



## PORTFOLIO IMPACT AND LEARNING SUMMARY

### TEN YEAR VISION

- CHILDREN HAVE ACCESS TO CULTURALLY RELEVANT, EVIDENCE-BASED PREVENTION AND WELLNESS PROMOTION PRACTICES FOR THEMSELVES AND THEIR FAMILIES.
  - COLORADO'S CHILDREN EXPERIENCE HEALTHY SOCIAL AND EMOTIONAL DEVELOPMENT.
  - MENTAL HEALTH EXPERTISE IS INTEGRATED INTO PROGRAMS SERVING CHILDREN AND FAMILIES.

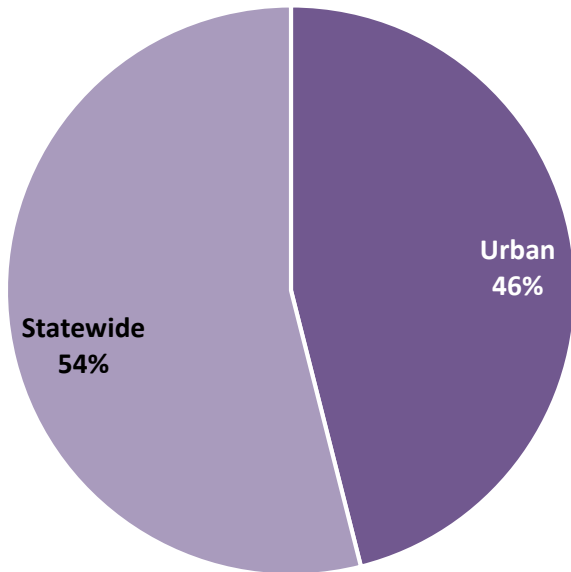
### HEALTHY CHILDREN AND YOUTH PORTFOLIO – MONITORING METRICS:

Metric	Population	2015 Data	2016 Data	Data Source	Frequency of Collection
Percent of babies born with a low birth weight	All babies born in Colorado	8.8%	8.9%	Vital Statistics Report	Annual
Women with newborns who felt down, sad or depressed	Mothers on Medicaid with newborns	32.5%	N/A	PRAMS	Annual
Infants receiving Well-Child Visits in the First 15 Months of life (6 or more visits)	Infants 0-2	46.2%	N/A	NCQA HEDIS	Annual
Percent of preschool-age children receiving all recommended doses of six key vaccines	Children 19-35 months	69.8%	74.3%	US National Immunization Survey	Annual
Percent of Colorado parents concerned about child's emotions, concentration, behavior or ability or get along with others	All Medicaid Children 1-8	25.5%	N/A	Colorado Child Health Survey	Annual
Percent of Colorado Children lacking medical home	Children 1-14	35.8%	N/A	Colorado Children's Access to Care Index (from CHAS data)	Every 2 years
Number of births to teen mothers per 1,000 teenage females	Adolescents 13-19	23.4	23.4	Colorado Health Report Card	Annual
Number of School Based Health Center users	All School Aged Children	35,286	N/A	School Based Health Center Survey (CHI and CASBHC)	Annual
Percent of School Based Health Centers offering mental health assessment and treatment (two separate metrics)	All School Aged Children	96.4% - Assessment, 76.4% Treatment	N/A	School Based Health Center Survey (CHI and CASBHC)	Annual

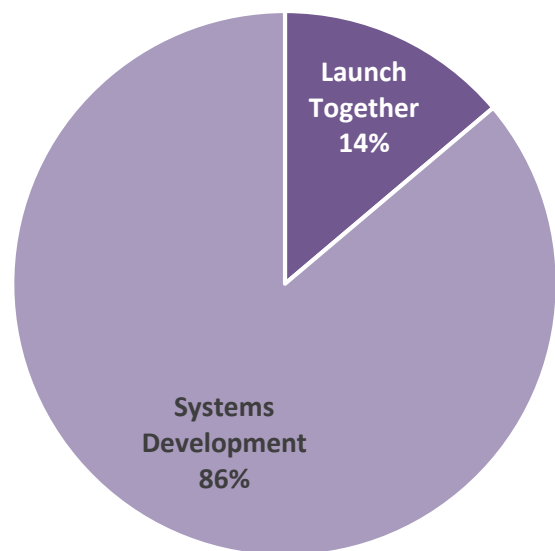
**GOAL ONE: CATALYZE COMMUNITIES TO BUILD COMPREHENSIVE SYSTEMS AND SERVICES TO PROMOTE THE SOCIAL AND EMOTIONAL DEVELOPMENT OF YOUNG CHILDREN.**

	2015	2016	2017
<b>NUMBER OF GRANTS</b>	<b>6</b>	<b>1</b>	-
<b>TOTAL FUNDS</b>	<b>\$344,580</b>	<b>\$575,000</b>	-
<b>ESTIMATED NUMBER SERVED</b>	3,500 (with 4 final reports submitted and most grants reaching statewide)	<i>*Pending submission of final report</i>	-

**Geographic Distribution of Funds\***



**Distribution of Funds by Objective\***



*\*Geographic distribution of funds, distribution of funds by objective, grantee objectives and assessment of impact ratings are based on all grants with final reports submitted for Healthy Children and Youth Goal One.*

<b>Grantee Objectives*</b>			<b>Overall Assessment of Impact*</b>		
<b>Not Met</b>	<b>Partially Met</b>	<b>Fully Met</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>
<b>0%</b>	<b>25%</b>	<b>75%</b>	<b>0%</b>	<b>50%</b>	<b>50%</b>

**Staff Reflections and Stories**

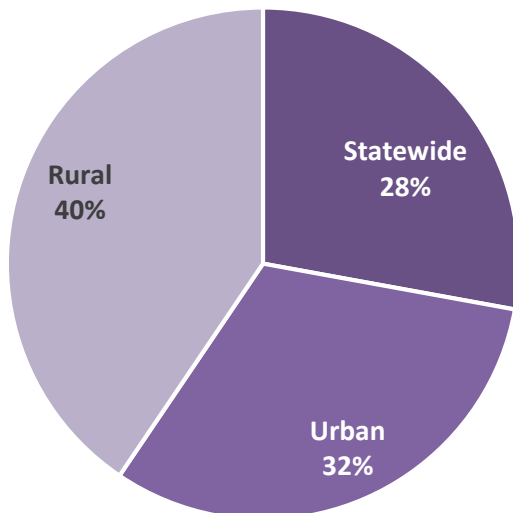
*(Final reports have been submitted for 4 grants under this goal)*

- Grants under this goal have been largely system focused with broad based goals and objectives, including LAUNCH Together (which has an independent evaluation). LAUNCH Together grants are largely not reflected in this evaluation yet due to the extended timeline of the grants and the outside evaluation work that will be specific to this initiative.
- Policy focused grants have been awarded under this goal including to the Colorado Children’s Campaign. Such policy grants have potential for high impact yet also can prove challenging for meeting objectives due to the highly volatile political environment.
- One grant in this area was awarded to an early childhood council to implement a system-based process for referral and follow through in early childhood settings. While this grant did not achieve all the state objective numbers in terms of increase in referral follow through, it had a high impact on the community and the partner organizations because their systems in this area are more efficient and coordinated. In cases such as this it is important to remember that the health outcome data often do not show significant change until multiple years later.

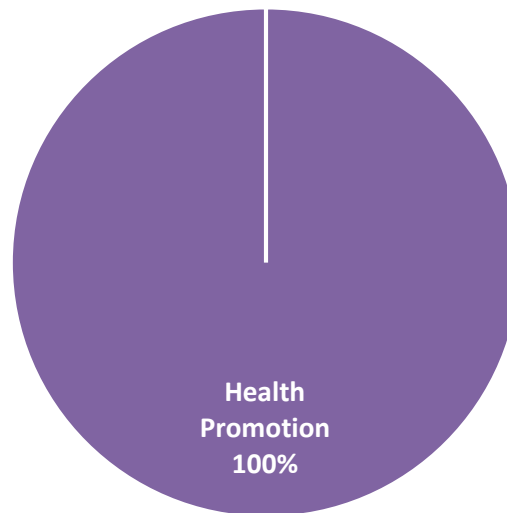
**GOAL TWO: PROMOTE CHILDREN’S SOCIAL, EMOTIONAL AND PHYSICAL DEVELOPMENT.**

	2015	2016	2017
<b>NUMBER OF GRANTS</b>	<b>17</b>	<b>20</b>	<b>24</b>
<b>TOTAL FUNDS</b>	<b>\$691,895</b>	<b>\$1,083,497</b>	<b>\$1,166,838</b>
<b>ESTIMATED NUMBER SERVED</b>	30,050 (with 13 final reports submitted)	3,604 (with 7 final reports submitted)	<i>*Pending final report submission</i>

**Geographic Distribution of Funds\***



**Distribution of Funds by Objective\***



*\*Geographic distribution of funds, distribution of funds by objective, grantee objectives and assessment of impact ratings are based on all grants with final reports submitted for Healthy Children and Youth Goal Two.*

<b>Grantee Objectives*</b>			<b>Overall Assessment of Impact*</b>		
<b>Not Met</b>	<b>Partially Met</b>	<b>Fully Met</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>
<b>5%</b>	<b>35%</b>	<b>60%</b>	<b>5%</b>	<b>40%</b>	<b>55%</b>

**Staff Reflections and Stories**

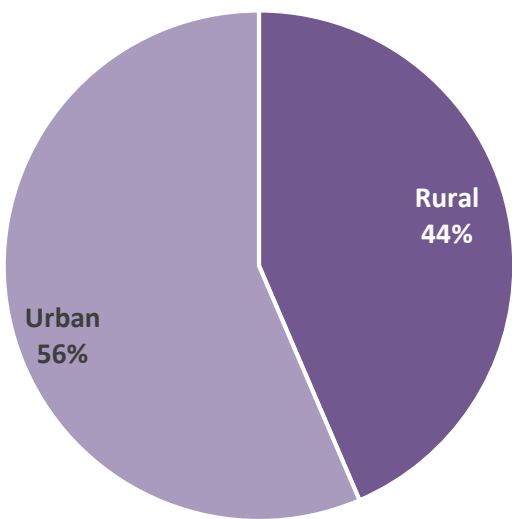
*(Final reports have been submitted for 20 grants under this goal)*

- Grants within this goal ranged greatly from systems implementation work to direct service focused. Some organizations funded in this area are working across this spectrum and addressing systems issues through a direct service lens. One such organization is Florence Crittenton – during the grant period the organization provided 670 teen parents with behavioral and physical health services while also developing a comprehensive plan to improve coordination of services between the Early Childhood Education Center and the Student and Family Support program and their respective community partners.
- An increasing number of grants under this goal are focusing on early childhood mental health consultation. This is a prevention specific model that enhances the ability of early childcare providers and organizations to address social and emotional issues before they arise. The results of these grants are highly promising with high impact noted on many of the grants. This is a model that CFC expects to fund even more in the future and we are currently analyzing how to provide the most effective funding support.
- Grants in this area also pertained to medical home models, home visiting programs and systemic issues such as vaccines. The grant to the Colorado Immunization Coalition illustrated great success in both grassroots vaccine work and large, state level policy change, specifically a new law to lower vaccine exemption opportunities. CFC will continue to cultivate these multi-strategy grants going forward.
- The majority of grant funds went to rural areas which aligns with CFC’s organizational values and highlights the need for funds in this area across the state.
- The results of the final reports showed a majority of organizations had a high impact and fully met their stated objectives. Examples of the high impact of these grants includes the funding of the family planning initiative through CDPHE when the Colorado legislature failed to do so, as well as one-on-one ACE assessments and appropriate referral for 454 families through the Southern Colorado Family Medicine Clinic.
- Only one grant was deemed “low impact” with “not met” objectives. This was due to a complete shift of programming by the awarded organization with no communication with CFC staff. The shift came after large staff turnover and a change in administration – an issue that many organizations face over time. The experience with this grant highlights the importance of understanding organizational leadership dynamics while completing due diligence on a grant request.

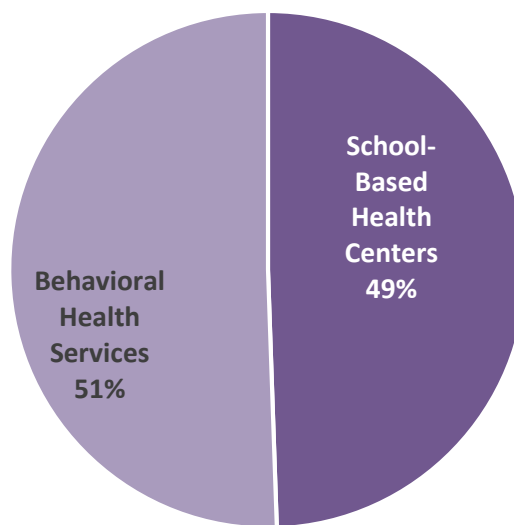
**GOAL THREE: IMPROVE ACCESS TO HIGH QUALITY SCHOOL-BASED HEALTH SERVICES FOR CHILDREN AND ADOLESCENTS.**

	2015	2016	2017
<b>NUMBER OF GRANTS</b>	<b>8</b>	<b>4</b>	<b>3</b>
<b>TOTAL FUNDS</b>	<b>\$450,154</b>	<b>\$167,500</b>	<b>\$140,550</b>
<b>ESTIMATED NUMBER SERVED</b>	9,530	497 (with 1 final reports submitted)	<i>*Pending Final Report submission</i>

**Geographic Distribution of Funds\***



**Distribution of Funds by Objective\***



*\*Geographic distribution of funds, distribution of funds by objective, grantee objectives and assessment of impact ratings are based on all grants with final reports submitted for Healthy Children and Youth Goal Three.*

<b>Grantee Objectives*</b>			<b>Overall Assessment of Impact*</b>		
<b>Not Met</b>	<b>Partially Met</b>	<b>Fully Met</b>	<b>Low</b>	<b>Medium</b>	<b>High</b>
<b>0%</b>	<b>34%</b>	<b>66%</b>	<b>11%</b>	<b>23%</b>	<b>66%</b>

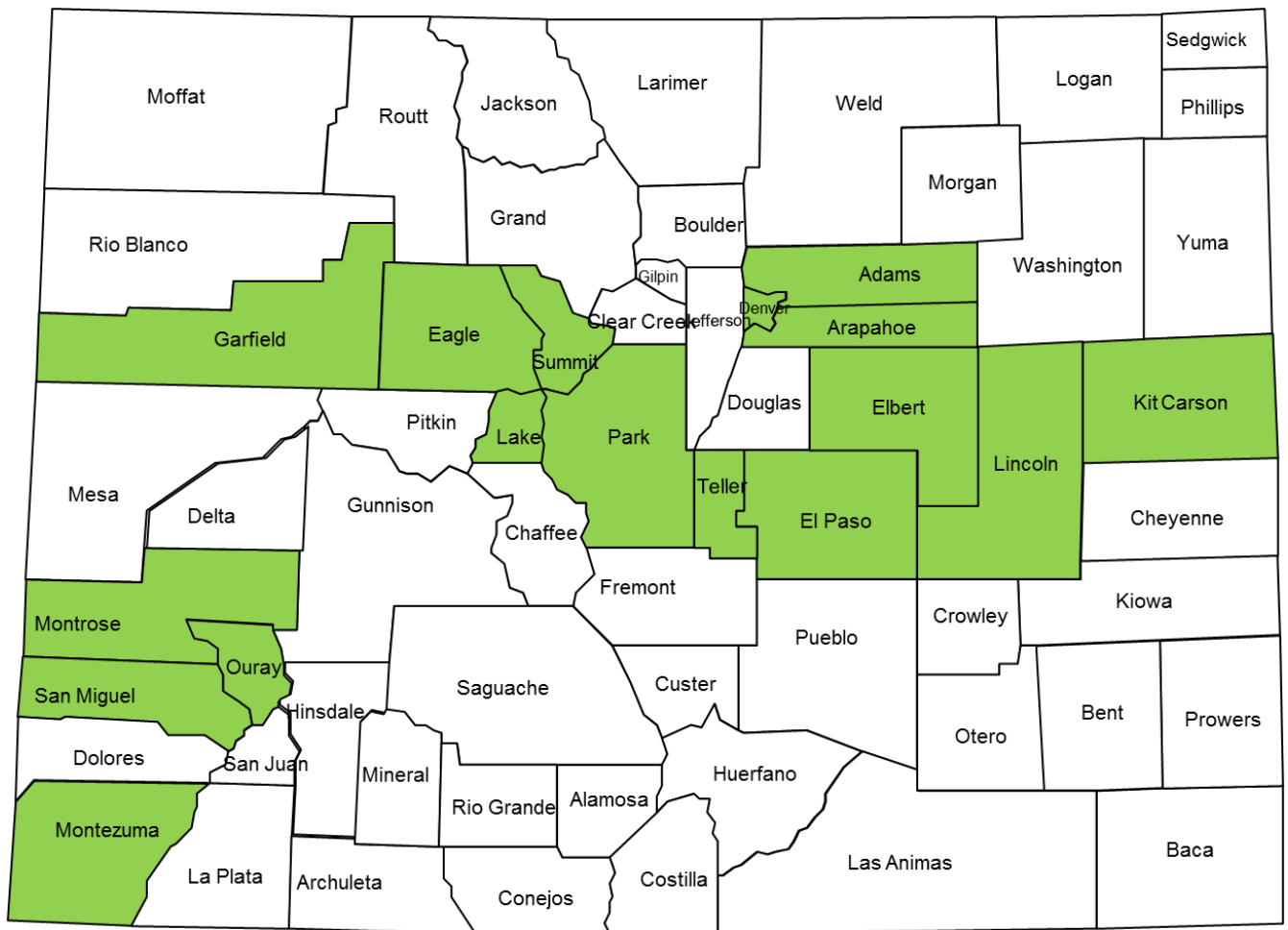
**Staff Reflections and Stories**

*(Final reports have been submitted for 9 grants under this goal)*

- A slight majority of grants in this goal went to urban areas of our state – a potential consequence of where the most promising school based programs are. This will be important to analyze further as CFC develops a more comprehensive strategy in adolescent health. What needs to be provided in rural areas to get them to the level of capacity of some of the urban programs?
- Grants in this goal showed especially high levels of impact and fully met objectives. This could be due in part to the multiple years of coordinated investment some of the programs have had from CFC. For example, the Samaritan Center has received four years of grant funding to provide mental health resources to the students in Eagle County. CFC has also supported the Eagle County Schools health center for multiple years and this year the center increased enrollment by 19%. While CFC always seeks new grantee partners, it is important to understand the value of multiple investments to coordinated programs such as the ones in Eagle County.
- CFC continues to see a need for a more sustainable funding source for youth behavioral health services as many of the final reports noted a lack of clear direction to make the services provided sustainable. The lack of direction is exacerbated by the complex funding streams coming from the school district, state and federal levels.
- Schools continue to be a valuable place to provide services to youth as noted by the high level of impact in many of these grants. This will continue to be important as CFC develops the adolescent initiative as well.
- Some of the challenges reported in this area include staff retention and the general overwhelming requirements on schools and staff. Even when qualified staff are found, hired, and retained, some schools simply do not have the capacity to implement a new program or integrate new staff, no matter how high the need is. CFC’s support of general capacity building to organizations will continue to be important to address these issues.



**CHILDREN AND YOUTH – GOAL 3, SCHOOL BASED SERVICES – GEOGRAPHIC IMPACT OF ALL AWARDS 2015-2017**



## HEALTHY CHILDREN AND YOUTH GRANT SUMMARIES

### GRANTS WITH COMPLETED FINAL REPORTS

Organization	Grant Amount	Grant Summary Statement (as written by grantee)
All American FAMILIES PLUS	\$43,634	The project further developed the systems-of-health-care delivery approach that specifically addresses the comprehensive needs of children and youth experiencing maltreatment and chronic lack of resources in the home. Through this grant, the number of children served expanded, additional staff were recruited and trained, and the effectiveness of getting children access to dental, behavioral health, and primary care improved, all of which substantially impacted the health outcomes of children served. In addition, Families Plus also had significant success working to bring this model of health care access for children with complex needs into the primary medical homes here.
AllHealth Network	\$68,216	AllHealth Network was successfully able to implement and integrate mental health programming into five schools in Englewood, CO. Upon integration, the number of children and families served increased, along with billable encounters, enabling the program to achieve sustainability as well as expand to three providers. The report notes initially being challenged by full integration into school environment, indicated strong need to have clear, widely understood referral system in place when implementing services. Additionally, the report notes a reduction in stigma when services offered within school.
Assuring Better Child Health & Development	\$69,581	ABCD enrolled 22 practices in quality improvement (QI) projects to improve internal screening and referral processes. Through active facilitation, practices were able to keep improvement efforts in the forefront and positively impact children and families.
Baby Bear Hugs	\$43,814	The grant allowed Baby Bear Hugs to hire a Program Supervisor, whose job description it was to supervise the County Coordinators and implement Partners for a Healthy Baby to fidelity. The adding of this position to Baby Bear Hugs enhanced accountability of the Coordinators, increased quality - not just for the Partners for a Healthy Baby program - but other programs and responsibilities impacted by the County Coordinators, expanded services - meaning that more families received higher quality services, and definitely made the program sustainable.
Catholic Charities, Diocese of Pueblo	\$40,000	Catholic Charities provided evidence based curriculum and services to high need families in the region. The services are designed to empower parents as primary educators of their children in the home and raise parent involvement in school and community life to maximize the changes of successful early school experiences. The programs provide educational materials that increase community awareness of the importance of early childhood education, focus on brain development and pre-literacy through parent-child interaction.
Center for Health Progress	\$18,000	AKC was able to comment and influence decision-making within SIM and ACC Phase II, both of which can significantly contribute to higher quality service delivery to children.
Colorado Children's Campaign	\$40,000	With the generous support and partnership of the Caring for Colorado Foundation, we have developed the following Healthy Start Agenda, which advances our "True North Goals" and has been integrated into our current Strategic Plan. The Healthy Start Agenda includes Prenatal Care and Planning; Nutrition and physical Activity; Oral Health; Immunizations and Behavioral Health. CFC funding supports the Vice President of Health and the Vice President of Early Childhood to effectively advocate, communicate and engage stakeholders across the state in driving improvements, through policy, on the following outcomes: <ul style="list-style-type: none"> <li>- Births to women with less than 12 years of education</li> <li>- Women who receive early prenatal care</li> <li>- Immunization rates</li> <li>- Children with two or more adverse childhood experiences</li> <li>- Parents who express concerns about their child's behavior who access behavioral health care</li> <li>- Children who received medical care consistent with a medical home approach</li> <li>- Children with teeth in fair or poor condition</li> </ul>

Organization	Grant Amount	Grant Summary Statement (as written by grantee)
Colorado Children's Immunization Coalition	\$20,000	The Colorado Children's Immunization Coalition (CCIC) achieved much success meeting the goals and strategies deployed with this grant award. Colorado's new vaccine exemption law, HB14-1288, was fully implemented as of July 1, 2016 and CCIC utilized the collective voice of parents, healthcare professionals and others to support proposed Board of Health rule changes in order to implement the new law. In addition, CCIC successfully advocated for a \$1.2 million increase in general funds to support optimizing the Colorado Immunization Information System (CIIS), the state immunization registry. Finally, healthcare professionals and parents were given new messaging tools to promote the safety and importance of vaccines and gained essential knowledge needed to choose childcare centers and schools with high immunization and low exemption rates.
Colorado Department of Public Health and Environment	\$100,000	Through the collaborative funding of 12 Colorado foundations, CDPHE supported access to effective contraceptive methods to 6,947 women (goal was 5,000), trained 170 health care providers in the provision of effective methods, with high levels of satisfaction and sense of efficacy, and completed a research-based, evaluation report on the impact of the Colorado Initiative to Reduce Unintended Pregnancy and the costs-avoided in Colorado as a result of the impact.
Denver Health and Hospitals Foundation	\$95,963	The Denver Health - Health Education Program (HEP) served a record number of 3,632 students through 6,470 visits for the 2014-15 school year, increasing its reach by 900 students from the previous year. A strong team of 8 health educators, along with increasing program integration into school culture resulted in the highest student-visit numbers HEP has had since its inception. Additionally, HEP was recognized by Denver Public Health as a contributing factor in the continued decline of Denver teen births.
Eagle County Schools	\$50,000	Eagle County Schools health center increased overall enrollment by 19% to 1758 patients and delivered over 1667 unduplicated office visits with 834 physical health visits including 505 sports/school physicals, 316 flu vaccines and 430 patient encounters for follow up, phone calls and prescriptions. Behavioral health enrollment increased to 209 students, receiving over 1254 hours of counseling. In oral health we have enrolled 261 students delivering oral health screenings, cleanings and fluoride varnish.
Early Childhood Partnership of Adams County	\$66,580	ECPAC is continuing efforts to build a comprehensive coordinated medical, oral, developmental and mental health referral process for young children and families by reducing the barriers to coordinating care and focusing on strong family engagement. Over the past year, screening rates, referral rates and follow-through rates have increased, along with integration of more health and child serving agencies engaging in the comprehensive community process.
Early Childhood Partnership of Adams County	\$66,355	Through collaborative and diverse partnerships, Adams County early childhood organizations and programs have implemented a common best practices cross-domain screening and referral process for young children. Through this effort, our follow through rate to evaluation has increased, organizations have developed strong partnerships to support the referral process, and there is a strong commitment to improving health outcomes, in recognition that healthy children supports kindergarten readiness.
Early Connections Learning Centers	\$62,668	Early Connections Learning Centers used CFC funds to implement Pyramid Plus in some of the classrooms. Training from the Pyramid model has resulted in teachers and directors experiencing results and continue to feel support when dealing with challenging behaviors. Parents have been more receptive and are more likely to follow through with our referrals and recommendations for their children.
Early Milestones Colorado	\$20,000	Early Milestones Colorado successfully completed a research and design scope-of-work for LAUNCH Together, an \$8.5 million initiative to support Colorado communities in advancing children's social and emotional health.
Family Advocacy, Care, Education, Support (FACES)	\$44,800	FACES home visitation program clients demonstrated significant improvement on validated tools, including the Adult Adolescent Parenting Inventory, the Family Global Assessment Tool and the Parenting Stress Index. The more than 300 clients served also had a 90% satisfaction rate with the program. Despite the positive impact of this program and it's efforts to improve the health and mental health of parents, FACES ceased operations in August 2016. Fortunately, the home visitation program within FACES was transferred to another entity for continued operations.
Family Learning Center	\$18,000	The Family Learning Center provided targeted professional development for 25 Family Learning Center teachers in conducting effective home visits, the Early Head Start theoretical model, and teaching social emotional skills in the classroom. Home visits to 65 families were initiated, mental health consultation was offered when needed, and parent support groups were supported to increase parent engagement and knowledge.



Organization	Grant Amount	Grant Summary Statement (as written by grantee)
Family Resource Center	\$35,000	The Family Resource Center experienced organizational capacity growth during the grant period. Existing programming was enhanced and new programming was implemented. Overall, the Family Resource Center continues to expand and identify community needs resulting in stronger community partnerships and quality services. Future plans are being developed through a strategic planning process.
Family Visitor Program of Garfield County	\$92,900	Family Visitor Programs' Healthy Families America Program provided support and education for 95 families of infants and toddlers with 1,395 home visits for 2,119 hours during the grant period. The purpose of the agency's Caring for Colorado funding is to use the evidence-based Health Families America program that has been proven to positively impact maternal and child health outcomes, positive parenting practices, child development and school readiness.
Florence Crittenton Services of Colorado	\$25,000	Over the 12 month period, more than 670 teen mothers, fathers, young children and extended family members benefited from Florence Crittenton Services' efforts to strengthen the quality of the behavioral and physical health services offered through the Healthy Families Program—services that make attendance and academic advancement possible for both teen mothers and their children. Among the key milestones achieved during this funding period was the development of a comprehensive plan to improve coordination of services between the Early Childhood Education (ECE) Center and the Student and Family Support Program (SFSP), and their respective community partners.
Grand Beginnings	\$74,641	The goal of the Early Childhood Mental Health Support Project has been to promote child and family mental health and well-being by increasing the use of evidence-based, social-emotional, and inclusive practices in early care and education settings, including child care centers, family child care homes, home visitation programs, and community service entities, through the expansion and sustainability of the regional implementation of the Pyramid Plus Approach. Grant objectives included supporting and expanding Pyramid Plus Approach training and coaching, supporting and expanding early childhood mental health consulting, providing family education opportunities, and promoting a cross-sector approach for developing social and emotional competencies.
Invest in Kids	\$35,000	Invest in Kids offered its largest scale effort to date related to The Incredible Years program throughout Colorado. IIK utilized proven implementation methods to expand the evidence-based IY program in turn improving the social and emotional development of young children throughout Colorado.
Jewish Family Service of Colorado	\$65,000	International KidSuccess (IKS) assisted refugee children and adolescents in their adjustment to a new school, American culture, and home in the United States. The goal of the program is to offer individual and group counseling at school to reduce isolation, decrease stigma about mental health and address common mental health issues affecting refugee and immigrant youth: post-traumatic stress disorder, depression, grief and loss, generalized anxiety, adjustment disorder and somatization.
Kids First Health Care	\$39,020	Kids First added a full-time, year-round health educator at their Commerce City clinic. Health education has increased patients' knowledge, skills, and positive attitudes about health. Through the intervention of a health educator, patients learn skills they will use to make health choices throughout their lifetime.
Montrose County School District RE-1J	\$25,000	Northside Child Health Center (under Montrose County School District) focused on on various elements of comprehensive assessment and evaluation of the pediatric patients. During the grant year the clinic developed and implemented an intake and health care needs assessment which helped increase the health care literacy of the population served and, in turn, allowed higher and more efficient utilization of the clinic.
Reach Out and Read Colorado	\$25,000	Support from this Caring for Colorado award directly funded the addition of 2,000 children in new communities across Colorado. Additionally, Reach Out and Read Colorado increased clinic partnerships by 11% and ensured new programs were displaying fidelity to the program model.
Ronald McDonald House Charities of Southern Colorado	\$25,000	The grant from Caring for Colorado helped support the Ronald McDonald Care Mobile Program, providing medical and dental care to under served and uninsured children 0 - 21 living along the Front Range.

Organization	Grant Amount	Grant Summary Statement (as written by grantee)
Southwest Open School	\$56,955	<p>The Southwest Open School (SWOS), School Based Health Center (SBHC) has been building momentum in the last 18 months of the grant. We provide a multi-tiered level of support to at-risk students attending SWOS, 95% of which meet the at-risk definition under Colorado Department of Education guidelines. These supports include providing risk assessments to 48/240 unduplicated students for the first year of the grant and 60/175 unduplicated for August through December 2016. We are actively building on our success in striving toward our goals through various services including integrated behavioral/primary care visits, implementing an "Alternative to Suspension" process for students identified with using substances on campus, providing case management support by partnering with the school for bi-monthly Interdisciplinary Team meetings, organizing a Student Wellness Council led by the BHP, and recruiting students for the second semester Dialectical Behavior Therapy group (building on SWOSology I - an entry level character education/SWOS immersion class) titled, "SWOSology II". We have also been successfully billing for primary care visits for the last six months of this grant period.</p>
St. Mary-Corwin Health Foundation	\$44,250	<p>The Southern Colorado Family Medicine Clinic provided one-on-one ACE assessments for 454 parents of children aged 0 to 5. These parents were educated regarding ACEs and the health and behavioral risk factors associated with ACEs. Parents were offered supportive services and ongoing support by both Residents at the clinic and a Family Development Specialist at every wellness checkup.</p>
Starpoint - Fremont County Family Center	\$15,000	<p>Continuity of services, Home Visitor retention, ongoing community/interagency collaborations and positive outcomes in School Readiness and Parent Survey Reports have been some major accomplishments during this grant period. Specifically, the Home Visitors are trained in the Strengthening Families Model. Using this model they promote: parental resilience, social connections, knowledge about parenting and child development, providing concentrated supports in times of need and supporting children's social emotional competence. Outcomes show that participants increase their knowledge in parenting skills and child development, decrease isolation and connect to community resources which lead to knowledgeable and healthy choices, strengthened parent/child attachment, and safe and healthy family environments free of substance abuse. The program provides parents with child development and parenting information; hands on learning activities; and linkage to other programs.</p>
The Early Childhood Council Of Boulder County	\$15,000	<p>Through this grant, ECCBC supported a partnership between Mental Health Partners (Community Infant Program) and Boulder County Department of Health and Human Services to determine if the total costs and positive impacts of the CIP program and the total costs saved to DHHS through a reduction in child welfare costs. A detailed analysis was performed, data sharing between agencies was increased, community commitment to prevention was enhanced and it appears Boulder is poised to move forward with a Pay for Success financed model of program expansion for CIP.</p>
The Samaritan Center of the Rockies	\$50,000	<p>Samaritan Counseling Center provides mental health resources and counseling to the students of the Eagle County School District. The project served 5 middle schools and 2 high schools during this grant period. These schools are limited to no mental health resources outside of what Samaritan offers.</p>
Warren Village	\$25,000	<p>Warren Village shifted focus during the grant period in regards to the social and emotional program implemented at the on-site learning center. The existing model, Pyramid Plus, was found not to be a good fit for the organization so a new model, the Conscious Discipline model is now being implemented. This change came after admin and director changes. The organization is now successfully implementing the conscious discipline model and continuing their work with the DECA assessment tool to evaluate success of the model.</p>