

# New York State Early Childhood Initiative

New York State Early Childhood Advisory Council December 13, 2018

## Pritzker Children's Initiative

- The Pritzker Family Foundation seeks to expand access to high-quality services for at least one million at-risk infants and toddlers to get them on track for school by assuring: healthy beginnings, supported families, and high-quality child care.
- Pritzker has provided four state teams with planning grants to develop state policy agendas and will be providing three-year implementation grants.
- Pritzker is funding the following state teams:
  - North Carolina
  - Oregon
  - New York
  - California



### Building an Early Childhood Coalition

- Building on the work of the NY Equity Coalition, we are bringing together diverse stakeholders from across the state to advocate for policy changes that will increase the number of children who are on track for school readiness, with a focus on improving long-term outcomes for low-income children, children of color, and other under-served groups.
- With Pritzker's support, we have formed a planning committee, including business leaders, advocacy groups, immigrant groups, as well health care and child care providers.
- Over the past six months, we have conducted a landscape analysis, focus groups, and have identified key priorities and recommendations that will anchor the advocacy of our coalition going forward.



## Landscape Analysis

- Gaps Identified
  - Infant/toddler quality child care
  - Universal developmental screenings from birth
  - PN-3 coordinated system throughout the state
  - State budget supports
- Opportunities to Leverage
  - Build upon cross-sector local & state agency work currently in progress
  - New Early Head Start grants
  - New York State is seen as progressive nationally and more organizations and funders want to engage with PN-3 work at all levels
- Campaign Prospects
  - The need for a well-coordinated PN-3 system for the entire state
  - Identifying common themes that unite all programs and pilots currently taking place into a state-wide PN-3 system
  - Cultivating policymaker and elected officials to become champions for a well-coordinated state-wide PN-3 system



## Focus Groups -Overview

- Five focus groups were conducted between the end of October and early November.
- Focus groups had statewide representation:
  - Western New York;
  - Central New York; and
  - New York City and suburbs.
- Focus group participants represented diverse stakeholders:
  - Families, including immigrant parents;
  - Child care providers (center-based and family providers);
  - Pediatricians; and
  - Family engagement coordinators.
- 40 individuals participated in the focus groups.



#### **Child Care Providers**

- Quality of Staff = Quality Program
- More parent education and resources needed
- Lack of infant-toddler teacher prep programs and ongoing training
- Salary parity must be addressed
- El transition at age 3 needs to look like CPSE transition at age 5
- Need to rebrand family child care
- Expand Early Head Start
- Rethink eligibility
- Changes to system feel political
- Importance of shared services

"We support staff in getting their certifications and higher education degrees and then they leave for better paying jobs, mostly with DOE." "The QS Specialists connect all the pieces. They are extremely professional. People like to see them coming. They actually like children. QS works."

#### **Pediatricians**

- Lack of parenting education services for children under 5
- Integrate communication btwn EI and CPSE and primary medical care (other states have two way consent forms)
- El still functions by using a fax system. The El process is not standardized and is case worker dependent
- Rarely included in a CP case
- If an effort is made to increase screenings, then EI funding must also increase
- No reimbursement for ACES or other screenings
- Use the existing structures like ECDC to handle EI to CPSE transition
- Transportation can determine which primary doctor a parent might choose
- Dearth of infant mental health services
- Paucity of mental health services for mothers

"Engaging with the current system is a significant effort. Communication is not an expectation. If there were some level of coordination, it would go a long way to improvement. " "The screening rates for NYS place us at 49<sup>th</sup> out of 50 in the country."

#### **Immigrant Families**

- Need for improved safety and security
- Poor quality of providers
- Lack of parent education/ understanding of developmental milestones
- Need for more adult ESOL classes
- Concerns about transportation
- Concerns about quality of El specialists/ need for more El services
- Quality of local healthcare options, including lack of language access
- Need for home-based guidance or groups following birth
- Interest in more information on home- based services

" I am unsure when [my child] should start talking or when I should seek an interventionist or therapist." "I am fearful of leaving children in unknown hands."

### Focus Groups- Key Takeaways

#### Infrastructure

- There is a need for a coordinated and integrated system that serves parents and providers and that can provide data and resources necessary for quality services to be offered
- The system must be adequately funded

#### **Parent Support**

• Greater efforts must be made to educate and support parents

#### Early education and care

- Every child care environment must demonstrate intentionality around the safety of children
- High quality staff are critical for programs to be high quality

#### Health

- All children must be offered universal developmental screenings
- Early Intervention must be adequately funded, including seamless transition to Committee for Preschool Special Education
- Mental health supports for mothers and children are lacking



#### Our Vision and Campaign Focus

**Vision**: All New York children are healthy and developmentally on track at birth and throughout early childhood.

**Campaign Focus**: A prenatal to school-entry system that is committed to equity, qualitydriven, appropriately funded, well-coordinated, and cross-sector, and that fully embraces the racial, cultural, linguistic, and geographic diversity of New York children and families.



### Our Draft Priorities

**Priority 1**: New York's health, mental health, education, child care, social services, and safety net systems are connected through shared data and programmatic coordination, and have sufficient funding to meet the needs of families and providers.

**Priority 2:** Low-income families with young children are provided with opportunities to achieve economic security and better integrate into their communities.



### Our Draft Priorities

**Priority 3**: All families have supported access to programs that value strong and positive relationships with families and ensure that parents and children receive both screenings and a comprehensive and complementary set of services that promote maternal health and child development.

**Priority 4:** All families have access to and are supported in accessing affordable, high-quality, safe, and culturally responsive child care and early learning that are supported by a universal, transparent quality rating and improvement system.

