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## Promote Access to Comprehensive Services

**Link necessary services for vulnerable babies  
and toddlers in child care settings.**

### **WHY? RESEARCH SAYS:**

Babies need good health and supported families and can be put at risk of unhealthy development by demographic, family, and environmental risk factors. Neuroscience suggests that early interventions for vulnerable children should begin at birth or even prenatally, since earlier interventions are more likely to affect the entire trajectory of a child's life. Interventions that provide intensive services for vulnerable children *and* connect parents to needed supports can help families experiencing multiple risk factors. Since vulnerable families may have less access to health care, mental health care, and social services, it is particularly important for child care settings serving vulnerable infants and toddlers to provide access to the comprehensive services that these children need.<sup>1</sup>

### **HOW? STATE POLICY OPTIONS:**

**Contract directly with child care providers in the subsidy system and pay them higher rates to connect babies and toddlers to screening, referral, and comprehensive services.**

Illinois requires contracted providers to make regular contact with Family and Community Resource Centers and report how they connect families to services and referrals made. Massachusetts contracts with certain child care centers to provide additional services and supports for abused and neglected children and pays the contracted providers an additional \$15 per day.<sup>2</sup>

**Support child care health consultants with training on infant/toddler development so that they can better serve child care settings caring for babies.**

The Infant Toddler Initiative of Healthy Child Care Washington funds child care health consultants to provide technical assistance, information, referrals, and child development knowledge to child care providers; an evaluation showed that providers increased practices promoting healthy development.<sup>3</sup> Child care providers caring for infants and toddlers who have been identified with developmental delays or other special needs may need supports relative to their needs.

## **Create a statewide network of infant and toddler health and mental health specialists to provide technical assistance to providers, caregivers, and parents.**

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Connecticut's statewide Early Childhood Consultation Partnership funds behavioral health consultants to work with child care providers and parents to address socio-emotional needs of children from birth to age 5; an evaluation found decreases in children's behavior problems.<sup>4</sup>

## **Fund partnerships with Early Head Start (EHS) for children in all care settings, including family, friend, and neighbor (FFN) care, to receive EHS screening and referral services.**

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An Iowa pilot creates partnerships between EHS and family child care and FFN care settings and requires EHS programs to implement the home-based model with those children. Nebraska uses partnerships to leverage federal expertise and resources to improve quality of child care.<sup>5</sup>

## **Develop a single enrollment form for child care subsidies and other state services.**

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To get more eligible families into the child care system and provide them with needed services, states can develop a form that screens for eligibility for CCDBG, WIC, SNAP (formerly Food Stamps), social services, IDEA Part C early intervention, and health care, including Medicaid and EPSDT services. A prior step is for state agencies to share enrollment data to reach out to eligible unserved families.

## **Provide training opportunities and support for child care providers and caregivers to recognize, work with, make referrals for, and follow up with vulnerable families.**

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Vulnerable families may be struggling with poverty, domestic violence, substance abuse, child abuse, or neglect. The Strengthening Families program focuses on building protective factors that prevent child abuse and neglect through working with early care settings and currently operates in seven states.<sup>6</sup> Creating community-based support networks for FFN caregivers can link comprehensive services through trusted resources like libraries, immigrant-serving organizations, or public television.

## **Allow FFN caregivers receiving child care subsidies to participate in the federal Child and Adult Care Food Program (CACFP).**

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CACFP allows states to serve FFN caregivers if they care for a child(ren) receiving CCDBG assistance and the state has standards for exempt providers. If one child is eligible, CACFP reimburses healthy meals and snacks for all children cared for by that caregiver. New York extends eligibility to FFN caregivers for a year after qualifying, even if the child(ren) loses CCDBG assistance or changes care.<sup>7</sup>

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<sup>1</sup> For additional resources and complete references, see Elizabeth Hoffmann, *Comprehensive Services: Charting Progress for Babies in Child Care Research-Based Rationale*, CLASP, [http://www.clasp.org/publications/cp\\_rationale12.htm](http://www.clasp.org/publications/cp_rationale12.htm).

<sup>2</sup> Matthews and Schumacher, *Ensuring Quality Care for Low-Income Babies Contracting Directly with Providers to Expand and Improve Infant and Toddler Care*, CLASP, [http://www.clasp.org/publications/ccee\\_ensuring\\_quality\\_care\\_contracting.pdf](http://www.clasp.org/publications/ccee_ensuring_quality_care_contracting.pdf).

<sup>3</sup> Healthy Child Care Washington Web site, <http://www.healthychildcare-wa.org/>.

<sup>4</sup> CLASP, *Connecticut Early Childhood Consultation Partnership*, [www.clasp.org/ChildCareAndEarlyEducation/map030707ct.htm](http://www.clasp.org/ChildCareAndEarlyEducation/map030707ct.htm).

<sup>5</sup> See profiles for ten state initiatives on State Early Head Start prepared by CLASP and ZERO TO THREE, <http://www.clasp.org/ChildCareAndEarlyEducation/StateEarlyHeadStartInitiatives.html>.

<sup>6</sup> Strengthening Families Web site, <http://www.strengtheningfamilies.net/>. Current states: AK, AR, IL, MO, NH, RI, and WI.

<sup>7</sup> National Women's Law Center, *Close to Home*, <http://www.nwlc.org/pdf/CloseToHome2007.pdf>, p. 19-20.