

Idaho's Plan:

Building the Future for Early Care and Learning

September 2005 - August 2008





DIRK KEMPTHORNE
GOVERNOR

On behalf of Idaho, I want to underscore my appreciation for the hundreds of task force members, stakeholders and partners that helped develop this unique and comprehensive state-systems plan. It will undoubtedly benefit all Idaho's families for many years to come, especially those with children between the ages of birth and eight.

Idaho has a multitude of stellar efforts, initiatives, projects and services that are designed to help people thrive. But there has been a gap between the coordination of the complex "systems" that serve Idaho's families and the communities they live in. I asked the task force to develop a plan to help fill the gap to better coordinate the resources, skills and expertise in communities across the state.

Now that we have this plan, I'd like to request your help to implement it in the following ways:

- Promote and adopt the ten "shared goals." They serve as the foundation upon which every community and the state can build a solid foundation for early childhood initiatives.
- Advocate for the shared goals, outcomes and strategies to become part of your organization's strategic plans or other planning documents.
- Network with others with a similar passion for families.

This plan would not be a reality if it weren't for the support and leadership of the First Lady of Idaho, Patricia Kempthorne, as well as task force co-chairs Gregory Culet and Susan Piper-Gray.

Idaho is a great place to live and raise a family, especially when all the children in those families are healthy, nurtured by their families, friends and neighbors, and are supported in their communities.

Sincerely,

A handwritten signature in black ink, appearing to read "Dirk Kempthorne".

DIRK KEMPTHORNE
Governor

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Executive Summary

The Idaho Early Care and Learning State Systems Plan provides the rationale and method for coordinating and improving the delivery of critical services and networks of support for children and their families. It also provides the road map to integrate the services and supports into effective, responsive systems. Families of young children need a system that responds to their needs because:

- Idaho has one of the fastest growing populations of young children in the nation (Idaho Kids Count, Idaho Works if Child Care Works)
- Sixty percent of Idaho women in the workforce have children under the age of six (Idaho Kids Count, Idaho Works if Child Care Works.)
- Most of these children require some form of child care during the time their mother works, yet quality child care options are severely limited in many areas of the state (Idaho Kids Count, Idaho Works if Child Care Works)
- Only 50% of Idaho children entering kindergarten are fully prepared (Idaho Department of Education, Idaho Reading Indicators, Fall 2004)
- Only 23% of Migrant Children are prepared for kindergarten (Idaho Department of Education, Idaho Reading Indicators, Fall 2004)
- 19.3% of children under age five live in poverty (Idaho Kids Count)
- Only 15.3% of children from birth to 12 months have developmental tracking services (Idaho Infant Toddler Program)
- Idaho children are less likely to have a medical home than children living elsewhere (MCH internal and external scan 2005)
- Services for children and families in Idaho vary based on geographical location (MCH internal and external scan 2005)
- Failure to identify and address developmental problems in the early years imposes significant costs, including remediation (e.g., \$30,000 to \$100,000 per child, much of which is taken out of education budgets (James Heckman, *Invest in the Very Young*)
- It's more cost effective for families, the community and government to invest in healthy child development than to treat problems later in life (James Heckman, *Invest in the Very Young*)
- Success in a modern economy starts at birth not at the school doors (Shonkoff & Phillips. *Neurons to Neighborhoods*)
- Long before children enter school they have learned how to learn, in fact, all children are born wired for feelings and ready to learn (Shonkoff & Phillips. *Neurons to Neighborhoods*)

Why Should We Care?

All of the above factors impact children, families, communities and the state. The impact begins with remedial services when children enter school. The cost is evident when examining the school drop-out rate and the juvenile justice system. The impact is tremendous on our skilled workforce and higher education preparedness.

Basic Building Blocks: Do We Know What All Young Children Need?

Every child's early development depends on the health and well being of parents, caregivers and the systems that sustain healthy communities. Many of Idaho's families are struggling with the effects of poverty, untreated family mental health problems, recurring exposure to violence, and substance abuse.

Every child needs structured, dependable, nurturing relationships with parents and other caregivers.

Every child needs a family with adequate resources to provide a safe, nurturing environment which meets physical, emotional, and educational needs.

Every child needs health care, developmental, and education services delivered by people who can identify potential risks and address potential problems at the earliest possible time, when intervention is most effective.

How Can We Maximize The Benefit for Children By Maximizing The Support for Families and Communities ?

Families are the cornerstone of humanity and the basic building blocks of our communities. They are currently one of the most fragile organizations as evidenced by the fact that over half of marriages in America end in divorce, with significant impact on children. Couple the effects of divorce with the fact that most adults have no formal education in parenting, yet are responsible for caring for the most vulnerable and impressionable segment of the population, and we increase the risks for healthy families.

Idaho's families come in many varieties, sizes, cultures, backgrounds and religions, but they have one thing in common—their children all require a set of basic building blocks in order to develop well. The building blocks all children need often cannot be provided exclusively by their parents during the critical first years of their lives. Parents need a system of support including grandparents, other extended family, neighbors, friends, faith communities, caregivers and the community. While the general perception is that most of Idaho's early care and learning services are targeted at children from a lower socio-economic status, the truth is **all** children benefit from the services and programs offered in communities across the state.

Just as a family needs a support system, so do the communities and local organizations that serve them. State organizations, business and corporate partners, governmental agencies, as well as faith-based and community organizations are critical players in the network that supports families both at the state and local level. They are all players in a system that provides services to families and children, but the missing link has been a common plan with a shared set of goals, outcomes and strategies for attaining those outcomes.

Why Does Idaho Need to Invest In Early Care and Learning?

Early care and learning services and programs in communities across the state have had a positive impact on Idaho's families. They are well-established, but rarely receive adequate financial support or the political clout needed to provide services and supports for vulnerable families. This systems initiative is focused on supporting parents and strengthening efforts to help children become healthier and well prepared to enter the school system and lead productive lives. But essential elements which enable this work are missing, specifically statewide coordination of the infrastructure which is the foundation of the "system" for early care and learning.

Governor and Mrs. Kempthorne have provided foundational support for many early care and learning initiatives over the years, including establishment of the **Early Care and Learning Cross Systems Task Force (ECLCSTF)** by Executive Order in 2003. The work of the ECLCSTF builds on the recommendations of the 2000 Early Learning Legislative Task Force, the summary from the Northwest Early Learning Summit in June 2002, and the final report from the Early Learning Subcommittee of the Governor's Coordinating Council for Families and Children in 2002. These three reports, as well as reports from other organizations, including the new National Governor's Association Report *Building the Foundation for Bright Futures*, substantiate the need for coordination and collaboration across all systems that serve young children and their families. Also see page 3 for *Strategies to Improve School Readiness Trajectories*.

Planning Process

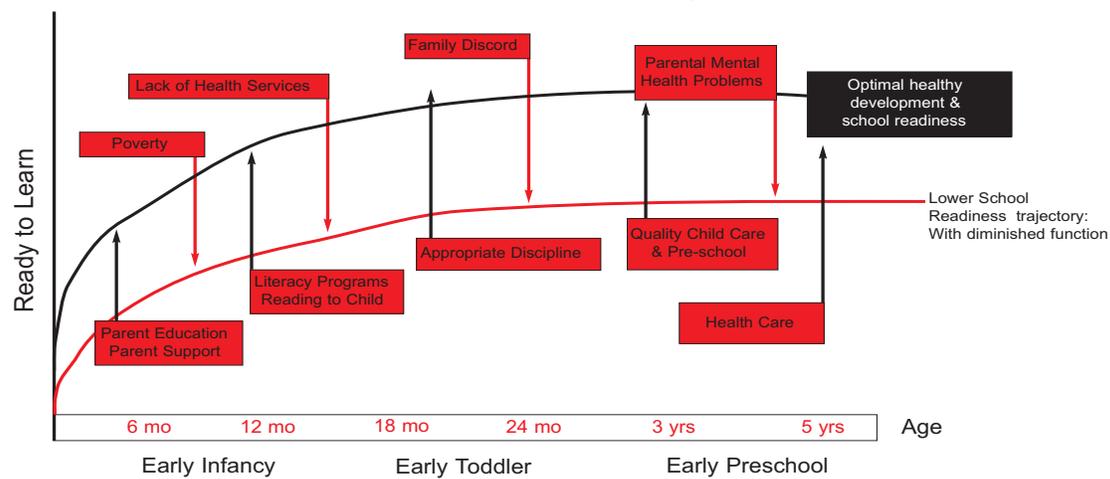
Purpose

The Governor authorized the ECLCSTF to develop a comprehensive state systems plan based on the essential building blocks for optimizing the development of young children. The Task Force developed this plan based on "shared goals" that **all** citizens can implement for the betterment of **all** young children.

Members

Over forty of Idaho's best experts, champions and leaders volunteered thousands of hours over the past two years to develop a plan that has broad buy-in and investment from a variety of stakeholders, including families with young children, professors, healthcare professionals, clergy, parent educators, judicial representatives, business persons, public health staff, legislators, law enforcement, child care providers and elementary school teachers.

Strategies to Improve School Readiness Trajectories



In order to manage the process, the task force membership was limited. Knowing the success of the implementation plan would depend on broad ownership, long-term commitment, and buy-in by many organizations serving young families, the task force utilized a participatory process which gathered input from over 1,000 citizens.

The official planning process began in August 2003 and concluded in May 2005; however, preliminary work started in October 2002. The Office of the Governor took the lead in convening, facilitating and managing the work of the task force. A grant from the Health Resources and Services Administration’s Bureau of Maternal Child Health provided the funding for the planning process. The planning process was marked with some of the following accomplishments:

October 2003, the vision, mission, guiding principles, organizational structure, quarterly meeting dates and identification of existing efforts, funding streams, communication outlets, and other pertinent information was determined.

January 2004, a model developed by the Johns Hopkins School of Public Health served as the springboard for work by the task force and its four subcommittees.

April 2004, the framework of the plan was developed, as well as the language of the “Shared Goals.”

July 2004, the survey was developed and tested prior to implementation on the Web and in the regional areas.

January 2005, the task force invited all potential partners and lead agency representatives to review the work to date and many committed to assist with plan implementation.

May 2005, the Early Care and Learning Cross Systems implementation grant was written and submitted.

For more information on the work of the Early Care and Learning Cross Systems Task Force visit <http://www.gccfc.idaho.gov/ECLCSTF.html> .

Is Early Childhood Progressing and Changing in Idaho?

In stating our current needs for young children and their families in Idaho, it is also important to look at the strengths and progress toward child well-being. Over the past four to five years, significant changes have occurred that will have long-term impact on a generation of children. Some of those changes are listed below:

- 188 slots for Head Start were added with Temporary Assistance for Needy Families (TANF) dollars in 1999 (MCH External Scan 2005)
- 9% increase in immunized two year olds (Idaho Kids Count)
- 119,009 children are enrolled in CHIP compared to 54,824 in 1999 (Covering Kids and Families)
- 3,076 children were served by the Infant Toddler Program in 2004 compared to 2,101 in 1999 (ITP 2005)
- Over half of all third graders received dental sealants in 2001 (MCH External Scan 2005)
- Every birthing hospital in Idaho participates in Newborn Hearing Screening (Sound Beginnings, 2003)
- 97% of all newborns are screened at birth for hearing difficulties (EHDI 2003)
- An incentivized early childhood professional development system started in 2004 to encourage voluntary education and training (IdahoSTARS)
- 37 Parents As Teachers Programs across the state served 1,756 families and a total of 3,167 children through home visiting and parent group activities (Parents As Teachers, 2004)
- An Early Childhood, Early Childhood Special Education Blended Certificate is available for teachers (blending early childhood and early childhood special education from birth to third grade (Idaho Early Childhood Clearinghouse, 2005)
- \$749,726 in grant dollars have been distributed across the state to encourage and support community collaboration that will benefit children and families (Generation of the Child, 2005)

Plan Development

The Early Care and Learning Comprehensive Systems Plan is designed to connect all stake-holders that serve families of young children at the state and local levels. This plan is based on *focus areas*, *guiding principles*, and *shared goals* along with outcomes, indicators and strategies to guide implementation.

The comprehensive plan was developed with the support and leadership of the Office of the Governor along with parents, service providers, legislators, health care professionals, parent educators, businesses, state and regional representatives and faith-based organizations. Regional forums and a web-based survey provided input from over 1,000 people across the state. Detailed information regarding the regional forums and web-based survey may be found in the appendices.

What are Idaho's Early Care and Learning Focus Areas?

Six focus areas were used as the basis to develop the goals for the Idaho Early Care and Learning Plan. Those areas are:

- Health Care (HC)
- Mental Health and Social& Emotional Development (SE)
- Early Care and Learning (ECL)
- Parent Education (PE)
- Family Support and Self Sufficiency (FS)
- Comprehensive Systems (CS)

What are Idaho's Guiding Principles ?

The following principles helped guide the development of the plan and are viewed as essential implementation:

Quality Matters: Children benefit when social, physical, emotional, educational and home environments are enriched with access to quality child care, appropriate community structures and policies that are reinforced at the state level.

Relationships Matter: Children benefit when positive relationships are developed and everyone works together, at all levels of government and in their communities.

Resources Matter: Children benefit when we focus on improving the resource base for families and communities, specifically the resources that support early childhood systems including the financial and organizational structures.

Results Matter: Children and families benefit when resources are utilized on research and best practice models.

How are the Shared Goals Addressed in the Plan?

The ten "Shared Goals" were developed with the positive end results in mind. Each of the following goals will be addressed in the plan with specific activities and indicators to assure successful completion. The goals are as follows:

1. Families of young children have a regular health care provider that oversees their health care and refers them to other services and resources as needed (medical home).
2. All children receive appropriate health-related services for optimal health and development.
3. Families of young children have access to social and emotional screening, and when needed, assessment and age-appropriate follow-up care.
4. Young children have access to high quality child care, when needed.
5. Young children access early learning opportunities to support school readiness and their optimal development.
6. Families and caregivers of young children have access to information, resources and support to help them raise healthy, strong children.
7. Parents and caregivers meet the basic needs of children.
8. Families, communities, businesses and the state work together to establish strategies and procedures that support families of young children.
9. Assure linkages and coordination among providers and programs that serve families of young children.
10. Establish and use outcomes and indicators to assess and monitor changes in the health and well-being of families of young children.

One of the tasks undertaken by the ECLCSTF was to develop a vision and mission statement to drive the plan and implementation phases. Each statement, carefully thought out, is sensitive to the values of Idaho's families and citizens.

Vision:

All Idaho's Young children are healthy, nurtured by families with quality learning opportunities, and supported by community resources.

Mission:

To ensure the well being of all Idaho's young children by establishing a statewide framework to strengthen families and support community based early care and learning.

Current funding to coordinate implementation of this plan is provided by the Maternal-Child Health Bureau. Additional resources will be needed in order to fully implement this plan.

Focus Area: Health Care (HC)

Why is Health Care Important?

Most parents have spent time cradling their sick or injured child and have experienced the feeling of helplessness that accompanies these events. For parents with the economic means, including health insurance, these incidents are a bump in the road; for others a single significant injury or prolonged illness could mean bankruptcy. In a recent report by the Covering Kids and Families Project the number one reason for personal bankruptcy is the lack of adequate health insurance.

Ideally every child should have a single place that takes responsibility for overseeing and coordinating their health and development -- a **medical home**. Parents rank health care providers high on a list of those they respect and listen to, and look to their physician to provide them with guidance on child development topics in addition to immunizations, well-baby check-ups and health issues.

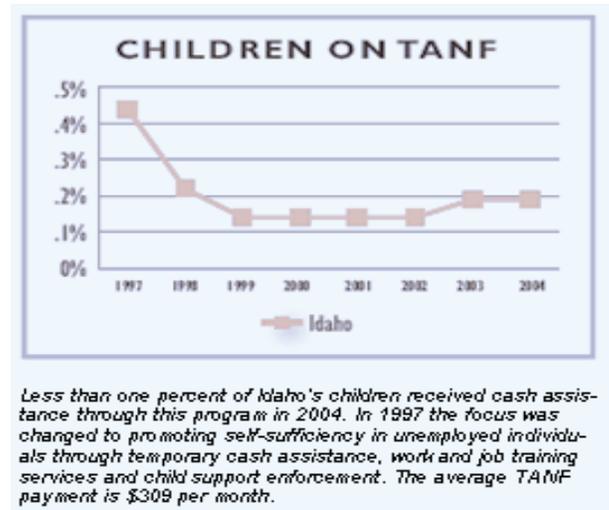
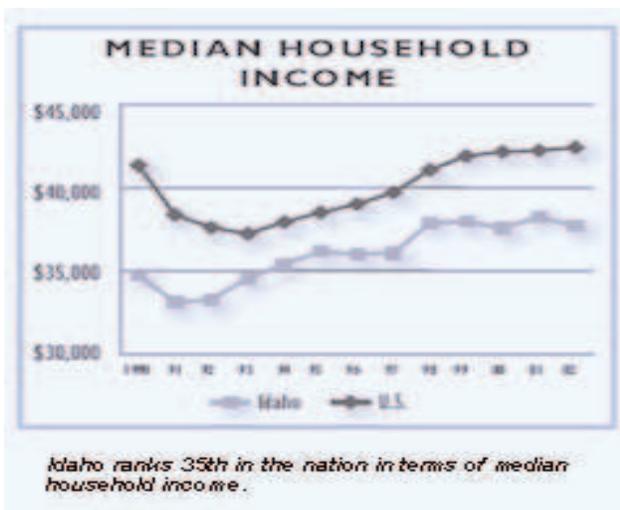
In Idaho a dramatic paradigm shift needs to occur to reduce the number of health care related barriers, addressing the health insurance gap for poor working families, early diagnosis of developmental delays, and the delivery of health care, dental care, and mental health services to rural and frontier communities.

As shown in the graph below, less than one percent of Idaho's children received cash assistance through the TANF program in 2004. The average TANF payment is \$309 per month.

The health care focus area addresses both the issues of access to medical care including the availability of affordable insurance, as well as the capacity of a community to provide for the health needs of their citizens. The Shared Goals in this segment of the plan are:

Families of young children have a regular health care provider who oversees their health care and refers them to other services and resources, as needed.

All young children receive appropriate health-related services for optimal health and development.



Focus Area: Health Care (HC)

At a Glance:

Shared Goal #1 Families of young children have a regular health care provider who oversees their health care and refers them to other services and resources, as needed.

Shared Goal #2 All young children receive appropriate health-related services for optimal health and development.

Outcomes:

- All families of young children have public or private health insurance and are informed health care consumers.
- Families access health service for their children.

Indicators:

- 1) Children have health care coverage.
- 2) Children have an identifiable medical home.
- 3) Children receive health and developmental services.
- 4) Families access readily available health care information

Partner's In Implementation:

Many agencies and entities have volunteered support and resources for the Health Care segment of this plan. It is anticipated new partnerships will evolve as strategies are implemented. At the time of printing this plan, the following "Partners in Implementation" were identified:

Office of the Governor
Idaho Department Health & Welfare: WIC, Maternal-Child Health, Medicaid, Infant Toddler Program, Children's Mental Health, Careline 2-1-1, Children's Special Health Program
Idaho Primary Care Association,
Idaho Association for the Education of Young Children:
Healthy Child Care Idaho, Idaho STARS
American Academy of Pediatrics – Idaho Chapter
Health Insurance Companies,
Health Care Providers
Idaho Head Start Association
Public Health Districts
Infant Toddler Interagency Coordinating Council
Idaho Family Physician Association
Idaho Hispanic Commission
Idaho Medical Association
Obstetricians
Division of Health & Office of Rural Health Initiatives
Idaho Hospital Association
University of Idaho: Center on Disabilities and Human Development
Council on Developmental Disabilities
Faith-based Organizations
Idaho KinCare Coalition
Idaho Kids Count
Caring for Children and Families
Boise State University Idaho State University

Identified Resources:

The following resources will assist in achieving the strategies. Additional resources will be developed over time.

System Building Initiatives

State Early Childhood Cross Systems (SECCS)

Participating Systems

Department of Health and Welfare: Medicaid, Maternal Child Health, Idaho Head Start State Collaboration; Rural Health District Health Departments
Covering Kids and Families
Idaho Association for the Education of Young Children
Higher education health related programs

Business

Insurance Companies
Physicians and Dentists



Focus Area: Health Care (HC)



On the following pages, the *Strategies* for this section are listed in chronological order for projected dates of implementation. Each strategy will be monitored through data measurements and an overall assessment to determine if the indicators and outcomes were achieved.

Strategies:

Start - 9/05 End - 8/08

HC.1. Explore options to increase Medicaid reimbursements to Healthy Connections providers.

Start - 12/05 End - 8/08

HC.2. Assist in the recruitment and the retention of primary health care providers for rural and frontier communities.

Start - 12/05 End - 8/08

HC.3. Research, identify and begin to implement presumptive eligibility strategies within private and public systems to enroll income eligible families in CHIP, Medicaid and Access Card programs.

Start - 12/05 End - 8/08

HC.4. Maximize CHIP enrollment (including renewals) by developing, financing, and implementing multiple outreach and process improvement strategies. Outreach should include: neighborhood schools, hospitals, clinics, public libraries, and faith-based venues.

Start - 12/05 End - 3/08

HC.5. Convene representatives from health care, Idaho Department of Insurance, private health insurance providers, government entities, businesses, and other stakeholders to develop affordable insurance plans for all families (e.g. single payer health insurance, small business medical insurance "co-ops").

Start - 12/05 End - 8/08

HC.6. Develop and distribute a common enrollment application for Medicaid, CHIP A, CHIP B and the Children's Access Card that is user friendly (including an electronic version).

Start - 6/06 End - 9/07

HC.7. Develop, resource and implement a health education initiative (including training) to help healthcare providers, child care and social service providers, educators, faith-based organizations and businesses educate families about the benefits and importance of disease prevention, healthy lifestyles, health insurance options, and medical homes.



Start - 6/06 End - 6/07

HC.8. Evaluate the effectiveness of Early Periodic Screening Diagnosis and Treatment Service Coordinators who work with health care professionals.

Start - 9/06 End - 12/07

HC.9. Develop an education campaign for health care providers to help them access community-based resources including early care and education, family support, parent education and children's mental health resources.

Start - 12/06 End - 9/07

HC.10. Explore the benefits of developing and using a universal screening and health tracking form for use by health care professionals and early childhood service providers.

Start - 3/06 End - 8/08

HC.11. Develop a plan to address financing and implementation of periodic, comprehensive health screening for all young children (including developmental and behavioral assessments).

Start - 3/06 End - 8/08

A. Develop a report that substantiates the research including cost-effectiveness/cost-benefit, fiscal impact and rationale for Early Periodic Screening Diagnosis and Treatment for all Medicaid eligible children.

Start - 3/07 End - 8/08

B. Increase awareness specifically with legislature and health insurance companies on the benefits of providing coverage for well child visits and screening.

Start - 3/08 End - 8/08

C. Identify and secure resources to develop the system to pay for well child visits for uninsured children and work with health care professionals to include screening for maternal depression during the first year of post-partum.

Start - 3/06 End - 12/06

HC.12. Identify the availability and accessibility of Support Groups for parents of children with special needs and promote these resources.

Start - 6/06 End - 3/08

HC.13. Promote the development of a statewide respite care system that includes services for families with children who have special needs.

Start - 9/06 End - 9/07

HC.14. Develop a state level public health technical consultant position to help advise, support and link health districts and public and private health care providers.

Start - 9/06 End - 8/08

HC.15. Work with state agencies and organizations to ensure access for all eligible young children to mental health assessment and services, if needed, through CHIP, Medicaid, EPSDT, and IDEA; Work with insurance companies to educate them about the value and cost benefit of age appropriate assessments and treatments and the merit of these services in their insurance benefit packages.

Start - 12/06 End - 12/07

HC.16. Develop a health and social and emotional development screening checklist for parents and guardians to assess, track and monitor their child's well-being as well as document visits with their child's health care providers.

Start - 12/07 End - 8/08

HC.17. Support the development of legislation requiring insurers of children's health to include a minimum level of coverage for early intervention services.



Focus Area:

Mental Health and Social and Emotional Development (SE)

Why is the social and emotional development of young children important?

The first years of life create the foundation for a child's ability to have positive relationships with others, to have self-confidence and the ability to meet change and challenges successfully. Healthy social and emotional development is necessary for success in school and in life.

In order to grow and learn, children need good mental health, as much as they need good physical health. Social and emotional health is tied very closely to the relationships the child has with his or her parents and significant caregivers. Children learn to effectively express emotions, make friends and explore the world around them through these relationships (Zero to Three, 2005).

Poor social and emotional health risk factors include overburdened families, homelessness, living with caretakers who are unable to provide adequate care, abuse (physical, emotional, sexual), parents who abuse substances, chronic or life threatening health situations, family member with severe or persistent mental illness, and multiple out-of-home placements (e.g. foster care, adjudicated children).

The Mental Health and Social and Emotional Development Focus Area of the plan addresses the capacity of families and communities to support healthy social and emotional development of young children through prevention, intervention and treatment. The goals, outcomes, activities and strategies for this focus area have been carefully integrated with the Infant Early Childhood System of Care (Building on Each Others Strengths) plan to ensure the intent, planning and language is consistent between the two strategic documents. The Shared Goal in this segment of the plan is:

Families of young children have access to social and emotional screening, and when needed, assessment and age-appropriate follow-up care.



Focus Area:

Mental Health and Social and Emotional Development (SE) At a Glance

Shared Goal #3 Families of young children have access to social and emotional screening, and when needed, assessment and age-appropriate follow-up care.

Outcomes:

- Current services for young children with disabilities, or those at high risk for developing emotional challenges, are assessed with gaps in services addressed, and an expansion plan is developed (e.g. Infant Toddler Program, Special Education Preschool programs).
- The Infant/Early Childhood Mental Health component is integrated into the larger Children’s Mental Health System of Care, and linked to school systems and other early childhood and family support systems.

Indicators:

- 1) Early childhood mental health and social and emotional development services are available when needed.
- 2) Culturally appropriate early childhood mental health and social and emotional development services are available.
- 3) Educated and trained professionals deliver early childhood mental health services when needed.
- 4) A comprehensive, integrated system for early childhood mental health exists.

Partner’s In Implementation:

Many agencies and entities have volunteered support and resources for the Mental Health and Social and Emotional Development segment of this plan. It is anticipated new partnerships will evolve as strategies are implemented. At the time of printing this plan, the following “Partners in Implementation” were identified:

Office of the Governor
Idaho Department Health & Welfare: Maternal-Child Health, Medicaid, Infant Toddler Program, Children’s Mental Health, Careline 2-1-1, Idaho Head Start State Collaboration
Idaho Association for the Education of Young Children: Healthy Child Care Idaho, Idaho STARS
Health Care Providers
Idaho Head Start Association
Public Health Districts
Infant Toddler Interagency Coordinating Council
Idaho Department of Insurance
Consortium for the Preparation of Early Childhood Professionals
Idaho Hispanic Commission
Caring for Children and Families
Division of Health & Office of Rural Health Initiatives
Department of Commerce & Labor
Council on Developmental Disabilities
Department of Commerce & Labor
University of Idaho
Idaho KinCare Coalition
Idaho State Board of Education
Idaho Parents Unlimited
Idaho Kids Count
Boise State University
Faith-based Organizations
Boise State University
Federation of Families
Idaho Migrant Council
Idaho State University

Identified Resources:

The following resources will assist in achieving the strategies. Additional resources will be developed over time.

System Building Initiatives

State Early Childhood Cross Systems (SECCS)

Participating Systems

Department of Health and Welfare: Medicaid, Maternal Child Health, Idaho Head Start State Collaboration, Children’s Mental Health, Idaho Infant Toddler Program; Rural Health
State Department of Education
District Health Departments
Idaho Association for the Education of Young Children
Higher education health related professions

Business

Insurance Companies (Ameriben Insurance Co.)
Physician Groups



Focus Area:

Mental Health and Social and Emotional Development (SEH)



On the following pages, the *Strategies* for this section are listed in chronological order for projected dates of implementation. Each strategy will be monitored through data measurements and an overall assessment to determine if the indicators and outcomes were achieved.

Strategies:

Start -3/06 End - 6/08

SE.1. Convene a cross-agency group to review current policies and procedures, as well as services related to prevention, intervention (after early onset), and intensive interventions. The group will develop a plan to address the following:

- A. Identify current programs, policies (e.g. referral), and procedures across agencies that provide services to young children and their families
- B. Identify current services and gaps in services that address protective factors
- C. Identify needs (e.g. personnel, financial, training, etc.)
- D. Identify data needed, collection procedures and reports needed
- E. Assure clear referral protocols for follow-up

Start - 3/06 End - 3/08

SE.2. Implement strategies identified in gap analysis (see SEH 1) to ensure that children served by early childhood agencies and programs receive comprehensive mental health services. First step: develop a template of an interagency agreement that delineates the role of each partner for Prevention, Promotion, Early Intervention and Treatment.

Start -9/06 End -8/08

SE.3. The Infant/Early Childhood (Systems Of Care SOC) subcommittee will lead the effort to:

- A. Identify appropriate mental health and social emotional screening instruments for children ages birth - 8
- B. Identify resources and training needs across public and private service agencies, etc
- C. Identify the data to be collected including who will collect the data and compile reports

Start - 6/07 End - 8/08

SE.4. Develop education programs, training, resources and contracting proposals to encourage mental health providers to use culturally sensitive methods (consider requiring it as part of programmatic funding).

Start - 9/07 End - 8/08

SE.5. Develop a braided (cross-agency) fiscal strategy utilizing resources from public and private agencies to support System Of Care (SOC) activities. The strategy must address:

- A. Funding and governance for pilot programs
- B. Fiscal oversight
- C. Provider payment rates

Start - 12/07 End - 8/08

SE.6. Develop state, regional, and community governance structures and plans to support the delivery of a full range of mental health services (prevention, early intervention, treatment).

Governance includes:

- A. Convening stakeholders and developing linkages between Infant Early Childhood Mental Health System of Care (Building on Each Others Strengths) and the Governor's Interagency Council on Children's Mental Health (ICCMH) partners
- B. Ensuring statewide resources are available to support expectant mothers, families with young children, and are provided to support healthy social and emotional development
- C. Identifying existing and potential resources



Focus Area: Early Care and Learning (ECL)

Do we need to be concerned with the quality of care and learning?

Research about learning during the youngest years supports the positive benefits of quality early childhood experiences. Part-day preschools and full-day programs, which provide rich learning environments and developmentally appropriate curriculums enhance a child's social, emotional and cognitive development and are linked with school readiness. Children with special needs gain substantial benefits from early intervention programs.

In the past, children were cared for primarily by their parents until they entered school. Economic, social, and family factors have changed over the last generation. We now have many children spending a majority of their time with caregivers who are not their parents in either formal or informal settings. A significant percentage of a working family's budget is spent on child care, while the options for quality child care in most areas of the state have not kept up with demand. Supporting the practical needs of families requires addressing issues of:

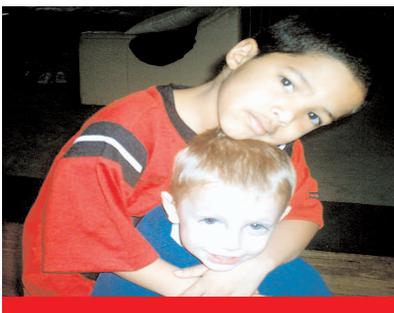
- ◆ quality child care and the cost for quality
- ◆ early learning opportunities
- ◆ credentialing of early childhood professionals, and
- ◆ laws that provide for safe and caring environments for the majority of young children in Idaho.

Quality child care is not inexpensive. It requires considerable time, effort and expertise, but selecting a quality child care setting promotes school readiness, healthy growth and helps close the gap between children from low income families and affluent families. Language acquisition, better cognitive and literacy outcomes and fewer behavioral problems occur when children are placed in environments that promote and support all aspects of their development. Children's environments with or away from their parents should support their healthy social, emotional, physical and cognitive development. Unfortunately, relatively few child care settings are equipped to provide the necessary elements of quality programs.

The Early Care and Learning Focus Area addresses child care, preschool and out-of-home learning opportunities. The Shared Goals in this segment of the plan are:

Young children have access to high quality childcare, when needed.

Young children access early learning opportunities to support school readiness and their optimal development.



Focus Area:

Early Care and Learning (ECL)

At a Glance

Shared Goal #4 Young children have access to high quality childcare, when needed.

Shared Goal #5 Young children access early learning opportunities to support school readiness and their optimal development.

Outcomes:

- Improved licensing regulations for child care providers include a minimum level of provider training, with background checks, health and safety standards, and caregiver to child ratios
- Child care health consultants are available to licensed child care providers
- Early Childhood program staff understands and respect the cultural characteristics of the children and families in their programs
- Families, communities and schools are partners in preparing young children for school, and efforts are coordinated to ensure children have opportunities to engage in meaningful and enjoyable activities that support their optimal growth and development

Indicators:

- 1) Licensing standards address the needs of children cared for in out-of-home settings.
- 2) Children have access to quality early care and learning settings.
- 3) Children with special needs have access to early care and learning settings with typically developing children.
- 4) Children and families participate in programs that promote early care and learning.

Partner’s In Implementation:

Many agencies and entities have volunteered support and resources for the Early Care and Learning segment of this plan. It is anticipated new partnerships will evolve as strategies are implemented. At the time of printing this plan, the following “Partners in Implementation” were identified:

- Office of the Governor
- Idaho Department Health & Welfare: Maternal-Child Health, Infant Toddler Program, Careline 2-1-1, Idaho Head Start State Collaboration
- Idaho Association for the Education of Young Children: Healthy Child Care Idaho, IdahoSTARS
- Department of Commerce & Labor
- Consortium for the Preparation of Early Childhood Professionals
- University of Idaho: Center on Disabilities and Human Development, Extension Service, Consumer and Family Science Department
- Infant Toddler Interagency Coordinating Council
- Workforce Development Council
- Idaho Head Start Association
- City of Boise
- Idaho Hispanic Commission
- Faith-based Organizations
- Lewis and Clark State College
- College of Southern Idaho
- Idaho Migrant Council
- Idaho KinCare Coalition
- Idaho Kids Count
- Easter Seals
- Parent’s As Teachers
- North Idaho College Head Start
- Public Health Districts
- Family Advocate Program, Inc.
- Association of Idaho Cities
- Idaho State Board of Education
- Idaho Voices for Children
- Developmental Disability Agencies
- BYU - Idaho
- Boise State University
- Idaho State University
- Idaho State Library
- Learning Lab

Identified Resources:

The following resources will assist in achieving the strategies. Additional resources will be developed over time.

System Building Initiatives

- State Early Childhood Cross Systems (SECCS)
- Success By 6 Initiatives

Participating Systems

- Department of Health and Welfare: Medicaid, Maternal Child Health, Idaho Head Start State Collaboration, Idaho Infant Toddler Program, Idaho Child Care Program (ICCP)
- State Department of Education
- District Health Departments
- Idaho Association for the Education of Young Children, IdahoSTARS
- Idaho Head Start Association
- Idaho State Library

Business

- Idaho News Channel 7



Focus Area:

Early Care and Learning (ECL)



On the following pages, the *Strategies* for this section are listed in chronological order for projected dates of implementation. Each strategy will be monitored through data measurements and an overall assessment to determine if the indicators and outcomes were achieved.



Strategies:

Start - 9/05 End - 3/08

ECL.1. Improve the state child care licensing regulations to include enforcement of child care licensing regulations.

Start - 9/05 End - 8/08

ECL.2. Expand the professional development opportunities for child care providers both at the higher education and community levels.

Start - 9/05 End - 12/06

ECL.3. Develop or locate training information, resources, materials and equipment to promote healthy child development.

Start - 9/05 End - 8/08

ECL.4. Increase the number of caregivers with formal education in early care and education or related fields.

Start - 9/05 End - 9/06

ECL.5. Identify & secure funding to support the child care health consultant program including the consultant training component.

Start - 9/05 End - 8/08

ECL.6. Expand community awareness and support for child care providers to access and enroll in the IdahoSTARS education program.

Start - 9/05 End - 12/06

ECL.7. Expand the reach of public awareness campaigns and the number of web-based information outlets that contain quality child care information.

Start - 9/05 End - 8/08

ECL.8. Recruit child care providers and early childhood educators with different ethnic, cultural and linguistic backgrounds.

Start - 12/05 End - 6/07

ECL.9. Work with non-profit programs who serve children and families to assist the Department of Health and Welfare in documenting state/private match to leverage additional federal funds.

Start - 12/05 End - 3/08

ECL.10. Identify and promote information about a transitional strategy to continue to deliver subsidies to families that are just over the eligibility limit. Goal is to transition parents off subsidy.

Start - 12/05 End - 8/06

ECL.11. Promote and distribute the National Governors' Association for School Readiness Report to increase awareness about the need for "ready state-ready schools-ready communities-and ready parents."

Start - 12/05 End - 12/07

ECL.12. Identify resources to promote appropriate language learning and second language acquisition that is targeted at early childhood professionals and caregivers.

Start - 3/06 End - 12/07

ECL.13. Review existing 3-5 year old state early learning standards to determine how they are working and how the standards are being coordinated statewide. As part of the review, develop the birth-3 standards to align with the 3 -5 year old early learning standards.

Start - 3/06 End - 6/07

ECL.14. Develop and/or identify quality resources in a variety of languages to meet parental needs.

Start - 6/06 End - 3/08

ECL.15. Remove restrictions on school districts so they can offer and/or partner with existing early learning programs to provide services to all children in addition to children with special needs.

Start - 6/06 End - 6/07

ECL.16. Develop a toolkit to be used by child care networks to orient new providers to the resources in their community.

Start - 9/06 End - 9/07

ECL.17. Identify research-based approaches to assess the abilities and learning needs of young second language learners.

Start - 12/06 End - 12/07

ECL.18. Research and develop recommendations for increased compensation and training to child care providers for services to children with special needs.

Start - 12/06 End - 12/07

ECL. 19. Provide guidance and technical assistance for parents, preschools, kindergarten teachers, Head Start, child care providers, principals, community members and other stakeholders to collaborate in developing community-wide transition plans to clearly define the skills, experiences, and knowledge necessary for success in K - 3.

Start - 3/07 End - 8/08

ECL.20. Develop and/or coordinate an ongoing series of training events on special needs targeted for child care providers.

Focus Area: Parent Education

Do parents want information about how their child grows and learns?

From the first breath -- a baby is learning! Within the first year of life a child's brain is actively engaged in the "mapping" process of making connections that will be the foundation of learning for life. This brain development is greatly influenced by a child's experiences, which often occur in interactions with parents, family members, and caregivers. Very few adults receive adequate training for the most crucial responsibility they will undertake; shaping and influencing the life of a totally dependent human being. Everything an infant needs must be provided by someone, and nurturing relationships are critical.

The most active learning period in a child's life often occurs at the same time many young parents are learning how best to provide for their families. During this crucial time, they may not have the information or supports to help their child develop socially, emotionally, cognitively, educationally or physically.

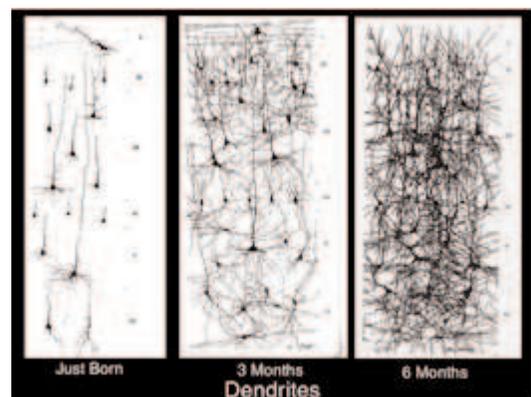
This plan is based on the premise that children are learning every waking moment from their parents through observation, hearing and touching. Raising children is difficult in the best of circumstances, more so for parents struggling with marital, economic, physical and mental health issues, or other stressors. Parents are responsible for providing and monitoring their child's environment; however when a parent lacks the knowledge, skills or resources to adequately perform these fundamental tasks then the child is negatively impacted. The positive supports provided by parent education services and programs can reduce worry and anxiety while encouraging the "good stuff" that parents want to nurture in their children.

When healthy development is a concern, it is important to seek screening and intervention services. It is important to identify developmental delays as early as possible in babies and young children so early intervention services can maximize a child's potential and reduce later risks. Parents need information, support and to be a part of the team during screening, diagnosis and treatment for a child with special needs.

Parent education includes a broad range of services and programs that can support parents and increase their knowledge about appropriate child development. Information about important topics like guidance, play, regulating behavior, language and early literacy is available to help parents strengthen their ability to help their child thrive. Community, church and, home visitor programs, Head Start and extended family can offer support so babies and parents thrive.

The Parent Education focus area addresses the knowledge, skills and supports that parents and caregivers need to help their child develop in a healthy and secure manner. The Shared Goal in this segment of the plan is:

Families and caregivers of young children have access to information, resources and support to help them raise healthy, strong children.



Focus Area: Parent Education

At a Glance

#6 SHARED GOAL Families and caregivers of young children have access to information, resources and support to help them raise healthy, strong children.

Outcomes:

- Families have up-to-date information about how to access available resources and services from Idaho Careline 2-1-1 and other information and referrals systems.
- Families of young children have access to on-going parent education and peer support.

Indicators:

- 1) A system of statewide information and referrals are accessible to families in all forty-four counties.
- 2) Early literacy opportunities are available to and utilized by parents.
- 3) Communities respond to child and family needs.
- 4) Parent education is recognized as important and promoted statewide.

Partner's In Implementation:

Many agencies and entities have volunteered support and resources for the Parent Education segment of this plan. It is anticipated new partnerships will evolve as strategies are implemented. At the time of printing this plan, the following "Partners in Implementation" were identified:

Office of the Governor
Idaho Department Health & Welfare: Maternal-Child Health, Infant Toddler Program, Careline 2-1-1, Idaho Head Start State Collaboration
Idaho Association for the Education of Young Children: Healthy Child Care Idaho, Idaho STARS
University of Idaho: Center on Disabilities and Human Development, Extension Service
Idaho Council on Domestic Violence and Victim Assistance
Idaho Federation of Families for Children's Mental Health
Infant Toddler Interagency Coordinating Council
Leadership Alliance
Idaho State Board of Education
Idaho Voices for Children
Idaho KinCare Coalition
Parent's As Teachers
RADAR
Community Action Partnerships
Even Start
Nampa School District
Idaho's Heart, Inc.
Healthy Families Nampa
Public Health Districts
Faith-Based Organizations
Idaho Migrant Council
Idaho State Library
Lee Pesky Learning Center
Family Advocate Program
City of Boise
North Idaho College Head Start
Learning Lab
Idaho PTA
Idaho Head Start Association
Idaho Hispanic Commission

Identified Resources:

The following resources will assist in achieving the strategies. Additional resources will be developed over time.

System Building Initiatives

State Early Childhood Cross Systems (SECCS)
Success By 6 Initiatives

Participating Systems

Department of Health and Welfare: Medicaid, Maternal Child Health, Idaho Head Start State Collaboration, Idaho Infant Toddler Program
State Department of Education
District Health Departments
Idaho Association for the Education of Young Children, Professional Development System
Idaho Head Start Association
Idaho State Library
Parents As Teachers
Even Start
North Idaho College Head Start
Nampa School District

Business

Idaho News Channel 7
Lee Pesky Learning Center

Focus Area: Parent Education



On the following pages, the *Strategies* for this section are listed in chronological order for projected dates of implementation. Each strategy will be monitored through data measurements and an overall assessment to determine if the indicators and outcomes were achieved.

Strategies:

Start - 9/05 End - 3/08

PE.1. Identify and help secure funding to ensure 2-1-1 Idaho CareLine and other information and referral systems will be able to increase their capacity and scope to better meet the needs of families of young children (possibly a "24/7" hotline, if needed).

Start - 12/05 End - 8/08

PE.2. Develop methods to increase the number of services and resources listed in the 2-1-1 Idaho CareLine and other Information & Referral databases including:

- A. Developing tools to assess gaps in community services
- B. Developing a web-based application for continuous updating and revising of database listings
- C. Cross referencing the community mapping data with the 2-1-1 CareLine database
- D. Recommending state agencies and other funding organizations to be listed in the database

Start - 12/05 End - 8/08

PE.3. Identify and coordinate early literacy opportunities including implementing programs in medical settings.

Start -3/06 End - 12/06

PE.4. Create website links between and among the early care and learning community to increase awareness of resources and services.

Start - 3/06 End - 8/08

PE.5. Identify and promote cross-cultural training that is sensitive to the diverse populations represented in Idaho and targeted at parent education providers, members of state associations and faith-based communities.

Start - 9/06 End - 12/07

PE.7. Work with state level family service organizations to incorporate, sponsor and/or facilitate parent education opportunities including training for those who work at the community level.

Start - 12/06 End - 8/08

PE.8. Identify opportunities and help develop multi-purpose community centers that house family education resources, classes and services, as well as services for the broader population (seniors, disabled, etc).



Focus Area:

Family Support and Self Sufficiency (FS)

Do family needs change over time?

Children live and are nurtured within the context of their families and communities. There are numerous environmental, physical, economic and transportation factors that can work against what we hope every child and their family will have; a safe, nurturing and healthy life. Stressors can affect a parent or caregiver's ability to provide for the basic needs of their children, especially when they are barely making ends meet. These stressors are broad and can have long term effects. Poverty in particular has been associated with poor child outcomes such as poor language acquisition which affects a child's readiness for school.

The number of substantiated child abuse cases in Idaho has decreased dramatically between 1995-2000 from 10.7 percent to 6.6 percent per 1000 children. This is good news, but there are still far too many children in homes that are not safe.

Idaho's divorce rate is consistently higher than the national average. The effects of the income disparity between males and females is accentuated when a female is the sole provider for her household. Also, the research clearly demonstrates the positive benefits of fathers and the harmful effects if they are absent.

The responsibility for family economic self-sufficiency resides not only on the head of the household, but on society. Few people strive to be on public assistance rather, they strive to be able to provide for the needs of their families. Federal and State funded services that can help support and guide a family to a more stable and prosperous future include WIC, food stamps, transportation assistance, and home ownership programs. Just as increasing the support system for families is critical for creating opportunities for advancement, decreasing risk factors that harm children is just as critical. Issues other than economic instability that cause a break down in the resiliency of the family include substance abuse, child abuse, domestic violence, mental health concerns and divorce.

The Family Support and Self-Sufficiency focus area addresses the protective factors that enhance a family's environment or the risk factors that diminish their capability and capacity to meet basic needs.

Parents and caregivers meet the basic needs of children.

Families, communities, businesses, and the state work together to establish strategies and procedures that support families of young children.

Focus Area: Family Support and Self Sufficiency (FS) At a Glance

Shared Goal #7 Parents and Caregivers meet the basic needs of children.

Shared Goal #8 Families, communities, businesses, and the state work together to establish strategies and procedures that support families of young children.

Outcomes:

- Families access programs and services that support their self-sufficiency efforts including: housing, food support, and job preparation programs
- Resources are available in communities across the state to help parents provide a nurturing family environment
- Procedures, policies and networks of support address parental substance abuse, child abuse/neglect, and maternal mental health issues that affect the stability and security of families
- Temporary Assistance for Needy Families (TANF) regulations promotes self-sufficiency while protecting the family unit.

Indicators:

- 1) Family support services are culturally sensitive.
- 2) Collaboration exists at local and state levels among family service providers.
- 3) Support and self sufficiency is promoted based on best practice and evidence-based programs.
- 4) Families identify and utilize resources that promote self sufficiency.

Partner's In Implementation:

Many agencies and entities have volunteered support and resources for the Family Support and Self Sufficiency segment of this plan. It is anticipated new partnerships will evolve as strategies are implemented. At the time of printing this plan, the following "Partners in Implementation" were identified:

Office of the Governor
Idaho Department Health & Welfare: Maternal-Child Health, Infant Toddler Program, Careline 2-1-1, Idaho Head Start State Collaboration
Idaho Association for the Education of Young Children: Healthy Child Care Idaho, Idaho STARS
Idaho Head Start Association
Public Health Districts
Idaho Hispanic Commission
Infant Toddler Interagency Coordination Council
North Idaho College Head Start
United Way Agencies
College of Southern Idaho Head Start Program of Idaho: Extension Service
Faith-Based Leadership Alliance
Idaho Voices for Children
Idaho KinCare Coalition
Parent's As Teachers
Community Action Partnerships
State Board of Education
Healthy Families Nampa
Idaho Migrant Council
Idaho State Library
Family Advocate Program
Even Start
Family Voices

Identified Resources:

The following resources will assist in achieving the strategies. Additional resources will be developed over time.

System Building Initiatives

Governor's Generation of the Child
State Early Childhood Cross Systems (SECCS)

Participating Systems

Governor's Coordinating Council for Families and Children
Department of Health and Welfare: Medicaid, Maternal Child Health, Idaho Head Start State Collaboration, Idaho Infant Toddler Program
State Department of Education
District Health Departments
Idaho Association for the Education of Young Children, Professional Development System
Idaho Head Start Association
Even Start
United Way Agencies
Judicial System

Business

NBC News Channel 7

Focus Area:

Family Support and Self Sufficiency (FS)



On the following pages, the *Strategies* for this section are listed in chronological order for projected dates of implementation. Each strategy will be monitored through data measurements and an overall assessment to determine if the indicators and outcomes were achieved.

Strategies:

Start - 9/05 End - 8/08

FS.1. Develop a working group of government and other agencies to identify methods to streamline and increase flexibility in programs to promote asset development for working families (e.g. individual development accounts, asset disregards for public programs, etc.)

Start - 9/05 End - 8/08

FS.2. Coordinate with faith-based and community organizations (FBCO's) to identify and promote self-sufficiency resources and education (e.g. financial/budgeting courses, nutrition and food preparation, housing programs, etc).

Start - 9/05 End - 8/08

FS.3. Coordinate activities with substance abuse treatment programs to meet the needs of parents of young children, specifically pregnant mothers.

Start -12/05 End - 8/08

FS.4. Identify and/or promote career guidance opportunities including job skills training with a specific emphasis on increasing the earning capacity of non-custodial parents so they can support their children.

Start - 12/05 End - 8/08

FS.5. Expand the scope and capacity of quality parent education and support programs such as: PAT, Fatherhood "Best Practices" Initiatives and Head Start.

Start - 3/06 End - 8/08

FS.6. Increase public awareness of self-sufficiency resources and education programs offered by faith-based and community organizations (e.g. finances & budgeting courses, nutrition, housing programs, etc).

Start - 6/06 End - Ongoing

FS.7. Identify resources and increase the capacity for father involvement programs and initiatives that strengthen marriages and build positive relationships with children.

Start -6/06 End - 8/08

FS.8. State agencies identify and/or develop faith-based friendly policies to increase partnerships.

Start - 9/06 End - 8/08

FS.9. Help facilitate meetings and dialogue on the benefit of "neighborhood centers" in venues such as schools, senior citizen centers, libraries, faith-based organizations, etc. that share resources, serve as one-stop family resource centers and promote intergenerational work.

Start - 9/06 End - 8/08

FS.10. The judicial system, state organizations and agencies incorporate family support efforts in their work with families of young children including; parent education, support groups, social and emotional assessments and substance abuse treatment.

Start -12/06 End - 8/08

FS.11. Coordinate planning between domestic violence shelters, homeless shelters and other crisis response programs to develop procedures, policies and networks of support and coordinate services to make them more accessible and readily available.

Start - 12/06 End - 8/08

FS.12. Develop a working group or council consisting of representatives that receive TANF funds such as state agencies, legislators and other stakeholders and conduct an annual review to provide recommendations for improvement of the quality, access, and use of TANF funds. The recommendation will include regulations (specifically, explore the viability of changing the two-year lifetime limits and the education restrictions on TAFI).

Start - 6/07 End - 8/08

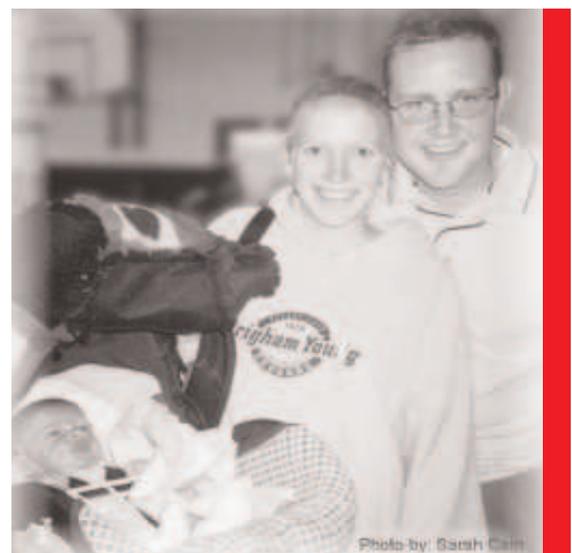
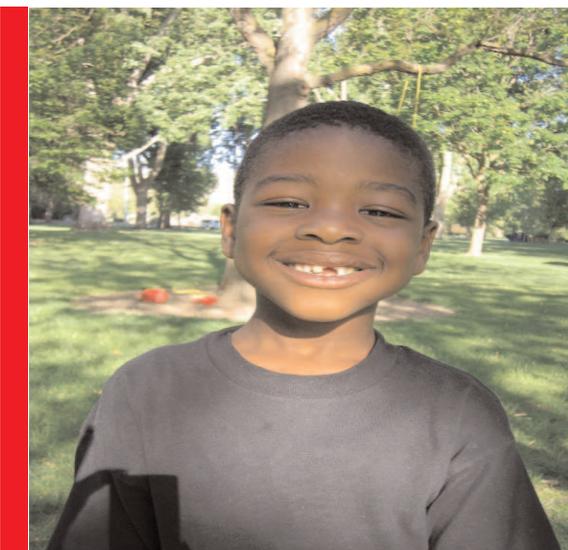
FS.13. Increase emergency cash assistance by identifying and raising awareness of the community-based resources to help TANF families (Directory of Idaho Foundations).

Start - 9/07 End - 8/08

FS.14. Find ways to support enforcement efforts specifically by increasing public awareness of the value of paying child support.

Start - 3/07 End - 8/08

FS.15. Replicate the Healthy Nampa Families model to help establish paternity.



Focus Area: Comprehensive Early Care & Learning Systems

Is there a need for a comprehensive system for early care and learning?

For many years, hundreds of caring leaders in Idaho have conducted business with limited resources to serve the most vulnerable population—young children and their families. While their efforts are recognized and applauded, there is considerable benefit to be gained by enhancing coordination, sharing resources and developing mutually beneficial strategies to support the vision we have for all Idaho’s young children. The only way to maximize the outcomes for all children is to maximize the delivery system for services and programs that serve them and their families. To accomplish this, we need to develop a multi-disciplinary and multi-sectoral, or “systems approach,” to better resource and deliver critical services and supports to those who need them.

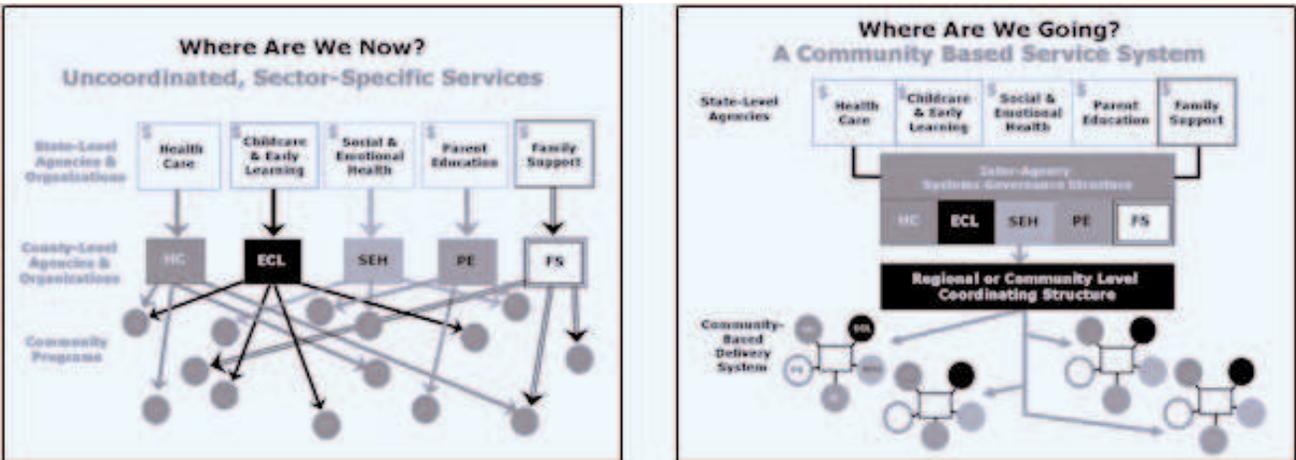
The Early Childhood Comprehensive Systems focus area serves to tie together the five critical issue areas of the plan. It is designed to work effectively with complex organizational structures, policies, procedures and systems to improve effectiveness, availability and the quality of early care and learning services.

An overall improvement in coordination, communication and cooperation among the various state agencies, early childhood associations and others, who provide services to families of young children, will positively affect the way services and programs are delivered to children within the context of their families and at the community level.

The Early Childhood Comprehensive Systems focus area is the thread woven between the five focus areas and supports their implementation. Each of the five focus areas could be implemented as a separate piece, however comprehensive services for families requires an expanded view of the system as a whole. The two shared goals in this segment of the plan are:

Assure linkages and coordination among providers and programs that serve families of young children.

Establish and use outcomes and indicators to assess and monitor change in the health and well-being of families of young children.



Focus Area: Comprehensive Early Care & Learning Systems(CS) At a Glance

Shared Goal #9 Assure linkages and coordination among providers and programs that serve families of young children.

Shared Goal #10 Establish and use outcomes and indicators to assess and monitor change in the health and well-being of families of young children.

Outcomes:

- The governance structure for early care and learning provides the leadership, coordination and resources to ensure the goals of the plan are achieved.
- Effective interagency coalitions, councils and coordinating bodies that work across systems and serve families and children at the state, regional, and community level are promoted and supported.
- Families use the information and support component of the system to provide them with access to the network of community resources.
- Efficient and accountable systems for distributing government funds are coordinated across initiatives that serve families of young children.

Indicators:

- 1) A sustainable early care and learning system is in place.
- 2) Statewide partners combine efforts and resources to assure early care and learning opportunities.
- 3) State policies support family self sufficiency.
- 4) State policies support healthy, safe, and quality early care and learning.
- 5) An early childhood data collection system is developed and used to compile useful data for policy and program decision-making.
- 6) Communication supports agencies, entities, communities and families.



Focus Area: Comprehensive Early Care & Learning Systems At a Glance Continued

Partner's In Implementation:

Many agencies and entities have volunteered support and resources for the Comprehensive System segment of this plan. It is anticipated new partnerships will evolve as strategies are implemented. At the time of printing this plan, the following "Partners in Implementation" were identified:

Office of the Governor
Governor's Coordinating Council for Families and Children
Idaho Department Health & Welfare: Maternal-Child Health, Infant Toddler Program, CareLine 2-1-1, Idaho Head Start State Collaboration
Idaho Association for the Education of Young Children: Healthy Child Care Idaho, Idaho STARS
Idaho Head Start Association
Idaho Hispanic Commission
University of Idaho: Extension Service
Faith-based Leadership Alliance
Idaho Voices for Children
Idaho Migrant Council
Idaho KinCare Coalition
Idaho State Library
Parent's As Teachers
Family Advocate Program
Community Action Partnerships
Even Start
State Board of Education
Family Voices
State Department of Education
Boise State University: Department of Early Childhood Studies, College of Health Sciences, Funding Information Center
Idaho Children's Trust Fund
Kids Count
Eastern Seals
Judicial System
Idaho Community Foundation
Department of Commerce and Labor
Higher Education
Idaho's Women's Network
Idaho Department of Corrections
City of Boise
Idaho Commission of Aging
Partner's For Prosperity
Association of Idaho Cities
Madison School District
Nampa School District
North Central District Health Department
Southeastern District Health Department
Idaho PTA
Panhandle Health District
Idaho Child Care Program

Identified Resources:

The following resources will assist in achieving the strategies. Additional resources will be developed over time.

System Building Initiatives

Governor's Generation of the Child
State Early Childhood Cross Systems (SECCS)

Participating Systems

Governor's Coordinating Council for Families and Children
Department of Health and Welfare: Medicaid, Maternal Child Health, Idaho Head Start State Collaboration, Idaho Infant Toddler Program, Idaho Child Care Program
State Department of Education
District Health Departments
Idaho Association for the Education of Young Children, Professional Development System
Idaho Head Start Association
Even Start
United Way Agencies
Judicial System

Business

Idaho Power Company
NBC News Channel 7



Focus Area:

Comprehensive Early Care & Learning Systems(CS)



On the following pages, the *Strategies* for this section are listed in chronological order for projected dates of implementation. Each strategy will be monitored through data measurements and an overall assessment to determine if the indicators and outcomes were achieved.

Strategies:

Start - 9/05 End - 8/06

CS.1. Work with stakeholders to identify and develop the governance structure for long-term early care and learning cross systems collaboration efforts (e.g. central office, cabinet, council, etc.).

Start - 12/05 End - 9/06

CS.2. Prioritize strategic action steps for each of the strategies of the first phase of the state plan.

Start - 12/05 End - 8/08

CS.3. Annual planning sessions for programs that address early childhood issues are coordinated so funding streams can be maximized and shared goals can be accomplished (e.g. Title 1, HSC, Infant Toddler Coordinating Council, etc.) This includes identifying opportunities and appropriate fit to co-locate or share infrastructure costs.

Start - 12/05 End - 9/06

CS.4. Develop a strategic messaging plan to create public support and political will to ensure the long-term success of early care and learning resources including identifying resources for public information and awareness campaigns to address each focus area of the plan and targeted at multiple audiences and using multiple media.

Start - 3/06 End - 12/07

CS.5. Identify the policies and resources needed to achieve the ten shared goals.

Start - 3/06 End - 12/07

CS.6. Convene partners and responsible parties to identify funds (state and federal) that can be blended and/or braided, and to identify and/or develop flexible funding structures and tools to support coordination and collaboration at the state and local levels.

Start - 6/06 End - 3/08

CS.7. Work with private and non-profit funding agencies to develop performance based contracting to better monitor program outcomes to ensure they meet their intended purposes and appropriate funding is based on desired results.

Start - 6/06 End - 6/08

CS.8. Develop and implement a funding plan which includes building the capacity and expertise to apply for federal and private funds.

Start - 9/06 End - 8/08

CS.9. Work with state policy makers and faith-based decision makers to ensure that policy decisions and investments are made based on facts, best practices and research. Provide information that includes the policy impacts of any proposed legislation.

Start - 12/06 End - 8/08

CS.10. Identify and/or develop Memorandums of Understanding (MOU's) or Memorandums of Agreement (MOA's) between agencies to better coordinate the services they provide for families of young children to include integrating service delivery efforts, developing accountability measures across programs, streamlining in-take procedures, providing cross training, and developing joint outreach to parents.

Start - 12/06 End - 8/08

CS.11. Agencies co-host and/or co-sponsor trainings, conferences, workshops at the state and local levels to reduce duplication and encourage cross-training. To include training to educate communities about "blending and braiding" funding streams to support services for families of young children.

Start - 12/06 End - 8/08

CS.12. Develop a data task force to convene state agencies that collect and analyze data to assess, and identify opportunities for:

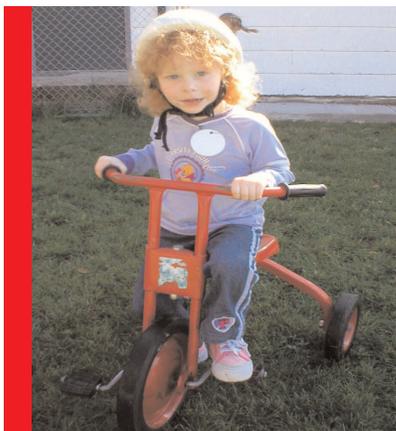
- A. Alignment of data collection and reporting
- B. Assessment of the types of data collected, including outcome measures
- C. Coordinated reports used to define set of child well-being indicators

Start - 3/07 End - 8/08

CS.13. The state legislature is briefed annually on the status of young children, specifically addressing the importance and cost benefit of supporting ECL initiatives.

Start - 6/07 End - 8/08

CS.14. Identify and use total quality management tools to assess and monitor coordination and streamlining efforts to ensure cost savings or efficiencies.



Plan Evaluation

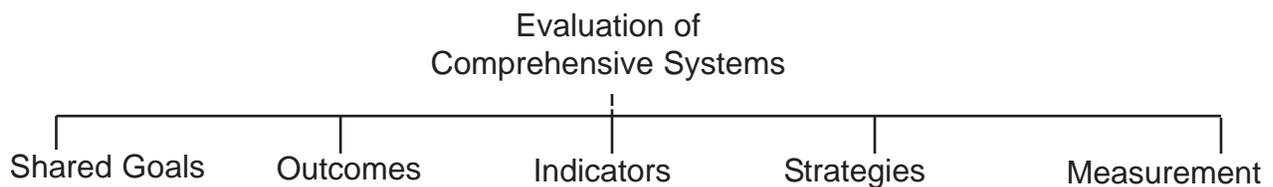
Method of Evaluation

The Early Care and Learning Plan will be evaluated annually for three years. Shared Goals provide the foundation for the plan. Each goal has associated outcomes, indicators and strategies. Data sources have or will be identified for every strategy. Progress will be measured for every strategy from baseline information at the beginning of implementation to the end of each annual cycle. At the conclusion of the three year plan cycle, an analysis will be completed to determine the overall achievement toward indicators and outcomes. Additionally, a post survey will be circulated statewide to determine stakeholder's (families, policy makers, agencies, organizations, etc.) perception of change in accessibility and availability of services.

Many sources of data exist to assist with measuring the accomplishments of this Early Care and Learning Plan. One of the first steps in implementation will be to determine if there is a gap in baseline and/or critical data sources. Facilitation of data gathering and analysis will be the next step.

Simultaneously with data collection, methods of communication will be analyzed with an emphasis on developing relationships and to assure communication linkages are in place. Another key component to communication is developing and marketing our messages.

Through the evaluation process, the accomplishments to five focus areas 1) health care; 2) mental health and social and emotional development; 3) early care and learning; 4) parent education; and 5) family support and self sufficiency will be carefully monitored with a larger perspective on what has changed in each system. This will be measured through lines of communication, inter and intra-agency agreements, policies, procedures and legislative action.



Data Collection

Data Collection

In order to assess progress toward the strategies, indicators and outcomes of this plan, data will be gathered and synthesized. Many sources of data have been identified. The challenge during implementation will be to gather baseline data, ongoing data and analyze the data for the purpose of informed decision-making. One of the first priorities is to establish the mechanism to gather data from Partners In Implementation. The second priority will be to analyze the data and create reports for all stakeholders so that decisions will be responsive to needs, gaps and resources.

The following known data collection banks will assist in providing baseline and ongoing data during plan implementation:

- Idaho Kids Count
- Idaho Child Care Program
- Idaho AEYC, Idaho STARS
- Parents As Teachers (PATNET)
- Idaho Infant Toddler Program Part C (Data Tot, Find A Tot)
- State Department of Education Part B
- Maternal Child Health Bureau: WIC
- Idaho CareLine 2-1-1
- Medicaid
- Department of Commerce and Labor
- Head Start
- District Health Departments
- Higher Education
- Covering Kids and Families
- Idaho Department of Insurance
- Family Voices

Additional methods will be developed to gather and analyze data as needed.

ACTION STEPS

This plan was developed to help support your agency or organization's efforts. In fact, the strategic plans from many organizations were reviewed, and when appropriate incorporated into the plan. The Task Force recommends that each organization engaged in early childhood initiative activities for young children and their families take the following steps to assure your agency/organization is in alignment with the plan.

1. Advocate for and understand the content of the plan.
2. Promote and align efforts with the shared goals.
3. Identify strategies to implement the plan.
4. Promote the strategic plan, sustainability plan and/or action plan for your organization.
5. Promote the reporting of data collection activities and progress toward indicators and outcomes.
6. Adopt the same wording used in the plan because it helps all efforts when public awareness is raised regarding the importance and value of early care and learning initiatives.
7. Add the shared goals to public information materials to promote common messages and public awareness.
8. Contact the Early Care and Learning State Systems Program Manager and provide information on the organization's methods for aligning with the state plan.

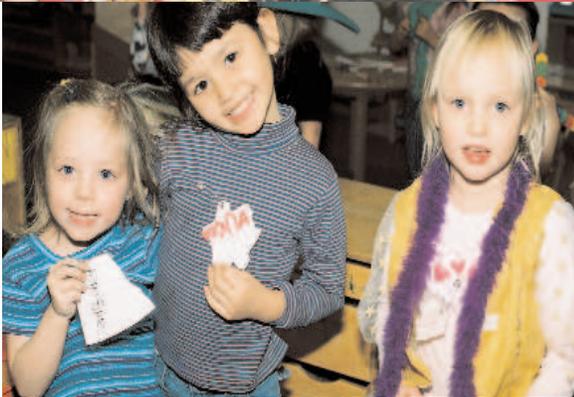
The following examples provide practical application for specific actions that will assist children and families based on the guidance of this plan. A **foundation** or an **initiative** can identify one or more strategies such as access to health care or child care training and place the strategies as a priority for funding. **Community programs** may identify statewide efforts that are in alignment with their program services and determine how they fit into the strategic plan. A **legislator** can identify a strategy that needs legislative action to move forward such as child care licensing or compensatory school age of children. **Business** can view the plan and determine how to help resource some of the strategies such as the in-kind support for publications from Idaho Power Company. **Families** can actively participate in the planning and implementing strategies by participating in work groups, committees and voicing their support at the local, state and federal levels. **Agencies** may align their goals, objectives and method of data collection to collaborate in the effort to gather and analyze data for decision making. **Service organizations** may offer to dedicate a fund raising effort toward early childhood education as specified in one of the many strategies in this plan. **Community and state leaders** can help spread the word that early childhood is a solid and cost savings long-term investment. Results matter.

CONCLUSION

The Early Care and Learning Plan is a shared vision in Idaho. The commitment of expert and knowledgeable stakeholders in developing all components of this plan ensures a foundation for all children to grow, learn, enjoy childhood and begin school ready to succeed.

Children and families are Idaho's greatest resource and her most valuable crop. This plan provides a framework for nurturing this crop and reaping the harvest.

APPENDIX



Contributors and Acknowledgements

Task Force Co-Chairs

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Region 2: Marci Schreiber
Region 3: LeAnn Simmons
Region 4: Mary Ellen Haley
Region 5: Laura Bondurant
Region 6 & 7: Lorraine Clayton

Ten Core Concepts of Early Childhood

Source: *Neurons to Neighborhoods*

1. Human development is shaped by a dynamic and continuous interaction between biology and experience.
2. Culture influences every aspect of human development and is reflected in childrearing beliefs and practices designed to promote healthy adaptation.
3. The growth of self-regulation is a cornerstone of early childhood development that cuts across all domains of behavior.
4. Children are active participants in their own development, reflecting the intrinsic human drive to explore and master one's environment.
5. Human relationships are the building block of healthy development.
6. The broad range of individual differences among young children often makes it difficult to distinguish normal variations and maturational delays from transient disorders and persistent impairments.
7. Children's development unfolds along individual pathways whose trajectories are characterized by continuities and discontinuities, as well as by a series of significant transitions.
8. Human development is shaped by the continuous interplay among sources of vulnerability and sources of resilience.
9. The timing of early experiences can matter, but more often than not the developing child remains vulnerable to risks and open to protective influences throughout the early years of life and into adulthood.
10. The course of development can be altered in early childhood by effective interventions that change the balance between risk and protection, thereby shifting the odds in favor of more adaptive outcomes.

Source: From *Neurons to Neighborhoods: The Science of Early Childhood Development* (2000). Institute of Medicine.

Regional Meetings and Shared Goals Survey Results

The Task Force recognized that in order for other organizations, businesses, agencies and communities to support the implementation of the plan they would need to provide input and guidance. The goal is to have a plan that people not only agree with, but lend their time, resources and expertise to implement. The following process was used to gather stakeholder input:

1. A regional forum was hosted in each of the seven health districts to gather input on whether the ten goals developed by the task force were truly "shared". Regional leaders including task force members facilitated the forum with the help of staff members from the Governor's office. Participants were given the opportunity to modify the language of the goals, prioritize the goals, learn about the web-survey, and develop strategies for local implementation. Over 260 people attended representing a broad constituency including; parents, educators, child care professionals, health care professionals, business and community leaders, legislators, and others. In all 7 regions the shared goal; "parents and caregivers meet the basic needs of children" was identified as the number one priority.
2. A web-based survey was developed, piloted and translated into Spanish to gather citizen input on the importance of the shared goals. Following are the results of the survey.

The Early Care and Learning Survey was developed to ask three questions about each of the shared goals:

- a) Would the goal be important to you if you were a parent of young children?
- b) Do families in your community have access to the resources mentioned in the goal?
- c) Should all families in Idaho have access to the specified resources?

Only one question was asked about goal ten: "I think it is important for the State of Idaho, its communities, and its businesses to address the needs of families and young children."

Respondents rated their agreement with the statement on a five-point scale from strongly agree to strongly disagree. "I'm not sure" was also an option. The survey was available on the Internet in both English and Spanish, and in paper copy for those without Internet access.

Results of the survey show that the shared goals developed by the Task Force are indeed endorsed by a strong majority of respondents. As shown in the table below, respondents showed overwhelming agreement about the importance of the goals to themselves as parents of young children (column (a) on shared goal chart). There was a similarly high level of agreement that all families in Idaho should have access to the resources described in the goals (column (c) on shared goal chart). However, there was much lower agreement that these important resources are available in Idaho's communities. (Column (b) on shared goal chart).

Regional Meetings and Shared Goals Survey Results Continued

| Shared Goal | Percent Agreement* | | |
|-----------------------------------|----------------------------|----------------------------|--------------------------------|
| | Important to my family (a) | Available in community (b) | Important for all families (c) |
| 1. Basic needs | 93.7% | 54.5% | 95.8% |
| 2. Parenting information | 96.2% | 54.4% | 96.3% |
| 3. Child care | 96.5% | 21.9% | 93.5% |
| 4. Early learning | 94.6% | 48.1% | 93.4% |
| 5. Health care | 96.9% | 45.9% | 93.7% |
| 6. Child social/emotional health | 94.0% | 35.6% | 91.4% |
| 7. Family social/emotional health | 94.7% | 25.0% | 91.4% |
| 8. Finding services | 97.8% | 25.5% | 95.8% |
| 9. Coordinating services | 93.1% | 19.4% | 89.8% |
| 10. State/community/business | 95.0% | ** | ** |

In summary, the survey results show a strong pattern in which respondents agree about the resources that are important for Idaho's families and children, but are considerably less likely to agree that those resources are available in Idaho's communities. This was a strong and consistent pattern across subgroups, including males and females, residents of cities, small towns, and rural areas, and people in all age groups and income levels.

These survey data can help communities set priorities for action, by finding goals people agree are important for families (question a or c), but for which few agree that the resource is available in their community (question b). Using this as a guide, four of the goals stand out: child care, supports for social/emotional health of the family, help in finding services, and coordination of services for families, all of which have strong agreement about importance, but low endorsement on availability.

In review, research shows that the early years are critical to children's development and that families play a key role in this process. These survey results show strong agreement among Idahoans about the resources that should be available to all families of young children in Idaho. The findings position the Early Care and Learning Cross Systems Task Force to move forward in constructing a plan to realize these aspirations for Idaho families.

For more information about the Early Care and Learning Cross Systems Task Force or for additional survey results visit <http://www.gccfc.idaho.gov/ECLCSTF.html> Questions about the survey can be directed to: Harriet Shaklee, Ph.D. Family Development Specialist, University of Idaho Extension, 208-364-4016, hshaklee@uidaho.edu.
FALL 2004

Letters of Support/Commitment for the State Early Childhood Cross Systems Plan

| Entity/Organization/Agency | Statement of Commitment for Early Care & Learning Grant/Plan | Contact Person |
|--|--|--------------------|
| Ameriben/IEC Group | Resources | T. Andrew Fujimoto |
| Association of Idaho Cities | Child care licensing; annual conference; Supporting Early Childhood Success Action Kit | Ken Howard |
| Boise State University, College of Health Sciences | Nursing graduate students for family health care education and evaluation; co-sponsor an educational event | James Girvan |
| Boise State University, Department of Early Childhood Studies | Infant mental health training | Cari Mori |
| Center on Disabilities and Human Development University Of Idaho | Developing curricula for training; dissemination of information; assist with change initiatives; provide data; carry-out roles and responsibilities as assigned | Julie Foder |
| City of Boise | Alignment with plan; child care certification; community centers | Dave Bieter |
| Covering Kids and Families | Work to develop and distribute a common children's health insurance state application; work on presumptive eligibility strategies; maximize CHIP enrollment | Mary Lou Kinney |
| Department of Health and Welfare Divisions of Family and Community Services; Bureau of community and Environmental Health; | Parent education; clearinghouse materials; health prevention; CHIP: access, delivery and staff time; ICCP: staff time; CMH: best practice; ITP: child find, early intervention services, ICC, fiscal manager; Clinical and Prevention Services: staff time | Karl Kurtz |
| Easter Seals Goodwill Northern Rocky Mountain | Time training; NAEYC accreditation; promote CHIP; promote tiered reimbursement for child care; provide education to legislators; model best practices | Jeanette Kreider |
| Family Advocate Program, Inc | Parent information; community centers; toolkits; web links | Susan Hazelton |
| Grandparents Raising Children | See Idaho Commission on Aging | Marie Sonderman |
| Head Start Collaboration Council | Assist in system change; funded oral health strategic planning; funded three Early Childhood Mental Health Professional Development Conferences; and other early childhood related field grants | Carolyn Kiefer |
| Healthy Families Nampa | Linkage between parent education and marriage; interactive website; information and resources | Terry Smith |
| Idaho Association for the Education of Young Children | Professional development system for early childhood providers; child care health consultants; child care regulations; scholarships; advocacy | |
| Idaho Child Care Program | ICCP advisory expertise, time and professional network | Trudy Potter |
| Idaho Children's Trust Fund | Parent education; child abuse prevention; family support, father involvement; public awareness | Margaret Hower |
| Idaho Commerce and Labor | Staff time to work on strategies; workforce development; family friendly work policies | Roger Madsen |
| Idaho Commission on Aging | Support for kincare; grandparents raising children | Lois Bauer |
| Idaho Community Foundation | Provides funding for numerous early childhood projects across Idaho | Cathy Silak |
| Idaho Council on Domestic Violence and Victim Assistance | Training and education on abuse; violence and battered treatment; fall training sessions for staff and public; violence and victim protection | Diane Blumel |
| Idaho Department of Correction | Policies that assist in the re-entry process; partner | Gail Cushman |
| Idaho Department of Education | Participate in ECLCSTF; participate in ECMHS; participate in partnerships; cross-training and discussions regarding financing broader systems for early learning and care | Marybeth Flachbart |
| Idaho Federation of Families for Children's Mental Health | Outreach; family education; support groups and sib shops | Courtney Lester |
| Idaho Head Start Association | 4 hours of staff time per week | Jim Wilson |
| Idaho KIDS Count | White paper policy brief; analysis of issues; participation | Linda Jensen |
| Idaho Kin Care Coalition | Neighborhood centers; advocate; develop and disseminate educational and informational materials; support and participate in educational conferences; support groups | Marie Sonderman |
| Idaho PTA | Parent education; community centers; father involvement | Maureen Chadwick |
| Idaho RADAR Network Center | Educational materials; conference/training | Georgia Girvan |
| Idaho State Board of Education | Systems planning; parental awareness | Karen McGee |
| Idaho State University, College of Education | Governance structure; policies and resources; capacity building; total management tools for assessment and monitoring efforts; performance based outcomes | Larry Harris |

Letters Continued

| | | |
|--|--|--------------------|
| Idaho's Heart, Inc | 2-1-1 Careline listing; website links; parent toolkits; move state level opportunities to local level | Sunny Reed |
| Idaho's News Channel 7 | Air PSA for 2-1-1 | Sally Craven |
| Learning Lab | Expertise; student data; intergenerational learning; early literacy; multicultural and multilevel population | Gemma VanHole |
| Lee Pesky Learning Center | Statewide dissemination of early literacy materials to parents of every newborn | Hildy Ayer |
| Madison School District | Collaboration | Janet Goodliffe |
| Nampa School District | Facilities; equipment; supplies | Jay Hummel |
| North Central District Health Department | Support work on shared goals #1, 2,3,4,6,7,8,9,10 | Dianne Waldemarson |
| North Idaho College Head Start | Training; resources; materials; equipment; legislative education; child care licensing; training events | Doug Fagerness |
| Panhandle Health District | Support strategies in health | Jeanne Bock |
| Parents As Teachers, UW of Treasure Valley | Distribution of toolkits for families | Michelle Welsh |
| Partners for Prosperity | Strategic messaging; technical assistance; staff time | Tom Putnam |
| Southeastern District Health Department | Support strategies related to health, nutrition, immunizations and child development | Tricia Coddling |
| State of Idaho Department of Administration | Support for systems and processes | Pam Ahrens |
| University of Idaho Extension | Research; evaluation; Parents as Teachers alignment | Harriet Shaklee |
| US Department of Labor, Bureau of Apprenticeship | Access to quality child care | Barbara Adolay |
| Workforce Development Council | Support strategies to access education | Karen McGee |

Funding Sources and Opportunities to Share Resources

Federal

Child Care Block Grant
 Community Development Block Grant
 Early Learning Opportunities Act Grant
 Early Reading First
 Even Start
 Head Start Collaboration
 Head Start and Early Head Start
 Medicaid
 Food Stamps
 TANF
 WIC
 Social Services Block Grant
 After School and Extended Day Programs
 IDEA Parts C and B

State

Governor's Generation of the Child Initiative
 Community Development Block Grants
 Department of Health and Welfare

Foundational

Albertson's Foundation
 Idaho Community Foundation
 Idaho Children's Trust Fund

Business and Corporate Contributions

Idaho Power Company

More Information

For additional information about this plan, contact the Idaho CareLine at 2-1-1 or 1-800-926-2588 and <http://www.idahocareline.org> or <http://www.gccfc.idaho.gov/ECLC-STF>.

Information regarding early childhood issues may also be found on the Early Childhood Information Clearinghouse <http://www.idahochild.org>.

◆ *A special thank you to Idaho Power Company for printing this plan and the brochure.*