Applying the EHS Approach to Services and Systems for Infants and Toddlers

Fran Majestic
Barbara Gebhard
Rachel Schumacher
Sue Mitchell

May 25, 2010
Early Head Start

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Early Head Start

Early Head Start’s Reach

Before ARRA

• Approximately 83,600 children and 9,600 pregnant women served

• 715 programs funded

ARRA

• Added 48,000 additional slots

Photo credit: Sarah Merrill
Early Head Start

- 69 Brand New to EHS
- 378 Existing EHS, Expanding
- 180 Head Start Expanding to EHS

Photo credit: Nicole Slaughter
Early Head Start

Early Head Start 2008-2009 Program Options

Center-Based
Home-Based
Combination Option
Locally Designed Option
Family Child Care

Photo credit: Nicole Slaughter
Program Governance in Head Start

- Governing Board
- Policy Council
- Parent Committees

Photo credit: Nicole Slaughter
Early Head Start

Early Childhood Development and Health

• Screenings, Assessment, Curriculum
  – Group size, ratios

• Physical Health

• Dental Health

• Mental Health
Family and Community Partnerships

- Family Engagement
- Services to Pregnant Women
- Community Collaboration
Early Head Start Research and Evaluation Project

- 3,001 children and families randomly assigned to EHS program or control group in impact study with experimental design:
  - 17 of first programs funded
  - Data collection: 14, 24 and 36 months; prekindergarten follow up; fifth grade follow up in progress
Programs that implemented HSPPS *early* and *fully* had broadest range of outcomes:

- Child outcomes
- Parent-child interactions
- Parenting
- Mental health
- Progress toward economic self-sufficiency
  - [www.acf.hhs.gov/programs/opre](http://www.acf.hhs.gov/programs/opre)

Photo credit: Nicole Slaughter
Early Head Start

More Information

- Early Childhood Learning and Knowledge Center
  - www.eclkc.ohs.acf.hhs.gov
    - Early Head Start (EHS)
      - Key Implementation Tools
      - Early Head Start 101 Toolkit

References
- Early Head Start (EHS) Tip Sheets
- EHS Questions and Answers
- A Head Start Dictionary
- Breastfeeding: Guide to Online Resources
- Grant Definitions and Explanations

Key Implementation Tools
- Checklist for New Head Start and Early Head Start Directors
- Organizational Readiness Chart
- Quality Early Head Start Services

Latest News
- Upcoming Events

Websites of Interest
- Early Head Start National Resource Center (EHS NRC)
- EHS Program Listserv (This is a private mailing list for EHS program staff)

Birth to Three Institute
- Watch the plenary video archive on-demand:
Early Head Start National Resource Center

– www.ehsnrc.org
A Policy Framework and State Early Childhood Development System

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Policy Framework

**Health:**
- Physical Health
- Social & Emotional Health
- Developmental Screening

**Family Supports:**
- Basic Needs
- Parent Education
- Home Visiting
- Child Welfare
- Paid Family Leave

**Early Learning:**
- Child Care
- Early Head Start
- Early Intervention

Good Health

Strong Families

Positive Early Learning Experiences
Early Learning

Health, Mental Health and Nutrition

Family Support

Special Needs/ Early Intervention

Early care and education opportunities in nurturing environments where children can learn what they need to succeed in school and life.

Economic and parenting supports to ensure children have nurturing and stable relationships with caring adults.

Comprehensive health services that meet children’s vision, hearing, nutrition, behavioral, and oral health as well as medical health needs.

Early identification, assessment and appropriate services for children with special health care needs, disabilities, or developmental delays.
INTEGRATED PLANNING & ACTION

Services + Infrastructure = System

Accessible
Affordable
High Quality
Culturally Responsive

Regulations & Standards
Quality Improvement
Professional Development
Accountability & Evaluation
Public Engagement
Political Will Building
Governance & Leadership
Financing
Core Elements of a System

- **Families Supported and Children Thriving**
- **Governance & Leadership**
  to set policy direction for the comprehensive system
- **Quality Improvement**
  effective policies, practices, and programs that improve quality and are aligned across the system
- **Accountability & Evaluation**
  cross-system data, planning, analysis, and evaluation to account for quality, effectiveness, and credibility of programs and services
- **Regulation & Standards**
  federal and state regulations that establish minimum standards and track performance
- **Professional Development**
  to increase the knowledge base, skills, and compensation of the workforce
- **Public Engagement & Political Will Building**
  to garner and build support for early childhood care and education
- **Financing**
  sufficient to assure comprehensive quality services based on standards

Adapted by ZERO TO THREE from the Early Childhood Systems Working Group slide
State Roles in Building Comprehensive Systems and Services

Rachel Schumacher
Senior Fellow,
Child Care and Early Education

May 25, 2010
A Continuum of Ways the EHS Model Can Inform State Systems and Services

1. Connect federal EHS to state and local early childhood systems
2. Coordinate state early childhood systems to offer EHS-like services to families
3. Support community partnerships between EHS and local programs, e.g. child care and home visiting
4. Expand access to programs that meet federal Program Performance Standards for EHS
The role of the state is to engage and coordinate all components that can enhance the lives of vulnerable infant/toddlers and their families.

State actions take place along a continuum of short- and long-term activities to implement the vision.
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## Example Policies

- Fund state EHS or EHS/child care partnerships
- Make families eligible for child care subsidy as long as in EHS/HS
- Require health screenings for children in licensed or subsidized care
- Use Medicaid to pay for mental health therapy and home visits

## Funding Sources

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## Other Supports

- Child Safe Environments
- Family Partnerships & Economic Supports
- Child Health
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- Child Nutrition
- Early Childhood Education & Development
- Supports for Expectant Families
**Steps to Comprehensive Infant/Toddler Development Policies**

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**System Actions**
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- Set benchmarks across early childhood
- Leverage federal funds
- Mandate linkages across agencies
- Work with Region staff
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- Make FFN eligible for CACFP and conduct outreach
- Put family support workers in subsidized child care centers or support community hubs
- Extend home visiting to low-income pregnant women, and include FFN
20 States Studied in Building on the Promise


http://clasp.org/in_the_states

- States with in-depth initiative profiles
- Other states with EHS initiatives included in full report

www.clasp.org
States Building on EHS in 2007

Extend the day/year of existing services
• California, District of Columbia, Idaho, Illinois Child Care Collaboration Program, Maine, Maryland, Montana, Nevada, New Mexico, Oklahoma, Oregon, Vermont

Expand the capacity of existing EHS/HS programs
• Idaho, Illinois Prevention Initiative, Kansas, Maine, Maryland, Massachusetts, Minnesota, Missouri, Oklahoma, Wisconsin

Provide resources and assistance to child care to deliver EHS
• Illinois Prevention Initiative, Oklahoma

Support partnerships between EHS and centers and family child care to improve quality or deliver EHS
• Illinois Prevention Initiative, Iowa, Kansas, Maryland, Missouri, Nebraska
Pennsylvania Early Head Start

Sue Mitchell
Chief, Division of Standards
Office of Child Development and Early Learning
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Why did Pennsylvania invest in EHS?

Recommendations from OCDEL’s Infant-Toddler Systems Committee

• Launch a statewide initiative for vulnerable at-risk infants, toddlers and their families
• Improve early identification and referral through developmental screening
• Support high quality, multidisciplinary infant/toddler workforce
• Enhance social and emotional health through provision of early childhood behavioral health services
Pennsylvania as a grantee

PA receives funds through ARRA funding for expansion

- 8 partners throughout Pennsylvania
- Represent a variety of program types (PCHP, NFP, EHS, CC)
- 128 children and families:
  - 11 home based programs (88 children)
  - 5 center based classrooms (40 children)
Seamless services, birth through K

In addition to HS performance standards, PA EHS:

- Utilizes Pennsylvania’s Learning Standards for Early Childhood
- Reports children’s outcomes and demographic information through PA’s Early Learning Network
- Requires staff to obtain a minimum of 24 professional development hours from PQAS certified instructors
- Implements a community-collaborative approach to program service delivery
- Follows procedural guidance that mirrors other OCDEL program requirements
Early Head Start’s sister initiative

Keystone Babies:

- A second outgrowth of the Systems Committee’s recommendations
- Uses supplemental funds to support child care centers’ high quality implementation of infant-toddler programs
- Follows key elements of Early Head Start standards
  - Requires health and mental health consultations
  - Emphasis on parent engagement and involvement
  - Requires relationship with Early Intervention including early identification through screening
  - Full enrollment and prioritization of waiting list
Coordinated Services

Both Early Head Start and Keystone Babies:

- Receive technical assistance and support from regional infant-toddler specialists
- Attend infant-toddler specific professional development together
- Hire lead teachers with BA in early childhood education or related field
- Access additional program support through Pennsylvania’s Regional Keys and the PA Key
Pennsylvania is building the plane as we fly!

Challenges:

• Program governance – who sits on this committee? How do we avoid conflict of interest?
• What fiscal and reporting requirements are OCDEL’s? What are the partners’?
• How do we create an effective policy council with representatives from across the state?
• How do we communicate effectively with statewide grantees
Questions?