Community Guidance Body continues to show promise and potential for strong leadership.*** Building on findings from this evaluation's focus groups, findings from the Year 3 case study confirms that *Metro LA's* Community Guidance Body (CGB) is composed of a dedicated, creative, and cooperative group of individuals representing a broad swath of the community. They have struggled this past year with demands and oversight that they had not previously accepted. This dynamic likely contributed to slower-than-expected progress, as did staffing changes at PLN. Barring continued instability, we can expect continued progress for the CGB as its members gain confidence and direction.

SYSTEMS

- ***Systems level investments, falling short of becoming fully integrated with other components of Best Start LA, have subsequently been deemphasized.*** While each of the systems-level contractors in *Metro LA* has performed important work, these efforts continue to be somewhat disconnected from the child and family, and community-level components. As a result, First 5 LA seems to have deemphasized this work in favor of focusing resources on the child and family, and community strategies efforts in *Metro LA*. Implementation of Best Start LA in subsequent communities should consider this lesson carefully and either work to clarify for systems-level partners how their work co-exists with families and communities, or consider holding off on investing in systems-level reforms until the community and child and family components of the investment have been well-established.

In summary, Best Start LA in the *Metro LA* pilot community has made good progress during Year 2 and appears to be gaining momentum in its implementation. It is hoped that this detailed analysis of implementation is helpful to First 5 LA officials and community stakeholders in *Metro LA*—as they continue their work—as well as in the 13 new Best Start communities that will launch similarly ambitious efforts.

I. Introduction

Best Start LA (BSLA) is a multi-faceted community investment that aims to improve the health, wellbeing, and development of children, ages 5 and under, while supporting the needs of their parents. BSLA is funded by First 5 LA (First 5 LA)—a child advocacy organization launched after the 1998 passage of Proposition 10 (the California Children and Families Act). BSLA works to affect change at three levels—child and family, community, and systems—and thus includes multiple, interwoven strategies designed to strengthen both the capacity of families to raise children and the capacity of communities and broader systems to support families. The investment aims to achieve four outcomes for children—specifically, that they are:

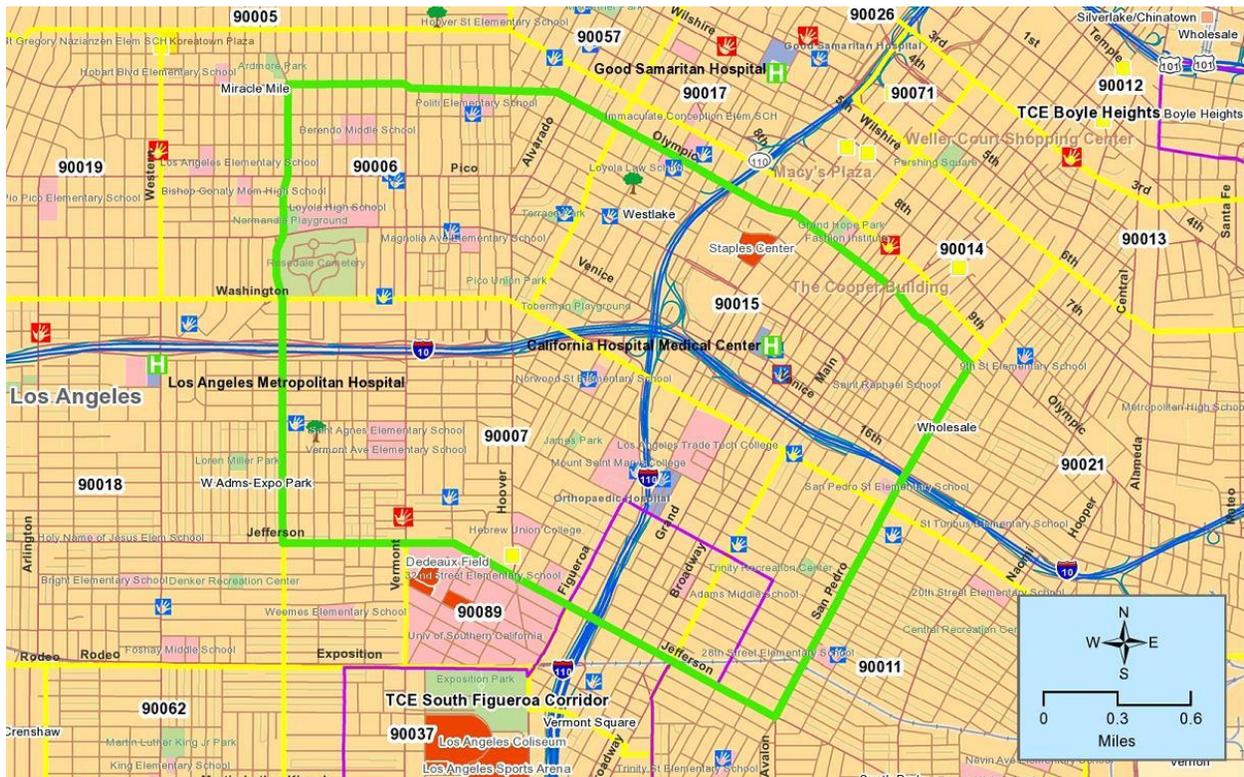
- Born healthy;
- Maintain healthy weight;
- Protected from abuse and neglect; and
- Ready to learn upon enrollment in kindergarten.

To achieve its goals, First 5 LA has contracted with a variety of community-based organizations and service providers in a downtown Los Angeles community to implement the following core strategies:

- ***Home visiting:*** This family-level activity brings nurses, college-educated parent coaches, and paraprofessionals to visit families in the home prenatally, at birth, and postpartum to provide breastfeeding support, guidance on infant health and development, and referrals to needed resources and services.
- ***Community Mobilization and Place-Based Strategies:*** This community-level activity empowers a community-based lead entity, supported by Community Based Action Research methods, to mobilize community members and facilitate identification of needs in their neighborhoods, and then to initiate strategies and services to address those needs.
- ***Systems Change Activities:*** Investments at the system level promote the development of family-friendly services, policies, and systems at the community and county levels.

The BSLA investment, which was first launched in 2009 in this pilot community referred to as *Metro LA*, has recently begun to expand into an additional 13 communities across Los Angeles County. The *Metro LA* area encompasses parts of four different downtown Los Angeles neighborhoods—Pico-Union, Koreatown, the Byzantine Latino Quarter, and South L.A. (figure 1). First 5 LA’s intent is to use lessons from implementation of BSLA in *Metro LA* to inform and improve implementation of BSLA in the 13 additional communities.

Figure 1: Map of Metro LA Pilot Community



This report was developed as part of the BSLA Pilot Community Evaluation under a six-year contract between First 5 LA and the Urban Institute. The evaluation was launched in 2009 to document and assess the implementation and impacts of the program. The Institute and its partner—the University of California, Los Angeles—are conducting a broad range of evaluation activities over the life of the contract, including a longitudinal household survey of parents, focus groups with families, community members, and partners in *Metro LA*, and analysis of community indicators from the WIC data mining project¹. In addition, the evaluation includes annual case studies of implementation of BSLA in *Metro LA*; this report summarizes the findings from our third case study and builds on the lessons presented in the first two case studies (Hill et al. 2011a, Hill et al. 2011b).

¹ <http://www.first5la.org/Community-Change/Research-Partnerships/PHFE-WIC-Data-Mining-Project>

II. Methods

To gather information for this third case study of BSLA implementation in *Metro LA*, researchers from the Urban Institute conducted a three-day site visit to Los Angeles in April 2012 and held one- to two-hour interviews with 15 key informants. Informants included First 5 LA staff as well as agency staff and leadership from each of the BSLA partner contractors. The key informant list was somewhat smaller this year than in the past, as several BSLA partner contracts ended in June 2011. These changes will be discussed in further detail throughout the report.

All interviews with key informants were conducted by Urban Institute evaluation staff using structured protocols tailored to each key informant category. Before starting all interviews, key informants were told that their participation was voluntary, that they didn't have to answer any questions they weren't comfortable answering, and that they would not be quoted without their permission; all informants consented to these ground rules before interviews began. (A list of informants by category is included in appendix 1.) We employed a careful and rigorous process of informant selection to ensure that all opinions of key stakeholders were considered. Of course, a necessary limitation of this kind of study is that it summarizes and synthesizes information and perceptions obtained from a relatively small number of people and thus may contain some inaccurate information, or opinions that may not be generalizable.

Based on information and insights gathered from our interviews, this report describes BSLA implementation efforts in the *Metro LA* community, beginning with activities targeting children and families, followed by efforts aimed at improving outcomes at the community and systems levels. Much of the discussion is organized around the agencies and service providers that have been involved with BSLA in *Metro LA*. For each of these contractors, we provide a recap of their scopes of work, responsibilities, and initial implementation activities in 2010 and early 2011, followed by a more detailed description of activities they have engaged in over the past year. We then assess the contractors' continued progress in achieving BSLA objectives, as well as any challenges they have faced during the implementation process. This report concludes with a discussion of the cross-cutting lessons that continue to emerge from *Metro LA*, lessons that should inform First 5 LA as well as stakeholders in the 13 additional communities where BSLA initiatives are being launched.

III. Findings: Implementation of BSLA—Year 3

As discussed above, the BSLA model encompasses a broad range of strategies designed to effect change at the child and family, community, and system levels. Strategies are being carried out by several organizations with which First 5 LA has contracted, which we have described previously as a constellation of services to engage with families and community organizations, and to facilitate systems improvement (Hill et al. 2011). The remainder of this section

summarizes our findings related to ongoing implementation of BSLA in *Metro LA*, addressing, in turn, child and family-, community-, and systems-level investments.

A. CHILD AND FAMILY

There are two organizations engaged with BSLA's home visiting strategy in *Metro LA*—Maternal and Child Health Access (MCH Access) and the California Hospital Medical Center (CHMC). CHMC is the designated birthing hospital for the *Metro LA* community, and MCH Access is a community-based organization located in downtown Los Angeles that, under a subcontract with CHMC, is leading the home visiting component of BSLA, called *Welcome Baby!*

Welcome Baby! is a free, voluntary family engagement program offered to all women who give birth at CHMC and live within a five-mile radius of the hospital. The home visiting program focuses on education and support for pregnant women and mothers of newborns. Women can be recruited into the program prenatally (by parent coaches from MCH Access) or just after giving birth before discharge from the hospital (by hospital liaisons at CHMC). The *Welcome Baby!* protocol includes the following engagement points (also presented in figure 2) (all or some of which may occur, depending on when women enroll and whether or not they complete the entire program):

- A prenatal home visit at any point up to 27 weeks gestation
- A phone call between 20 and 32 weeks gestation
- A prenatal home visit at between 28 and 38 weeks gestation
- A hospital visit, following delivery (conducted by hospital liaison staff)
- A nurse home visit within 72 hours of discharge from the hospital
- A home visit at two weeks postpartum²
- A phone call at one to two months postpartum¹
- A home visit at three to four months postpartum
- A final home visit at nine months postpartum

The actual content of each *Welcome Baby!* engagement point varies. Previous case studies and focus group reports produced under this evaluation outline the content of these visits (Hill and Adams 2011a and Hill et al. 2011b).

² Previously, the schedule included a two-week phone call and a 1-2 month home visit but the order of these were reversed as of spring 2012.

1. Recap: The First Two Years of Implementation

This evaluation's first two case studies found that *Welcome Baby!*—launched in November 2009—had grown steadily during its first year of operation, expanding its reach in *Metro LA*, and reaching its 1,000th family by April 2011. While MCH Access initially encountered some delays, including slower-than-planned hiring of home visiting staff, resultant slower recruitment of mothers into the program, and challenges with the information system designed to support and report on *Welcome Baby!* activities, the home visiting intervention quickly proved to be a well-managed and well implemented program, led by skilled and professional staff (Hill et al. 2011).

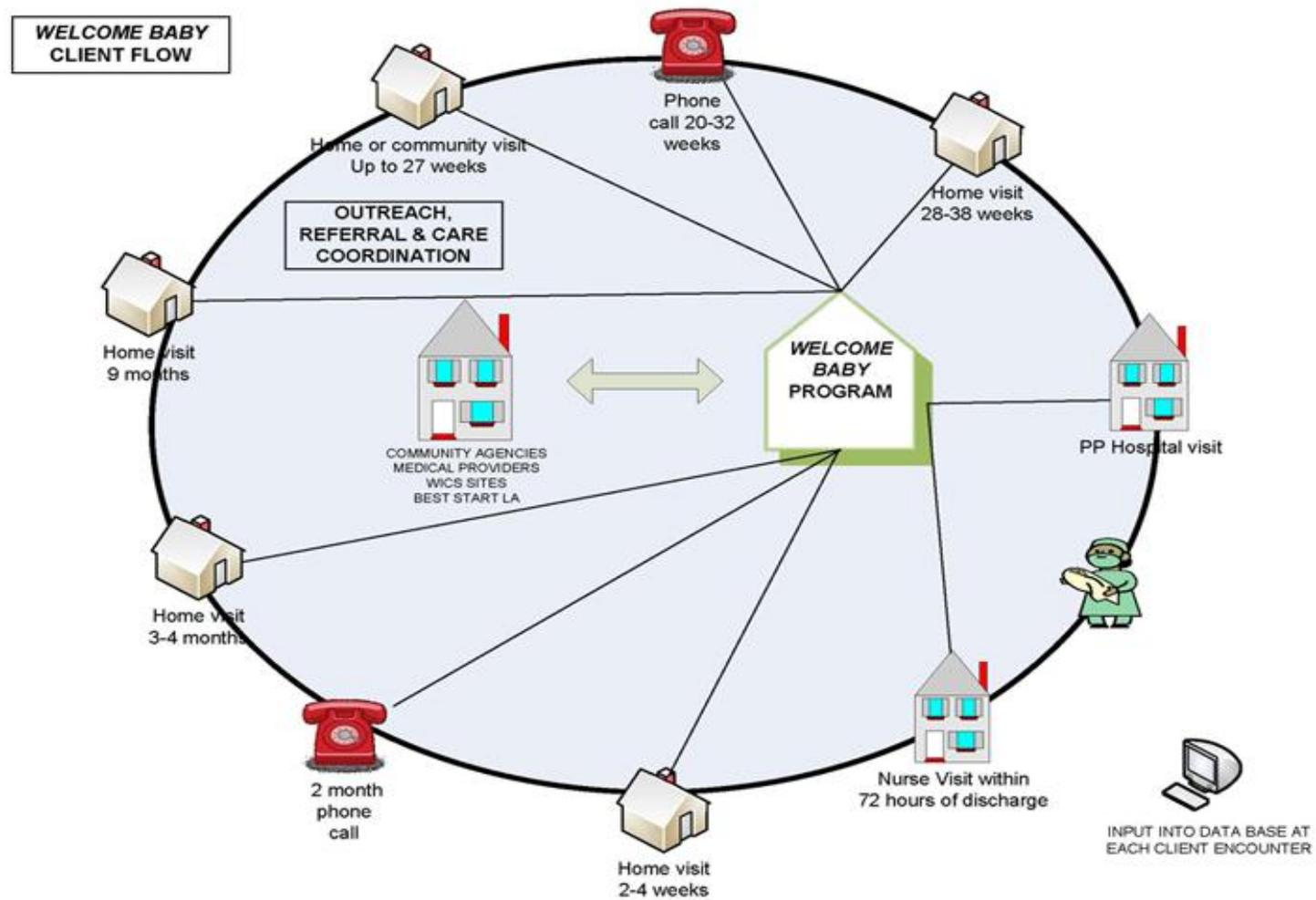
Most importantly, information gathered during the first two case studies confirmed that *Welcome Baby!* is a program that is highly valued by the parents it serves. Focus groups with mothers receiving home visiting revealed that parents were very satisfied with the service, reporting that it had played a valuable role in providing critical information and education about their children's health and development, while also connecting families to important resources in their community. Mothers also described having developed very close and trusting relationships with their parent coaches, who offered them tremendous emotional support as they dealt with the stresses of childbirth and raising a newborn (Hill and Adams 2011).

The initial two case studies and focus groups also revealed, however, that the home visiting intervention likely needed some modification. *Welcome Baby!* was originally designed as a low-to medium-intensity intervention, with a limited number of contacts made by staff composed of a blend of clinical, nonclinical, and paraprofessional personnel.

During its first year of implementation, MCH Access officials observed that women giving birth in *Metro LA* are often at very high risk; many are adolescents or first-time mothers, living in poverty and substandard housing, and/or experiencing mental and behavioral health problems. As a result, there was a strong sense that most, if not all, *Welcome Baby!* enrollees could benefit from receiving more visits and assistance than the model permitted. MCH Access approached this challenge with creativity and flexibility, extending extra care when home visiting schedules permitted. And with the support of First 5 LA, by the end of 2010, the agency had begun recommending changes to the *Welcome Baby!* protocol so that it could be more responsive to the needs of its target population of pregnant and parenting mothers and their infants. Several protocol changes were implemented in 2011 in order to respond to the needs of the population, including a change allowing parent coaches to visit pregnant women as early as 16 weeks gestation (instead of 20 weeks), and the addition of a telephone contact at two weeks postpartum to keep in touch with new mothers before their first scheduled home visit at one to two months.

During the first two years of implementation, *Welcome Baby!* proved to be a tangible, reliable, and highly appreciated component of the BSLA investment in *Metro LA*.

Figure 2. *Welcome Baby!* Client Flow Chart³



³ Source: MCH Access. This represents the Welcome Baby! model as of June 2010. The 16–26 week prenatal visit was initially only permitted between weeks 20 and 26. The prenatal phone call was added to bridge the gap between the first and second prenatal visits. The two week phone call has been changed to an in-person visit (note on p.4)

2. Year 3 Activities

At the time of our third site visit in April 2012, *Welcome Baby!* staff report that they have a current active caseload close to 900 women, that they served their 2,000th client in early 2012, and that they expect to reach nearly 3000 clients this year. MCH Access is pleased with the growing demand, and managing to serve the present caseload despite some recent staffing shortages attributable to maternity leaves and staff turnover. Despite these challenges, 2.5 full time nurses and 15 parent coaches carrying full caseloads report making between 5 and 10 visits per week depending on the parent coach's level of experience, and the program continues to run quite efficiently. The one obstacle they have encountered pertains to the nurse visits, which are scheduled to occur 72 hours post-discharge. MCH Access' staff noted that with less than three full-time nurses, and each family needing to be seen by a nurse in a timely manner, the nursing staff are overwhelmed. Nonetheless they know of only one time that this visit did not occur. While more nursing staff, which they are expected to hire imminently, will ease the strain, in general, this problem is a welcomed one—indicating that uptake and retention are improving as word about the program spreads.

Despite growing enrollment, MCH Access managers interviewed for this study spoke at length about their desire to increase the effectiveness of their outreach and retention efforts. In particular, they have continued to focus on recruiting women prenatally, so that they can help pregnant women prepare for childbirth, develop stronger relationships earlier in the process, improve retention, and ultimately improve overall outcomes.

In the first several years of the program, outreach and recruitment for *Welcome Baby!* was the responsibility of Level I parent coach (PC I) staff. Given rising caseloads and increasingly over-stretched parent coaches, and the perception that a dedicated outreach staff would benefit recruitment, two new outreach specialist positions were created in spring 2011 to take on this role. One outreach specialist participated in our focus group, and MCHA is poised to hire a second outreach specialist this year to further improve *Welcome Baby!* recruitment and retention. As of April 2012, PC I staff no longer conduct outreach. The outreach specialist with whom we spoke focuses exclusively on prenatal outreach at provider clinic sites and California Hospital Medical Center (CHMC). This reflects the increased commitment by *Welcome Baby!* to recruit clients in the prenatal time period. MCH Access has found that the discharge rate for women recruited parentally is nearly half that for women recruited in the hospital (9 percent vs. 18 percent). The outreach specialist began her prenatal recruitment work by visiting provider clinics (clinics that deliver at CHMC) at their busiest times, or at designated baby shower events for expecting patients at large community health clinics. Motivated by the desire to reach a broader audience and recruit prospective clients more efficiently, *Welcome Baby!* leadership began considering alternative outreach strategies. Building on their partnership with CHMC as the designated birthing hospital for *Welcome Baby!*, the outreach specialist started working more closely with the hospital's outreach department. This CHMC Outreach Department has

relationships with all 100 providers who have delivery privileges at CHMC, giving *Welcome Baby!* access to this larger network of relationships.

At first, this new partnership involved working together at community health fairs, but later expanded to include a *Welcome Baby!* presence at CHMC hospital tours for expectant mothers. This new outreach strategy was considered a tremendous success by MCH Access staff, given its efficiency—a large captive audience is reached, reduced follow-up and reduced follow up time compared with other approaches. Outreach staff spend less time out in the field, leaving them more time to do the requisite intake calls with those who are interested in enrolling in the program. In turn, the prenatal acceptance rate has improved, with nearly half of all women in the program now being enrolled prenatally. Overall, retention of women in the program remains a challenge, but has been improving. Some of this may be attributable to increased prenatal enrollment, which has been correlated with better retention rates, and some may be the reputation that *Welcome Baby!* has gained in the community.

MCH Access continues to find that many of the women that they serve are particularly high need (MCH Access estimates that 40 percent of the women they see need more visits and support than the program is able to offer). Despite this, recent requests to add a 6 month and 12 month visit were not approved by First 5 LA due to cost considerations that would impact the *Welcome Baby!* programs that are going to be rolled out across the other BSLA sites. While parent coaches have historically conducted more visits than are specified in the *Welcome Baby!* protocol, this practice is no longer being endorsed, and extra visits require approval by a supervisor. This is in part for protocol fidelity, in part due to caseload demand, and in part an effort to protect the parent coaches from being overworked or becoming overinvested. Overall, the goal of these changes would have made *Welcome Baby!* a higher touch (i.e., more intensive) model of home visiting, which is ultimately not First 5 LA's intention for the *Welcome Baby!* program. During this past year, what was approved was a change to the two week touch point—making it an in-person visit rather than a phone call. *Welcome Baby!* parent coaches and leadership felt that this change was important for reinforcing breastfeeding early on, as well as establishing a relationship between families and the parent coach.

Welcome Baby! roll-out in the other BSLA communities being implemented throughout the county is planned for medium risk mothers. All mothers will be screened by hospital liaisons and triaged to home visiting programs that target low-, medium- and high risk mothers and babies. There will be an RFP for expanding *Welcome Baby!* into these other communities, as well as implementation of the other home visiting programs. *Welcome Baby!* in the other communities will essentially replicate the protocol being deployed in *Metro LA* , and target low- to medium- risk families, while other evidence-based home visiting models will be chosen to reach higher risk families.

A new development this year was that First 5 LA encouraged MCH Access to explore alternate funding sources for *Welcome Baby!* in order to bolster the overall sustainability of the

model. The Medi-Cal Administrative Activities (MAA) match was one option that was being pursued.⁴ At the time of our visit, MCH Access was evaluating the data necessary and administrative time that would be required to obtain MAA payments.

A final area of discussion during our site visit centered on the Data Collection and Reporting (DCAR) system, which remains a cause for frustration at MCH Access, though some improvements were cited. Managers interviewed for this case study acknowledged that both First 5 LA and the DCAR contractor have been working hard to adjust the system and make it more responsive to MCH Access' program management needs. Nonetheless, MCH Access staff recommend that DCAR ultimately be replaced by a new system for use throughout the county.

B. COMMUNITY

The two primary organizations working at the community level in *Metro LA* are Para Los Niños (PLN), the lead entity working to support community strategies and facilitate change in the pilot community; and Special Service for Groups (SSG), hired to assist PLN with Community Based Action Research (CBAR) efforts in *Metro LA*.

PLN, a nonprofit family service organization, is responsible for mobilizing community members and stakeholders within *Metro LA* through the formation of the BSLA partnership among community agencies, providers and residents, and facilitating their process for developing community-level change. PLN was initially off to a slow start (described fully in previous case study reports), but staff quickly learned that active engagement of parents in the community is a key component of successful mobilization, and have since made that a priority (Hill et al. 2011a and Hill et al 2011b). As will be discussed below, despite promising movement, progress continues to be interrupted due to frequent staff turnover at PLN and recent efforts to align the work in *Metro LA* with 13 other Best Start LA communities in Los Angeles County.

Special Service for Groups (SSG), a multiservice organization that provides research and evaluation, technical assistance, and capacity building services to community-based organizations was retained in 2010 to provide support the CGB's mobilization effort by directing a Community Based Action Research (CBAR) project in the neighborhood. CBAR is a research method which entails engaging residents and others involved with the community in identifying and conducting research projects.

⁴ The Medicaid/Title XIX program provides federal matching funds for administrative activities necessary for the proper and efficient administration of the program. State and local programs often explore whether services they provide or activities they engage in that benefit large numbers of Medicaid recipients are eligible for federal Medicaid administrative match. Approval for such matching funds must be obtained from the state Medicaid agency.

1. Recap: The first two years of implementation

As we've reported previously, PLN was off to a slow start during its first year of implementing community change in *Metro LA*, but picked up steam in the second year and began making some substantial progress. Initially distracted by conflict with another community based organization in the community, PLN staff turnover, and challenges engaging community members to get involved, everything began to change once PLN recognized the importance of engaging parents in the community. With this shift they were able to make great strides culminating in the establishment of a Community Guidance Body (CGB) comprised of parents, residents, and community leaders in *Metro LA*. The CGB is ultimately charged with leading the development of strategies for community action.

Another substantial milestone was achieved when the CGB funded 17 mini-grants—now called collaborative partner projects—in the spring of 2011. These grants were given to community organizations for short term, shovel-ready projects in *Metro LA*. This marked a first step for tangible community strategies, while PLN and the CGB had been engaged primarily in process up to that point (Hill et al. 2011).

Last year SSG worked with the CBAR Task Force to begin planning and implementing the CBAR project they hoped to complete. At the time of last year's site visit this effort was just beginning. SSG was planning to hold trainings for the task force to assist them with identifying a research question, designing a research project, and implementing the CBAR methods. While this process began in April of 2011, they had only until June of 2011 to exhaust the funds that were allocated for CBAR research. We learned more this past year about what they were able to accomplish in the short time frame allotted (described below).

2. Year 3: Progress in the Midst of Persistent Challenges

While last year marked a turning point for community strategies beginning to gain momentum in *Metro LA*, this past year has not been without challenges for PLN and the CGB. Once again, there has been turnover among the PLN leadership, as last year's Best Start director resigned in July 2011, and a new director was appointed in February. In addition, First 5 LA has stepped up its involvement with the CGB, attending more meetings, and being another participant at the table, which has represented a shift. This increased involvement has been perceived skeptically by the CGB and PLN, and interpreted as increased oversight and monitoring, which may have resulted from the recent audit and increased scrutiny which First 5 LA has been under.

In addition, *Metro LA* has been asked to conform to standards that are being required in the other 13 communities, including participating in a community needs assessment. This was particularly controversial among CGB members that felt they had already done the research needed to determine what their community needs and felt this imposition suggested their research had been inadequate. In the end, this needs assessment was conducted by Harder+Company, and confirmed the findings gathered previously by the CGB. There is also

talk of PLN's role as the fiscal agent changing, again to bring Metro LA in line with the other 13 communities. This has not been received favorably by PLN or the CGB, citing concern that PLN's role in *Metro LA* is much deeper than the facilitators in other communities, and eliminating their role as fiscal agent will be detrimental to progress in the community.

With approximately 32 active members, the CGB has created four task forces including the: 1) Parent Task Force, 2) CBAR Task Force, 3) Communications Task Force, and 4) Training and Technical Assistance Task Force. The make-up of task forces is slightly changed from last year as there have been some consolidations (for instance, The Community Mobilization Task Force has been folded into the CBAR Task Force). Now three years into the investment, PLN is making a conscious move to step back and give the CGB center stage, while supporting them to move forward on the community plan—a concept introduced to the CGB by First 5 LA in May 2011 which entails specifying activities that the CGB plans to implement. The community plan, which was due in June 2012, but was not available at the time of our site visit—will specify the CGB's scope of work going forward, and will be the metric by which their progress is measured. PLN leaders envision their role from this point forward as providing logistical support to the CGB, facilitating community organization, helping the CGB understand and proceed with the community plan, and facilitating relationship building between the CGB and First 5 LA.

Building on the success of last year's collaborative partner projects, a second round of grants was funded during the third year of the investment, and awards were announced in February 2012. Interviews with First 5 LA and PLN as well as a focus group with round one awardees indicate that the program has been successful in promoting development of new projects as well as supporting ongoing programs with a demonstrated record of success. Collaborative partner project grantees expressed some frustration with the process, and what was described as narrow eligibility criteria, but were overall happy to get support for programs that they believe are essential to the community. There is no expectation that a third round of grants will be awarded in the coming year, but instead the hope is to leverage successful programs and relationships to build more sustainable investments in *Metro LA*.

As noted in last year's case study report, IDEPSCA (Instituto de Education Popular del Sur de California), took the lead on the CBAR project. IDEPSCA is a primarily volunteer run non-profit organization in *Metro LA* that utilizes popular education techniques to support the community with health education programs, a program to keep kids in school, and programs to support day laborers. The CBAR task force chose to evaluate the adequacy of child care centers in the community (how many there are, how crowded they are, and their quality), as its research project and conducted focus groups with parents, interviews with childcare providers, and photovoice—a research method in which residents are asked to represent their point of view through pictures. The CBAR team succeeded in collecting all of the data by the June 2011 deadline, but regrettably ran out of time to do much analysis. During the spring of 2012, IDESPCA was preparing a proposal for First 5 LA that would provide additional funding to allow them to continue to analyze the CBAR data and more fully complete the CBAR project

that they began last year. During this process, IDEPSCA has been frustrated and felt disrespected by the inflexibility of First 5 LA. In particular they cited the inability to spend the full amount allocated for the CBAR project, in the short period of time they had, while there was more work to be done, and additional money available. (See Hill et al. 2012 for more details).

C. SYSTEMS

One of the original goals of the Best Start LA investment sought to achieve improvements at the systems-level, specifically by informing policies, practices, and infrastructure that support sustainable capacity building. During the first two years that BSLA was rolled out in *Metro LA*, the systems level efforts that were launched included the design of a workforce development curriculum (led by Zero To Three), the conduct of a technology assessment and design of an integrated data system to meet the needs of community residents and stakeholders (led by Parents Anonymous, Inc.), and a project to promote Baby Friendly USA—hospital policies that encourage breastfeeding (facilitated by PAC-LAC), and a comprehensive branding and messaging effort (led by Fenton Communications).⁵

1. Recap: The first two years of implementation

During the first case study of *Metro LA*, the BSLA evaluation team found that the contractors leading these efforts had been independently making steady progress, but had reached a point where collaboration with the lead entity and/or other partners was required, but the CGB and/or PLN was not yet ready to participate (Hill et al. 2011). During the second year, the evaluation team identified a mix of continued progress, yet delays coordinating with other entities continued (Benatar et al. 2011 and Hill et al. 2011).

Zero to Three (ZTT)

During the first years of Best Start implementation in *Metro LA*, ZERO TO THREE made significant headway toward workforce development capacity building with an eye toward implementation in *Metro LA* and countywide. As reported in the first case study report (Hill et al. 2011), ZTT spent 2009-10 working with a team of experts to establish a set of core competencies determined to be essential for developing and supporting a cross sector workforce engaged with 0-3 year olds and expectant parents⁶. ZTT then began working to develop a training approach and curriculum, engaging another set of experts in the process, and hired eight lead trainers to train 25 community members to disseminate the model (Hill et al. 2011).

⁵ The work of PLN represents a community level intervention, while the work of MCH Access represents a child and family level intervention. Therefore, they are described in previous sections of this report.

⁶ ZTT's scope of work specifies a focus on 0-3 year olds; The BSLA strategic plan expanded the population of interest to 5 year olds. ZTT has indicated that the work they have done will be translatable to the older set with only moderate additional effort required.

ZTT originally planned to pilot this approach in *Metro LA* and *Long Beach* for replication in other Best Start communities, but coordination with PLN and members of the Community Guidance Body (CGB) was a challenge, as discussed extensively in previous case study reports (see Hill et al 2011 and Hill et al 2011b). As of the spring of 2012, no workforce development task force had been formed within the *Metro LA* CGB, and ZTT has shifted its focus to the 13 other BSLA communities.

Parents Anonymous

Parents Anonymous, Inc. initially met similar challenges coordinating with PLN and the other contractors in *Metro LA*, but made some progress during the second year of implementation culminating in a set of recommendations for development of the Best Start Information Engine (BSIE). To inform these recommendations Parents Anonymous conducted: a technology survey of residents and community providers; 13 focus groups—10 with parents and three with other community residents; over a dozen key informant interviews with all BSLA contractors in *Metro LA*; and performed comprehensive community walkthroughs to assess the layout of the community and discuss technology access options with residents.

Under a separate effort First 5 LA hired a consultant, Confluence, to assess its own overall technology capabilities, including those of contractors and products developed to benefit First 5 LA projects. After over a year, Confluence has advised First 5 LA on how to move forward with an integrated system for First 5 LA tracking all of First 5 LA's data. As a result, First 5 LA ended its contract with Parents Anonymous as of June 30, 2011.

PAC-LAC

The Perinatal Advisory Committee/Leadership Advocacy and Consultation (PAC-LAC) was charged with identifying county hospitals with poor breastfeeding rates, providing them with a needs assessment, and helping them to qualify for Baby Friendly USA status, a UNICEF designation that recognizes pro-breastfeeding policies and practices. During its contract with First 5 LA, PAC-LAC developed a needs assessment tool to determine individual hospitals' Baby Friendly readiness and helped First 5 LA select several hospitals to receive grants designed to support efforts toward attaining Baby Friendly status. PAC-LAC worked with First 5 LA through June 2011, and offered a quality improvement workshop for hospitals that had received First 5 LA funding to support Baby Friendly designation, after which point its contract with First 5 LA expired. As of the spring of 2012, sixteen hospitals had been funded.

Fenton Communications

Fenton Communications was hired in the spring of 2010 to support the BSLA investment both in *Metro LA* and countywide. Fenton was brought on to promote a consistent brand and develop compelling messaging for Best Start LA, a concept that had been proving difficult to articulate. Fenton has worked closely with PLN, MCH Access, and First 5 LA to capture the essence of Best Start in *Metro LA* and the 13 other communities in which Best Start is being rolled out. Initially, Fenton did not encounter the same challenges as some of the other contractors working to affect change at the systems level, in part because its scope of work—while intimately tied to the needs of PLN—was not dependent upon the progress of PLN.

In *Metro LA*, Fenton has been involved with producing collateral material for PLN and *Welcome Baby!*, and has begun working closely with the Community Guidance Body's (CGB) communications task force. During 2011-12, Fenton, the communications task force, and First 5 worked together to develop a work plan that emphasizes the need for capacity building around communications. It plans to utilize social marketing and develop expertise around communications strategies for the task force members. Fenton is also working directly with First 5 LA to brand Best Start for the broader county investment.

Fenton has encountered some challenges working with bilingual communities, and coordinating with the CGB in *Metro LA*. It has become clear along the way, however, that the establishment of a communications task force early on will be essential to developing a consistent and coherent brand for promoting the BSLA message in subsequent BSLA communities.

2. Year Three: Systems investments deemphasized

In the third year of Best Start implementation in *Metro LA* the effort to improve systems-level infrastructure has become less of a focus. Several of the systems-level contracts have ended and the Best Start Department's capacity building team has disbanded, seeming to signal a de-emphasis on this component of the investment. While ZERO TO THREE and Fenton Communications continue to have a role with BSLA, particularly in the additional 13 communities, First 5 LA's contracts with Parents Anonymous' and PAC-LAC's have ended. The remainder of this chapter will summarize the past activities of these four systems-level efforts in *Metro LA*, and provide a quick update on their status as of spring 2012.

With a shaky start to the implementation of Best Start LA in *Metro LA*, the focus on building systems level capacity in the pilot community has become less of a priority, and the focus has shifted to the more promising child & family and community investments.

IV. Lessons Learned

At the three-year mark, BSLA has become more firmly established in the *Metro LA* community, and implementation efforts have shown good progress and continued commitment in the midst of ongoing challenges. Based on analysis of information collected during our third evaluation site visit, we provide the following observations and lessons learned, intended to help not only stakeholders and First 5 LA officials working in the *Metro LA* pilot community but also those designing and implementing BSLA in the other 13 Los Angeles County communities.

CHILD AND FAMILY

- ***Welcome Baby! home visiting provides a strong and highly valued service for BSLA in Metro LA.*** As preliminary data from the Child and Family survey suggests, and focus group input reaffirms, *Welcome Baby!* is a highly valued service in the community, providing families with much needed support and resources. MCH Access deserves recognition for its continued commitment to improving the protocol, and serving families to the greatest extent they are able; *Welcome Baby!* nurses and parent coaches have now served nearly 3,000 clients and show every indication that they will continue to expand their services to eligible families.
- ***First 5 LA will be well served by deploying the Welcome Baby! model in the 13 new Best Start LA communities.*** This year we learned that this recommendation, which we made last year, will be implemented. Our Year 3 case study has reaffirmed our belief that the home visiting component of BSLA, as implemented by MCH Access, has already shown itself to be a well-designed, adaptable, and highly valued service for mothers with new infants. As such, it represents the most tangible component of the BSLA investment. This distinguishes it from other parts of the BSLA model (such as community mobilization) which are more conceptual and less concrete, and thus more challenging to convey to community members and other stakeholders. To help BSLA launch in the additional 13 communities identified in First 5 LA's current strategic plan, a *Welcome Baby!* home visiting component could similarly ground the efforts and provide community members with a similarly tangible benefit. To build a stronger BSLA brand identity, First 5 LA should consider requiring other communities to adopt the same (or at least a similar) model, and to employ the *Welcome Baby!* moniker.

COMMUNITY

- ***While few tangible community-level changes were observed in Metro LA, Para Los Niños continues to support the progress of the CGB.*** As discussed in this report, PLN

continues to encounter staffing challenges, yet has remained committed to supporting the CGB and task forces as they continue to make progress establishing community strategies for *Metro LA*.

- ***Striking the right balance between agency leadership and community ownership is a key challenge for the Best Start Metro LA community.*** Engaged residents are an extremely valuable resource to place-based investments, but at times require the support of an agency to execute stated goals. Keeping this balance in mind while implementing BSLA in subsequent communities may help to facilitate the smooth rollout of the Best Start brand and foster good relationships.
- ***The Collaborative Partner Grants, while imperfect, have succeeded in getting the community to take action and build promising relationships in advance of the establishment of community strategies.*** Faced with a difficult challenge of what to do with unspent monies, First 5 LA and PLN responded creatively by devising a process that effectively, albeit hurriedly, pushed nearly a half-million dollars out the door in support of community projects. This sudden development, after two years of process that was not leading to clear action, was received positively overall, but not without its challenges. First and foremost, the tight turnaround for execution was challenging and not well-understood. The five months allocated for the second round of grants is an improvement, but remains challenging for busy organizations. First 5 LA's plans to implement this in the 13 new BSLA communities, remains a wise idea and should help these communities make tangible progress more quickly, but also more pragmatically.
- ***Metro LA's Community Guidance Body continues to show promise and potential for strong leadership.*** Building on findings from this evaluation's focus groups, findings from the Year 3 case study confirms that *Metro LA's* CGB is composed of a dedicated, creative, and cooperative group of individuals representing a broad swath of the community. They have struggled this past year with demands and oversight that they had not previously accepted. This dynamic likely contributed to slower-than-expected progress, as did staffing changes at PLN. Barring continued instability, we can expect continued progress for the CGB as its members gain confidence and direction.

SYSTEMS

- ***Systems level investments, falling short of becoming fully integrated with other components of Best Start LA, have subsequently been deemphasized.*** While each of the systems-level contractors in *Metro LA* has performed important work, systems-level efforts continue to be somewhat disconnected from the child and family, and community-level components. As a result, First 5 LA seems to have deemphasized this work in favor

of focusing resources on the child and family, and community strategies efforts in *Metro LA*. Implementation of Best Start LA in subsequent communities should consider this lesson carefully and either work to clarify for systems-level partners how their work co-exists with families and communities, or consider holding off on investing in systems-level reforms until the community and child and family components of the investment have been well-established.

In summary, Best Start LA in the *Metro LA* pilot community has made good progress during Year 3 despite some persistent challenges. Home visiting through *Welcome Baby!* continues to shine, proving to be a strong program that could serve as a model throughout Los Angeles County; community strategies have begun in the form of Collaborative Partner Grants; and systems-level work has been deemphasized in favor of focusing resources on the child and family, and community strategies in *Metro LA*. At this, the midpoint of the evaluation, it is hoped that this detailed analysis of implementation is helpful to First 5 LA officials and community stakeholders both in *Metro LA*, as they continue their work, and in the 13 new Best Start communities as they implement their BSLA projects countywide.

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Appendix A: Key Informants

Key Informants

Informant Type	Name	Organization
F5LA Administrator/Project Officer	Hayley Roper	F5LA
	Christine Aque	F5LA
	Diana Careaga	F5LA
	Alfredo Lee	F5LA
	John Bamberg	F5LA
BSLA Contractor/Provider	Veronica Trigueros	Para Los Niños
	Lisa Marin	Para Los Niños
	Brenda Aguilera	Para Los Niños
	Lynn Kersey	MCH Access
	Luz Chacon	MCH Access
	Lilli McGuinness	MCH Access
	Sandra Hoffman	MCH Access
	Eric Wat	Special Service for Groups (SSG)
	Raquel Trinidad	Special Service for Groups (SSG)