

The information below, provides an update to Exhibit C in the transmitted BSK Evaluation and Performance Measurement Plan. These tables provide updates by strategy areas for RFPs that had been completed and for which performance measures had been identified when the update was provided. The information was provided by Executive Staff on August 2, 2017. It is expected that as implementation continues, this information would continue to be solidified.

Prenatal to 5 Strategies and Programs:	Status of Performance Measures
<p>Home-Based Services:</p> <ul style="list-style-type: none"> - Parent-Child Home Program 	<p>Working in partnership with United Way, RFP for expansion to be released mid-August. This existing program has standardized performance measures:</p> <ul style="list-style-type: none"> ▪ Number of families served ▪ Number of home visits completed ▪ Number of referrals to support services ▪ % of enrolled families completing year 1 and year 2 ▪ % of families with cultural match ▪ % of families with required number of visits ▪ % of children transitioning to other early learning settings ▪ % of children with increased positive behaviors from enrollment to completion ▪ % of parents with increased positive behaviors from enrollment to completion
<p>Direct Services and System Building to Assure Healthy Development:</p> <ul style="list-style-type: none"> - Early Intervention Services 	<p>Performance measures:</p> <ul style="list-style-type: none"> ▪ # children receiving services ▪ Evaluation and service plan in place within 45 days from initial contact ▪ Service start within 30 days ▪ Transition meeting at least 90 days prior to child turning 3 to determine eligibility for school services ▪ % that show progress in three categories between entry and exit: <ul style="list-style-type: none"> ▪ 1 = positive social/emotional development ▪ 2 = acquiring knowledge/skills ▪ 3 = appropriate behavior

<p>Investment in Public Health— Seattle & King County’s Maternal/Child Health Services (ensuring that parents and children across the county continue to access necessary public health services provided by Public Health)</p>	<p>Nurse Family Partnership</p> <ul style="list-style-type: none">▪ Number of clients served (by demographics)▪ Number of visits to the mother▪ Maternal prenatal health<ul style="list-style-type: none">○ Weight○ Substance use○ Smoking▪ Maternal outcomes<ul style="list-style-type: none">○ Subsequent pregnancies and birth interval○ School enrollment and completion○ Employment▪ Child health and development outcomes:<ul style="list-style-type: none">○ Breastfeeding rates○ Immunization status○ Lead screening○ Developmental screening○ Emergency room visits for injury▪ Birth outcomes<ul style="list-style-type: none">○ Low birth weight (only for Seattle)○ Preterm birth▪ Service linkages<ul style="list-style-type: none">○ Referrals to other assistance <p>First Steps (Maternal Support Services and Infant Case Management [MSS/ICM])</p> <ul style="list-style-type: none">▪ Number of clients served (by demographics)▪ Number of visits delivered to MSS/ICM clients▪ Number of visits delivered by ancillary programs (Early Intervention, Family Planning Public Health Nurses at Community Service Offices, Children with Special Health Care Needs program, Nurse-Family Partnership)▪ Number of MSS clients (pregnant/postpartum) for specific time or dates▪ Number of ICM clients for specific times or dates▪ Number of MSS clients by risk level▪ Proportion of MSS clients in King County served by Public Health (indicator of demand of mothers for Public Health’s services rather than another provider; delayed by 2 years) <p>Women, Infant, and Child Supplemental Nutrition</p> <ul style="list-style-type: none">▪ Number of participating clients (by demographics; infants/children; pregnant, breastfeeding, and postpartum women)
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	<ul style="list-style-type: none">▪ Financial contributions to local economy: total food dollars redeemed, total food dollars for fresh fruits and vegetables, total food dollars for WIC Farmers Market Nutrition Program▪ Reducing obesity: percent of children with a BMI \geq95th percentile; percent breastfeeding more than 6 months▪ Percent working families▪ Percent living in poverty▪ Number of client visits with nutrition education sessions▪ Number of referrals to preventative services (medical, social, and food assistance programs) <p>Family Planning Services</p> <ul style="list-style-type: none">▪ Number of people served (by demographics)▪ % Family Planning female clients ages 24 and younger who have had an annual chlamydia screening▪ Percent of female Family Planning clients on contraceptive▪ Number of pregnancies averted and health care cost savings <p>Family Planning Health Education</p> <ul style="list-style-type: none">▪ Number of health education session conducted▪ Number of youth/young adults reached (by demographics)▪ Number of trainings conducted (professional development of youth-serving agencies and school personnel)▪ Number of people (of youth-serving agencies and school personnel) served in professional development training
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5 to 24 Strategies:	Status of Performance Measures
<u>Partnerships with Schools</u>	
Build Resiliency of Youth and Reduce Risky Behaviors: <ul style="list-style-type: none"> - Trauma-Informed and Restorative Practices in the School Environment 	RFP for these mini-grants closed on June 26 th . Applications currently under review. Decisions made in mid-August. No performance measures have been developed yet.
Meet the Health and Behavioral Needs of Youth: <ul style="list-style-type: none"> - School-based Health Centers 	3 new school based health centers to open in Sept 2017 School Based Health Centers <ul style="list-style-type: none"> ▪ # of students provided primary care services including health and mental health services (by demographics) ▪ % of SBHC users who received a standardized risk assessment ▪ % of SBHC users who screen positive for drug/alcohol issues who receive a brief intervention and/or referral to services as appropriate (SBIRT) ▪ % of SBHC users who screen positive for depression and who receive mental health counseling ▪ % of SBHC users who have received all required vaccinations ▪ % of SBHC users who have completed HPV vaccination ▪ % of SBHC users with < 10 absences per year ▪ % of SBHC users who are passing all classes
Meet the Health and Behavioral Needs of Youth: <ul style="list-style-type: none"> - Screening Brief Intervention and Referral to Treatment and Services 	Requests for invitations were due on June 14 th for planning grants. Decisions will be made week of August 1 st . For these short-term, small grants focused on planning activities, progress report at the end of the contract period will be required in lieu of performance measures.
Build Resiliency of Youth and Reduce Risky Behaviors: <ul style="list-style-type: none"> - Quality Out-of-School Time (After school and summer) 	BSK partnering with Schools Out Washington, who will work with BSK Staff to develop the evaluation plan for this strategy, including performance measures.

<p><u>Youth Development</u></p> <p>Help Youth Stay Connected to Families and Communities:</p> <ul style="list-style-type: none"> - Mentoring <p>Build Resiliency of Youth and Reduce Risky Behaviors:</p> <ul style="list-style-type: none"> - Healthy relationships and domestic violence prevention for youth - Youth Leadership and Engagement Opportunities <p>Meet the Health and Behavioral Needs of Youth:</p> <ul style="list-style-type: none"> - Positive Identity Development 	<p>This RFP closed on August 10th. No performance measures as of date update was provided.</p>
<p><u>Meet the Health and Behavioral Needs of Youth</u></p> <ul style="list-style-type: none"> - <u>Healthy and Safe Environments</u> 	<p>18 grantees. On date update provided, staff was in the process of meeting with awardees to review and update grantees' scope of work and budgets and providing technical assistance as needed. Performance measures were in development.</p>

<p>Stopping the School to Prison Pipeline</p>	<p>Theft 3 and Mall Safety</p> <ul style="list-style-type: none">• # of youth that engage with the pilot• # of youth that complete Goodwill Youth on Track program• # of youth that complete their ISP• Quarterly engagement with case manager• End of program youth satisfaction with services• % of participants that did not recidivate• % of participants with improved school attendance• % of participants with improved grades• % of participants in the Goodwill on Track program that get a job <p>Outreach and Case Management</p> <ul style="list-style-type: none">• # of youth engaged by outreach services• # of youth enrolled into case management services• Engagement and retention in services• % of participants that do not recidivate• % of participants completing high school or equivalent or remain in secondary school• # of participants that enroll into post-secondary education and/or are placed into employment
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Communities of Opportunity. At the time this information was provided, no update was available for Communities of Opportunity. Contracts had not been yet executed and performance measures were still in development.