

# Nevada Early Childhood Advisory Council Application

June 2010

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## **(a) Objectives and Need for Assistance**

### **Overview**

Nevada has been hit by the economic downturn, experiencing the highest foreclosure and unemployment rates in the nation. According to the United States Department of Labor, Bureau of Labor Statistics, Nevada had the highest unemployment rate (13.4%) second only to Michigan (14.1%) as of March 2010.<sup>1</sup> According to RealtyTrac, Nevada has the highest rate of foreclosure with one in every seventy-six housing units receiving a foreclosure filing in March 2010.<sup>2</sup> The Food Research Action Center (FRAC) reported that Nevada experienced the largest increase in SNAP/Food Stamps caseloads of all states between February 2009 and February 2010 (45.5%), and the largest increase across all states in SNAP/Food Stamp usage over a five year period with a 117.8 percent jump since 2005.<sup>3</sup>

The Kids Count Data Center reports Nevada has the highest percentage of children ages three to five (58%) not enrolled in a nursery school, preschool or kindergarten.<sup>4</sup> In addition, the *2009 Demographics Report: Child Care in the State of Nevada* reported that 135,115 children five and under (57.27%) in Nevada have all available parents in the workforce, meaning they need some type of care arrangement while parents work. With only 47,269 spaces available for children in licensed child care environments, licensed care is available to serve less than 35% of children in need of care. Additionally, just 9% of eligible children are served by Head Start programs, and slightly more than 1% of eligible children are served by State funded Pre-

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<sup>1</sup> Unemployment Rates for States, Monthly Rankings, Seasonally Adjusted March 2010 found online at <http://www.bls.gov/web/laus/laumstrk.htm>, May 11, 2010

<sup>2</sup> National Real Estate Trends, map and statistics found online at <http://www.realtytrac.com/trendcenter/> May 11, 2010

<sup>3</sup> Food Stamp Program Participation Data found online at [http://www.frac.org/html/news/fsp/2010.02\\_FSP.htm](http://www.frac.org/html/news/fsp/2010.02_FSP.htm), May 11, 2010

<sup>4</sup> Kids Count Data Center, Data Across States, Children Ages 3 to 5 not enrolled in nursery school, preschool, or kindergarten found on line at <http://datacenter.kidscount.org/data/acrossstates/Rankings.aspx?ind=5109> May 11, 2010

Kindergarten. The demographic report also found 6,932 people work in licensed child care centers in Nevada, and 517 work in licensed home-based care. An additional 2,933 people work in school age programs. Starting wages of aides in licensed child care centers are less than eight dollars an hour, while the average wage of licensed center directors is \$16.05 per hour.<sup>5</sup> Given that the living wage in Las Vegas for a family with two parents and two children is \$26.62 per hour, child care workers are clearly unable to support their families without assistance.<sup>6</sup> In addition, licensed child care may not meet standards of quality given that Nevada does not have a statewide Quality Rating and Improvement System (QRIS).

The 2009 legislative session resulted in major cuts to state-funded programs due to decreased revenue from gaming and tourism, the state's largest industry and source of state revenue. It is timely then that Nevada's early childhood programs closely study how to best use limited resources, increase efficiency in delivery of those services and develop a cohesive system of early childhood services at the state and local level. These efforts will ensure that children living in rural, frontier and urban areas of the state receive the support necessary to enter school ready to learn.

Governor Gibbons established Nevada's Early Childhood Advisory Council by executive order (see Appendix A) in September 2009. Council members were appointed during the last quarter of 2009 and convened for the first time in January 2010. The State of Nevada Early Childhood Advisory Council is comprised of 13 members including those identified in the Head Start Act plus a business person and a parent. A complete listing of members begins at the bottom of page 41 in the Approach section. ECAC members are willing to invest time, resources

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<sup>5</sup> Elquist, M. (2009). *Child care in the State of Nevada: 2009 demographics report*. Reno, NV: The Children's Cabinet, Inc.

<sup>6</sup> Living Wage Calculator (Pennsylvania State University) found online at <http://www.livingwage.geog.psu.edu/places/3200340000> May 11, 2010

and effort to sponsor the research, invest where necessary and create a solid plan that links all state and federal early childhood funding and programs together across departments.

### **Availability of Quality Early Care and Education**

The Bureau of Services for Child Care reported a total of 942 licensed child care facilities in the State of Nevada as of June 30, 2009.<sup>7</sup> Of those, 38 (or 4%) were Head Start programs, all of which are licensed. A total of 48 facilities are accredited, including 39 centers, six licensed family child care homes and three out-of-school programs.

### **State-funded PreKindergarten**

The 2009 Nevada State Legislature passed (AB) 563 that continued funding for the Nevada Early Childhood Education (ECE) Program appropriating \$3,338,875 per year for the 2009-10 and 2010-2011 fiscal years. The Nevada Department of Education (NDE) must use that money to award competitive grants to school districts and community-based organizations for early childhood education programs. Grants must have a parenting component, which was specified in the original legislation for the Nevada ECE Program. Families are eligible for the program if they have a child until the child is eligible to attend kindergarten.

In July 2009, NDE awarded a competitive grant to 11 of the 13 school districts and community-based organizations that applied to operate an early childhood education program based on the recommendations of peer reviewers. Ten of the successful applications were school districts, including Carson City, Churchill, Clark, Elko, Humboldt, Mineral, Nye, Pershing, Washoe, and White Pine Counties. The eleventh application was awarded to Great Basin College in Elko. Despite flat funding, two new sites were funded due to increased collaboration.

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<sup>7</sup> Nevada Department of Health and Human Services. (2009). *Statewide licensing report January 1, 2009 to June 30, 2009*. Carson City, NV: Division of Child and Family Services, Bureau of Services for Child Care.

During 2008-09, the 10 Nevada ECE projects provided services to 1,089 families, including 1,123 children and 1,130 adults (through parenting programs). The 1,123 program children represent 1.4 percent of the estimated 78,176 three to four year-old children in Nevada (2008 American Community Survey). Of the 1,123 children, 78 percent (878 children) did not participate in any other educational program prior to Nevada ECE, and 85 percent (957 children) did not participate in any other educational program while in Nevada ECE. Without Nevada ECE, many children may not have participated in any educational program before enrolling in school. For many children, Nevada ECE helps prepare them for school. 1,123 children were served in Nevada ECE during the 2008-09 school year.

The annual evaluation design of Nevada's Early Childhood Education Program is based on five outcome indicators: two indicators measure the developmental progress of children and three indicators measure parental involvement. Four of the outcome indicators were developed in June 2001 and the fifth indicator (Outcome Indicator 2) was added in 2007-08 to better measure developmental gains of enrolled children. NDE reviews the benchmarks annually based upon the performance results of the participants, as directed by AB 627. In fact, NDE raised the benchmarks for three indicators in 2008-09: Indicators 1, 3, and 4. The results show that Nevada ECE children and parents exceeded expected performance levels for all five indicators, as shown in the table beginning on the next page.

<p align="center"><b>State of Nevada Pre-Kindergarten Outcome Indicators</b></p>	<p align="center"><b>Actual Measure (Exceeded Goals on all Indicators)</b></p>
<p><b><i>Indicator 1: Reading Readiness: Individual Student Gain</i></b>  Eighty percent (80%) of Early Childhood Education children from three years old until they enter kindergarten with a minimum of four months of participation will show improvement in auditory comprehension and expressive communication as measured by a standard score increase on the Peabody Picture Vocabulary Test (PPVT) and the Expressive One-Word Picture Vocabulary Test (EOWPVT).</p>	<p align="center">PPVT- 87.6 % EOWPVT- 90.5 %</p>
<p><b><i>Indicator 2: Reading Readiness: Average Gain</i></b>  Early Childhood Education children from birth until they enter kindergarten with a minimum of four months of participation will make an average gain of seven standard score points in auditory comprehension as measured by the Peabody Picture Vocabulary Test (PPVT) and of 10 standard score points in expressive communication as measured by the Expressive One-Word Picture Vocabulary Test (EOWPVT).</p>	<p align="center">PPVT- 11.1 points EOWPVT- 14.3 points</p>
<p><b><i>Indicator 1: Individual Parenting Goals.</i></b>  Ninety-two percent (92%) of participating adults enrolled in Early Childhood Education for at least four months will meet at least one goal related to parenting skills (e.g., developmental appropriateness, positive discipline, teaching and learning, caregiving environment) within the reporting year.</p>	<p align="center">99.2 %</p>
<p><b><i>Indicator 2: Time with Children</i></b>  Seventy percent (70%) of first-year Early Childhood Education parents will increase the amount of time they spend with their children weekly within a reporting year.</p>	<p align="center">94.8 %</p>

State of Nevada Pre-Kindergarten Outcome Indicators	Actual Measure (Exceeded Goals on all Indicators)
<p><b><i>Indicator 3: Reading with Children</i></b>            Seventy percent (70%) of first-year Early Childhood Education parents will increase the amount of time they spend reading with their children within a reporting year.</p>	<p>94.4 %</p>

**Nevada’s Publicly Funded Early Childhood Programs**

Most of Nevada’s early childhood services are housed in the Nevada Department of Health and Human Services. However, two positions in the Nevada Department of Education (NDE) are dedicated to early childhood services. The Early Childhood Education Consultant manages State-funded Pre-Kindergarten grants, described in the previous section. The Early Childhood Special Education Consultant manages Nevada’s Part B 619 apportionment to serve children three to five years of age with special needs through local education agencies.

The remaining federal and state funded programs serving young children are housed in the Department of Health and Human Services (DHHS). The Head Start State Collaboration and Early Childhood Systems Office, which manages Nevada’s Head Start State Collaboration and Early Childhood Comprehensive Systems projects, is housed in the DHHS Director’s Office.

The remaining early childhood programs in DHHS are distributed across five of the six divisions in Nevada’s DHHS. An organizational chart for DHHS is provided in Appendix B. The six divisions and their respective early childhood programs are indicated in the table on the next page.

Division	Early Childhood Programs
Health Division	<ul style="list-style-type: none"> <li>• Nevada Early Intervention Services (NEIS)</li> <li>• Maternal Child Health Program (Title V)</li> </ul>
Child and Family Services	<ul style="list-style-type: none"> <li>• Bureau for Child Care Services</li> <li>• Early Childhood Mental Health Services</li> <li>• Child Welfare</li> </ul>
Aging and Disability Services	<ul style="list-style-type: none"> <li>• Part C (evaluation, management and planning for NEIS)</li> </ul>
Health Care Financing and Policy	<ul style="list-style-type: none"> <li>• Medicaid</li> <li>• Nevada Check Up</li> </ul>
Welfare and Supportive Services	<ul style="list-style-type: none"> <li>• Child Care and Development</li> </ul>
Mental Health and Developmental Services	<ul style="list-style-type: none"> <li>• None</li> </ul>

As a result of programs being managed in different divisions, they often are unaware of the policies and plans of the other programs creating increased discontinuity and alignment of program goals that in turn affect the ability to provide more comprehensive services.

***Strategic Needs Assessment***

Nevada does not have the resources to conduct a Strategic Needs Assessment. However, the Early Childhood Advisory Council understands that conducting a needs assessment is imperative to understanding the needs of our youngest citizens, which is essential to effective planning and implementation to meet those needs. Prior to preparing this application, the Nevada Department of Education (NDE) was awarded a Ready Kids, Ready Schools, Ready Communities planning grant intended to assist states in preparing proposals for accessing

American Recovery and Reinvestment Act (ARRA) funds. To help promote increased collaboration and coordination across sectors, it was determined that the planning grant would be used to facilitate a planning retreat that included the newly formed state ECAC members as well as other early childhood system stakeholders to develop a statewide plan in developing a comprehensive early childhood system in Nevada. This included providing input for the early childhood education priority of NDE's Race-to-the-Top (RTTT) proposal, the state ECAC proposal, as well as providing a framework for any other potential early childhood funding sources that may come available in the future. Through collaboration with the Head Start State Collaboration and Early Childhood Systems Office Director, also the Governor's appointee for coordinating efforts of Nevada's Early Childhood Advisory Council, it was determined that the main focus of this planning retreat would be to plan our approach to submitting Nevada's request for ECAC funding from the Office of Head Start. An outside facilitator worked with DHHS and NDE to plan the retreat during which the following strategic planning was conducted.

It was decided that all members of the ECAC would be invited to the retreat along with strategic partners. Planning retreat activities included analysis of strengths, opportunities and challenges, including potential barriers to successful implementation of a comprehensive statewide system of early childhood services in Nevada. That analysis was followed by discussion of each task of the ECAC listed in the Head Start Act, in addition to several that were added as priorities during the two year planning process and previous years work engaged in prior to establishing Nevada's ECAC.

## **Vision**

The following vision statement was created through a series of statewide focus meetings and further adopted by the state ECAC: *Nevada's children will be safe, healthy, and thriving*

*during the first eight years of life, and the system will support children and families in achieving their full potential.* Key elements that were identified as apart of this vision being achieved and coming to fruition include:

- Consistent health care and medical home for children for birth to age eight
- Quality, inclusive early childhood environments in a variety of settings with a diverse population of caregivers to meet the needs of individual families across all of Nevada
- Highly trained teachers earning a living wage
- Support and development for parents and parenting skills
- Nevada residents are knowledgeable about and value high quality early childhood environments
- Early Childhood programs are recognized as a good return on investment (ROI)
- Parent training is included in school curriculum for teens BEFORE parenthood
- A cohesive system exists integrating all services and sectors (eliminating silos)
- Early care and education without borders (community based and school based)
- Adequate and full funding of services
- All children are ready for school – developmentally appropriate benchmarks, evidence based, measurable
- All schools are ready for children
- Every child’s basic needs are met (a home, food, emotional support, etc.)

## Strengths and Challenges

Council members also identified strengths in Nevada, upon which such a system could be built as well as current challenges to creating a comprehensive and cohesive system of services. Perhaps not surprisingly, council members identified more challenges than strengths as indicated in the table below.

Strengths	Challenges
<ul style="list-style-type: none"> <li>• Nevada has a relatively small population and most players know each other and work well together (16 states have smaller populations according to 2009 population estimates from census.gov).</li> <li>• We are collaborative because we have to be.</li> <li>• Our informal networks work well together, because sometimes the formal networks are competing for the same money.</li> <li>• Personalities can be a positive factor when people work well together.</li> <li>• There are already strong collaborative communities in some of our rural areas to use as models (it's all about relationships).</li> <li>• Family Resource Centers partner and network statewide (leaping over the need and time to build infrastructure).</li> <li>• An increasing perception of the importance of early childhood care and education.</li> <li>• Diverse strong partners can and do work together.</li> <li>• Strong Higher Education partners coordinate</li> </ul>	<ul style="list-style-type: none"> <li>• Nevada is a large land-mass (7<sup>th</sup> largest of all states) with frontier, rural and urban communities with extremely diverse needs and issues. (Clark County School District is the fifth largest school district in the nation, while Esmeralda County is one of the smallest with 68 children enrolled in three schools during the 2008-2009 school year.)</li> <li>• Often limited resources create competition.</li> <li>• Personalities can be negative when they dictate who a person is willing to collaborate with.</li> <li>• Funding at inappropriate levels               <ul style="list-style-type: none"> <li>○ Fluctuation of state funding prevents stability; Level of state funding is not adequate to provide necessary services; Leveraging match at times is not feasible; Local funding is not optimized or leveraged for Early Childhood Systems; Variation exists across counties regarding the levels and focus on early childhood investments</li> </ul> </li> <li>• Policy makers and community members do not see the importance of intervention or providing early, preventative services (including legislators, county officials, early childhood communities, parents).</li> <li>• No one strong, consistent message regarding early childhood programs and recommendations to policy makers, businesses or the general public - we need to correct the perception that education begins at 1<sup>st</sup> grade.</li> <li>• No consistent system of collecting data and not using what is available to make decisions regarding priorities or to make the case for early childhood investment.</li> <li>• Nevada is suffering economically, resulting in a larger transient population (i.e., increase in Head Start and Early Head Start capacity, but serving a lower percentage of the</li> </ul>

Strengths	Challenges
<p>early childhood degrees in Nevada --they participate in our processes and are all at the table</p> <ul style="list-style-type: none"> <li>• Head Start State Collaboration and Early Childhood Systems Office is connected to the inner sources of state government including the Governor</li> </ul>	<p>eligible population).</p> <ul style="list-style-type: none"> <li>• First time mothers are much younger in NV, and their education level is lower.</li> <li>• 40% of teen mothers received late or no prenatal care in 2007 (according to the 2009 Nevada Kids Count Data Book<sup>8</sup>)</li> <li>• High teen pregnancy rate (an average of 46.3 teens in 1,000 gave birth between 2005 and 2007 according to Kids Count<sup>9</sup>).</li> <li>• Politics – term limits mean that we will have a lot of new legislators in 2011. Need to seize this opportunity to help spread the message and value of investing early.</li> <li>• Limitations of state based programs in terms of advocacy. Need a broader community voice (need statewide and grass roots efforts).</li> </ul>

<sup>8</sup> 2009 Nevada Kids Count Internet Data Book accessed online at [http://kidscount.unlv.edu/kc\\_dbcontents\\_2009.html](http://kidscount.unlv.edu/kc_dbcontents_2009.html) June 18, 2010

<sup>9</sup> Ibid.

## **Recommendations & Opportunities**

Council members were asked to identify opportunities for developing the ideal comprehensive early childhood system in Nevada. Establishment of Nevada's Early Childhood Advisory Council has already presented opportunities for greater understanding about children's needs and issues of the programs serving them. Increased collaboration and coordination is already occurring. This application and the opportunity to fund the projects discussed within it through funding from the Office of Head Start represents perhaps the greatest opportunity Nevada has seen for coordination of early childhood serving programs at both the state and local level. *Voices for America's Children* will soon have a state chapter in Nevada and Early Childhood will be one of the issues they focus on. It will be an independent non-profit advocacy organization.

In addition, council members agreed this and future planning processes engaged in as a result of this application provides the opportunity to define systems elements and forge a strategic effort to include the core elements of a comprehensive early childhood system identified at the national level. Each component in the system is relatively universal, but definition and further discussion regarding Nevada's unique needs are required along with identification of related tasks to improve existing services and strategies for filling gaps in services. This framework will guide the work of the state ECAC as outlined in this application, aligned with the Head Start Act to build a cohesive system and leverage cross-sector state and federal investments. The table on the following page is the Council's first stab at defining the core elements of Nevada's Early Childhood System and what those elements mean for us.

**Opportunities within the Core Elements of an  
Early Childhood Development System**

- Funding – support for the full system
- Governance – anchors of authority
- Standards – standards and expectations for children, programs, and teachers/providers
- Data – gathering and USING information to improve the system
- Monitoring – data and standards link to monitoring
- Professional Development – building capacity and quality of those interacting with the children as well as our state and local systems
- Communication – tuning and refining our messages to ensure we are sending the same message

**ECAC Tasks in the Head Start Act & aligned with Nevada ECAC**

The Head Start Act as amended in 2007 describes seven specific tasks for State Advisory Councils. During the planning phase for establishing Nevada’s Early Childhood Advisory Council, three additional tasks were recommended to ensure a comprehensive approach to serving young children by meeting their needs and the needs of their families. The following sections begin by describing each of those tasks, and recommendations and strategies related to each.

**NEEDS ASSESSMENT**

*(I) Conduct a periodic statewide needs assessment concerning the quality and availability of early childhood education and development programs and services for children from birth to school entry, including an assessment of the availability of high-quality pre-kindergarten*

*services for low-income children in the State.*

Nevada has some information and data that can inform this process already, although some of the information is limited and a comprehensive assessment of needs and availability of high quality services has never been completed.

### **State of the State: Needs Assessment Information and Data Currently Available**

Child Care Licensing tracks the number of licensed facilities including homes and centers each month, in addition to the number of available spaces for children in those facilities. However, quality is not rated. The Silver State Stars Quality Rating and Improvement System pilot is in process in the Las Vegas area for two years. Although data is not publicly available during piloting of the system, aggregated findings regarding the quality of the 24 centers involved will be made available at the end of FY11.

Early Intervention Services conducts an annual Family Survey assessing family satisfaction with the quality and availability of services provided. Longitudinal data from the State Pre-Kindergarten Program is available. Additionally, some local school districts use Title I funding to expand pre-kindergarten enrollment. Data collection for Title I programs is not required. However, some districts are collecting outcomes on their state pre-kindergarten programs regardless of the funding source.

Other sources of data include Head Start Program Information Reports, which describe number of children served, teacher education levels and services provided to children in specific communities served by grantees in Nevada. Additionally, Head Start grantees conduct community needs assessments every three years and that information could be accessed. The number of accredited child care centers is known. Child Care Subsidies serve approximately 7,000 children per month, but the quality of care those children receive is not assessed outside of accreditation.

The Nevada Registry places early childhood teachers/providers on the Career Ladder and approves informal training for licensed providers. Licensing regulations were updated in 2009 requiring that all teachers/providers in licensed facilities across the state be registered by 2012. The Registry Advisory Committee has been discussing trainer criteria for some time. However, concrete requirements have not been confirmed due to the high percentage of informal trainers placing at level three or lower (Child Development Associate, no degree but some college coursework completed) on the Career Ladder. If criteria for trainers was linked to degree attainment only, for example, more than half of registered trainers today would no longer be approved to provide training. The Registry Advisory Committee, therefore, needs to determine the impact of those decisions and anticipate consequences before such criteria is implemented.

The Nevada State Demographers Office has data regarding children identified by age group. However, accessing the data is challenging, particularly when disaggregating it by county. Additionally, there is little data on children with undocumented citizenship and no data regarding the quality of care provided for children in out-of-home unlicensed care outside of the subsidy system. Given the need for care described in the first section of this application, it is assumed that many children needing care receive it from relatives and/or friends. Even if the Silver State Stars QRIS pilot were funded statewide, the quality of informal, unlicensed environments will remain challenging to evaluate.

Mental health services for children 0-3 are very limited and is virtually unavailable in rural areas; training for staff may be expanded to rural areas if funding permitted. ECCS funding will be used to sponsor a summit to address this need. There are few mechanisms for mental health consultation other than support for child care settings or Head start. Mental Health consultation is unavailable for families with children at home, in kindergarten or school age.

United Way of Southern Nevada has been collecting data for several years now on a quality improvement program for centers mostly in the Las Vegas area. Clark County School District allowed the children in the pilot to be given a unique identifier for long term data collection on child outcomes.

Early Childhood Special Education data including Early Intervention Services, Child Find and Part B 619 includes transition data and improvement in the three outcome areas defined by the Office of Special Education Programs. The number of children receiving respite services from the Northern Nevada RAVE Family Foundation is available. Additional agencies providing respite such as the Foundation for Positively Kids, Regional Centers in southern northern and rural Nevada serving people with disabilities, and Easter Seals have data. The Nurse Family Partnership program offered by the Southern Nevada Health District is evidence-based and collects data using the national model.

Kids Count Data Center in the Center for Business and Economic Research at UNLV updates Nevada's Kids Count data annually and is conducting a Southern Nevada Needs Assessment. In addition, the Parenting Education Survey was completed in 2009 by the Center for Program Evaluation in the Division of Health Sciences at the University of Nevada, Reno. Although it does not include all parenting education available across the state, it represents the responses of 57 individuals from 42 organizations.

Universal Newborn Hearing Screening collects data and could be better connected with EIS to ensure children with hearing deficits receive services as soon as possible after birth. Maternal Child Health is engaged in strategic planning, which includes analyzing health related data. They are also examining access to health care and availability of data where possible. The Nevada State Health Division in the Department of Health and Human Services is working on

integrating data in the Immunization Registry (WebIZ). The Nevada Institute for Children's Research and Policy (NICRP) has conducted a Statewide Kindergarten Health Survey for the last two years and plans to conduct it again in 2010.

NICRP has been contracted by the Child Care and Development Program to develop a statewide Early Childhood Data Warehouse. Data regarding the quality and availability of early childhood education programs and services is not available outside of accredited, state-funded or federally regulated programs (Head Start). NICRP will use a subcommittee of the ECAC to advise development of the Early Childhood Data Warehouse.

The different data sources identified illustrates a fragmented system of data collection at best. The following section identifies recommendations and strategies identified by the state ECAC for collecting information and data, and data still needed.

### **Recommendations and Strategies: Needs Assessment – Quality and Availability**

Further information is needed to determine the availability of data on children served by other community-based programs across the state. Home Visiting programs including Family to Family (F2F) Connections, the Parents as Teachers (PAT) and Home Instruction for Parents of Preschool Youngsters (HIPPO) and Early Head Start (EHS) programs are sources of data. The number of parents participating in Virtual Pre-K and data from an evaluation survey is available. Also, the Education Alliance in Washoe County has a statewide Parental Information and Resources Center (PIRC) grant for which data is collected.

The availability and accessibility of quality care for children with disabilities and special needs is unknown and needs to be assessed. The number of licensed facilities serving children with special needs or disabilities is unknown. While child care subsidies can be used by families with children diagnosed with disabilities or special needs, "purpose of care" as defined by CCDF does not include the need for respite. Respite programs are funded by Nevada's Community-

based Child Abuse Prevention (CB-CAP) and other sources, but there is no state wide data on respite or emergency care. NEIS agreed to add a question regarding the availability and accessibility of care for children with disabilities and special needs to the 2010 family survey.

Council members agreed that although much data is currently collected, very little of it is available to the public. If it is available, it is often difficult to access. A Comprehensive Data system including all services provided to young children and their families in the five critical areas of Health, Mental and Social Emotional Health, Parenting Education, Family Support Services, and Early Childhood Education needs to be developed.

## **COLLABORATION**

*(II) Identify opportunities for, and barriers to, collaboration and coordination among Federally-funded and State-funded child development, child care, and early childhood education programs and services, including collaboration and coordination among State agencies responsible for administering such programs*

### **State of the State: Status of Current Collaborations, Challenges, and Coordination**

Collaboration is often relationship-based given that it is not a mandated requirement. There are no policy driven incentives to collaboration across state or federally funded programs. Divisions still exist between service providers (e.g., Northern Nevada vs. Southern Nevada, those with higher education vs. those with less education), and all players are not at the table yet.

The Child Care and Development Program has collaborated with Head Start and Early Head Start grantees for many years to provide full day and/or full year spaces for children whose parents meet the purpose of care. Early Intervention Services in the north has entered into a memorandum of agreement with the University of Nevada, Reno Early Head Start grantee to have a classroom onsite at the Northern Nevada Early Intervention Services Office. Locally,

Head Start and State funded Pre-Kindergarten programs collaborate on teacher training, conduct joint enrollment, and often share buildings. Most Head Start and some community-based programs have teachers from Part B 619 of IDEA programs within school districts that serve children diagnosed with special needs. This often includes curriculum planning to address the learning needs of children with disabilities and/or special needs onsite.

### **Recommendations and Strategies: Collaboration and Coordination**

- Encourage programs to share resources to improve quality of local providers. Provide incentives for collaboration and braiding funding streams.
- Reach out to local service providers to assess barriers to and strategies for improving partnerships between programs and among community service providers.
- Promote and support Early Childhood Fairs modeled after Kindergarten, Health, or Senior Fairs, etc.
- Require Head Start programs receiving subsidy dollars to share resources with the local childcare community. Develop strategies to connect licensed child care programs to collaborations with Head Start programs.
- Increase spending of Title I funding on early childhood education in schools. Create materials for the purpose of advocating for using Title I to fund early childhood education. Develop presentation and panel for the statewide Title I directors meeting to demonstrate how this is being done effectively and the value of focusing on early investments.
- The creation of this council (ECAC) will help with all of these processes by making recommendations to decrease barriers and increase opportunities for collaboration. Develop materials and guidance on effective collaboration, such as building programs across sectors and braiding funding streams and requirements; and the importance of clarifying roles of

different players and programs to increase collaboration and reduce conflict.

- Strengthen guidance and requirements for collaboration within local councils and provide technical assistance to improve program and child outcomes.
- Connect with Title I directors about models that work and provide more support and efficiency for the programs. Demonstrate effectiveness of local collaborations. Provide outreach regarding benefits to improve understanding and help with structuring.
- Use media to raise awareness of the importance of early childhood investment. Identify media partners to personalize campaigns to specific groups and geographic areas.
- Promote transparent and coordinated funding decisions across service sectors.

## **INCREASING ACCESS**

*(III) Develop recommendations for increasing the overall participation of children in existing Federal, State, and local childcare and early childhood education programs, including outreach to underrepresented and special populations*

### **State of the State: Access Issues**

There is not one resource and referral system. There are numerous efforts at both the state and local levels to provide people with information and referrals (e.g., 2-1-1, Child Care Resource and Referral, Ready for Life website, etc.). As a result, people often do not know where to go for information on insurance, waiting lists, and other information.

Enrollment in licensed child care is down, but the 2009 Child Care Demographics Report released by The Children’s Cabinet still indicates there are not enough licensed child care spaces. Nevada’s Child Care and Development Program Administrator reports that “purpose of care,” the eligibility requirement for receiving subsidies regardless of income level, has decreased as unemployment has risen. Mechanisms for understanding which programs experience increases

and decreases during tough times need to be established. Are programs that are not fee based as linked to the economy? If so, how do we measure it? Head Start, Early Head Start, Child Care Subsidies, and State Pre-K programs all have waiting lists indicating greater demand for services than are currently available. In 2006, 13% of eligible children were enrolled in Nevada Head Start (and Early Head Start) programs. After additional slots were funded in 2009, Nevada Head Start programs had capacity to serve 9% of eligible children. This is likely an indication of the increased number of children living at or below the poverty level.

Federal programs encourage blending of funds but, currently it is difficult to obtain funding match among programs. Resources are limited to start with, which also creates challenges within itself. Where do at-risk or high need children receive services? Early Intervention encourages referral of children with special needs to early care and education programs for mainstreaming, but does not track where those children receive early care and education services. The infant and toddler population is underserved throughout Nevada communities. There is a gap in serving kids 0-3 that do not get services and are not in programs. Foster children 0-5 are also underserved. Foster families in the state are not required to access interventions for children in their care.

It is difficult to navigate the system and even find where the programs are located. Partnerships work best if non-competing, and non-threatening. How do we meet the needs of specific populations (e.g., Native, children in child welfare, kids on the edge of CPS)? Do information and referral systems know about these additional services?

### **Recommendations & Strategies: To Increase Outreach and Ultimately Access**

- Determine if we have enough slots for all children and families across all service sectors (similar to how the child care demographics report estimates the availability of licensed care)

for children needing care).

- Improve communication and dissemination of information about services to underrepresented populations.
- Make it easy for funders to see other funding sources of grantees so duplication of funding and services can be more easily tracked.
- Support and promote development of a Statewide referral system. Resource and referral should provide information for all children and all programs. Educate referral sources about each other and ensure they have accurate information.
- Use and build upon existing resources for referral such as 211, Ready for Life, The Children's Cabinet, etc.
- Increase access to Pre-Kindergarten by strongly encouraging use of Title I funding for early childhood services. Encourage common data collection as state-funded pre-kindergarten program by making the data collection system for that available to Title I program.
- Identify and/or develop and sponsor incentives for early childhood programs to co-locate and collaborate in order to increase access to services.
- Ensure that State funded Pre-K programs are included in resource and referral lists since they are not all licensed by regulatory entities. Preschools on school district property are not required to seek licensure. However, classrooms must have licensed teachers.
- Promote inclusion of child care staff in trainings sponsored by State Pre-K and Head Start programs.
- Develop incentives and guidance to increase the number of licensed child care providers serving children eligible for child care subsidies.
- Develop mechanisms for serving young children at-risk of needing intervention (in addition

to those already qualified or identified as needing intervention.)

- Find and share model community partnerships and regional services.
- State collaboration can provide an example for community partnerships and collaboration – develop more local connections (feeders) to state panels/councils.
- Seek out and include key players.

## **DATA**

*(IV) Develop recommendations regarding the establishment of a unified data collection system for public early childhood education and development programs and services throughout the State*

### **State of the State: Data Collection System**

Nevada does not have a unified early childhood data collection system. However, many programs currently collect data independently. Nevada Early Childhood Comprehensive Systems project funded a feasibility study in 2009 including recommendations and costs of establishing and maintaining an Early Childhood Data Warehouse. The State of Nevada Child Care and Development Program will use quality set aside dollars from the American Reinvestment and Recovery Act to fund the first two years of the data warehouse, which will be housed at University of Nevada Las Vegas (UNLV). Ideal elements identified by the Council include a consistent assessment of children's developmental capabilities at kindergarten entry. All kindergarten teachers across Nevada assess student skills upon kindergarten entry. However, that information goes into the child's school file and is not tracked in a data collection system, nor is there a standardized tool used to assess children's skill levels upon entry into school. If a standardized tool were used and data was collected on prior experience (i.e. who attended early childhood education programs), quality of early childhood programs could be assessed.

The Council confirmed its commitment to supporting and promoting development and sustainability of the Data Warehouse in the Nevada Institute for Children's Research and Policy that will be funded by CCDF ARRA dollars for first 2 years. The ECAC will form one central data workgroup to confirm elements of that data warehouse to phase in a comprehensive data collection system for early childhood in Nevada. Members discussed the importance of collaborating with other groups working on data collection systems development, such as the Governor's Blue Ribbon Panel. Resources may be combined to increase efficiency where possible. Other issues and challenges to consider included:

- States are required to assess child outcomes for special education (OSEP requirements)
- A majority of Head Start programs plus the Clark County School District utilize the online child assessment tool at cc.net. United Way of Southern Nevada is using the High Scope online child assessment system. Can we get an aggregated report from them for Nevada to demonstrate their effectiveness as programs vs. getting information on individual children?
- Programs have a fear that if we use their data it will impact their program (funding/participants?) How will data be used to improve their program? How can program and staff fears be ameliorated?
- We are in a new world now – programs need to demonstrate results, increasing accountability

### **Recommendations & Strategies: Data Collection System**

The data workgroup of the Early Childhood Advisory Council will clarify what data is necessary and what is desired in an ideal data collection system to phase in complexity of the system over time. The Council must increase its understanding about data already available, its accessibility and data still needed. A common definition of quality early childhood services must

also be adopted. The Council identified the following data elements to be tracked over time to paint a clear picture of services and related outcomes for young children in Nevada. This data and information will drive recommendations for funding priorities and program/service needs.

- Number of children in quality early childhood programs
- Percent of children ready to learn at Kindergarten entry
- Developmental “level” of children across domains
- Standardized common data elements to make the system useable
- Standardized Kindergarten entry screening data across child care, Head Start, State Pre-K, Early Childhood Special Ed (ECSE), etc.
- Promote use of data on children in publicly funded and community-based programs such as those just listed as a way to gather universal data for a large number of children.
- Include data related to transiency, nutrition (height & weight), immunizations; developmental assessment data, well-checkup. Identify sources and opportunities coordinate collection.
- Develop a standardized form, governance structure related to definitions and data-use standards, and connect with national organizations related to developing policy guidance around data collection that is currently being developed.

## **PROFESSIONAL DEVELOPMENT**

*(V) Develop recommendations regarding statewide professional development and career advancement plans for early childhood educators in the State*

### **State of the State: Professional Development**

Nevada has provided college scholarships for Early Care and Education professionals

using Child Care and Development Funds since 1998. Since 2001, Nevada has made great strides in planning and implementing supports for Professional Development across the state.

The Nevada Office of Early Care and Education was established in July 2001 under the Division of Welfare and Supportive Services to oversee the Child Care and Development Funds (CCDF), quality earmarks. The vision of this office is to promote and provide support, education, and resources to Nevada's child care community thereby increasing the development of high-quality child care environments for providers, families, and children.

The goals of the Office of Early Care and Education are:

1. Improve and maintain the quality and quantity of early care and education programs and services. Implicit in the definition of "quality" is safe, healthy, and developmentally and individually appropriate services. This includes both licensed and non-licensed services.
2. Increase the skills, education levels, and professionalism of field.
3. Increase the compensation, wages, benefits, and working conditions for early childhood professionals through public awareness, policy, and funding efforts. This includes public awareness, policy, and funding efforts to highlight the importance of quality early care and education in child development.
4. Increase parents'/guardians' knowledge and ability to understand the importance of early care and education, to be involved in their child's learning, and to make informed child care choices.
5. Improve the quality of early care and education programs and services, by providing quality intervention services for identified children with special needs.

The documentation of a professional development system has guided the work of the Office of Early Care and Education. Nevada's professional development system follows the

framework set by the National Child Care Information Center (NCCIC). The framework consists of five elements: 1) Funding, 2) Core Professional Core Knowledge Area, 3) Qualifications and Credentials, 4) Quality Assurances, and 5) Access and Outreach.

Since the Office of Early Care and Education was established, the following have been established, funded and implemented: a professional registry system, core knowledge and competencies, Pre-Kindergarten Standards, accreditation technical assistance, and the T.E.A.C.H. Early Childhood<sup>®</sup> NEVADA program.

*The Nevada Registry* ( [www.nevadaregistry.org](http://www.nevadaregistry.org)) is a statewide system of career development and recognition aimed at recognizing the professional accomplishments, formal early childhood education and training of individuals working in the field of Early Care and Education. This includes anyone working with children and families (both directly and indirectly) in a variety of settings and applies to professionals who are new to the field as well as those who have served children and families for many years. Recognition is granted through placement on the Nevada Early Care and Education Professional Career Ladder. Each participant is issued a certificate recognizing his/her Career Ladder level, years of service in the field, and other professional accomplishments. The Nevada Early Care and Education Professional Career Ladder is comprised of seven levels ranging from entry level to advanced experiences and graduate degrees.

In 2005, the Nevada Association for the Education of Young Children (NevAEYC) was awarded a grant to administer the T.E.A.C.H. Early Childhood<sup>®</sup> NEVADA program. T.E.A.C.H. addresses early childhood education needs, compensation, turn-over, and the professionalism of Early Care and Education providers in Nevada. The program provides scholarships for home care providers, center providers, or center directors working in a licensed facility. Scholarships

pay for 80% of tuition, 80% of books, \$50 per semester for travel, and a \$250-\$400 bonus in conjunction with a 2% wage increase provided by employers. Scholarship recipients commit to working with the sponsoring center for at least one additional year, following the completion of the scholarship.

Nevada has an early childhood special education endorsement and a birth to kindergarten as well as a birth to second grade endorsement. All state-funded pre-kindergarten classrooms are required to have a credentialed teacher with an early childhood special education or early childhood endorsement.

### **Recommendations & Strategies: Professional Development**

Building on these accomplishments, Nevada's ECAC discussed the following recommendations regarding statewide professional development and career advancement plans for early childhood educators in the state.

- Participate in the Summit of States pre-conference day at the 2010 NAEYC Professional Development Institute.
- Assume responsibility for updating the state Professional Development plan required by CCDF as requested by the Office of Early Care and Education upon the drafting of this application. Achieve this by establishing a professional development workgroup.
- Create and encourage intentional connections to K-3 professional development and connections with prenatal through third grade (P-3) structures. Develop a team and submit a P-3 structure application to be selected to participate in this opportunity provided by Harvard University in the fall.
- Support kindergarten transitions. Connect teachers across grades, focus on curriculum.
- Assist the Nevada Registry with developing trainer criteria.

- Develop standards for professional development.
- Create or adopt a blueprint or model for highly effective teachers that can be used as a resource statewide for caregivers and teachers of children from birth to third grade.
- Increase interesting, challenging and supportive professional development opportunities for those with higher education levels and/or longevity in the field.
- Develop a leadership program.
- Promote mentoring for new teachers. Use online resources such as the CLASS-My Teaching Partner.
- Promote online Professional Learning Communities to increase coaching/mentoring.

## **HIGHER EDUCATION**

*(VI) Assess the capacity and effectiveness of 2- and 4-year public and private institutions of higher education in the State toward supporting the development of early childhood educators, including the extent to which such institutions have in place articulation agreements, professional development and career advancement plans, and practice or internships for students to spend time in a Head Start or pre kindergarten program*

### **State of the State: Higher Education**

The Higher Education workgroup of the HSSC&ECS Partnership Committee developed recommendations for assessing the capacity and effectiveness of 2- and 4-year public and private institutions of higher education in the State toward supporting the development of early childhood educators. Those recommendations have been forwarded to the state team attending the Summit of States this year at NAEYC Professional Development Institute. Articulation agreements exist between universities and community colleges, but not between colleges. The most recent articulation agreement was signed early in 2010 between Great Basin College in

Elko and the University of Nevada, Las Vegas enabling students with associate degrees in early childhood education from GBC to complete their baccalaureate degree in early childhood through online coursework offered by UNLV.

### **Recommendations & Strategies: Higher Education**

The ECAC discussed how funding cuts will affect degrees and programs, the possibility of one newsletter distributed on behalf of all early childhood programs in the state to disseminate information regarding what is going on and what courses and degree programs are available. A strategic communication plan will be developed including and expanding these recommendations.

## **STANDARDS**

*(VII) Make recommendations for improvements in State early learning standards and undertake efforts to develop high- quality comprehensive early learning standards, as appropriate*

### **State of the State: Improving Standards**

Revised Nevada Pre-K standards have been completed and are awaiting approval from State Department of Education. Once approved, the document will be sent for professional formatting and printing. Final copies should be available to early childhood teachers and administrators by mid-summer 2010. Nevada Infant toddler learning guidelines are almost complete. They should be edited during the summer. Institutes and workshops across the state will be sponsored to train parents and teachers of infants and toddlers on using the guidelines.

### **Recommendations & Strategies: Improving Standards**

In conjunction with these developments, the ECAC discussed developing an Online Learning Community linked to the Registry website including videos and blogs for mentoring to

engage and support parents and professionals that attend the workshops. Perhaps the online learning communities could be tied to the Registry for actual training hours. California has developed DVDs which give examples of what child development looks like. Perhaps we could use them or model Nevada's after them. In addition, promote use of the standards within the Higher Ed community linking standards into higher education coursework.

### **Additional Tasks of the ECAC**

As previously mentioned, three tasks were added to the original list for State Advisory Councils in the Head Start Act during planning meetings in 2008. Planning meeting participants agreed that in order to meet the comprehensive needs of young children in Nevada, the Early Childhood Advisory Council must also address issues and assess children's needs in the areas of health and safety, social-emotional/mental health and school readiness.

- 1) *Develop recommendations to improve health and safety standards and promote health issues for children ages 0 to 5 (e.g., medical home, hearing screenings, immunizations, early health screenings, etc.)*

Council members discussed that Newborn Hearing is being screened, but "follow up" needs improvement. A high percentage of newborns that screen positive for hearing impairment are not being referred to early intervention. Nevada Newborn Hearing Screening does not mandate hospitals to refer to Early Intervention Services. The Health Division is sponsoring a statewide Text4Baby initiative, which will distribute relevant information to pregnant and new moms for at least the first year of a child's life. Efforts are being made at the local level to expand the Text4Baby approach to distribute information to parents of children up to five years old.

In 2009, child care licensing regulations were revised to increase health and safety standards. In addition, the new regulations require licensed providers to demonstrate that some type of screening is completed for children in care. Screening requirements in the revised regulations are not defined, creating an opportunity for sponsorship of a screening tool that could be made available statewide. The ECAC will make recommendations regarding a consistent screening tool including a statewide data tracking mechanism that links with other efforts described throughout this proposal. A number of programs report using the Ages and Stages Questionnaire, and the state Health Division may have funding for a statewide database for those using the screening tool.

Council members will also determine how to best tie Healthy Child Care Nevada into the fold of helping children get the services they need in the places they spend most of their waking time. The American Academy of Pediatrics (AAP) recommends screening for autism with a standardized developmental tool at 9-, 18-, and 24- or 30-month visits regardless of whether a concern has been raised or a risk has been identified during a well-child exam or other visit through medical homes during routine medical screening. The AAP defines a medical home as follows:

*A medical home addresses how a primary health care professional works in partnership with the family/patient to assure that all of the medical and non-medical needs of the patient are met. A medical home is defined as primary care that is accessible,*

*continuous, comprehensive, family centered, coordinated, compassionate, and culturally effective.*<sup>10</sup>

It would help providers, children and the entire system if parallel forms were developed and used by all child serving programs. Uniform records or checklist should require little training to use. Additionally, there is no mechanism for lead screening other than checklist, which is voluntary. However, if high blood lead levels are found, there are very few if any remediation projects funded in the state. Southern Nevada has had a program, but it is losing funding. Physicians could be trained and provided incentives to complete EPSDT standardized forms, which include descriptions of screening for lead and behavioral health issues. Emergency room, school and community-based organization staff could be trained to refer families to medical homes.

The Council also discussed opportunities for tracking health related data by tying it into Web IZ, which tracks immunizations of all Nevada residents. A new Office of Health Information Technology has been established within the DHHS Director's Office, which may provide opportunities for input into developing data collection approaches for young children.

Issues discussed by Council members included difficulty in Medicaid billing rates and policies that prevent health care providers from billing for all services provided during a visit. Representatives from the Division of Health Care Financing and Policy need to be at the table for these discussions. Nutrition is being addressed by federal grants, some of which Nevada agencies are applying for, or in some cases may have already been awarded. We need to tie in with them. Then our nutrition related regulations need to be compared to national standards for regulating child serving agencies. The Las Vegas branch of the American Heart Association recently

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<sup>10</sup> Accessed online at <http://www.aap.org/healthtopics/medicalhomeov.cfm> on June 9, 2010

convened policy-makers, health care professionals, and advocates to prioritize and make recommendations regarding obesity prevention policies. The ECAC will support and promote the work of this group as opposed to duplicating efforts. Funding for plenty of outside play space is needed to encourage parents with children at home, not in the workforce to take their children to parks.

2) ***Develop recommendations to improve mental health services for children ages 0 to 5***

The Early Childhood Advisory Council discussed the necessity of including parent education, specifically child development, in public school education. The ECAC sponsored Mental Health Day on May 6<sup>th</sup>, 2010, which focused on Early Childhood Mental Health. The topic was “My feelings are a work of Art.” The Council coordinator distributed materials developed by Early Childhood Mental Health Program management to providers throughout the state. Early Childhood Mental Health consultation, based on training from the National Training Institute for Child Care Health Consultation is being conducted by Clinical Program Managers within the Division of Child and Family Services (DCFS). DCFS also regularly co-sponsors training for mental health professionals on using the Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood (DC:0-3). Additionally, the Maternal Child Health Advisory Board established mental health as one of its four priority areas on which to focus attention.

Early Childhood Comprehensive Systems funding will support an Early Childhood Mental Health (ECMH) Summit in October to help identify professionals and organizations providing ECMH services and to improve communication among those providing early childhood mental health services across the state. The Summit will include professional

development opportunities as well by sponsoring presentations or nationally recognized keynote speakers. Local and state mental health coalitions will be asked to assist in planning these events.

The Part C Office (DHHS) and Part B 619 Office (NDE) are co-sponsoring stakeholder meetings to develop and submit a proposal to the Technical Assistance Center on Social Emotional Intervention (TACSEI) for Young Children. The grant would assist Nevada in developing local training sites, which must include three model classrooms and a team of trainers. The purpose of the grant is not a one shot train the trainer model. An integrated system for sustainability of integrating the pyramid model must be developed in order to submit the proposal. A team from Nevada recently attended the training for implementing centers and building teams of trainers. Planning meetings continue in hopes of a successful award for FY 2011. Efforts will be made to tie in with other grant applications for mental health so that all partners are at the table together, preventing competition for federal funding within the state (i.e., Project LAUNCH, etc.).

Early Childhood Comprehensive Systems is currently funding a public awareness campaign using the tagline, “Starting Early is Starting Right on Time.” Use this venue to raise awareness of early childhood mental health. Spread this message across disciplines, so that early childhood service providers across all sectors – mental health, health, parenting education, family support and early childhood education – are all speaking the same message.

- Just Step Back (child abuse prevention program)
- Training, Accountability, and Recruitment: # of providers for children 0-5 (capacity) and professional development, and accountability (governance structure)...this also requires a data system.

- Early Intervention needs a MH staff person. Possibly fund Early Childhood Treatment program training (*Infant-Toddler Mental Health Post-Graduate Certificate Program in Napa, CA*).
- Parent Training should be integrated into high school (for all students?), for example, in child development/social emotional development.
- Access to care – prevents “stigma”; avoids “emergency” situation
- How do we support training and recruitment for early childhood mental health professionals
- What would a system of mental health care look like? Point of entry -- trying to find out what mental health needs are...place a MH worker at the shelters, etc.
  - Comprehensive systems for early childhood mental health- capacity and professional development issues
  - Align with public awareness, monitoring, financing, accountability, governance, data need

### 3) *Develop recommendations for school readiness*

As previously discussed, Nevada needs a consistent, standardized measure for assessing every child’s kindergarten entry status across the state. There are many models for Ready Kids and Ready Schools including Maryland’s model, High Scope and North Carolina. Transitions between early childhood programs and schools at kindergarten entry must be strengthened. Local Early Childhood Advisory Councils will recommend strategies to strengthen those transitions. Integrated learning opportunities for teachers of young children (birth to third grade) should become the norm. Online mentoring and training opportunities need to be strengthened. The State of Nevada ECAC will adopt a common definition of school readiness.

**(b) Approach**

The first year of implementation will focus on gathering data, identifying needs for quality care and prioritizing activities and investments during years two and three. The fiscal mapping project will allow us to see the amount of money paying for particular projects to serve targeted children. From that we will be able to analyze where duplication of spending may be occurring, where efficiencies can be maximized, and where partners can work more effectively together targeting the same children. Spending will be analyzed by region to determine whether disproportionate service provision is evident and/or where specific needs are that the ECAC addresses.

After assessing available data and information, missing data and information, and priorities regarding the tasks outlined in the Head Start Act. Three priorities were confirmed during the May meeting of the ECAC.

1. Fiscal Mapping project – Create a funding map of federal, state and private expenditures on programs and services for young children and their families; and to analyze the effectiveness of current funding for Nevada’s system, highlighting the diversification and adequacy of existing funding, the stability and flexibility of available programs and funding sources, and issues related to coordinating funding from multiple public- and private-sector sources.
2. Needs Assessment – Conduct statewide through a parent survey, provider survey (providers in health, mental health, family support, parent education and early care and education) to determine how we can support Nevada’s children in being prepared to enter school. Identify barriers to access and strategies for implementation.

3. Comprehensive Early Childhood Plan – Develop a plan, including estimated costs to provide comprehensive services to children in frontier, rural and urban areas of Nevada so that their health, mental health, parent education, family support and early care and education needs are met to promote children’s readiness for school entry.

### **Other priorities**

Additional priorities that will be funded by other projects, but were deemed important by council members included the data collection system to be developed by NICRP, a public awareness campaign, a Quality Rating and Improvement System, establishment of local ECACs, and support for ad hoc workgroups as needed to address specific elements of the plan or urgent needs and issues. These projects are further defined below.

1. Data Collection System – A workgroup of the ECAC will be convened to advise the Nevada Institute for Children’s Research and Policy as the Early Childhood Data Warehouse is developed. ARRA CCDF quality set aside dollars are funding this project for the first two years. Funding for sustainability of the system must be secured.
2. Public Awareness Campaign – In addition to the two “Starting Early is Starting Right On Time” public awareness videos that have been developed, a brand such as Great Start, Bright Beginnings, or Smart Start needs to be developed and confirmed. Collateral materials to address specific groups such as business, law enforcement, parents, policy makers, and others must also be developed and easily accessible.
  - a. Cultivate Private investment to ensure funding for all children (e.g., economic summits and follow up).

3. Statewide Quality Rating and Improvement System - Seek continuing support for building on the pilot and expanding Silver State Stars to all licensed child care providers. Include strategies to achieve the following.
  - a. Increase consumer knowledge and demand for quality services.
  - b. Increase consumer power as educated constituents.
    - i. Increase public awareness activities to empower consumers so they can educate policy makers. This will balance the efforts of child care business owners that have influenced policy makers away from improving ratios, group sizes and director qualifications due to increased expense related to implementation.
4. Local Early Childhood Advisory Councils – Develop additional local ECACs and continue supporting new ones to support and promote a) local strategies to serve all young children through community-based providers, and b) communication with State of Nevada ECAC to include local needs in state recommendations and priorities.
5. Workgroups – Support workgroups including membership of non-council members to address topic specific issues (e.g., all of the priorities listed above plus, professional development, child care, health, mental health, parent education, and family support).

During year one of the project, fiscal mapping and the needs assessment will be completed. If the needs assessment overlaps into year two, periodic updates will be requested from the contractor as elements of the assessment are completed. During year two, the fiscal map and needs assessment will be used to inform the planning process to serve all children in Nevada. It is expected that this project will be completed toward the end of the three year grant period. The plan will be implemented through collaboration and commitment to coordinate across all early

childhood programs receiving federal money, all of whom are members of the ECAC or regularly attend ECAC meetings for the purpose of coordinating efforts. Activities to support these priorities are listed in the action plan beginning on the next page.

## Action Plan

Implementation Schedule September 2010 – August 2010

Activities	Complete By	By Whom
1. Contract in place for ECAC Coordination Assistant	September 2010	ECAC Coordinator
2. Bi-monthly ECAC and workgroup meetings scheduled for the year	September 2010	ECAC Members, Coordinator and Assistant
3. All ECAC workgroups established and members committed	September 2010	ECAC, workgroup members, Coordinator and Assistant
4. Contract in place for Fiscal Mapping	December 2010	ECAC Coordinator and proposal review team
5. Bylaws for ECAC adopted	December 2010	ECAC Members, Coordinator and Assistant
6. Additional local ECACs awarded planning grants	December 2010	ECAC Members, Coordinator, and Assistant, Nevada Public Health Foundation
7. Contract in place for conducting Needs Assessment	December 2010	ECAC Coordinator and proposal review team
8. Complete proposed action plan for year two of ECAC funding	June 2011	ECAC Coordinator, Assistant with public comment and approval from Members
9. Convene public hearing to review plan for year two	June 2011	ECAC Members, Coordinator, and Assistant, Nevada Public Health Foundation
10. Fiscal Mapping report completed	July 2011	Contractor, ECAC Members and Coordinator, plus partners identified during project
11. Needs Assessment of Quality and Availability of Early Care and Education completed with report made public.	August 2011	Contractor, ECAC Members and Coordinator, plus partners identified during project
12. Confirm how the fiscal mapping and needs assessment of quality and availability of care inform the remainder of the three year project.	August 2011	ECAC members, staff and contractors

## Nevada’s Early Childhood Advisory Council

Efforts to develop an Early Childhood Advisory Council (ECAC) in Nevada were funded in part by a grant from the National Governor’s Association in 2008. Nevada was one of twelve states awarded the planning grant. Stakeholders of four councils or boards overseeing projects serving young children and their families convened to determine the feasibility of merging the four councils into one Early Childhood Advisory Council. Those groups included the Interagency Coordinating Council; Head Start State Collaboration Partnership Committee; Maternal Child Health Advisory Board, and the Child Care Advisory Council. Four planning meetings were funded through the NGA planning grant, two in Las Vegas and two in Reno. Travel and per diem were funded for stakeholders to attend. At the end of the four planning meetings, the four councils recommended in order to maintain their integrity and original intent, they did not wish to merge into one council, but did wish to have representation on Nevada’s Early Childhood Advisory Council. Final consensus was to form a new council that would meet the requirements established in the Head Start Act and oversee the development of local early childhood advisory councils funded through the Early Childhood Comprehensive Systems project.

Six of the 13 members are term limited, allowing agencies and organizations they represent to change their representation on the Council over time as needed. The remaining representatives meet the federal requirements of the Head Start Act. The following chart identifies ECAC members and their representative agencies or stakeholders.

Agency Representation	Termed position (yes or no)	Name and Title
1. State Childcare Representative	No	Jerry Allen, Chief Child Care and Development Program DWSS

Agency Representation	Termed position (yes or no)	Name and Title
2. State Director for Head Start Collaboration	No	Margot Chappel, HSSC&ECS Director
3. Part 619 Coordinator (Ages 3-5) Special Needs (NDE)	No	Sherry Halley, Early Childhood Special Education Consultant
4. State Education Agency Representative (NDE)	No	Anna Severens, Early Childhood Education Consultant
5. Higher Education Representative	Yes	Catherine Lyons, UNLV Early Childhood Special Education
6. Local Education Agency (LEA)	Yes	Joanne Everts, Early Childhood Program Administrator, Washoe County School District
7. Part C (ages 0-3) Special Needs	No	Wendy Whipple, State Coordinator
8. Mental Health – Early Childhood	No	Ann Polakowski, Early Childhood Mental Health Clinical Manager, DCFS
9. Public Health – Early Childhood	No	Dr. Rutu Ezhuthachan, Department Chief, Pediatrics – Southwest Medical Association, Inc.
10. Representative Head Start Association	Yes	Laura Harrison, President Nevada Head Start Association
11. Business Representative	Yes	Larry Charlton, Senior Vice President, Nevada Regional Executive for City National Bank
12. Child Care Provider Association Representative	Yes	TBD (to be determined)
13. Parent	Yes	Shelli Beliveau, Parent - Clark County School District State-funded Preschool program

In addition, Deborah Aquino, Maternal Child Health Manager with the Nevada State Health Division plans to attend every ECAC meeting and has included all council members in the annual MCH needs assessment process. Deborah’s supervisor, Jo Malay, agreed that a pediatrician serving low-income families should represent early childhood public health on the council. Thus Dr. Ezhuthachan was appointed to the council.

**(c) Staff and Position Data**

As indicated in the letter of intent from Governor Gibbons, Head Start State Collaboration and Early Childhood Systems Director, Margot Chappel, is the designated coordinator of the Nevada Early Childhood Advisory Council. This ensures coordination of planning, resource allocation and efforts across Head Start State Collaboration funding, the Early Childhood Comprehensive Systems project funded by HRSA and Nevada's State Advisory Council allocation. Ms. Chappel has provided leadership since the signing of the reauthorized Head Start Act to plan and establish Nevada's ECAC.

The Head Start State Collaboration and Early Childhood Systems Office, which manages Nevada's Head Start State Collaboration and Early Childhood Comprehensive Systems projects is housed in the DHHS Director's Office. As described previously, Nevada's DHHS is comprised of six divisions, in addition to the Public Defenders Office. Coordination occurs through collaboration with other agencies and links within and across departments, community and state-based organizations. This is achieved as the HSSC&ECS Office manages meetings and planning efforts, during which prioritization of activities and projects to fund is determined.

Margot Chappel, HSSC&ECS Office Director has been in the Director's Office of the Nevada Department of Health and Human Services for close to four years. During that time, she has facilitated systems building activities including the following:

- Planning, establishing and funding for Nevada's ECAC
- Sponsoring an Early Childhood Summit on Serving Homeless Children and Families
- Co-sponsoring Nevada's Business Summit on Early Childhood Investment  
(materials from the summit are provided in Appendix D)

- Increasing access to lead blood screening for all Nevada children
- Increasing awareness of EPSDT among parents and providers
- Increasing availability and accessibility of health care services for young children without documented citizenship
- Expediting background checks and child abuse and neglect screenings of licensed early childhood educators and staff
- Leading strategic planning efforts for Child Care and Development Fund priorities and revising licensing regulations to increase the quality of child care for all Nevada children

Prior to coming to DHHS, Ms. Chappel served as a consultant. During that time, she facilitated development of a Preschool for All plan for West Sacramento, and performed child care workforce studies and child care needs assessments in compliance with California law for county child care councils. She also served as the lead consultant on a project to evaluate the early care and education system in Montana. Margot also facilitated the development of Nevada's Career Ladder, Tiered Reimbursement System and Core Knowledge and Competencies for Early Childhood Professionals in Nevada. In addition, she has been involved in development of Nevada's Pre-kindergarten Learning Standards and Guidelines for preschoolers and infants and toddlers. Her involvement in and knowledge of these important system components make her uniquely qualified to oversee the closely related activities of the ECAC, ECCS and HSSCO projects simultaneously. A resume for Margot Chappel is provided in Appendix C of this proposal. This of course would not be possible without the support of key partners including all members of the Early Childhood Advisory Council.

Contracted support for Nevada’s State and local Early Childhood Advisory Councils is provided by the Nevada Public Health Foundation, described in the next section. Rota Rosaschi, Executive Director for the Nevada Public Health Foundation, has over 35 years of experience in social services and public health. She has established statewide programs, set up new data reporting systems, and managed major social service and public health programs and projects. With over 19 years of child welfare (program manager for adoptions, foster care, licensing child placing agencies, and child protective services) and over 10 years welfare-to-work experience as a Program Chief, Ms. Rosaschi brings unique understanding of families and the ability to interface with other major programs throughout the state. Five programs implemented during the first years of Nevada’s welfare reform were recognized as national promising practices. With this success, Ms. Rosaschi was asked to speak at numerous conference and workshops throughout the United States and Canada on welfare reform and setting up new programs. Her experience as a public servant for so many years, experience in forming, writing and advocating for public policies and her knowledge, skills and statewide connections helps her facilitate and take action for families and children. Ms. Rosaschi is actively involved in a variety of organizations and community activities demonstrating her leadership skills and ability to work with people.

**Head Start State Collaboration and Early Childhood Systems (HSSC&ECS) Director  
Job Description**

**Primary Duties**

***Grant Management:***

The HSSC&ECS Director will manage budget, grantwriting and reporting responsibilities as required by the state fiscal and federal granting offices. This includes writing new and renewal grants as necessary, timely reporting as each grant requires and fulfilling all requirements for feedback among stakeholders and other requirements as needed.

***Collaboration:***

The grants managed by this position require extensive collaboration statewide and in local communities. This position must manage both of these well, convening stakeholders as necessary

and as outlined in grant requirements. Collaboration is essential to implementing a Comprehensive System of Early Childhood including its governing Council (Nevada ECAC), and therefore the majority of time in this position is expected to be spent in collaboration with stakeholders to increase effectiveness of and access to services for young children. To achieve this, collaboration and partnerships across the services sectors of health, mental health/social emotional, early care and education, family support and parent education services is essential. As relationships are essential to implementation of both projects managed by this position, stakeholders need to report a good working relationship with the ECS/HSSCO Director.

***Sub-grant/Contract Management:***

This position is the only paid position in the DHHS that is funded by these two grants. As such, sub-grants and contractors are important to the projects' implementation. The ECS/HSSCO Director must manage sub-grant and contractor requirements to deliver what is expected within the allotted time and budget for each project.

***(d) Organizational Profiles***

The Nevada Department of Health and Human Services promotes the health and well-being of Nevadans and our visitors through the delivery and facilitation of essential services. Our goal is to strengthen families, protect public health, and assist individuals in achieving the highest level of self-sufficiency. DHHS employs approximately 5,200 people to serve Nevadans health and human service needs at the state level. This work is often achievable only through collaboration with other state and local government and community-based agencies.

The Nevada Public Health Foundation (NPHF) is a 501(c)(3) education organization serving as an essential public health partner in identifying opportunities, mobilizing resources, and delivering programs to build a healthy future for Nevada. Established in 1996, Nevada Public Health Foundation (NPHF) has been committed to addressing the gap between growing public health issues and shrinking resources. NPHF is fully incorporated, and approved by the IRS as a 501(c)(3) education organization. NPHF serves to strengthen public health in Nevada through statewide partnerships that build public awareness and promote actions to address public health needs, making them the ideal partner to assist with managing activities and priorities of state and local Early Childhood Advisory Councils in Nevada.

The Nevada Public Health Foundation will serve as the contractor with DHHS to provide assistance with all activities of the ECAC.

***(e) Third Party Agreements***

At the time of this application, one third party agreement exists with the Nevada Public Health Foundation. However, after receiving notification of Nevada’s allocated ECAC funding, it is anticipated that at least three additional contracts will be initiated to complete:

- fiscal mapping,
- assessing the availability of high quality early childhood environments throughout the state; and
- developing a plan for ensuring access to comprehensive services for all Nevada children prenatal to third grade in frontier, rural and urban communities including the true cost of universally available high quality early childhood education, health, mental health, family support and parenting education services.

***(f) Budget and Justification***

**General Information**

It is policy not to charge any indirect costs for programs housed in the DHHS Director’s Office. One full time staff person with the state will be responsible for the Early Childhood Advisory Council, the Head Start State Collaboration Office and the Early Childhood Comprehensive Systems project. Due to the breadth and depth of the three projects, responsibility for specific projects will be distributed across contractors. The Nevada Public Health Foundation will sub-contract to provide staff to assist with activities described in the action plan for this and the other two projects. Additionally, community-based programs are

provided the opportunity to compete for specific responsibilities for which they have specific expertise. For example, funding for Healthy Child Care Nevada is provided by the Early Childhood Comprehensive Systems project. However, the Area Health Education Center of Southern Nevada manages the referral for Child Care Health Consultants statewide through a sub-contract.

Thus, the budget for this project includes funding for one third of the State of Nevada full time staff person. Salaries for contract staff through state and community non-profit organizations are included in the contractual line item.

**Budget**

Object Class Categories	Federal budget (30%)	Non-Federal budget (70%)	Total budget (100%)
Personnel		\$1,043,060.00	\$1,104,059.00
Fringe Benefits	\$24,000.00	\$411,696.00	\$435,696.00
Travel	\$71,421.00	\$0.00	\$71,421.00
Equipment	\$2,500.00	\$0.00	\$2,500.00
Supplies	\$5,050.00	\$0.00	\$5,050.00
Contractual	\$449,447.00	\$0.00	\$449,447.00
Other costs	\$10,050.00	\$0.00	\$10,050.00
<b>TOTAL</b>	<b>\$623,467.00</b>	<b>\$1,454,756.00</b>	<b>\$2,078,223.00</b>

**Budget Justification**

*Personnel and Fringe Benefits:* The budget includes funding for one third of the salary and fringe benefits of the ECAC Coordinator (also the Head Start State Collaboration and Early Childhood Systems [HSSC&ECS] Office Director). Salary and fringe for this one full time employee of the State of Nevada Department of Health and Human Services is evenly distributed across the three grants previously described (HSSCO, ECCS and ECAC). The total salary is

██████ per year for the HSSC&ECS Office Director. Fringe benefits include health, dental and vision insurance as well as state retirement benefits and cost ██████ per year.

**Travel:** Expenses for this category are based on travel for all members of the ECAC to meet face-to-face three times a year and by video-conference three times per year (10 partners X 3 times per year @ \$396 per trip = \$11,880). It also includes nine trips for the ECAC Coordinator or assistant to travel between Reno and Las Vegas for related meetings.

IN-STATE Travel		
Per Diem	639	9 trips to LV @\$71/day
Per Diem - Lodging	1,080	9 nights stay @ \$120/night
Motor Pool	510	20 days of motor pool use @ \$34/day
Personal Vehicle, Parking, Taxi	620	estimated parking and taxi, mileage for year
Commercial Air	1,950	6 flights to Vegas @\$325/flight
Non-state Employees*	11,880	*10 partners X 3 trips @\$396/trip
<b>Total-In State Travel</b>	<b>16,679</b>	

Out of State travel includes allowance for three partners to fly to an annual meeting for ECAC Coordinators.

OUT-of-STATE Travel	
Per Diem	1,278
Per Diem - Hotel	2,550
Public Transportation	120
Personal Vehicle, Parking, Taxi	360
Commercial Air	2,820
Non-state Employees	0
<b>Total Out of State</b>	<b>7,128</b>

**Equipment:** There is an allowance of \$2,500 for a new computer, software and related equipment such as a printer for the ECAC Coordinator and/or her assistant if the need arises. The HSSC&ECS Director’s computer is more than four years old and will likely need replacing in the first year of the grant period. This is anticipated as a one time expense.

**Supplies:** This category of expenses includes costs related to upkeep of the office, production and printing costs for materials developed, mailing, and computer software are based on current local market rates.

**Contractual:** Projects funded in this category include meeting support provided by the Nevada Public Health Foundation (contracted staff and meeting costs), \$100,000 estimate for conducting the fiscal mapping project, \$100,000 estimate for conducting the needs assessment, and the remainder allocated to the currently inestimable costs for drafting the plan to provide comprehensive early childhood system of services to all young children in Nevada.

**Other costs:** This category includes items that do not fit in other categories such as an allowance for professional development, rent, phone, assessments by the State of Nevada for information technology services, etc. The table below contains the detail comprising this category.

<b>Other Expenses</b>	
Cost Allocation/Assessment	\$ 2,650.00
Phone	\$ 150.00
Non-State Owned Bldg - Rent & Utilities	\$ 2,000.00
DO-IT Assessment	\$ 225.00
<b>Total Other Expenses</b>	<b>\$ 5,025.00</b>

**Indirect costs:** No indirect costs will be charged to this grant.

***Non-federal Resources:*** The Nevada Early Intervention Services (NEIS) is applying State of Nevada general fund as the 70% non-federal match requirement for this grant in the form of state funded salaries and benefits. This is especially fitting since Child Development Specialists employed by NEIS assist children with disabilities and special needs and their families be ready for school entry. Given that the purpose of this grant application is to increase the availability and accessibility of high quality early childhood services for young children and their families in order to assist children in being ready for school, this match is funding that goal as well.

**(g) Appendices**

Appendix A: Executive Order

Appendix B: DHHS Org chart

Appendix C: Resume

Appendix D: Business Summit handouts