



Early Childhood Comprehensive Systems

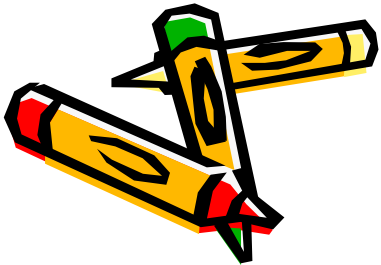
September 2009

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2009 ECCS Summit

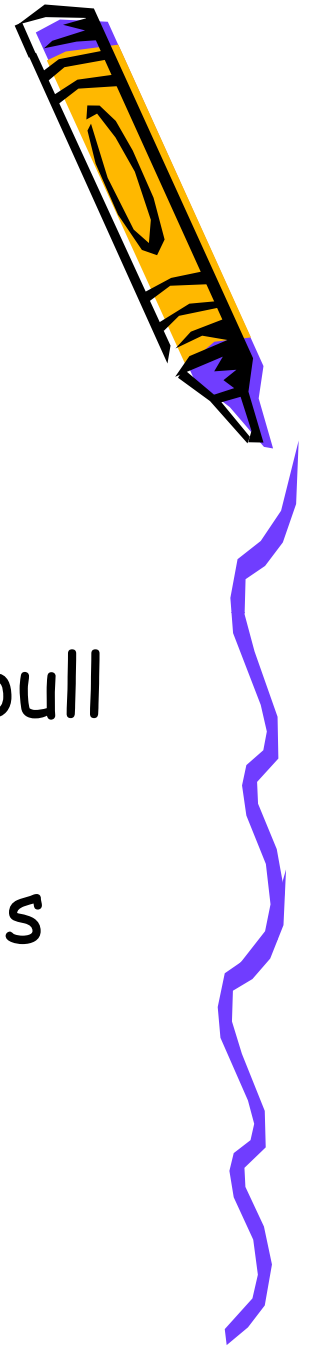
Never doubt that a small group of thoughtful, committed citizens can change the world; indeed it's the only thing that ever does." - Margaret Mead



2009 ECCS Summit

A Shared Vision

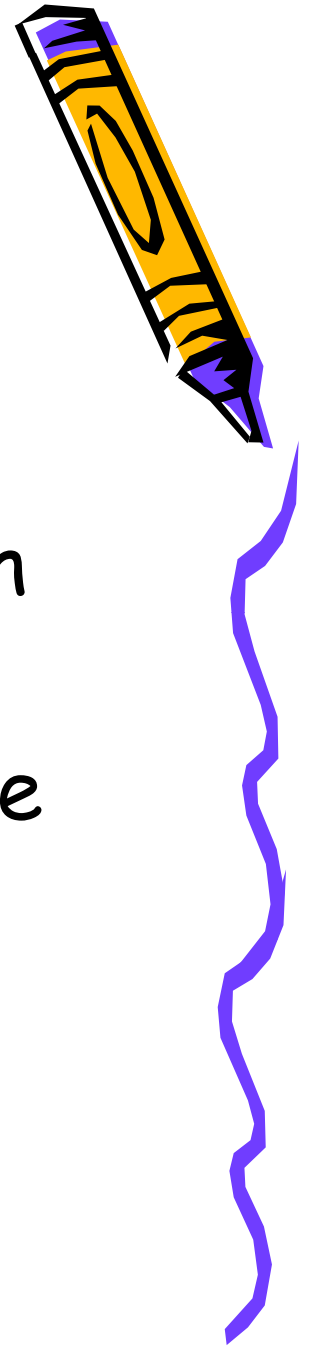
- Is more than a list of goals
- Inspires people and gets them to pull together for cooperative action
- Energizes People (what the group is trying to accomplish)



2009 ECCS Summit

A Shared Vision

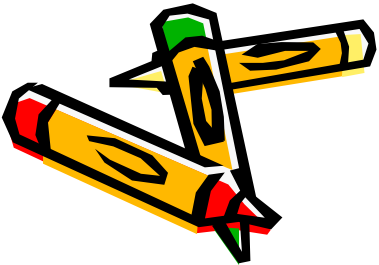
- Pulls people together to accomplish something worthwhile
- Allows people to see a personal role in bringing the vision to life



2009 ECCS Summit

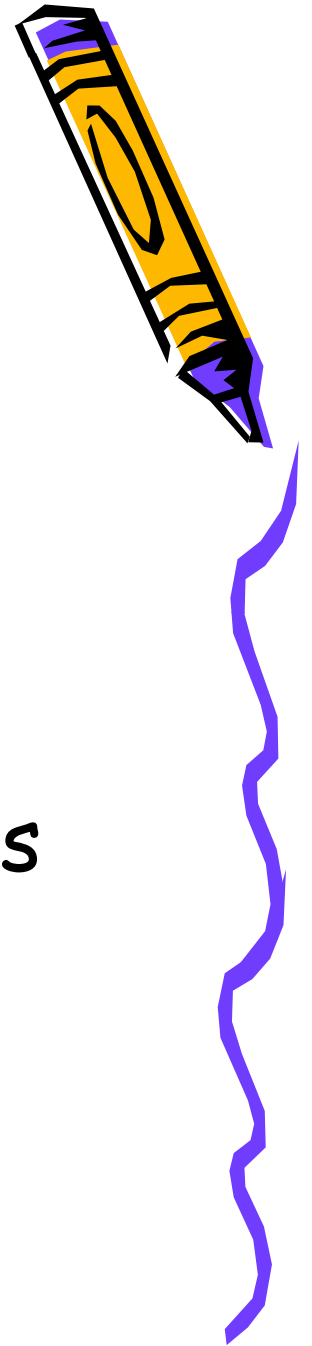
A Shared Vision Exists When People:

- Are inspired by the purpose of the group or organization
- Feel that their values and ideas are incorporated into what the organization is trying to achieve
- Can easily communicate the mission and direction of the organization



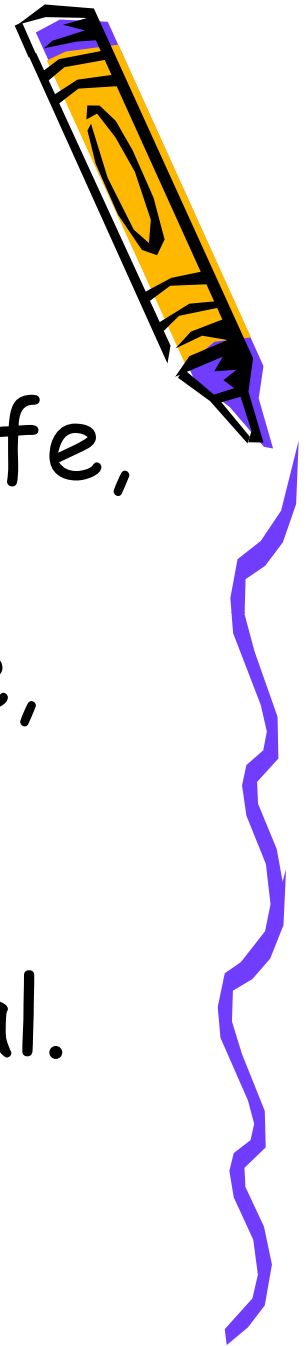
A Shared Vision Exists When People:

- Recognize that both individual and organizational needs are being addressed
- See how their day-to-day activities support the overall goals of the organization



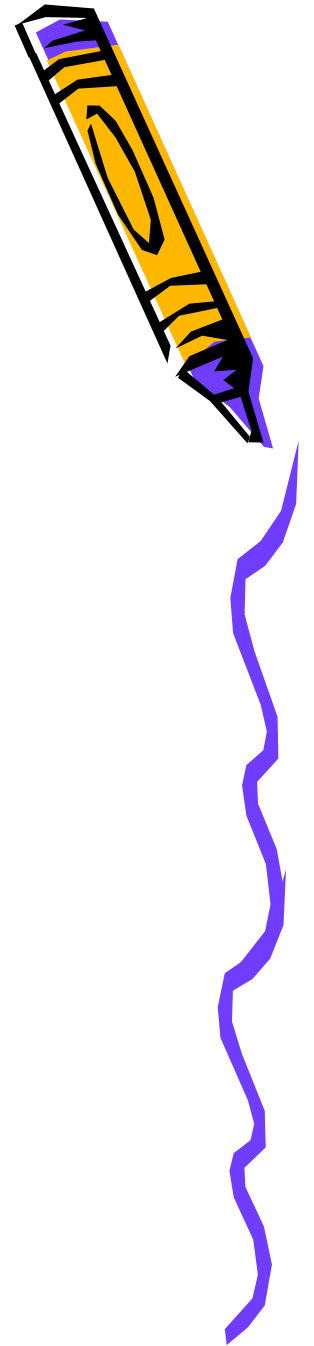
The Vision

Nevada's children will be safe, healthy, and thriving during the first eight years of life, and the system will support children and families in achieving their full potential.



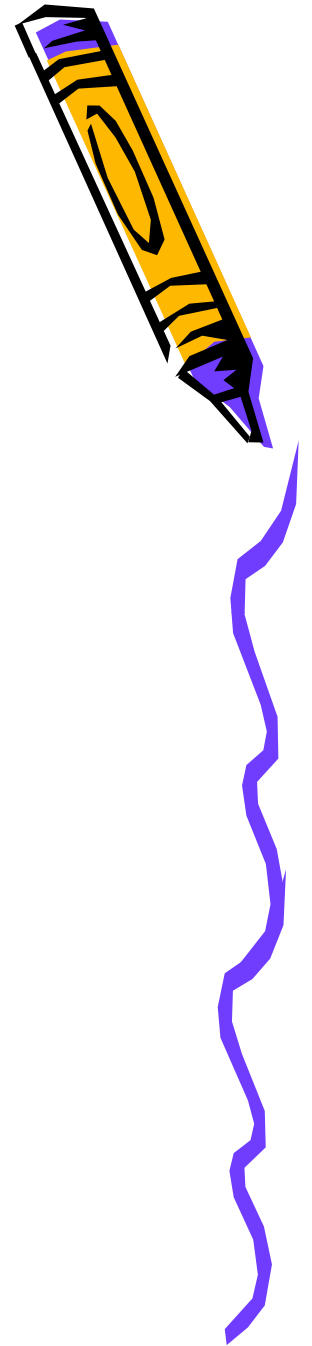
Critical Components

- Health/Medical Home
- Family Support
- Social Emotional/Mental Health
- Parent Education
- Early Care and Education

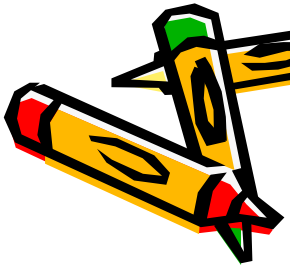
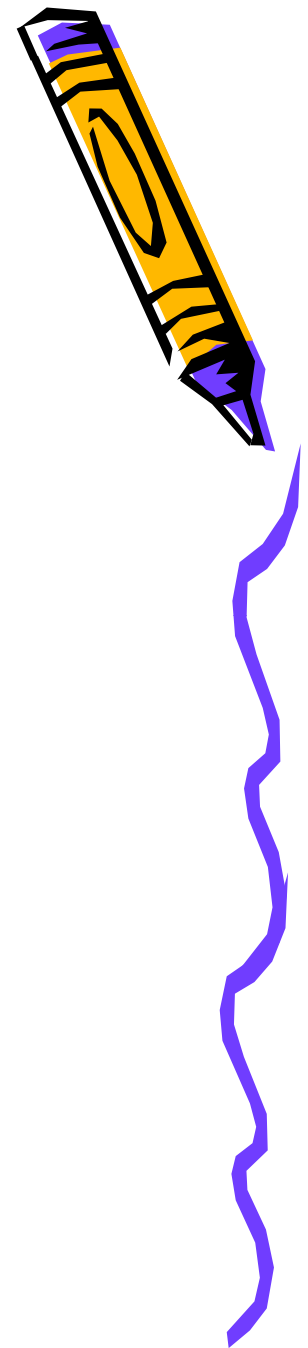
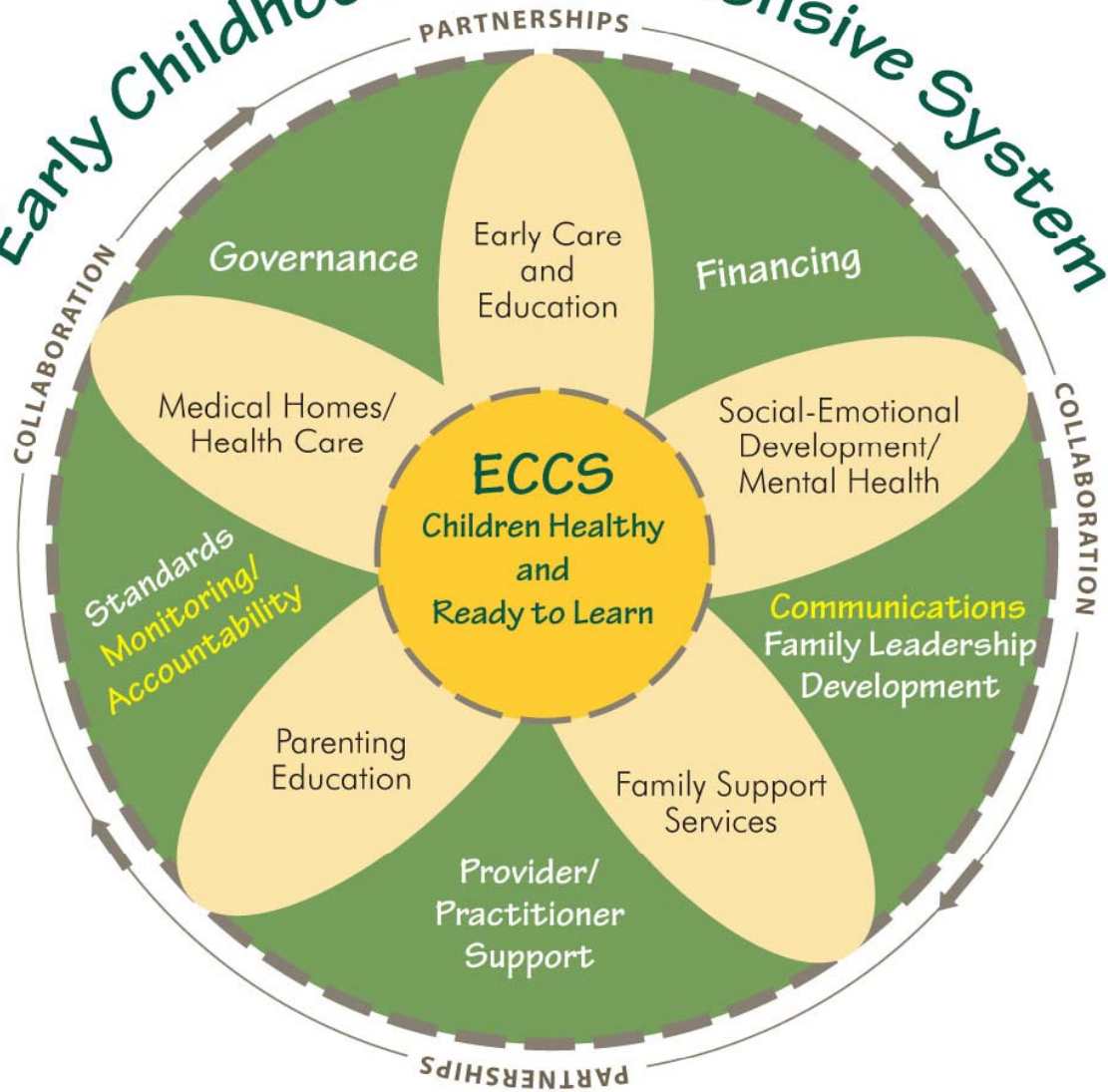


Core Elements

- Financing
- Governance
- Communication
- Family Leadership Development
- Standards
- Monitoring/ Accountability
- Provider/ Practitioner Support



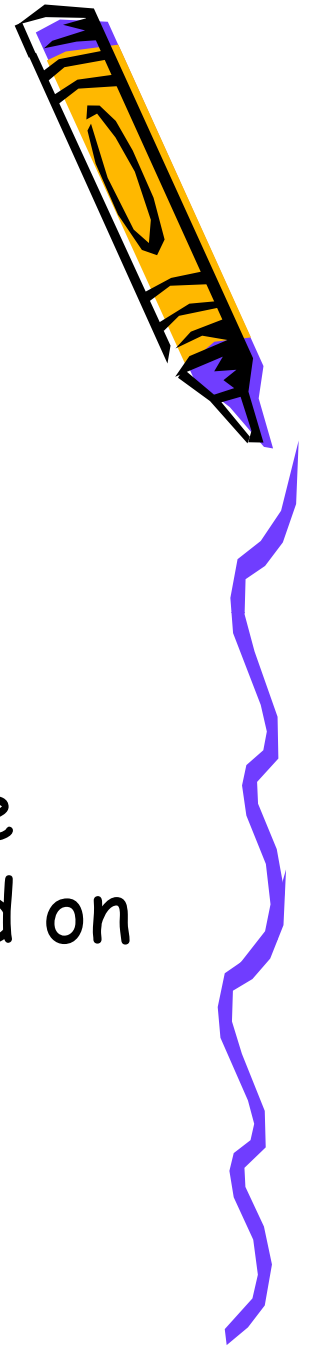
Early Childhood Comprehensive System



ECCS Proposal

June 2009 - May 2012

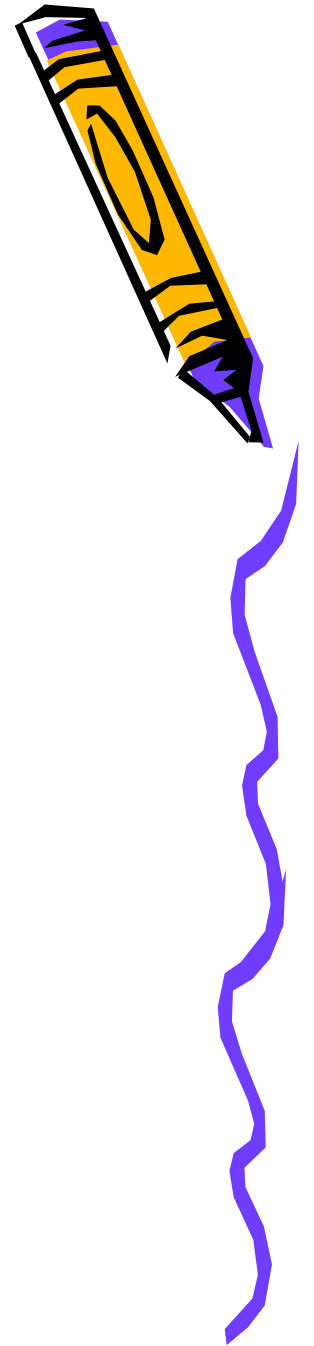
- Began June 1st
- Annual continuation over the three years is determined annually based on progress



Needs Assessment Highlights

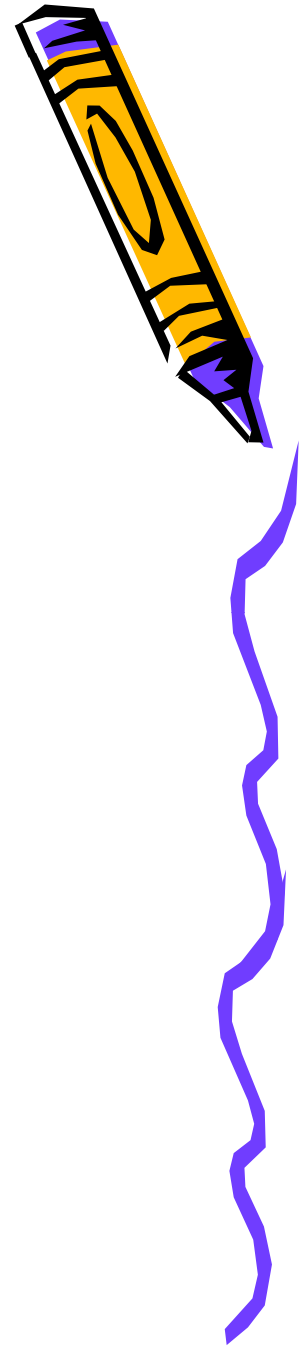
5 Critical Components (ECCS)

- Health/Medical Home
- Social-Emotional/Mental Health
- Parent Education
- Family Support
- Early Care and Education



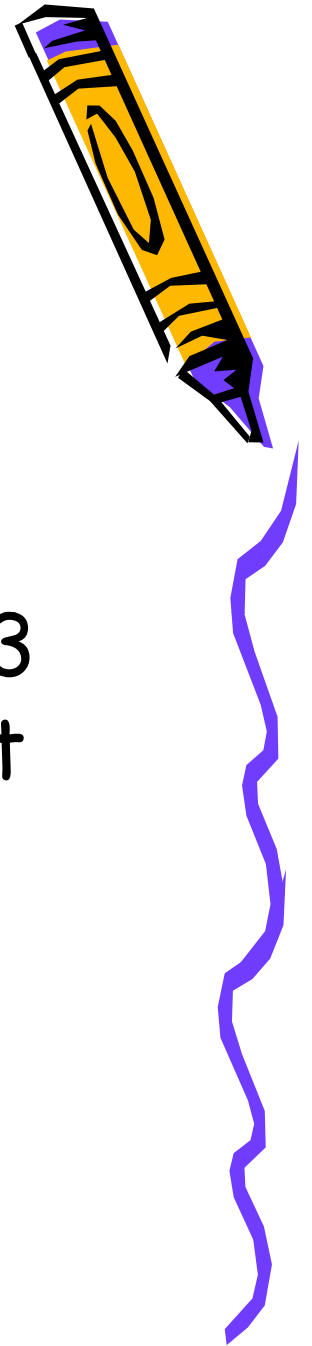
But first...

Overarching Issues



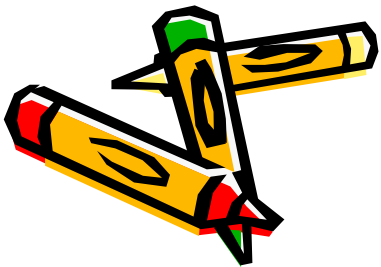
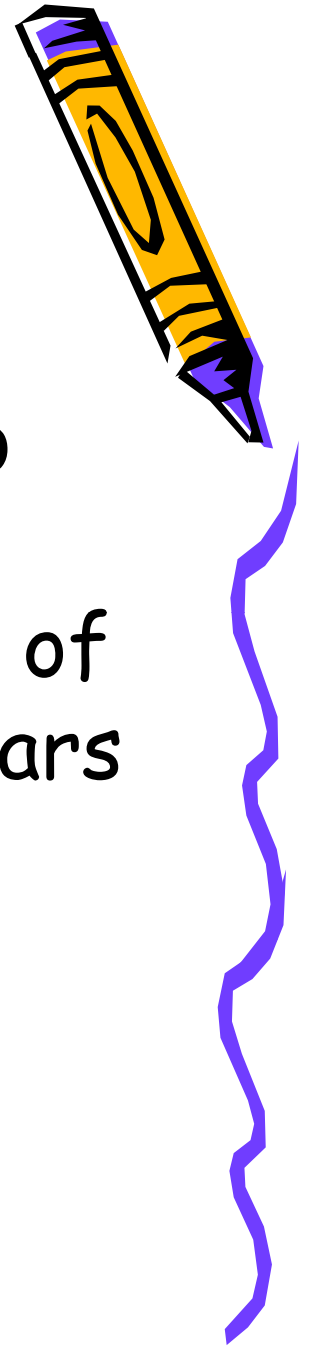
Overarching Issues

According to the State Demographers Office, Nevada is projected to grow by more than 1.3 million or 49 percent over the next 20 years.



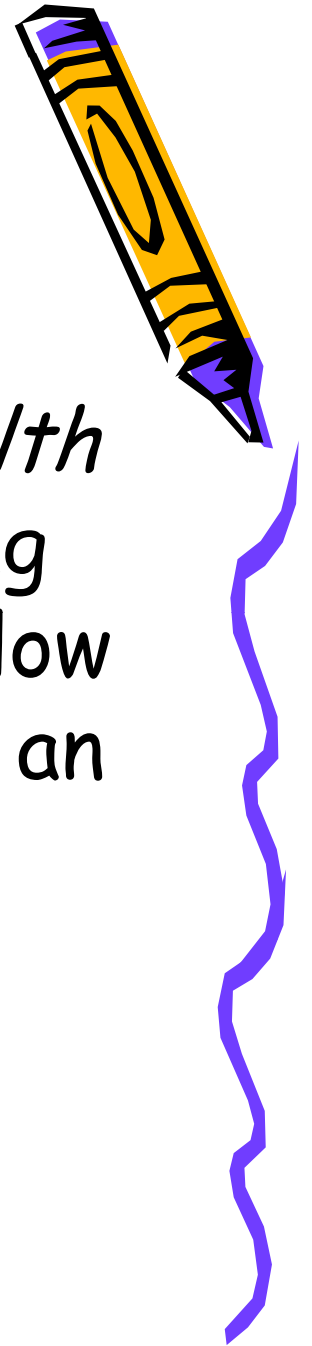
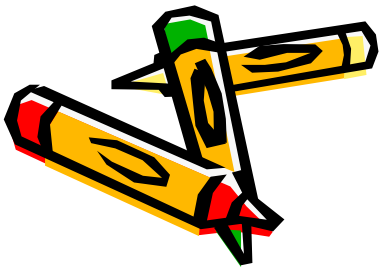
Overarching Issues

In the five years spanning 2006 to 2011, the Nevada Demographers Office estimates that the number of children between zero and four years old will increase almost 25%.



Overarching Issues

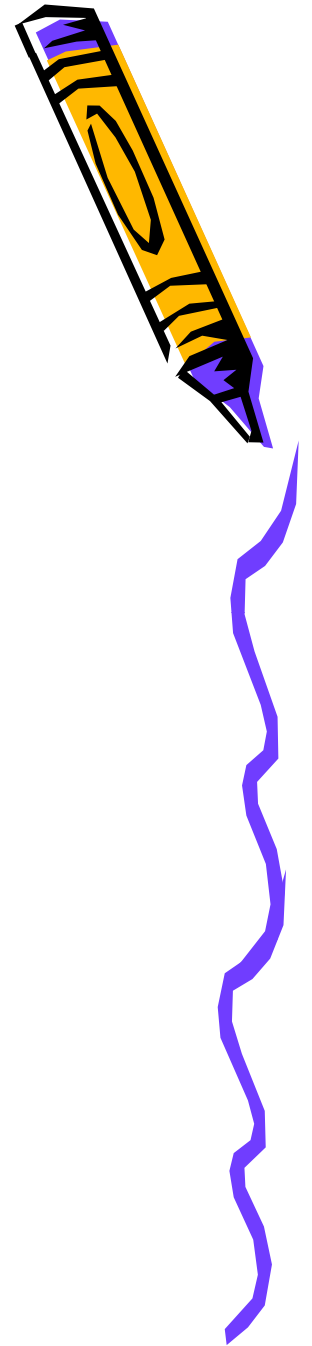
According to *2008 America's Health Rankings*, Nevada dropped to among the 10 unhealthiest states due to low graduation and high crime rates in an annual report issued in December.



Overarching Issues

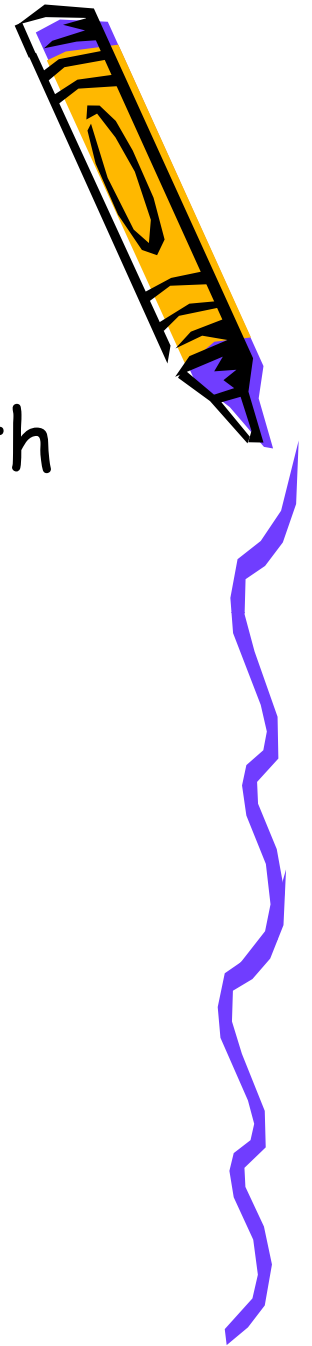
Nevada scored well in some areas:

- low prevalence in obesity, (ranked 13th);
- low levels of air pollution, (14th);
- and a low rate of preventable hospitalizations (13th overall).



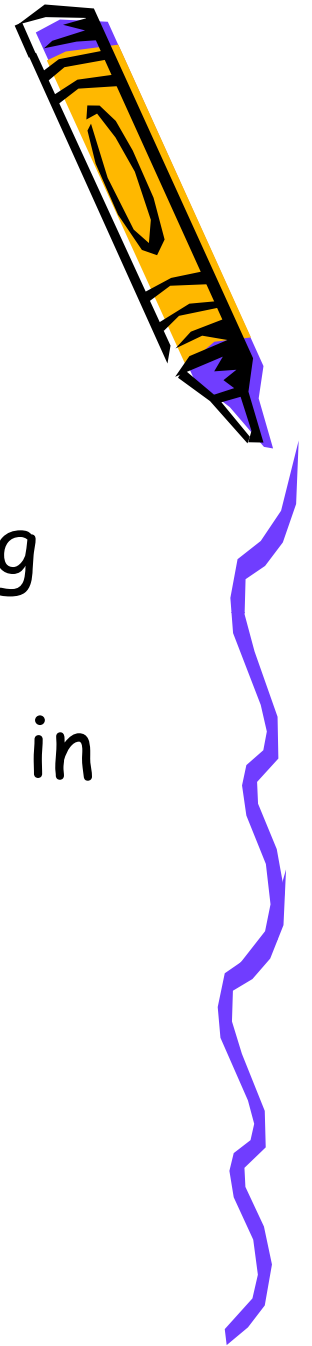
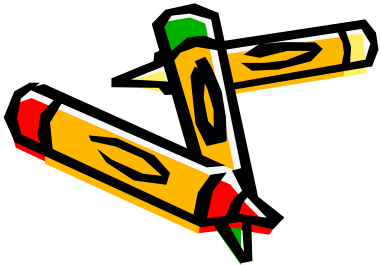
Overarching Issues

Nevada finished at the bottom with low graduation rates and immunization coverage and ranked 48th in violent crimes.



Overarching Issues

Kids Count and Nevada Kids Count, ranked Nevada 36th in 2006 among the 50 states on the overall well-being of children (down from 33rd in 2005).



Overarching Issues

Nevada has never risen above 30th despite high rankings in median family income and relatively low child poverty rates (15.9% according to the US Census).



Overarching Issues

- The Hispanic population is the fastest growing ethnic group in Nevada.
- The Pew Hispanic Center reports Nevada has the 5th highest percentage (24%) of Hispanic residents as a percentage of the state population compared to all 50 states.



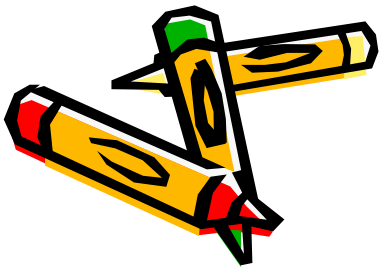
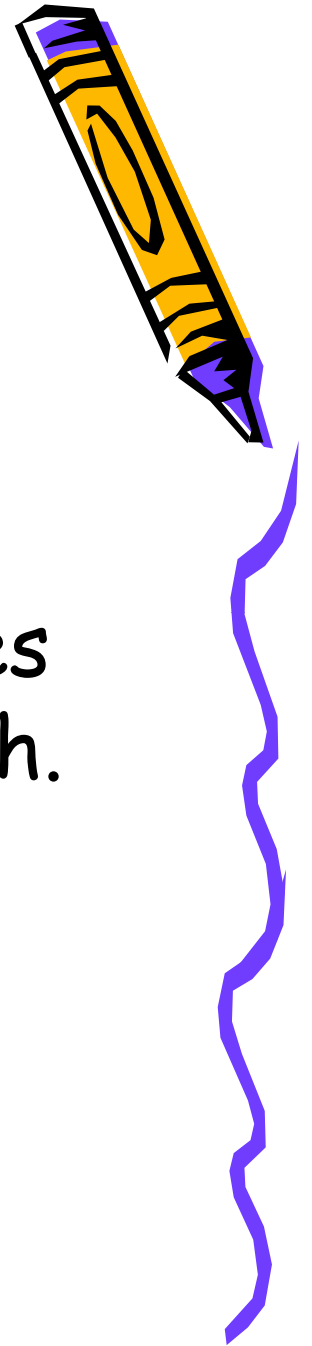
Overarching Issues

- The Center also reports that the Hispanic population 17 years and younger in Nevada is more likely to live in poverty (17%) than their white counterparts. Additionally, 32% of all children enrolled in grades K-12 are Hispanic.



Medical Home/Health

- According to the Kaiser funded website, statehealthfacts.org, Nevada ranks 50th out of 51 states in access to medical and oral health.

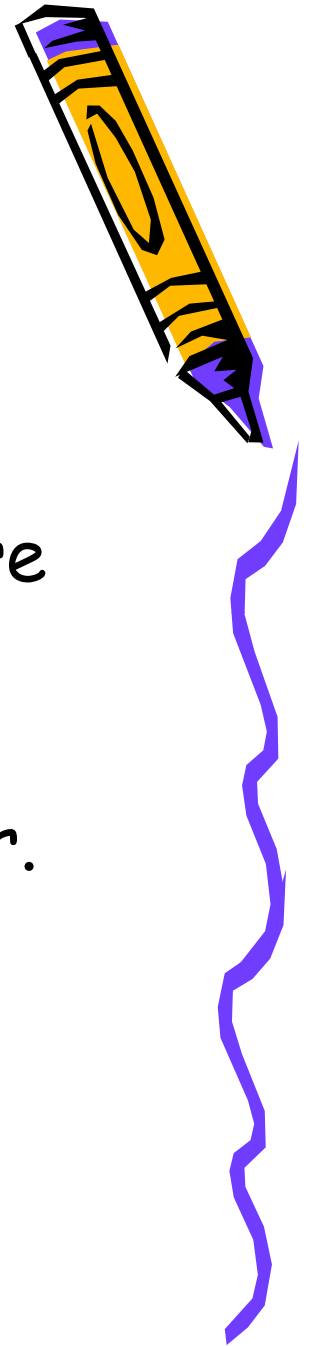


Medical Home/Health

- **Uninsured**

According to the Great Basin Primary Care Association

- Nevada will have as many as 532,000 medically uninsured citizens this year.
- And as many as 614,000 by 2010
(In 2008, Nevada's population was 2.6 mill)



Medical Home/Health

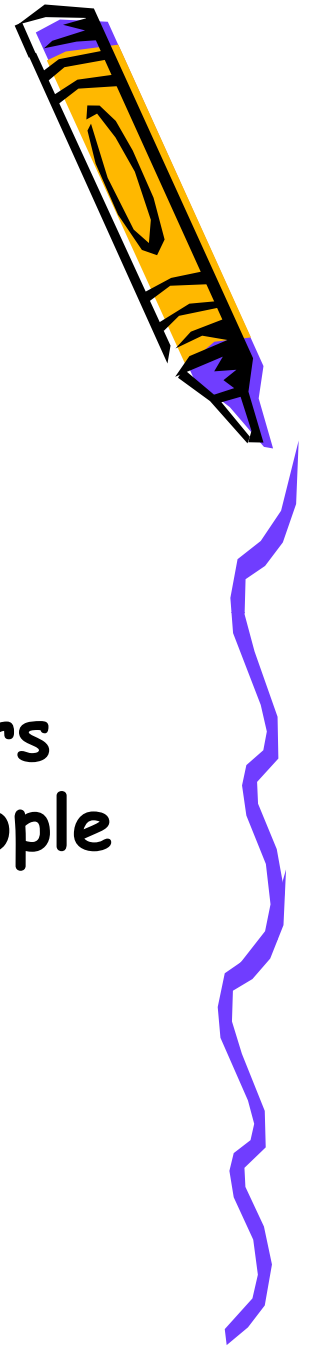
- Lead Blood Levels
 - According to the Environmental Protection Agency, Nevada children have an unusually high percentage of elevated blood lead levels due to non-paint related sources



Medical Home/Health

- Oral Health

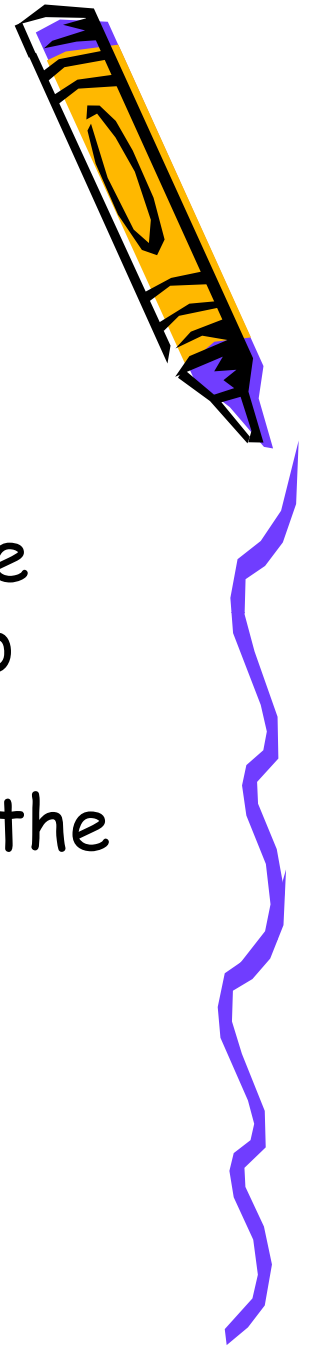
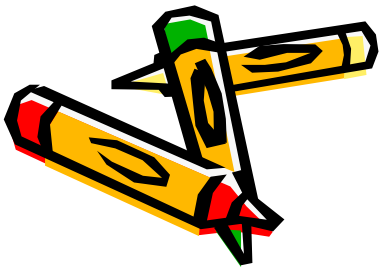
- According to the *Burden of Oral Disease in Nevada 2006*, 54% of children between two and four years old have dental caries. Healthy People 2010 target level is 11%.



Medical Home/Health

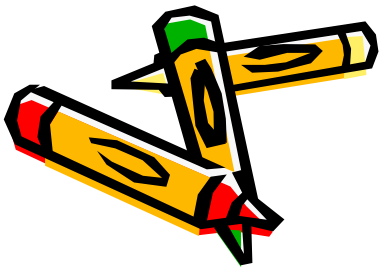
- **Immunizations**

- Only 67% of children have up-to-date immunizations in Nevada according to Kaiser State Health Facts website, making it the lowest ranked state in the nation



Social-Emotional/ Mental Health

According to Kaiser State Health Facts, Nevada ranked 43rd in access to mental health care for children needing it.



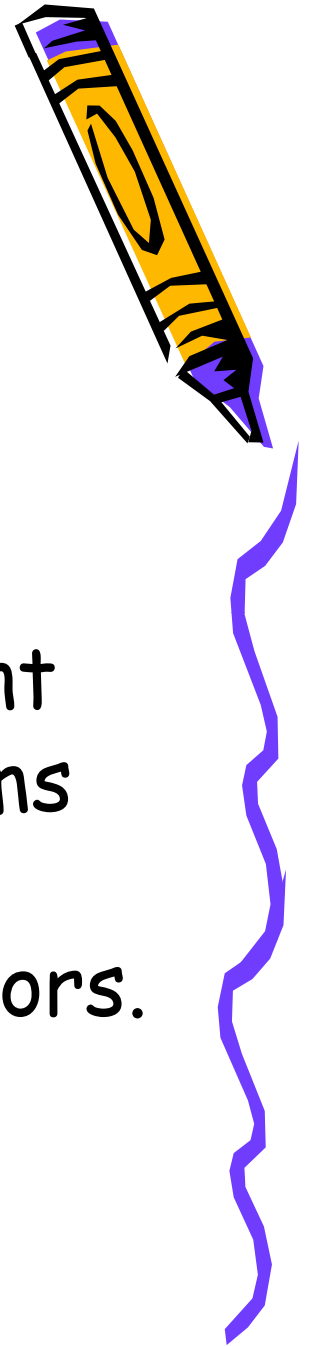
Social-Emotional/ Mental Health

A 2005 study from the Yale Child Study Center found that preschoolers in the United States are three times more likely to be expelled from their classrooms than students in grades K-12.



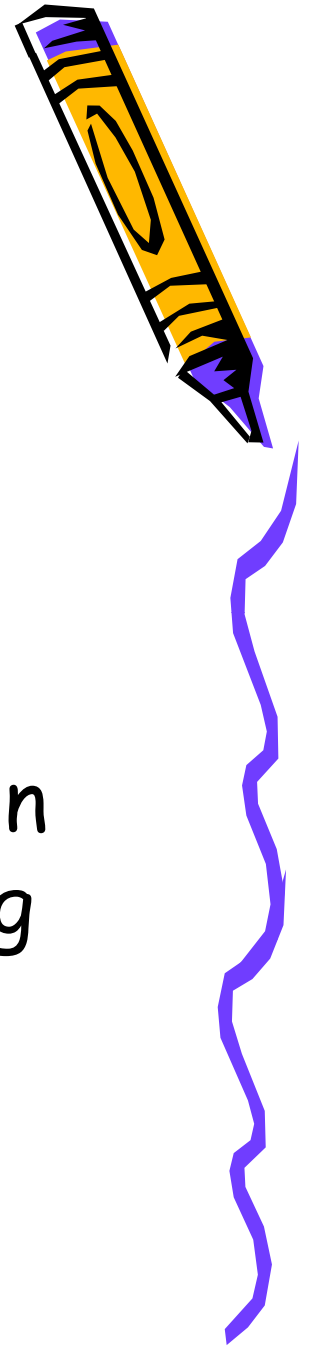
Social-Emotional/ Mental Health

Studies show that preschool teachers at low-income schools report between 15 and 20 percent of the children in their classrooms exhibit clinically high levels of disruptive and challenging behaviors.



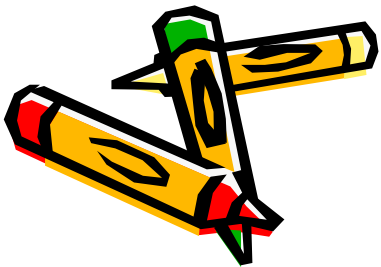
Parent Education

- Nevada has no standardization process for Parent Education
- Advocacy skills are not usually incorporated into parent education for those with typically developing children



Parent Education

There are few to no mechanisms for communication among providers to prevent duplication of services or promote standards and peer learning for Parent Educators. No CEUs or credentials are required.



Family Support

Informal local groups meet regularly to discuss collaboration in some areas. However, local Early Childhood Advisory Councils do not exist and need financial resources to organize



Family Support



Homelessness

- Three Continuum of Care geographic areas exist in Nevada (as defined by HUD). However, there is not a statewide comprehensive plan for assisting them.

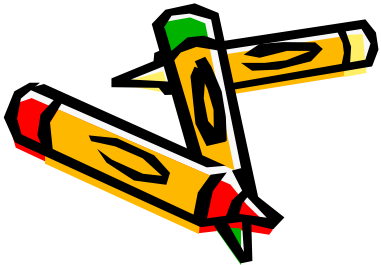


Early Care and Education

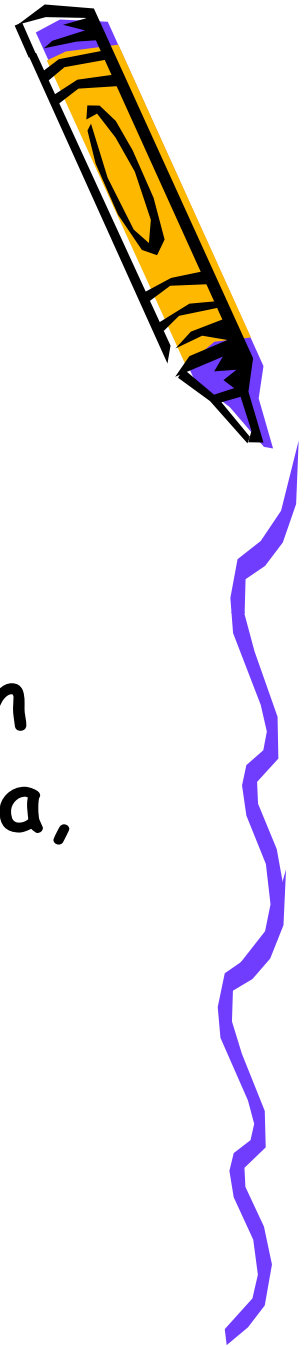


Lack of Licensed Care

- According to the Children's Cabinet, Inc. *2006 Demographics Report Child Care in the State of Nevada*, only enough licensed care spaces are available in Nevada to serve approximately 16% of children in need of care outside of their home.



Early Care and Education



Lack of Licensed Care

- The study also found that no licensed child care is available in four counties (Esmeralda, Eureka, Lincoln, and Mineral).

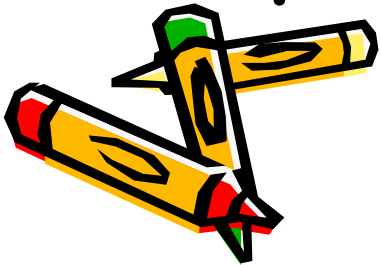


Early Care and Education



Early Intervention Services Waiting List

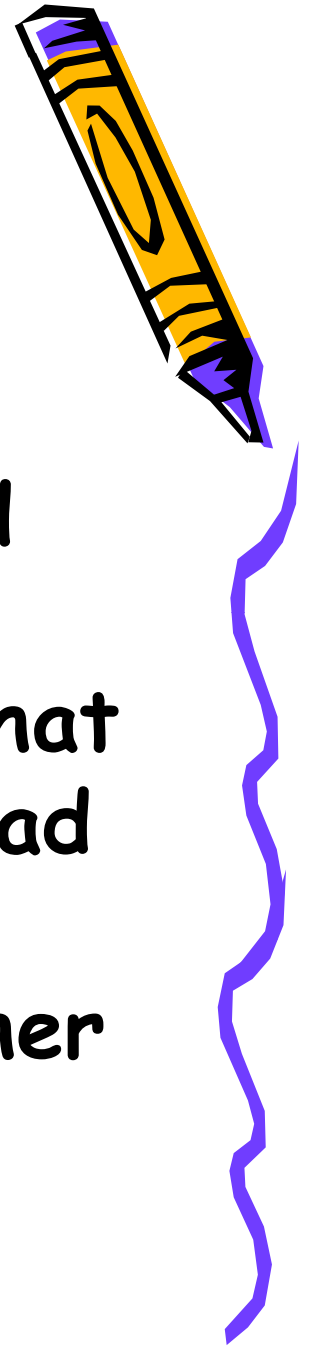
- Nevada's Early Intervention Services (NEIS) may be forced to place children on a waiting list due to lack of funding to support the program.



Early Care and Education

English Language Learners

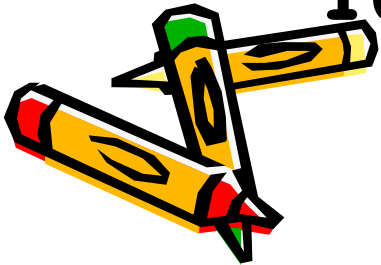
- During fiscal year 2006, Head Start Program Information Report (PIR) Data indicated that 46% of children served by Head Start and Early Head Start programs spoke a language other than English at home.



Early Care and Education

English Language Learners

- Between 2005 and 2007, the percentage of students who were identified as English Language Learners (ELL) in Nevada by the Department of Education in all schools increased to 23% from 16%.



Early Care and Education



Quality of Care

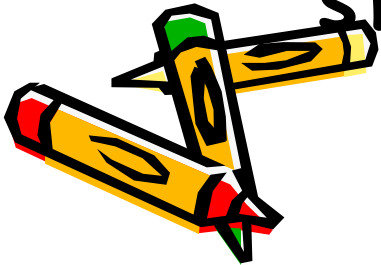
- As of 2006, just 13% of eligible children in Nevada were being served by Head Start programs, and only 3% of eligible children were being served by Early Head Start programs.



Early Care and Education

Quality of Care

- Just 3% of preschool age children are currently served by state funded preschool programs
- Only 30 licensed child care facilities are NAEYC accredited statewide.



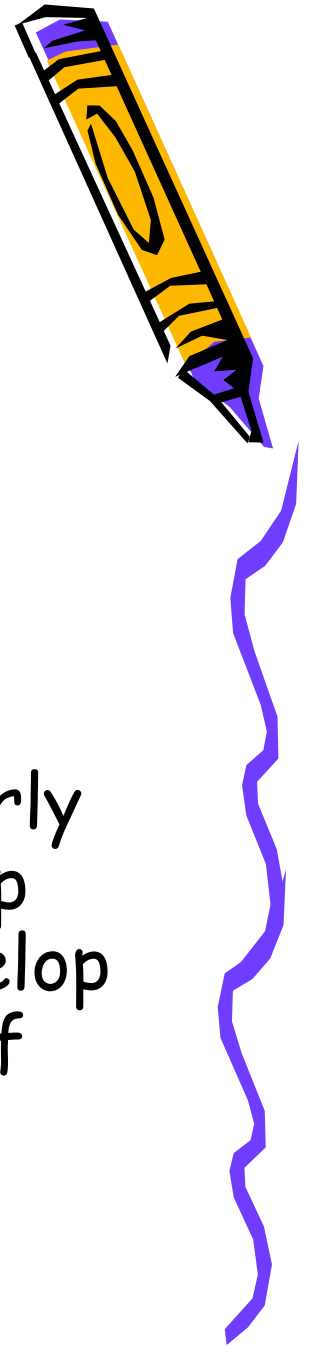
The Biggest Challenge

- More needs exist than can be addressed in the next three year period by the Nevada ECCS project.



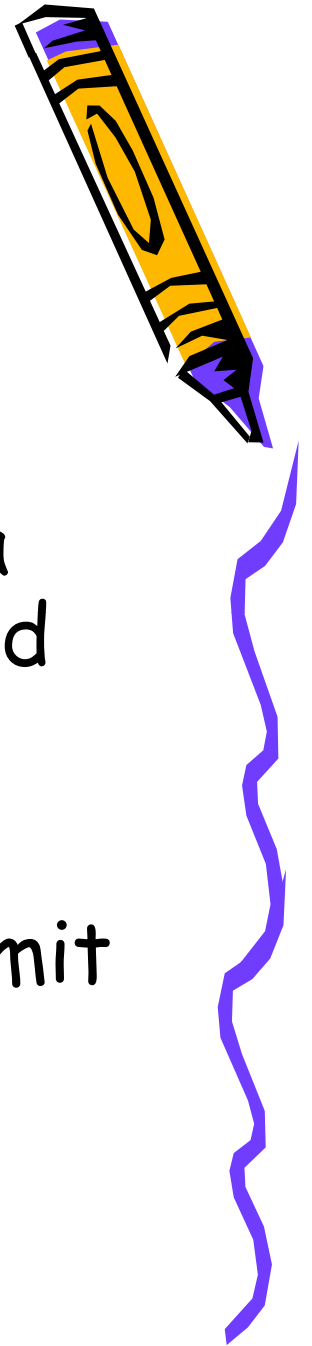
Priorities for ECCS funding include:

- Investing in a Child Care Health Consultation model for Nevada
- Funding the development of a State Early Childhood Council and providing start-up sub-grants to local communities to develop Early Childhood Councils (3 each year of the grant)



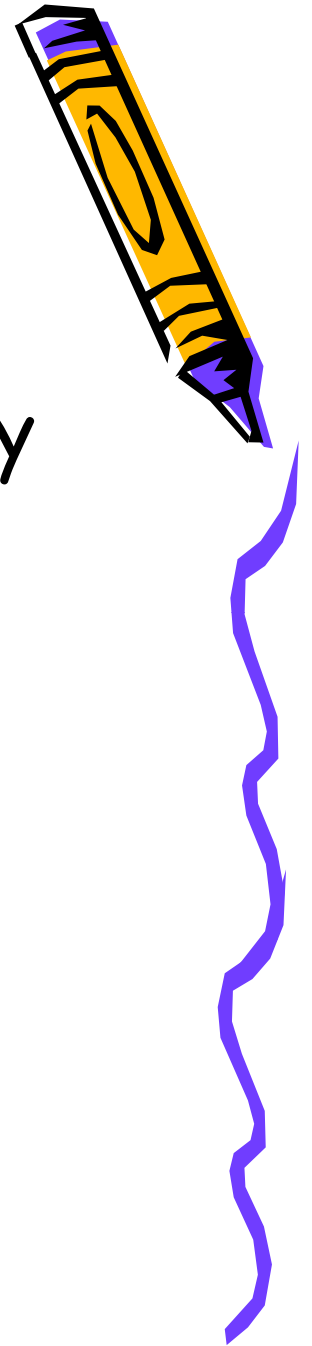
Priorities for ECCS funding include:

- Investing in development of a data tracking system for early childhood statistics
- Partially funding an Economic Summit on Early Childhood Investment



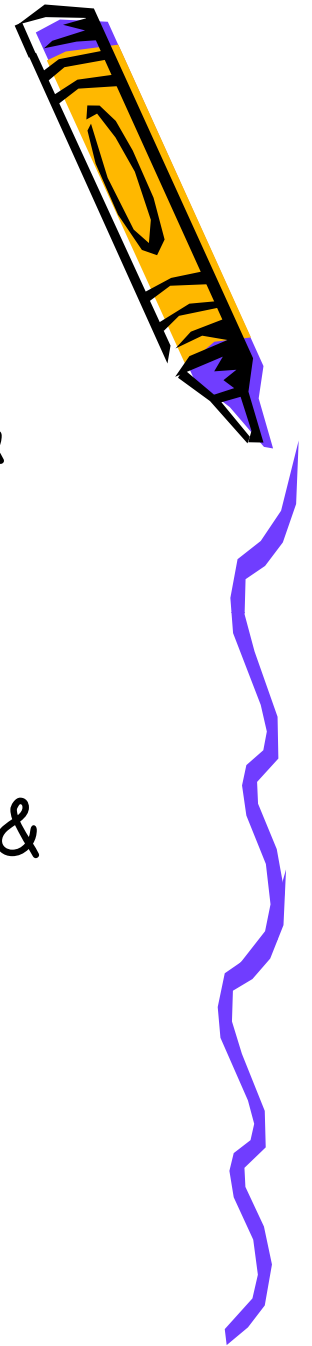
ECCS Goals

- All children are kindergarten ready by NDE age standard
- All children have access to early childhood services that are accredited or meet national standards



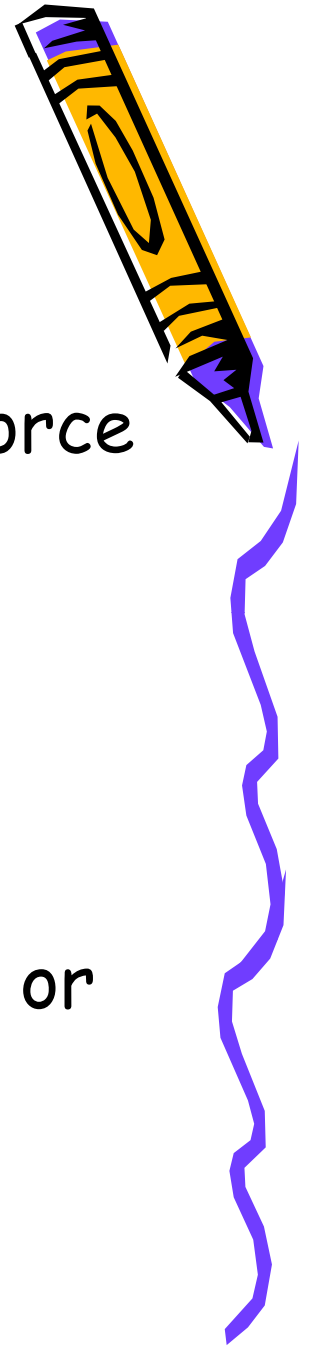
ECCS Goals

- Children have access to medical home & health insurance
- Social, emotional, mental health and developmental needs of young children & their families are supported by community-based services



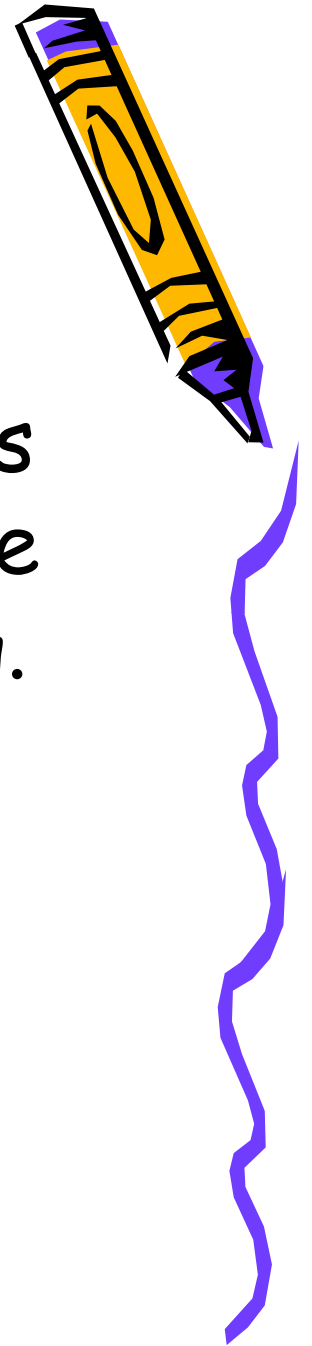
ECCS Goals

- Early childhood service provider workforce stabilizes
- Parents know child development
- Parents know what to expect from programs & advocate for their children or self



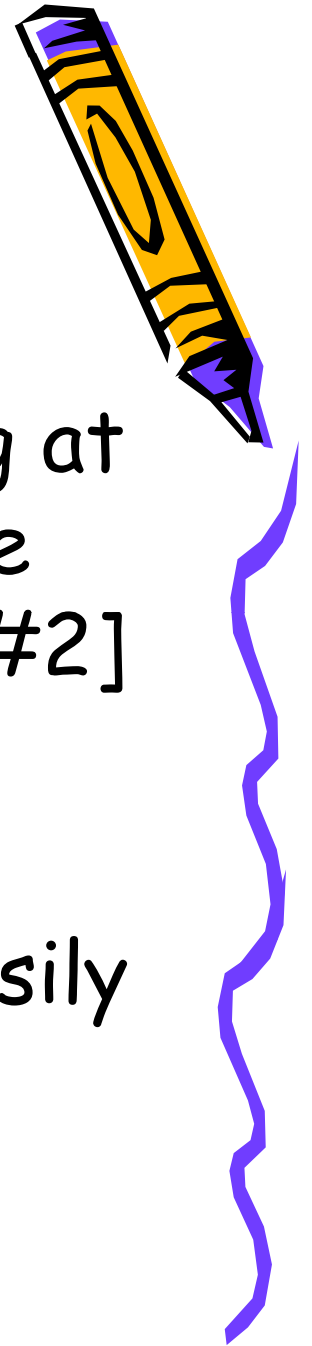
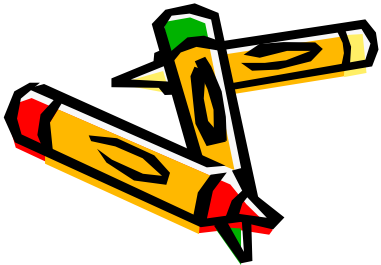
ECCS Goals

- Early childhood workforce receives professional development to ensure quality services for all children e.g. mental health, disabilities, etc.



ECCS Goals (2 MCH)

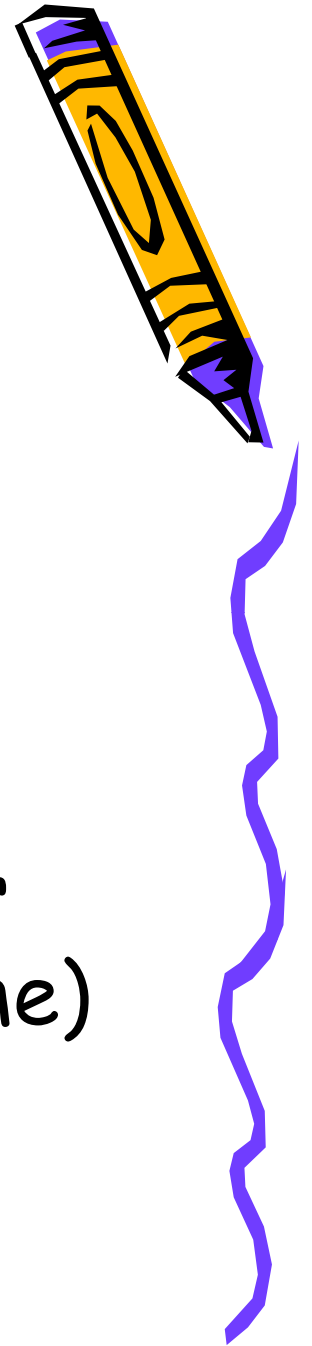
- Families partner in decision making at all levels and are satisfied with the services they receive [MCH NPM #2]
- More families report that community-based services are organized so they can use them easily [MCH NPM #5]



Activities Across Five Critical Components

Medical Home/Health

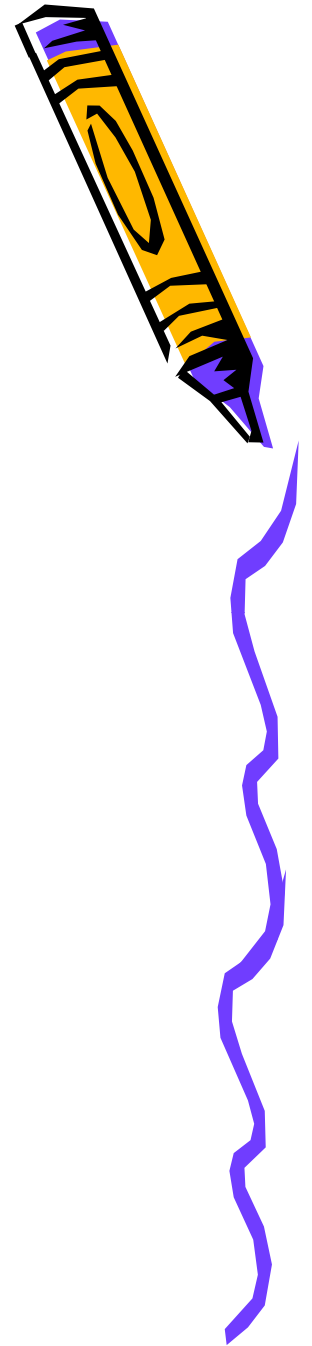
- Support continued development of pilot CCHC project and statewide expansion
- Support and promote campaign for family-centered care (medical home)



Activities Across Five Critical Components

Medical Home/Health

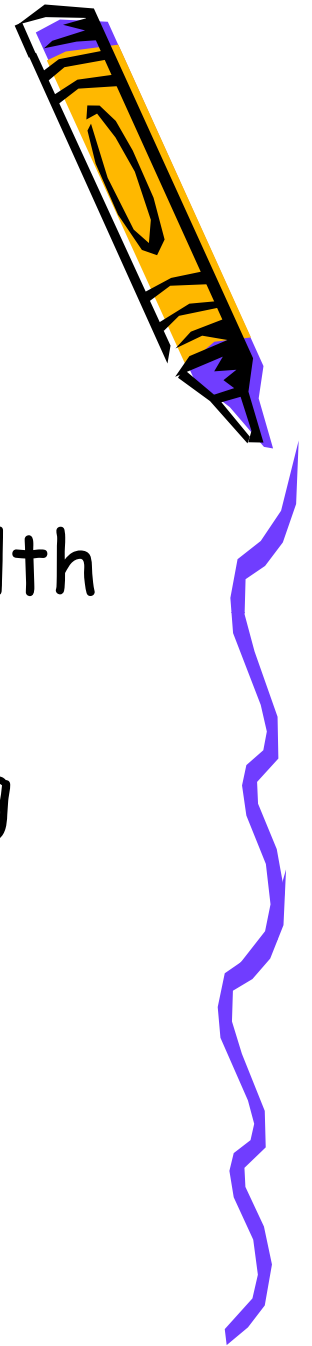
- Support work of Statewide Lead Screening Planning group
- Promote and expand Parent Leadership and Advocacy training based on our Nevada "Partners in Policy Making" course



Activities Across Five Critical Components

Medical Home/Health

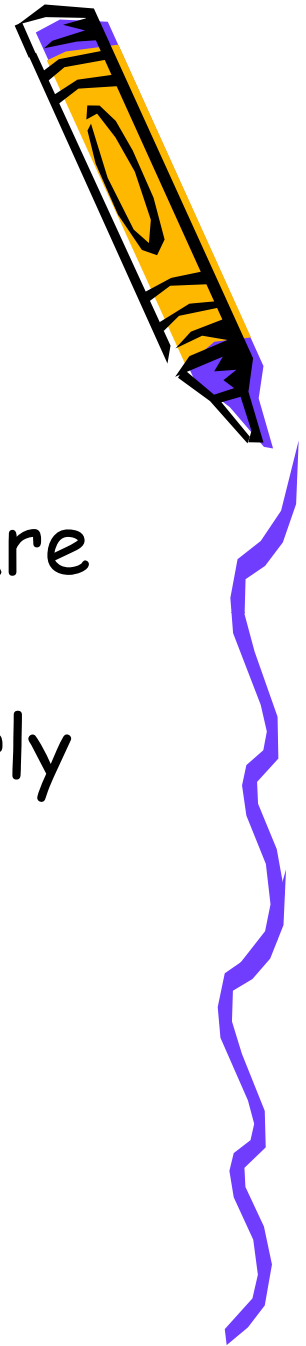
- Assist with Immunization and Health Conference September 2009
- Support and Promote home visiting programs



Activities Across Five Critical Components

Social and Emotional/Mental Health

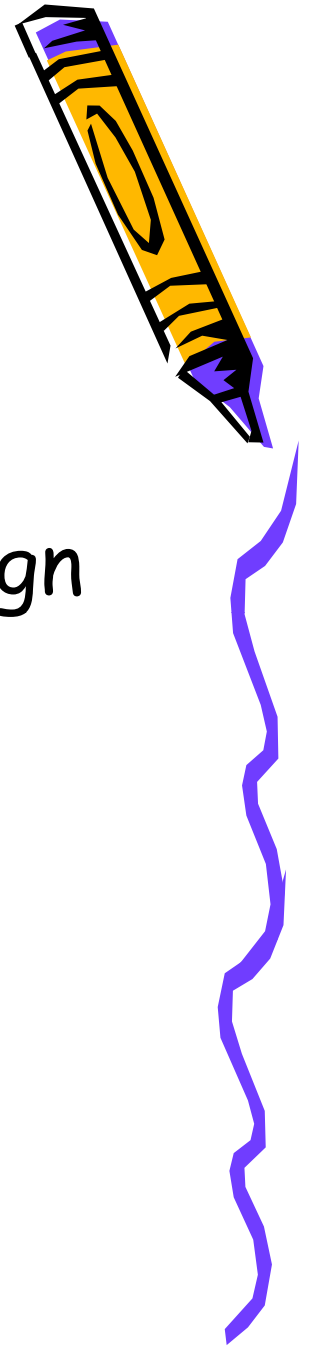
- Integrate EC SE/MH into Child Care Health Consultation and training
- Develop trainings on SE/MH in early childhood for both parents and providers



Activities Across Five Critical Components

Social and Emotional/Mental Health

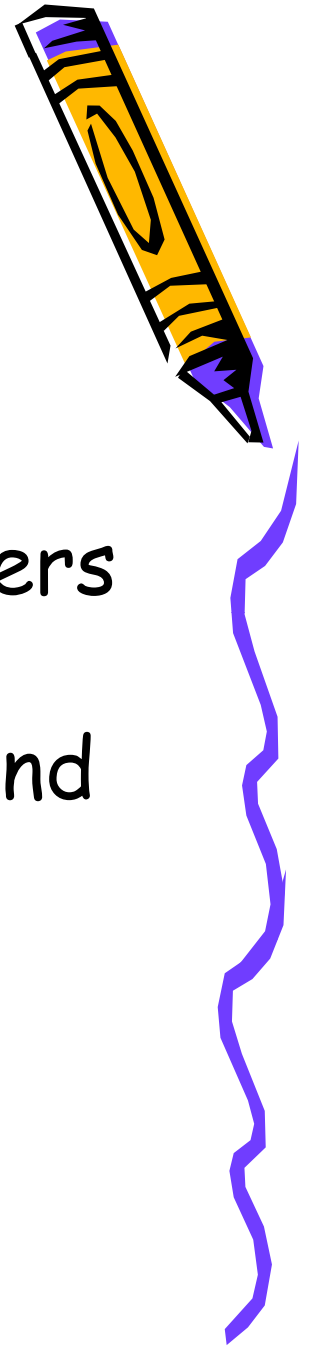
- Develop a public awareness campaign to increase knowledge about importance of child development SE/MH and issues



Activities Across Five Critical Components

Social and Emotional/Mental Health

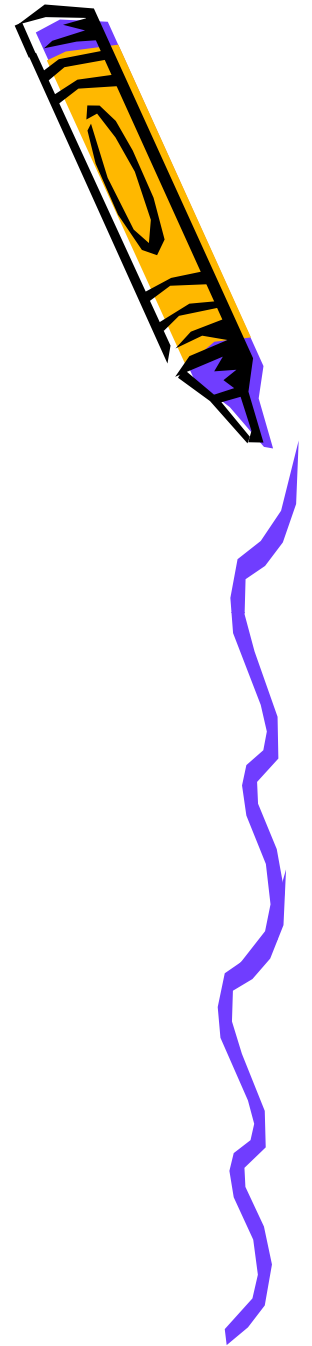
- Convene EC SE/MH service providers to build awareness of each other's programs, exchange information, and reduce duplication of services



Activities Across Five Critical Components

Parent Education

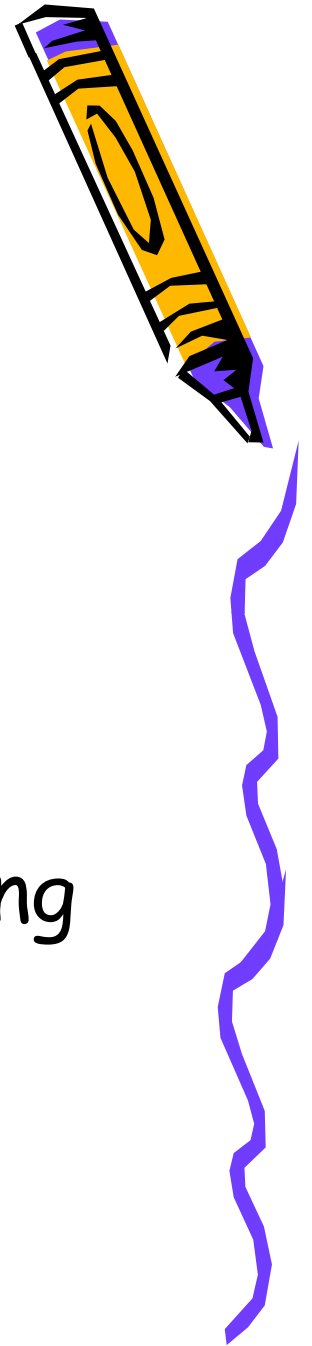
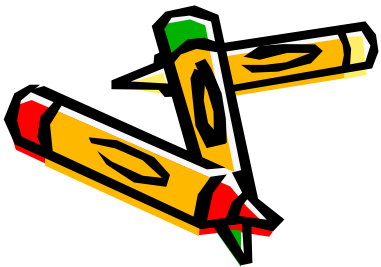
- Convene parent educators
- Promote and expand Parent Leadership and Advocacy training based on our Nevada "Partners in Policy Making" course



Activities Across Five Critical Components

Parent Education

- Create opportunities to integrate advocacy training into parent education
- Incorporate advocacy into parenting resources



Activities Across Five Critical Components



Parent Education

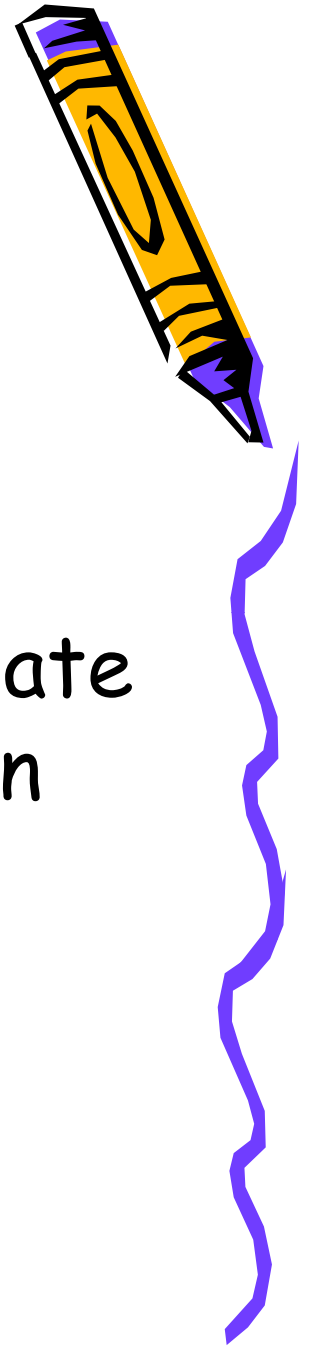
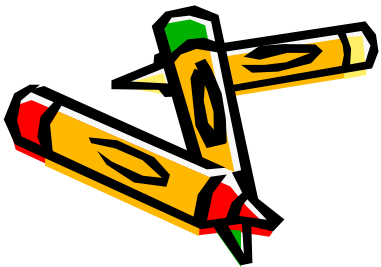
- Identify parent leadership training (what's out there, what needs to be developed; identify and support or develop community partnerships)
- Build on existing resources (e.g., PTA, EIS, PEP, etc.)



Activities Across Five Critical Components

Parent Education

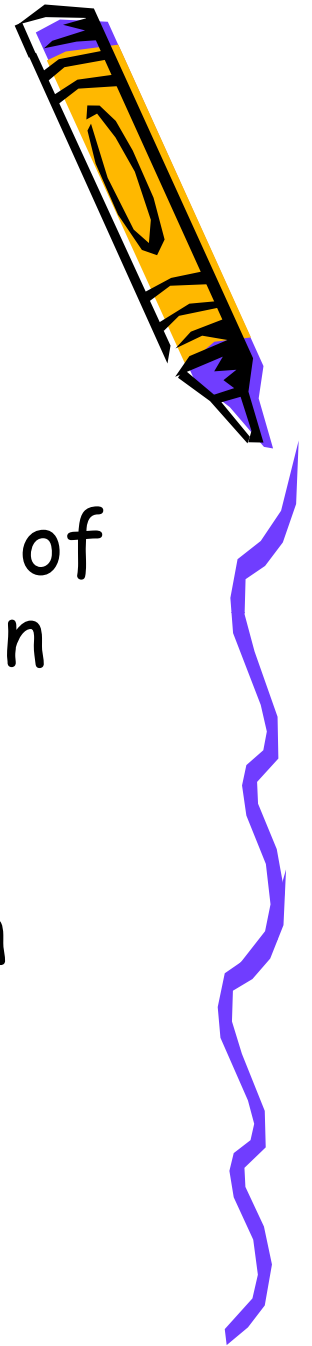
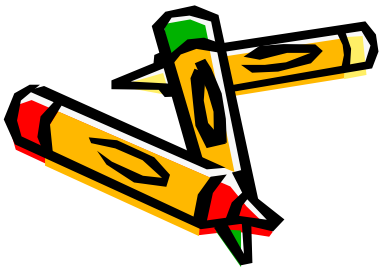
- Enable, encourage, and provide opportunities for parents to advocate for children and families (their own and on behalf of the community)



Activities Across Five Critical Components

Family Support

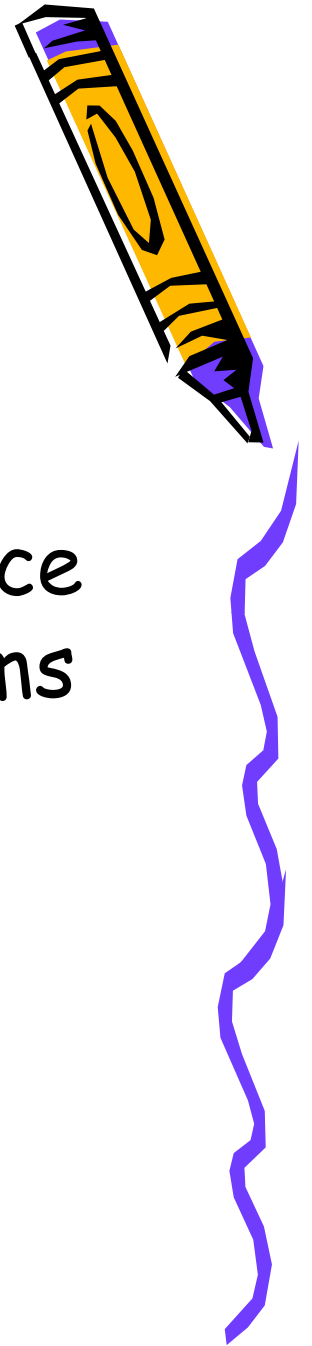
- Support and promote development of CCHC pilot and statewide expansion
- Promote Quality Rating and Improvement System for licensed early childhood care and education providers



Activities Across Five Critical Components

Family Support

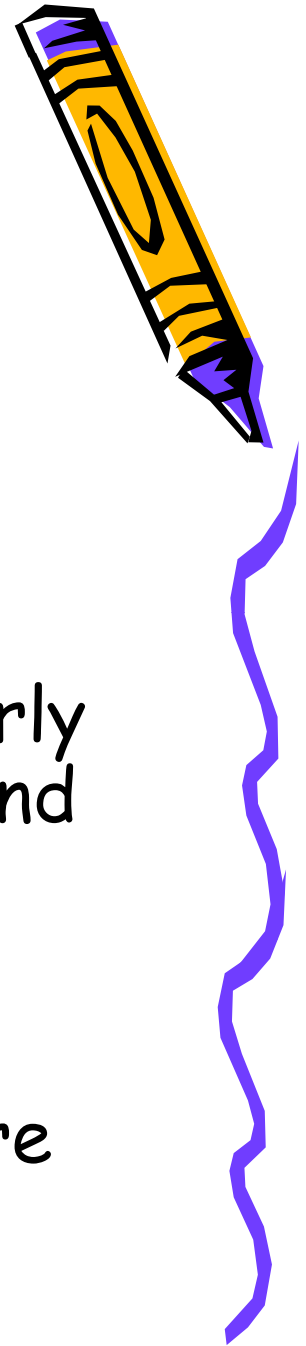
- Promote partnerships across service sectors with family support systems like 2-1-1, CCR&R, crisis support services, and others



Activities Across Five Critical Components

Early Care and Education

- Identify early care and education data sources
- Confirm structure, plan, supports of early childhood council to include providers and consumers of early care and education services
- Secure partners and develop public awareness campaign regarding early care and education quality in Nevada



Activities Across Five Critical Components

Early Care and Education

- Promote professional development programs available for providers by including in meetings and information dissemination
- Support development of a Quality Rating and Improvement System (plan for Nevada's Silver State Stars QRIS is underway)

