



# Early Head Start/Child Care Partnerships

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# Welcome Presenters



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# Overview

- Introduction
- New Partnerships- What are they?
- Who do they serve?
- What are the federal requirements?
- What we know so far.
- It's Our Opportunity.



# Introduction

## Here's what every parent knows:

- Learning begins at birth.
- Parents are their child's first teacher.

**There's a new opportunity for federal funds to strengthen child care for infants & toddlers.**

- It's targeted to low income children
- It's a two-generational approach (working with infants & toddlers and their parents)

**There are some rules that we'll go over. It's a challenge, no doubt about it.**

- It involves partnering at the federal, state, and local level
- It involves vision, commitment, and high quality child care



# Introduction

In January, Congress passed a new budget bill, which included investments for early learning.

- A modest increase for child care.
- A modest increase for Head Start.
- \$250 million for new preschool grants.
- **\$500 million for Early Head Start/Child Care Partnerships**



**The partnership funds are subject to a nationwide competition.**

- In conjunction with NM's Race to the Top- Early Learning Challenge Grant, CYFD held meetings throughout the state to talk to child care providers & parents.
- With your help, we identified investment zones based on child risk factors.
- Now's our chance to come together behind resources to promote quality care.

# New Partnerships – A Whole Program Approach

## Early Head Start/Child Care Partnerships:

### The basic concept:

- Identify child care settings serving children in poverty
- Identify child care settings serving children on subsidy
- Work with existing programs to promote high quality child care for infants & toddlers.
- Identify providers who might be interested in a new approach.
- It's not about provider payment rates. It's about supporting programs with sufficient funds to operate a high quality program.



We are looking for providers who are open to a new way of thinking.  
Partnering to support a whole program approach –  
**supporting children, parents, and integrating community resources.**

# The “101” – Likely Partners

To apply for the new federal money, we need:

- Providers who want to learn about Early Head Start Standards
- Providers who want to work with us to meet those standards
- Providers who want to help build a high quality network of infant & toddler care
- Providers who are committed to trying a comprehensive framework



**There are 86,492 infants & toddlers in New Mexico.  
31% are living in poverty. In some areas of our state, the % is much higher.**

# Early Head Start vs Child Care

In identifying eligible children in current child care programs, we will need to look at the differences between EHS Eligibility and Child Care Subsidy.

- 90% of EHS children need to be below poverty
- Target: 10% of children with identified disabilities
- NM child care eligibility is higher. We'll have to figure that out.



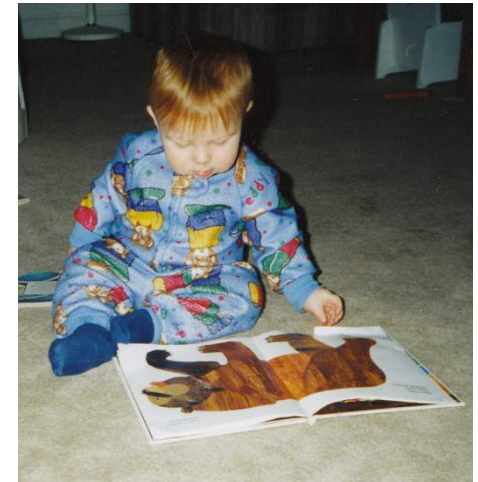
2014 Poverty Guidelines			
Compared to NM Child Care Subsidy Eligibility			
Household Size	Federal Poverty Level (Annual)	Federal Poverty Level (Monthly Estimate)	NM Child Care Subsidy Eligibility (Monthly)
2	15,730	1,311	\$2,585
3	19,790	1,649	\$3,255
4	23,850	1,988	\$3,925
5	27,910	2,326	\$4,595



# Target Children

Early Head Start targets children in poverty for services.

- It's much more than child care
- It's a framework for healthy child development
- It's a whole family approach
- Working with parents is a core piece of EHS
- Identifying current programs serving children on subsidy is step 1.
- Identifying providers who might be interested who serve children in poverty (not on subsidy) is step 2.



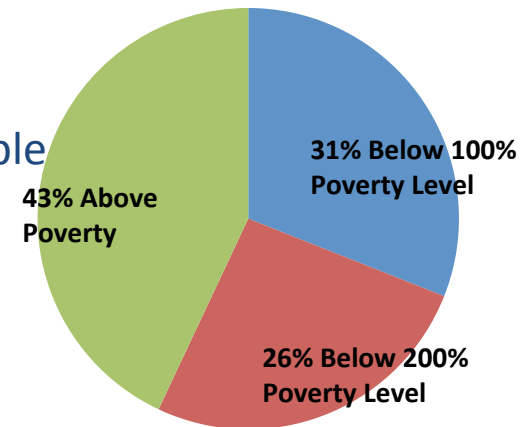
**42% of infants and toddlers in New Mexico live with a single parent.  
71% have at least one risk factor known to increase the chance of poor health  
and developmental outcomes.**

# Eligibility, Enrollment, Recruitment and Attendance

## EHS Participation:

- Children who are eligible for TANF, are homeless, have a disability, or are in the child welfare system are categorically eligible
- Up to 10% can be children above the poverty line
- Once deemed eligible for EHS, a child remains eligible for the duration of the program
- EHS programs must recruit local eligible families & keep a waiting list
- Attendance must be monitored and family contact made for high absentees (more than 4 days unrelated to illness)

**NM Infants & Toddlers  
Poverty Snapshot**



# EHS Requirements for Providers

The research shows that child:staff interaction is key to healthy child development.

## EHS Requirements: Ratios & Group Size

### Center-based:

- One teacher for every 4 infants and toddlers
- Maximum group size of 8

### Family Child Care Homes:

- One provider: maximum group size of 6 with no more than 2 under age 2
- Provider & Assistant: Maximum group size of 12 with no more than 4 infants and toddlers (with only 2 under 18 months)

It's not about provider rates per child; it's a whole program approach.  
To meet ratios, a center can add staff. (i.e., 1:4 = 2:8)  
Group sizes matter for effective interaction and relationship building.

# Providers: PD Requirements

## Provider Credentials:

- Centers: EHS requires teachers to have a CDA (or equivalent)
- For family child care providers, must be working to attain a CDA (or equivalent) within 2 years. (Must enroll within 6 months)

## Funds for training & education are part of the EHS program budget.

- Each provider has a professional development plan
- Each program is matched with specialists to help in:
  - ✓ Child development
  - ✓ Health Care & Mental Health
  - ✓ Family partnerships/engagement
  - ✓ Nutrition Services
  - ✓ Disabilities
  - ✓ Home visiting

**Pre-service and ongoing training are part of the budget. Specialists to help are part of the budget.**

# EHS Framework

## Early Head Start Programs Have a Comprehensive Framework:

- Eligibility, recruitment, selection, attendance
- Early childhood education & development
- Health & safety
- Health promotion (initial assessment, ongoing observation & follow up)
- Nutrition
- Disabilities
- Parent Involvement
- Family Engagement/partnerships
- Community partnerships (integrating resources within the community)
- Transportation

**Early Head Start is already working for some children in New Mexico.**

More than 2000 children and 217 pregnant women  
are currently in EHS throughout the state.

# Key EHS Requirements: Health

Healthy children are the foundation for EHS.

**To promote healthy children, EHS requires:**

- Screenings (for developmental, sensory and behavioral concerns)
- Referral and follow up
- Determination of ongoing source of health care and up to date on well baby/EPSDT (and connecting with services)
- Dental care
- Nutrition
- Mental health
- Safe sleep, feeding and environments
- Health and safety, hygiene and sanitation

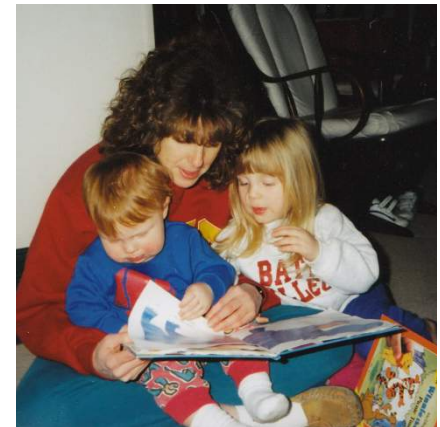


**EHS is as much a gateway to child health as it is a child care program.  
Healthy children within a healthy setting promote healthy child development.  
Bottom Line: Healthy children are the foundation.**

# Family & Community Partnerships

Working with parents is at the core of EHS:

- Increased parent knowledge of child development
- Parent input, parent engagement, working with parents to become advocates for their children
- Respect for parents & culturally sensitive approaches
- Policy Councils and Committees for Parent Engagement
- Family access to needed community resources
- Two home visits



**Bottom Line: The recognition that children live in families.  
To promote healthy child development, parents are part of the picture.  
In fact, parents drive the picture. EHS has a focus on parents.**

# Disabilities

## Early identification of disabilities matters.

- Children with disabilities means those identified as having a disability and needing services (IDEA Part C)
- The earlier children with disabilities can be identified, the sooner services can be provided.
- Children with disabilities participate in all aspects of EHS with appropriate modifications
- Disabilities services plan integrated with IFSP
- EHS provides services or links to services
- Disability service coordinators will help

**In current New Mexico Head Start programs:**  
599 children receive speech related services  
183 children receive services for developmental delays  
21 children receives services related to autism



# Transportation

## EHS Promotes Family Access by Offering Transportation

- Programs must assist families who need transportation in order for children to attend the program (locally designed)
- Programs providing transportation services must ensure child safety

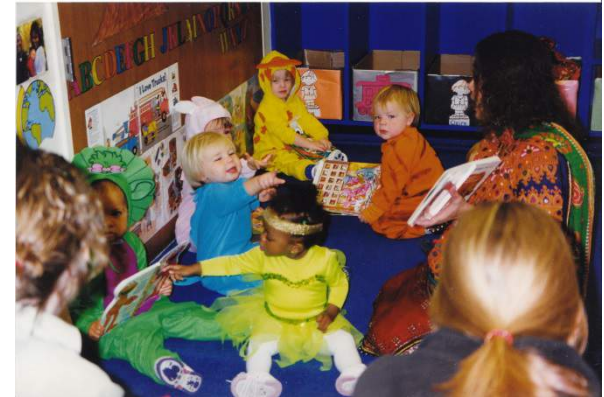
**Transportation funding is built into the EHS budget.**

**The concept is:** Transportation should not be a barrier to program participation.

# EHS in Brief

## EHS is a comprehensive framework

- Services are individualized by child
- Parents are as much as a focus as the child
- Healthy children are the foundation
- Building a strong workforce is critical
- Connecting to community resources is critical



## EHS budgets by program, not provider payment rates per child (like current subsidy rules with rates and allowable hours)

- Children are eligible regardless of a parent's work status
- No co-pays for parents; EHS is free – it's budgeted by program

**Wanted:** Providers who want to become part of the partnership.  
Providers who think “whole program, whole child, whole family.”  
It's a challenge, but one together we can address.

# What we know so far...

The U.S. Department of Health and Human Services will issue guidance for the new EHS/CC Partnerships in early April.

- We know the EHS Performance Standards, but not the specific criteria for the competition.
- We know New Mexico has a poverty population in need of high quality child care.
- We know we have committed providers who can excel at the challenge.
- We know we are all in this together and training & supports will help.

## The Vision:

### **New EHS/CC partnerships**

- that build off our current infrastructure of child care programs.
- That are embedded in our investment zones identified within our Race to the Top Early Learning Challenge Grant Plan

# Questions & Answers

**We would be pleased to take any questions.**

- **Questions?**
- **Thoughts?**

We may not have all the answers today since the guidance is not yet out from HHS, but we wanted to give you an idea of the concept and respond to any questions.

**It's a huge opportunity for us to invest in high quality infant & toddler care.**

- It's a competition, so it's not a guarantee
- It's a new approach, and without a doubt, it will be a challenge.
- We can do this.

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