



MINUTES

Early Care Best Practices Study Committee

October 31, 2007

First Meeting

MEMBERS PRESENT:

Senator Becky Schmitz,
Temporary Co-chairperson
Senator Robert E. Dvorsky
Senator Dave Mulder
Senator Amanda Ragan

Representative Cindy Winckler,
Temporary Co-chairperson
Representative Linda Miller

MEETING IN BRIEF

.....

Organizational staffing provided
by: John Pollak, Committee
Services Administrator,
(515) 281-3818

Minutes prepared by: Nicole
Hoffman, Senior Legal Counsel,
(515) 281-6329

- I. Procedural Business
- II. Early Childhood Iowa
- III. Family Support Coordinator
- IV. Fiscal Information
- V. Major Family Support Programs Panel
- VI. Iowa Public Television (IPT)
- VII. Loess Hills AEA
- VIII. Discussion
- IX. Materials Filed With the Legislative Services Agency



Early Care Best Practices Study Committee

I. Procedural Business

The first meeting of the Early Care Best Practices Study Committee was called to order without a quorum at 10:13 a.m. on October 31, 2007, in the Supreme Court Consultation Room of the Statehouse. Temporary Co-chairperson Winckler recessed the meeting at 11:55 a.m. for lunch, reconvening at 1:05 p.m. The meeting was adjourned at 4:33 p.m.

Next Meeting. The second meeting of the Committee is scheduled for November 26, 2007.

II. Early Childhood Iowa

Ms. Ruth Krueger, Mid-Iowa Community Action (MICA), and Ms. Gretchen Hageman, Department of Public Health (DPH), described the Early Childhood Iowa (ECI) Initiative and its strategic plan. The initiative is a voluntary alliance of stakeholders in early care, health, and education that affect children through age five. Its purpose is to support a comprehensive, integrated early care, health, and education system for Iowa. Staffing is provided through DPH. The initiative has an annually updated strategic plan involving six stakeholder groups relating to programs and infrastructure.

Desired Results and Priority Strategic Goals. The initiative has established the following five desired results, with respective priority strategic goals for fiscal years 2007-2009: healthy children, with goals of increasing access to and utilization of social, emotional, and mental health services and increasing access to and utilization of preventive health care services; children ready to succeed in school, with goals of increasing access to affordable quality early learning environments for all children and increasing the capacity of schools to be ready to meet the educational needs of all children; secure and nurturing families, with goals of increasing positive relationships between children and parents and increasing effective opportunities to learn about child development and parenting skills; safe and supportive communities, with goals of increasing the safety of young children and families in their communities and increasing community investment in the early care, health, and education system; and secure and nurturing early care and education environments, with goals of increasing the number of quality early care and education environments for all children and increasing parent and community demand for quality in early care and education environments.

Quality Services and Programs Group. The purposes of the Quality Services and Programs stakeholder group are to expand early learning environments, create and maintain links with entities that support the development and improvement of services, and to incorporate evidence-based knowledge. The group has developed many products to support evidence-based practices, including the Family Support Leadership Group led by Janet Gartin; definitions of “family support,” “parent education,” “evidence-based,” and “promising practices”; family support issue briefs, evidence-based assessment tools and workbook (ways of helping programs evaluate whether they are evidence-based and to develop programs); and a school readiness document. Planned future products and initiatives include continuation of the Family Support Leadership Group, issuance of a family support supervisor issue brief, development of a family support supervisor curricula, and continuation of technical assistance for local programs on evidence-based practice.



Questions/Comments. In response to a question from the Committee, Ms. Hageman stated that, although the federal grant for the program will end, federal partners want to find more funding to keep moving forward, with collaboration with other federal programs. In addition, the program has the commitment of state agencies and local entities. Temporary Co-chairperson Winckler raised the issue of linkages between the four-year-old preschool program and the entities involved in the ECI initiative. The presenters said that, although the link was already there, the preschool requirements are helping build the collaborative efforts between all the entities. Committee members requested copies of the ECI strategic plan and evidence-based research workbook (distributed later in the meeting) and the early learning standards from the Department of Education.

III. Family Support Coordinator

Ms. Janet Gartin, Family Support Coordinator, Office of Community Empowerment, Department of Management, provided an update on efforts so far with this recently created position and the newly created Family Support Leadership Group. She noted that the community empowerment initiative began with a high degree of local control and many family support programs were developed without research-based information. Her position is intended to improve the quality and consistency of programming. Currently, it is estimated that out of the 227,062 children in the state through age five, 13 percent, or 29,756, are involved in various publicly funded family support programs. It is estimated that over one-third of the families being served are not being served with a recognized model. She provided an overview of the major types of family support programs that were covered during the panel presentation held in the afternoon.

Iowa Peer Review Process/Iowa Family Support Credential and Family Support Standards.

Ms. Gartin and the leadership group have accomplished all of the following in the past several months: created a family support Website; began a systematic plan for professional development; created a draft set of basic family support standards; piloted peer review in three sites (groups in Mount Pleasant/Keokuk, Washington County, and Jones County); and obtained permission to use as a starting point the Wisconsin Children's Trust Fund core competencies for workers and supervisors. The Iowa Peer Review Process involves application and selection of a program to be reviewed, a self-assessment, a two-day site visit with a multilayered approach, a final report, and a quality improvement plan. The office will soon make generally available the Iowa Family Support Credential, initially targeting programs without another sort of credential.

The draft set of basic family support standards includes 16 program service standards, 17 organizational standards, and many second-order standards. The Iowa Family Support Peer Review Process uses the Council on Accreditation four-point rating scale for each standard.

Future Plans. In the future, Ms. Gartin and the leadership group plan to identify standard family support outcome measures, develop common demographics for support, implement the Iowa Peer Review Process and the Iowa Family Support Credential, and develop a curricula for supervisors.

Questions/Comments. In response to questions from the Committee, Ms. Gartin stated that it is often difficult to identify children who are "at-risk" and in need of program services. Temporary Co-



Early Care Best Practices Study Committee

chairperson Winckler stated that the state needs to identify wraparound funds for the future of the program.

IV. Fiscal Information

State Empowerment Facilitator Shanell Wagler, and Legislative Services Agency Fiscal Services Division staff Ms. Lisa Burk and Ms. Robin Madison, discussed a spreadsheet describing federal, state, and county or other local funding for family support and parent education programs. The spreadsheet identifies the department or local government involved, service or program, numbers and ages served, program location, and funding sources involved for FY 2005-2006 and FY 2006-2007. Ms. Madison provided additional information concerning the new funding appropriated through the community empowerment initiative for early childhood programs for FY 2006-2007, FY 2007-2008, and FY 2008-2009.

Questions/Comments. In response to a question from Representative Miller, Ms. Wagler stated she would try to get information regarding services provided by United Way agencies in the state.

V. Major Family Support Programs Panel

Ms. Gartin moderated a panel which included the following:

Parents as Teachers (PAT) Program. Ms. Betsy Moritz, Prairie Lakes Area Education Agency (AEA) located in north central Iowa, described how the program operates. The program begins at birth and continues until a child enters kindergarten using home visiting by certified parent educators, group meetings, and includes developmental health, vision, and hearing screenings.

The PAT model is a national model used in many programs in the state sponsored by various organizations including school systems, government agencies, community action agencies, health departments, private or public nonprofit agencies, and other entities. Programs are funded through a variety of public and private sources. The communities served are primarily rural and small-town. Eighty-eight percent of the families served by the program are considered “at-risk” and approximately 15 percent of the children screened are referred for further evaluation.

Ms. Moritz stated that the cost and accessibility of PAT training in the Prairie Lakes area is challenging and that the uncertainty of PAT funding inhibits the program’s ability to plan. In response to a question from Temporary Co-chairperson Winckler regarding the consistency of the the PAT program across the AEAs, Ms. Moritz stated that it depends on the funding awarded to the AEA.

Family Development and Self-Sufficiency (FaDSS) Grant Program. Ms. Danielle Leeser, Four Oaks, explained that the FaDSS Program is statewide and targets parents involved in the Family Investment Program (FIP) who are at the greatest risk of long-term dependency on public welfare. The FaDSS mission is to improve the lives of families at risk of long-term welfare dependency or family instability by creating opportunities for self-sufficiency. The program receives referrals and provides linkages with the Department of Human Services service unit, income maintenance, and PROMISE JOBS Program. The program reaches 3,500 families annually statewide (10-11 percent



of the FIP population). The Department of Human Rights conducts on-site reviews of local programs at least annually.

The Four Oaks program covers Dubuque, Delaware, Jones, Washington, Johnson, Linn, Benton, and Iowa Counties and serves 285 families, with waiting lists in all counties. The families served are primarily those with female heads of household (81 percent), with the balance being two-parent families. The top five barriers for families in the area are being a survivor of physical/emotional abuse, a past victim of domestic violence, a past substance abuser, an adult lacking a high school diploma or general equivalency diploma (GED), and having a child with special needs. Fifty percent of the families served had five or more barriers and almost 40 percent had two to four barriers.

The FaDSS Program provides goal-focused home visits at least monthly, family assessments addressing barriers to self-sufficiency, service referrals as needed (including mental health and substance abuse), advocacy (including attending school and other meetings with clients), and group activities. The Four Oaks program addressed child development and parenting standards locally by incorporating the Parents as Teachers curriculum into their home visits, which also assists with the high special needs population. Staff is also all trained to use the maternal depression screenings.

Ms. Leeser stated that the Four Oaks program is helping to successfully transition families from FIP with a 90-day continuance, with 70 percent still being off FIP one year later.

Healthy Opportunities for Parents to Experience Success — Healthy Families Iowa (HOPES-HFI). Ms. Mary Odell, Lutheran Services in Iowa (LSI) (offered by LSI in nine counties, 12 sites), described how this program operates targeting at-risk, low-income families with a nationally tested home visiting model with high-quality standards. The goals of the HOPES-HFI Program are to promote positive parenting, improve child health and development, and prevent child abuse and neglect and other poor childhood outcomes. The program is part of the national Healthy Families America (HFA) initiative and follows the “best practices standards” to ensure quality services in accordance with established research-based guidelines. The program receives referrals from hospitals, WIC (Women, Infants, and Children Nutrition Program), physicians, and other community resources.

The program has three critical elements: initiation of services prenatally or at birth (including the use of a standardized assessment tool and emphasizing voluntary, persistent outreach); service content (intensive services including weekly home visits for at least six months after birth and long-term services over a period of three to five years, cultural sensitivity, a focus on supporting parents as well as parent-child interaction and child development, linkages to other services, and limited worker caseloads); and selection and training of staff (personal characteristics important, intensive training on role, wraparound and ongoing training, and effective supervision). All 12 HOPES-HFI sites in Iowa are credentialed by HFA. Such credentialing involves an extensive self-assessment review and a peer review site visit. The credentialing provides programs that implement the HFA model with fidelity a seal of approval.

Early ACCESS — Special Needs Children. Ms. Cheryll Jones, Child Health Specialty Clinics, Ottumwa, described Early ACCESS as a system of care approach applying all available programs



Early Care Best Practices Study Committee

and services to families with young, special needs children. Early ACCESS is a federal program under the Individuals with Disabilities Education Act (IDEA). The Department of Education is the lead agency, collaborating with DPH and DHS, child health specialty clinics, and other public and private early intervention service providers. The AEA service areas are used for service delivery engaging many agencies.

Children are eligible for Early ACCESS if they are under three years of age and they may have a health condition or disability that may cause later delays in development or they may already be showing delays in their ability to play, think, talk, or move (25 percent or more delay or based on clinical opinion). Early intervention services provided by the program at low or no cost to families include medical evaluations to determine eligibility; health services; family training/counseling; occupational, physical, or speech/language therapy; special instruction; and assistive technology.

Ms. Jones raised several issues to the Committee. First, the system is rapidly expanding — there are 2,932 children enrolled in Early ACCESS (2.5 percent of infants and toddlers), all of whom must be enrolled within 45 days of identification according to federal law. Second, the complexity of the needs of children and families has changed and the skills needed by service coordinators have increased. Finally, there is a continued need for adequate resources for Early ACCESS and the partners involved in early intervention.

Local Community Empowerment Coordinator — HOPES-like Program. Ms. Cindy Duhrkopf, Audubon, Carroll, Greene, and Guthrie Counties, explained how this program differs from the HOPES-HFI model for cost reasons and because the program is used with higher income levels in order to prevent stigma from attaching to the families involved in rural areas. The success of the program has been choosing to align closely with the state HOPES-HFI and HFA, allowing the program to use HOPES-HFI software, trainings, and guidance. Another success has been working as a four-county project, learning from one another.

The program differs from HOPES-HFI in that it accepts enrollment prenatally through four years of age (HFA model enrolls families prenatally up to three months of age) and it accepts any family regardless of risk level. The program is a blend of HOPES-HFI elements, PAT educational elements, and Early Head Start model group socialization aspects. Ms. Duhrkopf acknowledged that their approach is not research-tested, which pushes them to measure their outcomes zealously — outcome achievement is measured for each family every six months and the program's annual report includes measures of health, education, finance, and social outcomes. The program has initiated various quality improvement incentive projects, including projects to address educational development/school readiness of the children and maternal depression screening. The program also offers quarterly training opportunities for the professional development of family support workers.

Prevent Child Abuse Iowa — Parent Education in a Group Setting. Ms. Brenda Ristvedt, Volunteer Cooperative in Buchanan County, described how the Nurturing Parenting Program has been integrated into programming using home visits and group sessions with parents. The program is research-based and is recognized by national substance abuse, mental health, and child welfare organizations as an effective approach to address prevention of child abuse and neglect. The program was developed to be culturally specific and is family-centered. The program has been shown to be very cost-effective to implement.



In the five-year period beginning in FY 2003-2004, 250 families have participated in the program offered by Buchanan County Volunteer Co-op, with an average 85 percent completion rate.

Early Head Start Program. Ms. Kim Young-Kent, Tri-county Child and Family Services serving Black Hawk, Buchanan, and Grundy Counties, focused on the Early Head Start Program by providing national and local outcome information. There are 13 federally funded programs in Iowa. She emphasized the importance of local collaboration to ensure that families are served by the program and discussed the grant writing and multiple-funded sources secured to provide necessary services.

There are two program options: home-based (using PAT curriculum) and center-based (the parent must be working or in school full-time). Families must be living in poverty to participate. The program must be comprehensive and include weekly home visits. Thirteen percent of children participating in Early Head Start are also enrolled in Early ACCESS.

A state-funded pilot project was launched in October 2006 in Tama County, Sioux City, Council Bluffs, and Floyd County. The program model is home-based Early Head Start with supplemental weekly or bimonthly visits to child care providers.

Questions/Comments. Temporary Co-chairperson Winckler raised the following points upon completion of the panel presentations:

- A crosswalk of consistent measures and accountability goals is needed.
- The accessibility of the family support Website to members of the general public.
- The need for one application or point of entry for families to be funneled to the appropriate programs/services.
- The need to address the issue of waiting lists for programs.
- Assessment of AEA service pieces.
- Drug-testing recommendations.
- A need to “tighten up” the current broad definition of HOPES-like programs.
- A need to provide broader access to HOPES-HFI software.

In response to a question from Temporary Co-chairperson Schmitz, Ms. Gartin stated that legislation to provide an initial home visit for every newborn was not necessary — some families do not need a home visit at all, but some need many more than one. Ms. Jones stated that the state should focus on identifying families at most risk and not stigmatize those families.

VI. Iowa Public Television (IPT)

Mr. Dan Miller, Executive Director and General Manager, IPT, described the Ready to Learn Program, an early literacy effort aimed at children through age 8 providing eight sessions over the course of a year at the local level for parents and children and for providers of care and children. At least 80 percent of the children reached are considered low-income, at-risk, or both. The program seeks to increase regular reading and discussion of books by distributing free children’s books and encouraging adults to participate in reading aloud. The program involves many partner organizations, volunteers, and coordination with IPT programming. An appropriation of \$100,000 was provided for FY 2007-2008.



Early Care Best Practices Study Committee

VII. Loess Hills AEA

Ms. Valerie Jensen, Associate Director, Loess Hills AEA, described the Fathers and Mothers Improving the Lives of Young (FAMILY) Children Program, which has been operating with no charge to families since the early 1990s in the Council Bluffs/Pottawattamie County area. The program combines home visiting, nutrition, screening, group meetings, and provision of resources to parents. The program is collaborative with the Visiting Nurses Association, the Iowa State University (ISU) West Pottawattamie County Extension Services — Teen Parenting Program, Early ACCESS, schools, and homes.

VIII. Discussion

Temporary Co-chairperson Winckler raised all of the following points at the end of the meeting:

- The Committee should look at consistent measurement standards for early care programs.
- Early care programs are all voluntary. Are there ways to improve access to and quality of programs, such as an overarching framework? Do other states have significant local control like Iowa or do they have more of a statewide approach?
- What is ISU Extension Services' role?
- The Committee should look at AEAs' roles statewide, including the budget percentage allocated to early care services.

IX. Materials Filed With the Legislative Services Agency

The following materials listed were distributed at or in connection with the meeting and are filed with the Legislative Services Agency. The materials may be accessed from the <Additional Information> link on the Committee's Internet Webpage:

<http://www.legis.state.ia.us/aspx/Committees/Committee.aspx?id=215>.

1. Committee Rules of Procedure.
2. Background Information Memorandum — John Pollak, LSA.
3. Definition for Family Support, Early Childhood Iowa, 2/4/05.
4. Effective Family Support Programs: Issue Brief #5 from Early Childhood Iowa (2/14/2007).
5. Early Childhood Iowa Presentation Slides — Ruth Krueger and Gretchen Hageman.
6. Early Childhood Iowa Leadership Agenda.
7. Early Childhood Iowa Organizational Overview.
8. Janet Gartin, Family Support Coordinator, Presentation Slides.



9. Janet Gartin, Family Support Coordinator, Summary of Family Support Standards.
10. Janet Gartin, Family Support Coordinator, Number of Children Served Age 0-5 Chart.
11. Major Family Support Programs Panel — Family Development & Self-Sufficiency (FaDSS) Grant, Danielle Leeser, Four Oaks.
12. Major Family Support Programs Panel — Parents as Teachers (PAT) Program, Betsy Moritz, Prairie Lakes AEA.
13. Major Family Support Programs Panel — HOPES-HFI Programs, Mary Odell, Lutheran Services in Iowa.
14. Major Family Support Programs Panel — Early ACCESS Programs - Cheryll Jones, Child Health Specialty Clinics.
15. Major Family Support Programs Panel — HOPES-like Program, Cindy Duhrkopf.
16. Major Family Support Programs Panel — The Nurturing Parents Program, Brenda Ristvedt.
17. Major Family Support Programs Panel — Prevent Child Abuse Iowa Annual Report 2007.
18. Major Family Support Programs Panel — Early Head Start Programs, Kim Young-Kent, Waterloo.
19. Iowa Public Television — Ready to Learn Program.
20. Area Education Agency Programs, Valerie Jensen, Loess Hills AEA.
21. Early Care Fiscal Information Spreadsheet (8.5 x 14).