

## REFERENCE DOCUMENT B: Program Needs & Gaps

<b>GOAL 1: READY CHILDREN</b>			
<i>A child arrives ready for school: healthy, well adjusted, and having been exposed to the fundamentals of learning.</i>			
<b>Need/Gap</b>	<b>Relevant Data/ Research/ Information</b>	<b>Current Strategies</b>	<b>Possible Strategies</b>
Under enrollment in CHIP+	Estimated 30% of eligible children are enrolled in Boulder County. Complexity of eligibility guidelines, limited access points for enrollment, and inadequate provider capacity are seen as key barriers.	Community Services has launched effort to address barriers and increase enrollment.	
Preventive services (e.g., dental) are underutilized for children on Medicaid and CHIP+	25% of children on Medicaid received dental services in FY2005. Provider capacity is limited due to low Medicaid reimbursement rates. Providers are not fully utilizing preventive dental strategies such as varnishes and sealants.	CCHAP (Colorado Children's Healthcare Access Program); Dental Aid; Child Health Promotion does dental screening and has some funding for treatment.	Cavity Free at 3, a statewide effort of Delta Dental, Rose Community Foundation, Caring for CO, and CO Health Foundation
Many pediatricians are not accessing best practices/technology for screenings.	Cost is a major factor in utilizing best technology for vision and hearing screenings.		Physician representation on ECCBC may present opportunities to address this issue; ABCD (assuring Better Child Health and Development) Project
Kids in non-center based care have limited access to health and mental health screenings.	This includes kids in licensed homes, legally exempt, and FFN (unlicensed family, friend and neighbor) care. There are issues of efficiency in serving these settings and children.	EPSDT; Child Health Promotion community health screenings have been successful. However, current capacity is limited	Boost mental health screenings by including DECA (Devereaux Early Childhood Assessment) as part of community health screenings; Mobile Health Units
Challenges in identifying and serving kids who do not qualify for and IEP (Individualized Education Program) or IFSP (Individualized Family Services Plan) but have issues		Colorado Preschool Program uses an ILP (Individualized Learning Plan); There is also an ITTP (Individualized Teacher Parent Plan)	

that could impact school readiness.				
Inadequate quality ECE opportunities for native language and literacy.	A number of studies have determined that cognitive and academic development in the first language has a vital and positive effect on second language schooling. Research indicates that if children do not reach a certain threshold in their first language, including literacy, they may experience cognitive difficulties in the second language (Collier, 1995 <i>Acquiring a second language for school</i> . National Clearinghouse for Bilingual Education: Washington, D.C).	PASO Program (Providers Advancing School Outcomes) LUMMA		
Children who are overweight/ at risk of overweight.	9.2% of WIC Children were overweight in January 2008.	Live Well Longmont		Colorado Physical Activity and Nutrition Program
<b>GOAL 2: READY FAMILY</b>				
<i>The family is empowered to nurture and grow their children; as a child's first and best teacher, the family has access to programs and services to support their child's development and can advocate effectively for their child.</i>				
<b>Need/Gap</b>	<b>Relevant Data/ Research/ Information</b>	<b>Current Strategies</b>	<b>Possible Strategies</b>	
Post partum/maternal depression	According to recent literature, postpartum depression affects 10% - 15% of mothers within the first year of giving birth (and rates are at least double among low income women). Prevalence of self-reported postpartum depressive symptoms (PDS) among mothers who have delivered in the preceding 2-6 months is measured by PRAMS. The PDS prevalence for 2004-2006 in Boulder County is 11.3% (95% CI 6.6-18.7).	Community Infant Program (CIP/ Circulo); Nurse/ Family Partnership; Parenting Place; Boulder County Public Health is exploring provider capacity	Involving employers See: <a href="http://www.nccp.org/publications/pdf/text_791.pdf">http://www.nccp.org/publications/pdf/text_791.pdf</a>	
Undetected mental health needs of families		Nurse/Family Partnership; Parenting Place; Kid Connects; Incredible Years		
Child abuse and neglect	Rate of maltreatment of children younger than 18 was 11 substantiated cases per 1,000 children in 2005. State rate was 9.2 per 1,000 children (MCH Data profile)	Community Infant Program (CIP /Circulo); Nurse/ Family Partnership		
Need for educating parents on importance and characteristics		Resource and Referral; Parenting		

of quality care and school readiness.			Place; School Readiness newsletter	
Need for reinforcing connection between parental and child literacy.			Even Start Family Literacy; Parenting Place; PASO; University of Colorado	
Need for increasing recognition of the importance of play in child development.			PASO Incredible Years	
Addressing misperception that kids learn in school, not at home, "school will take care of it".				
Many parents choose not to participate in ASQ (Ages and Stages Questionnaire) screening of children			Child Health Promotion; Colorado Preschool Program; Head Start	
Greater need for education and support of teen parents, especially those not in school.			GENESIS Fairview Teen Parenting Program	
Very little family support for transitions		When transition planning is a coordinated team effort, it benefits children, families, sending and receiving staff, and the entire community. Ongoing efforts help communities achieve long-term benefits. ( <a href="http://eclkc.ohs.acf.hhs.gov/hslc">http://eclkc.ohs.acf.hhs.gov/hslc</a> )	Head Start...in Boulder County as Longmont Children's Council	
<b>GOAL 3: READY EARLY CARE AND EDUCATION</b>				
<i>All families in Boulder County have access to high quality early childhood programs and services. A high value is placed on parental choice and all venues for early care and education including homes, both licensed or unlicensed, centers and preschools need to be: affordable, accessible and available and of high quality. Should a parent choose to provide in-home care for their child, they will have access to high quality family support and parent education programs and services.</i>				
<b>Need/Gap</b>	<b>Relevant Data/ Research/ Information</b>	<b>Current Strategies</b>	<b>Possible Strategies</b>	
Inadequate capacity for infant/toddler care	Capacity in BOCO: 580 infant slots in 2007 (NACCRRAware)	Recruitment and Training;	Early Head Start; EQ Training 2x per year; At Home Infant Care program; Home Based Option	
Inadequate capacity for native Spanish speaking and culturally competent care	Capacity in Boulder County: 23 Spanish speaking family child care homes in 2007 (NACCRRAware)	Recruitment and Training; Enhanced Referral Program;		

Inadequate capacity for children with special needs and/or challenging behaviors	Self reported skills/training in several special needs captured in NACCRRAware	LUMMA; PASO Kid Connects	
Inadequate capacity of subsidized programs to serve all eligible families.	BVSD CPP waitlist for preschool : 96 children; HS Needs Assessment estimated unmet need for 458 low income children; Expanded eligibility does not translate to expanded capacity (e.g., HS can serve up to 130% of FPL, but virtually all families are below the FPL, CLIFF can serve up to 300% FPL, but most are below the FPL)	Child Care Certificate Program (GAP/CLIFF)	
Inadequate capacity for affordable care for families who are not eligible for subsidized programs.			
Inadequate options for flexible care (e.g., drop-in, non-traditional hours, sick care) that meets needs of working families	Capacity in Boulder County: 311 weekend slots and 414 evening slots in 2007. (NACCRRAware)		
There is no single, standardized measure of quality and very little data on quality across the system	Approximately 5% of settings have current ratings from Qualistar; 19% of Centers are accredited (NACCRRAware)	Qualistar; NAEYC; NAFCC;	Qualistar rating more aligned with licensing standards
Quality rating/accreditation is costly, funding is inconsistent		ELF (currently not funded)	
Without sufficient capacity, quality rating/accreditation is limited in it's utility to inform consumer choice			
Tremendous variation in amount and content of staff orientation across programs	e.g., State requires 8 hours of orientation, Head Start does 10 days of orientation; ECE 101 content varies across instructor/institution		Shared Services Model
Family Child Care Homes need tailored training and coaching		Recruitment and Training has some tailored sessions; Child Health Promotion has community-based screenings to serve	

			children in FCCs.	
Family Friend and Neighbor (FFN) providers are largely “invisible”			PASO identifying Latina FFN providers	
Addressing and measuring quality of FFN care is complex; change is incremental.			LUMMA; PASO	Bank St. FFN Quality Assessment Tool; Massachusetts Model
Top training needs identified in 2008 Assessment were: addressing social and emotional needs of young children, responding to challenging behaviors, and helping children manage transitions			Kid Connects; Incredible Years	JFK Partners Pyramid Training
Inadequate training on business side of ECE, e.g., human resources, accounting, etc.				Shared Services Model
Providers need more training on “red flags” and indicators of special needs			Imagine	
Big need for diversity training			Head Start doing training for HS staff; Cultural Competency training through Colorado Statewide Parent Coalition	Head Start could partner to expand training to broader group of providers
Need for training English speaking providers on importance of native language and literacy			Mary Culkin lecture series through Naropa University	
Overarching gap between training and integration into practice				
Need for expansion of ECE degrees at all levels (CDA,			TEACH Scholarships	

Director Certificate, Associate, Bachelors, Masters, and PhD).				
Need for increased capacity of higher education facilities to accommodate students, especially working, non-traditional, and ESL students	Front Range Community College capacity expansion			
Inadequate provider access to mental health consultants	Kid Connects; Incredible Years			
Inadequate nutritional value of meals and snacks in many ECE settings	Child Health Promotion Programs has a dietician on staff that consults with child care providers	Cost is a big factor; Child and Adult Care Food Program (CACFP) carries heavy administrative burden and guidelines are out of date, not culturally competent;	Technical assistance to help providers utilize CACFP; Advocacy to improve CACFP program; Shared Services Model	
<b>GOAL 4: READY COMMUNITY</b>				
<i>The community recognizes the importance of early childhood as integral to the quality of life in Boulder County and as a critical part of the continuum of social equity. The community implements policies which support all families with young children throughout the county.</i>				
<b>Need/Gap</b>	<b>Relevant Data/ Research/ Information</b>	<b>Current Strategies</b>	<b>Possible Strategies</b>	
Competition for funding, slots, kids, and services does not benefit children and families				
Inconsistent/changing eligibility guidelines and application procedures across programs are burdensome for families		TANF/CCAP has a fairly seamless referral process; Boulder County exploring this issue as part of Human Services Master Plan	Teresa Vast higher education model for calculating financial aid; Rick Brandon Parent Provider Assistance Package (PPAP)	
Limited incentives for providers to accept CCCAP families				
Perceived barriers to accepting CCCAP children				
CCCAP families do not have same “purchasing power” as				Put CCCAP subsidy on a debit card that parents can use.

full pay families				
ECE is not a priority of school districts				
ECE needs to be more of a public education issue				ECCBC collaboration with The Community Foundation Serving Boulder County to increase community awareness of and appreciation for early childhood
Need for increased community role in promoting resiliency in young children				Assets model Bridges Out of Poverty
Wages for ECE workers are inadequate	2 issues: Livable wage, and wages are inadequate to promote quality		TEACH scholarships	Increasing funding for TEACH scholarships and link pay to academic credentials
Services are fragmented; there is no coordinated system in place				Human Services Master Plan Bridges Out of Poverty Network of Care