

# Minutes

(Digitally recorded)

## EC3 Meeting ~ September 5-6, 2013

Oxford Hotel, 1426 S. Entertainment Avenue, Boise, ID 83709

**Attendees:** Gary Rillema, Paula Mason, David Allen, Sherry Iverson, Shannon Dunston, Kathy McGill, Christy Cronheim, Erika Wainaina, Stan Burton, Ellen Neff, Justin Coleman, Greg Culet, Carolyn Kiefer, Beth Oppenheimer, Melissa Carico, Sara San Juan, Genie Sue Weppner, Jacquie Watson (proxy)

**Guests:** Julie Fodor, Annie Dalgetty, Deborah Drain, Katie Lamansky, Angela Gribble, Roger Sherman, Wickes MacColl, Dr. Noreen Womack

**Staff:** Lorraine Clayton, Diane Foote

Meeting Called to Order at 11:09am

Paula Mason opened the meeting with welcome and introductions, ordering of name tags for new members and general housekeeping.

**Approval of Meeting Minutes:** Correction noted to be made on pages 2 and 6 of May 2013 meeting minutes; Chris Allenson should be Chris Allen. Minutes then unanimously approved.

### **Council Chair and Governance Committee / Council Orientation**

David discussed the Executive Order and the attempt to codify EC3 which was not passed in the last legislature and the hope for recodification in the future. Gary revisited the Vision, Mission and Shared Goals of the Council for new and established members. He also summarized the Bylaws and asked regarding committee vacancies. Lorraine reported we have four (4) vacancies. Carolyn Keifer questioned the use of the word "curriculum" in Section 8, Education and Childcare Committee and needed clarification. The option of the words "curriculum" or "guidelines" was discussed. Carolyn also commented on Section 7, Head Start Committee and asked to change the language to "This committee serves as Head Start Collaboration Advisory committee." David asked that the minutes reflect that the Governance Committee will take up the matter of committee language changes. He then went over the Organization Chart, Committee Structure, Approval Process, and the Regional Early Childhood Committees. Stories of information gleaned from EC3 meetings then shared with others are requested. Paula reported a connection made between Mountain States Group and herself regarding the delivery of services for deaf and blind refugees. Christy asked if Anna Smith, Child Find Coordinator, was aware of this as she does refugee outreach and would like to see Anna and Paula connect. Expectations of Council Members were revisited requesting that everyone note on the sign-in sheet which committee you are interested in. Gary reported on present leadership and Sherry's appointment by the Governor and the need for a Co-Chair. Paula went over the acronyms list briefly and gave permission for the stress balls to be heaved whenever someone hears one they don't understand. Lorraine discussed Strategic Planning and one of the charges in the Executive Order for this Council is to have an early childhood comprehensive systems plan in place for the entire state. We have 5 areas that came from federal guidelines

that are critical for early childhood and to span systems planning: Health, Social & Emotional Development, Child Development, Parent Education and Family Support. Everything we do needs to be tied into systems development and looking at how it feeds and links across regions and government agencies and outside entities. We need a new Needs Assessment and Mapping of Resources that are in the state. She would like to know from the group if there are particular agencies and entities that are not sitting at the table that need to be involved in the process. Christy suggested AIM Early Idaho which addresses the mental health component be included. Everyone agreed. Carolyn asked how the Needs Assessment is structured – needs assessment vs. priorities. Lorraine said in the past it has been done as a SWAT analysis, i.e. Shaken Baby, Toxic Stress. If anyone has ideas as how to analyze, please contact her. Suggestions for organizations/issues to be included in needs assessment: child hunger-WIC, Children’s Trust Fund, Aim Early ID, refugee resettlement groups (Mountain States Group). Paula said Janice Carson from Assistive Technologies, for special needs children, would like to be a member of the group and receive a packet of information.

Sherry asked if we need to address the child morbidity in the state and access data regarding accidents, deaths. We need both people and data for the needs assessment.

### **Video ~ *a Theory of Change* from the Center for the Developing Child**

This video was sent to Sherry by a pediatrician doing research on toxic stress. Please think of distribution possibilities as you watch it.

- Greatest risks to early health and development are accumulative stress, i.e., poverty, drug abuse, violence.
- Need active skill building and help with problem solving and self-regulation.
- Focus on development of adults who are part of a child’s life; give parents, teachers, and childcare providers better skills.
- Need development of policies at the government level that support depletion of toxic stress.

The end note is children are resilient, but only if they have supportive adults in their lives.

COMMENTS: Can Council members use this video to bring in other members? Unanimously yes. Plus, sending it to regionals and suggest starting their meetings with it.

Lunch/Networking – meeting reconvened at 1pm

### **Quality Rating and Improvement System (QRIS) for Early Care and Education Programs in Idaho ~ Julie Fodor, IdahoSTARS Project**

The goal of Idaho STARS is to increase quality child care providers. Julie reported the present QRIS System was losing child care providers due to the fact that they were using a model that was higher than what we could handle in Idaho. Information was taken from other states to modify Idaho’s system. They are no longer using the 5 Star rating system and are now formulating 6 steps. She noted the handout is in draft form.

### Six Quality Standards:

- ❖ Health and Safety
- ❖ Staffing and Professional Development
- ❖ Child Growth and Development
- ❖ Special Needs
- ❖ Family and Community Relationships
- ❖ Leadership and Management

### Six Steps to Quality in Each Standard:

- 1) Director and Staff – Essential training 1 or CDA
- 2) Director and lead teachers – Essential training 2 or CDA
- 3) Director and lead teachers – Essential training 3 or CDA
- 4) Director and lead teachers – Essential training 4 or CDA
- 5) Director has AA in ECE or AAS with CDA – lead teachers have CDA
- 6) National Accreditation

### Details:

- 12- 18 trainings hours per step
- Trainings delivered by IdahoSTARS trainers and staff, child care health consultants and through distance learning
- Child care providers are not mandated to join IdahoSTARS or QRIS
- The essential trainings are embedded in PDS (Professional Development System), incentives, tech assistance, possibility of tiered reimbursement
- Revised PDS Pathway and Trainings will be introduced to the public in October and trainings and new PDS will launch in November
- Community education campaign beginning for parents
- Interactive map of childcare providers being developed
- A Star is given after Step 3
- Topic of IdahoSTARS rated providers being listed on website is being discussed.
- Need a system we can build on
- This is not for individuals, but there are mechanisms in place for individuals.
- On-going effort to identifying and demonstrating competencies in each step, i.e., Step 1 – Going through files for evidence of courses taken; Step 2 – Lesson Plans pertaining to training

Phases:

- 1) Transition of current STAR rated programs. If a provider was an early adopter, we want to supply incentives.
- 2) Transition non-star rated participating programs
- 3) Open enrollment/offer invitation

Q&A:

Does every area of the State have a program that offers a CDA? Yes and No. Everyone has access online.

Is pay higher for a provider with a CDA? No.

What is incentive for taking trainings? Dollars.

Is there a grandfathering process? Conversation is ongoing within IdahoSTARS.

Some states are combining QRIS systems, i.e., one state rating for public, private schools – are we doing this? Many of the states doing this have state-run preschools. We just aren't there yet and will have to find unique ways to engage child care providers to invest in furthering their education.

### **Idaho Early Childhood Professional Competencies ~ David Allen**

David thanked those who worked on the initial document and the current committee; Jennifer Ross, Julie Armstrong, Ellen Neff, Nannette Siemens, Margaret Elkins. He needs additional assistance and welcomes everyone to help. The Governance Committee asked that several items be addressed such as the scope; who does this document apply to? While the concepts are valuable, requiring every therapist and practitioner is too big of a scope. It was decided it would be a guide for early childhood educators and care providers. They also took the original work and looked at what would align with IdahoSTARS. They were going to look at tiers, but didn't want to confuse people with the tier reimbursements, so they decided on using levels. He read the purpose; to set standards for professional development based on research and best practices that meets the needs of practitioners and professionals working with young children in Idaho.

He read the scope of the document which contains broad statements – Scope of Application: see handout for details. David outlines the levels which are still being adjusted: (Please request a copy for full details)

Level One – Competent Provider: basically aligns with IdahoStars and what they are trying to accomplish “Lays foundation for early care and education and includes the basic knowledge and skills required of an early childhood professional.”

Level Two – CDA: Builds on Level 1, plus the knowledge and skills comparable to a Child Development Associate (CDA) credential or a college credit-based certificate in Child Development or Early Childhood Education.

Level Three – AA, AS, AAS: Builds on the skills and knowledge of Levels 1 and 11. Professionals understand and apply knowledge from all of the sic competency areas.

Level Four – Bachelor: Builds on requirements of Levels, I, II, and III. Includes advanced knowledge and skills across all core competencies, and meets all the requirements for a Bachelor’s Degree in Early Childhood Education, Child Development, Early Childhood Special Education or related fields.

Level Five – Specialized Professional: Includes Levels I, II, III, IV and advanced knowledge and skills corresponding to specialized degrees, endorsements, and certificates in early childhood education, early childhood special education, child development, early childhood mental health and other related areas.

Core Competencies: We looked at requirements set forth by Idaho and national associations, Division of Early Childhood, National Association of Education of Young Children, Idaho Core Standards for Preparation of Teachers and the ECSE Core Standards and came up with different competency areas which were put in a spreadsheet that is still in draft form. The NCATE formed a task force that wrote a very concise survey. David recently requested permission to use the survey, but has not yet received a response.

Competencies:

- Health, Safety and Nutrition
- Child Growth and Development
- Child, Family and Community Relationships/Collaboration
- Curriculum and Environments
- Observation and Assessment
- Professionalism

It has been a very time consuming process, and we are trying to write statements that are more general to avoid being cumbersome. We would like to have a working document that an educator could reference to see what they need to work on and then go to crosswalk document to see if they have met standards.

Next Steps are to complete the comparison by the October 1<sup>st</sup>. Second step would be to have stakeholders do crosswalk. Does Council want to go forth with these steps?

Carolyn moved that we move forward with document and extend gratitude and support to the committee; seconded and all in favor.

Christie, Carolyn and Julie Fodor volunteered to work on the document in September and then pass it on to Shannon for crosswalk portion. David also needs people in the field for final review. Suggestions were made for Head Start people and public schools K-3; both gen and special ed, to also be involved in the crosswalk portion. He believes two solid days will be needed in November for crosswalk. We will also look into using a facilitator.

Shannon will look into the State Dept. of Ed paying for transportation for those two days and Christie also offered webinar option.

## **Proposed Federal Regulation Changes for the Idaho Child Care Program – Review of Council comments and what the changes mean for Idaho ~ Genie Sue Weppner**

There are two things going on about child care in Washington, D.C. One is rule changes regarding opposite child care of an underground effort through OMB to get rules change because they knew above ground would never pass. They hope to pass and have in effect by October 2015.

In general, the theme is increased emphasis on safety and health and on the child. The plan is to keep the child in a program regardless of the parents' qualifications. The other intended consequence is a driver to make parents choose high quality child care and to be knowledgeable of provider's qualifications.

Overview: Executive Committee was able to give comments on all rules. We took each rule number and commented on each one.

- ❖ Market Rate Study (98.16): This gives states more flexibility as they are asking for innovative ways for people to come up with ways to do the study. In general, we support this.
- ❖ Revised Eligibility (98.20): Mandated you may only do 12-month re-evaluations. This will cost Idaho more money. We have the lowest eligibility numbers in the nation. Situations are very unstable and we need the 6-month check in. We may have options if this passes and do a 6-month reporting process.
- ❖ Use of Grants to Address Shortages (98.30): We will be required to have grants with providers to hold slots open in areas where we have shortages. This will be costly and unrealistic for Idaho. We asked to be able to analyze our shortages and notify them of how we will fix them.
- ❖ Require Criteria for Co-Payment (98.42): We are unclear of language; are they really requiring? We have flexibility in Idaho to waive co-pay for low income families.
- ❖ Requires a Lead Agency to Report Injuries and Deaths (98.41): We have a designated state agency. It is by Executive Order and the requirement is not to report injuries. We would have to change rules and it will be difficult in Idaho.
- ❖ Protective Services (98.20): We like the concept of more children receiving services. It will cost a great deal of money to implement and manage.
- ❖ Hotline for Complaints (98.328): We agreed with this as we already have a hotline, but would need to brush up on certain aspects.
- ❖ Consumer Education: Only for ICCP providers regarding history of violations, backgrounds checks, etc. Parents should have access to any information the state may have on a provider. This is a problem with maintaining because of low incomes. This will be difficult to comply with and legislature would have to agree.
- ❖ Compliance with State Fire and Building Codes: We already do this. We can't demonstrate from our ratios that somebody can take a child out during an emergency.
- ❖ Education and Training (98.41): House will require 14 requirements for education and training prior to becoming an ICCP provider. This is doable for us and gives the providers a grace period.
- ❖ Unannounced Annual Visits (98.41): Idaho agrees with rationale, but will be costly; approximately \$200,000 to implement, but needs to be done.

Genie Sue expressed concern about health districts' ability to do unannounced visits.

Genie Sue will wrap up her presentation after Dr. Womack.

Break

### **Dr. Noreen Womack – New Training Video on Early Brain and Child Development**

Dr. Womack is a pediatrician with St. Luke's and is a leader in improving child care in Idaho. She has received several grants and worked with Lorraine on the grant for this video. The two of them wanted to put together a video that would become a training module for IdahoSTARS. They would like feedback on the rough draft presented today. They are waiting on copyrights for several smaller videos to be inserted, so there are blanks in the longer video. The video was well-received and appreciated. Please see some general comments and suggestions below:

- May not need to be an hour in length to meet IdahoSTARS training requirements.
- Request most recent data available. 2009 numbers used in video.
- More examples of how providers can help children suffering toxic stress at home and clarity on the link between behavior and stress in children.
- Comparing sharks to babies? Need more kittens and puppies!
- All agreed video with mother and baby very powerful and underscored the importance of healthy relationships in a baby/child's life.
- Possibly, have one video with facts approximately twenty minutes long and then another one with practical advice and instructional examples. Some council members felt there might be a loss of impact if in two separate videos.
- Suggestion for the videographer to consider training thresholds, i.e., seven minutes for explaining.
- Issues with chart regarding parents' education; most providers are in lower socio-economic levels and might confuse them.
- Have one for parents and change language to encompass a more generic audience.

The Council thanked Dr. Womack and Lorraine for their efforts.

**Genie Sue** wrapped up her presentation regarding copay changes to the Idaho Child Care Program which will take place in November. These changes have been designed to make the Child Care Program easier to use, provide better supports to Idaho families with young children, and to meet federal requirements. We have gone to a flat rate based on income not based on care. This is much better for families and providers as 75% of the caseload that was researched will pay less. Twenty-five of those researched will pay \$1-\$10 more. This will lay the foundation for paying tiered quality providers more than less qualified providers.

It was asked where the money is coming from. Genie Sue said they have added 4 million a year from the CCDF grant and have a very low caseload at this time. Total impact will become clearer after implementation in six months.

These changes have been designed to:

- ❖ Encourage and support low-income families returning to work and maintaining employment,
- ❖ Base the co-pay on a family's income rather than on the cost of child care,
- ❖ Make it possible for families to choose child care based upon quality rather than cost,
- ❖ Establish a flat-rate system that is easier to understand,
- ❖ Help ensure that families pay a lower percentage of their income toward child care costs,
- ❖ Help families more easily manage budgets,
- ❖ Increase stability for children,
- ❖ Incentivize rather than penalize mobility in the workforce,
- ❖ Help students continue their education by being able to afford child care, and
- ❖ Support future changes to the program that will encourage more low income children to be in high quality programs.

### **Paula Mason ~ IESDB Update**

Preschool teachers in Meridian have placed on the website the "First 100 Words" for families to get activities and also, access what is being taught in preschools. Paula stated they had worked on a referral process more aligned partnership with ITP and commended ITP on the referrals coming in. There are places in the state that do not have pediatric audiology, so she has been asking local audiologists to go around the state and connect with families and do testing for hearing loss. Christy suggested Paula connect with Cynthia Carlin, Program Specialist for Sound Beginnings.

Paula reported Region 7 has equipment, but no audiologist, so they are sending a campus audiologist there to run tests. Upcoming workshops are family sign language, jumpstart for visually impaired children, literacy workshops for young children and a language goal workshop with IPUL. All dates are on the website -- [www.iesdb.org](http://www.iesdb.org)

It was decided because of the time to adjourn and finish up today's agenda in the morning. Meeting was adjourned at 4:45p.m.

## Minutes

**Early Childhood Coordinating Council**                      **Day 2**                      **September 6, 2013 8:00am**

Chair Sherry Iverson called the meeting to order at 8:08am

The agenda from Friday was continued with David and a report on the Blended Certificate video

### **David Allen – Video on Blended Certificate**

They are ready for the next step in the distribution of the video, but he has asked a student to go back and edit and have revisions done by September 25<sup>th</sup>. He will then send out to the Council for approval. David would like to work with Shannon on sending the video to all administrators, principals and special education directors. Comments were made by the council that we need to do a better job of getting the graduates into school districts in Idaho as opposed to them getting hired away to Washington and Oregon. A concern was expressed about finding blended-certificate students in Twin Falls, but Ellen reported they had five grads from that area and all were at the top of their class academically with employment at Idaho schools. David agrees there is an issue with getting the grads to the jobs and finds that most people in the state do not understand the benefits of having a candidate with a blended certificate. This video will show what qualifications the students will have upon graduation. There is no system in place of connecting grads and jobs, so the possibility of a private webpage with contacts for the universities and job fairs was discussed. **MOTION:** Sherry made a motion to move forward, Ellen seconded, to support the formation of a system to connect students and job possibilities. **VOTE:** Passed unanimously.

### **Angie Gribble and Katie Lamansky ~ Idaho Early Childhood Nutrition and Activity Component to Centers for Disease Control Grant**

IPAN's (Idaho Physical Activity and Nutrition Program) focus is on changing content to make individuals' default decisions healthy ones. The CDC grant period is from July 1, 2013 to June 30, 2018, and combines 4 programs:

- Heart Disease and Stroke
- Diabetes Prevention and Control
- IPAN
- Coordinated School Health

IPAN will work in several settings such as early childhood education sites, farmer markets and community events with proposed Year 1 activities for Basic Component 1:

- ❖ Work with IdahoSTARS to incorporate nutrition in "Tips for Selecting Child Care" checklist for parents
- ❖ Develop low cost, evidence-based PSE changes to promote healthy nutrition to groups child care facilities (7-12 children)
- ❖ Look at potential nutrition training to IdahoSTARS QRIS system
- ❖ Work with CACFP providers to increase participation

Basic Component 2 deals with Physical Activity and the number of ECEs that adopt strategies to increase PA

A collaborative workshop with Central Dist. Health and Blue Cross held this summer on nutrition and physical activity was budget limited to 30 participants. It filled up within hours and had 80 on the waiting list.

Comments from participants included a great workshop and recommended to be mandatory for everyone

getting their certification. Beth is working with Boise City childcare licensing to incorporate nutrition and PA education.

Sherry thanked Angie and Katie and extended an open invitation to join EC3.

### **Christy Cronheim ~ Part C Assignment for the IT Committee**

End report that is submitted has compliance indicators with no wiggly room. We have to meet 100%. Each year after the report is submitted, we receive a determination letter with a rating for that fiscal year. For 2011 and 2012 we received the highest rating, "Meets Requirements". We still battle with finding providers and with the increased number of referrals plus requirements; we may not receive that rating for 2013. We will be close.

Concerning the implementation of the new Medicaid Children's Developmental Disabilities Services, we have our process mapped out for 0-3 year olds and can get them through the eligibility process. We are still learning as it is very complicated. We are researching how it fits our population and are struggling to meet requirements for waived services. The majority of Medicaid's requirements line up with ITP's on-going monitoring plan. Another piece we are working on and have down is the redetermination process as we already have a plan and have to start in the middle of our IFSP (Individual Family Service Plan).

The ITP has a process of transition around the age of 2 years 8 months. The independent assessors who determine eligibility for older children have 90 days to determine eligibility once they receive all information. We wanted to tack on an extra 30 days to make sure transition goes as smoothly as possible.

We found we do not have a lot of data because in the past if a child was CHIC or Medicaid eligible, it didn't matter and we lumped all together. But prior to July 1, if a child was CHIC eligible, but not Medicaid eligible, they were not eligible for these services. There are a chunk of kids who will not be eligible and ITP has different eligibility criteria than Developmental Disability Agencies. We are trying to estimate the number and are working with families to make them eligible. Katie Becket eligibility throws another level of confusion into the mix.

We are mapping out how these services apply to our age group, for example, habilitation support for a child in a community setting. We need to make sure the activities are appropriate and not an intervention. We have identified scenarios and train staff on appropriate uses. ITP and service coordinators are completing packet/paperwork which is adding strain on staff. We are discussing a shift to independent assessment providers taking it all on.

Regarding the proposed FFY 2013 – FFY 2018 Part C State Performance Plan/APR Explanation and Rationale (Please see handout for specifics on proposed changes.)

We have targets for each year and are writing new state performance plan targets and asking EC3 to help. The State Systemic Improvement Plan (SSIP) has added a new indicator; the intent to add something more result-focused where we have been compliance focused. The handout describes the 3 phases. The Office of Special Education (OSEP) says there is no wrong or right focus and that we need to provide rational why we chose what we did. Some indicators are very specific, but this one is very subjective. Christy has ideas and will share at a later date. Two years ago ITP chose 0-1 enrollment area as result focus and put together a centralized plan and child find plan for the state. For 2 years in a row, their numbers are up which is at the highest level they have ever had. David requested Christy create a visual about these services which would be helpful. She has

one, but they are still working out the kinks and she wants to make sure messaging is correct. He requested she send it to Lorraine, even in its draft form, for her to get out to the council.

Break

### **Roger Sherman, Wickes MacColl and Norma Pintar ~ Overview of Statewide Effort of Stewards of Children Idaho Children's Trust Fund**

Roger opened the presentation discussing the occurrence of sexual abuse lawsuits and statistics of abuse where 1 in 10 will be abused before their 18<sup>th</sup> birthday. The Centers for Disease Control calls sexual abuse the silent epidemic where we are not doing enough. The good sign is we are hearing more about it possibly meaning that children are more aware and adults are realizing it is not ok to ignore it. They hope to work on inoculating the public to prevent sexual abuse in the long run. The Stewards of Children program has trainers around the State and is working with the YMCA on an initiative to train 22,500 adults over the course of 5 years. They are funded by St. Luke's and have 3 people from St. Luke's (Sherry is one of them) trained as facilitators. The cost of training is \$350 per trainer. They will need more trainers to go through the 2 hour training to reach 13 cities in the Treasure Valley.

The program provides knowledge and hopes to influence adults to use better protective mechanisms around children. The importance of reporting abuse is also discussed as it is a person's responsibility by law in the state of Idaho to report. It is not your job to judge/prove. Many people are concerned with regards to slander, etc. It is all done confidentially. Important note: you never "catch" a pedophile – you only suspect. There are 4 components to the trainings: Video / Training / Prevalence / Discussion

The video was then shown which involved childhood stories told by adult survivors of abuse. Very powerful message received from watching the video.

Comments regarding the training and video included:

- Grandparents discussing with their adult children to make sure they have a skill set
- Material is available in Spanish with bilingual trainers
- Head Start will offer training for their staff
- Need other forms of protecting ethical people who are working with children as many don't go into early childhood because of fear of being in those difficult situations – mainly men

The workbooks are \$10 each. Roger said they can scholarship notebooks for organizations and parent groups. Gary commented that back in the mid-80's the public health system had sexual abuse curriculum in the schools and is wondering if this should be a standard in Idaho schools for students and is it worth the council's consideration to catalog what is happening in Idaho to get the information out. Wickes replied that there is not anything in place in the Idaho school system. There has been an issue at one specific school and they are going through sexual abuse education training. Roger is working with Child Abuse America who is leading a national effort called Erin's Law which will create a mandate for school systems to have sexual abuse education in the schools.

Sherry had a parent from Lewiston Regional Early Childhood Committee take the training with her who wanted to take it back to their committee. Justin asked for her name and Lorraine will get it to him. Sherry also asked the Council if they would like training as part of the November meeting. It was decided to do it before the meeting for those interested. It will also be open to other staff members from agencies and visitors if they pay for it on their own.

### **Gary ~ Washington, D.C. Presentation and what he learned from other Councils**

He thanked the Council for the opportunity to represent EC3 at the meetings. Lorraine explained the invitation was extended to state EC3's to discuss sustainability and Idaho was not invited because we were one of five states that did not apply for any funds to run a council. The reason we did not we did not apply for any funds is because we had to put up a 70% match and we have no state match to throw in. Some councils have had over a million dollars to form a council and get it running. When Lorraine heard through Genie Sue that the councils were getting together, Lorraine contacted them to say Idaho did not have funding, but wanted to be involved and participate. It went to the top of the Department of Health and Human Service where they said yes, we want Idaho there. Gary was then asked to present.

The money for the councils came from the ARRA (American Recovery Reconciliation Act) so it was short term money to do council startups. There are councils who have had money for two-three years and are now struggling whereas Idaho is unique and have managed to do projects without funding. It was a benefit for the Council to show others how to do it with very little to no funds.

Gary put together a presentation for them entitled "*It's Not All About the Money*" which brought comments from others that it IS all about the money. He explained the challenges and options Idaho has faced with \$42,000 from IDEA Part C and about \$60,000 dedicated for staff from the ECCS Grant. Other resources have been AmeriCorps\*VISTA, parent volunteers, in-kind personnel costs. We need legislative champions and Lorraine said she has spoken to the Governor's office and they are taking it to the Senate and House to look for appointees. Other speakers were:

- Linda Smith, Deputy Assistant Secretary and Liaison for Early Childhood Development who was excited about President Obama's early learning initiative. She referenced a website, [www.whitehouse.gov/earlylearning](http://www.whitehouse.gov/earlylearning) to see more about the initiative. She also commented how positive the Senate has been on passing early childhood markings.
- Kathleen Sebilus, Secretary of the Department of Health and Human Services and Arne Duncan, Secretary of Education, Margo Chappelle from Nevada – talked about requiring the Dept. of Ed to participate in the process and establishing rules.
- Karen Rowback

Carolyn has also heard good things from the meeting and what other states did with the monies as far as setting up database systems.

### **Accountability from May Meeting**

**Christy** – Regarding the setting of targets for next year's State Performance Plan and the new indicator #11, had a good opportunity to train new ITP employees about the role of EC3 and how it plays in and links to processes.

**Gary** – Sent a summation to peers around the state in expanding the grant application and commented to them on the "Happiest Baby" video

**Carolyn** – Shared with her Administrative Assistant and national counter parts in other states on how the EC3 operates and survives on stone soup!

**Ellen** – She sent information regarding their fall conference to Lorraine for placement on Facebook and they are receiving hits on the page for registration. Also, at public meetings discussing the search for a new school president, early childhood education made the profile. Early Childhood was also mentioned for the first time in the administrative speech by the outgoing president.

**Stan** – Meeting of HS Board in August shared how the EC3 is serving with limited resources.

**Sara** – Takes notes and handouts from meetings back to staff for involvement in anything that pertains to them.

**David** – They are starting a new infant class in lab and there was a discussion of some items learned at EC3.

**Sherry** – After receiving the appointment with the Council, her Administrator asked for a paragraph about the council and it was in the St. Luke's newsletter. She received emails commenting that people didn't know there was a council. She is promoting sharing the paragraph internally and Lorraine will send it out to everyone to use.

Genie Sue mentioned a study done by the Kellogg Foundation pertaining to early childhood.

Carolyn has the report and will send it to the Council.

#### **Lunch – Lorraine presented on Oral Health Initiative, Early Literacy “Books to Go”, Facebook**

The statewide Oral Health Initiative includes several components:

- ❖ Instruction card and on brushing a baby's teeth plus a toothbrush going home with every ITP baby
- ❖ A guide to pediatric oral health distributed to all Dept. of Health & Welfare regions where ITP is staffed and uses it as a training tool with families. The guide has very graphic pictures of bottle rot and what it can do to babies' teeth. They received a discount on the guides through the American Academy of Pediatrics with Sherry's help. It is an invaluable resource.
- ❖ Dr. Noreen Womack is taking the guide and 3000 toothbrushes and doing a pilot program with pediatricians in the valley. Some pediatricians still hand out suckers with visits.
- ❖ “Did You Know” facts were posted to the EC3 Facebook page for 6 weeks.

Children who have a dental exam by the age of 1 year have a better chance of a life time of healthy mouths and teeth. There is not much data about dental exams by the first year other than Medicaid. We have a baseline established and will continue to look over the next three years and see if we have affected change in this realm. One of the most common reasons for school absences is dental visits. Once children leave for an appointment they tend to be gone for the entire day. They hope to distribute 6000 toothbrushes over the next year plus finger brushes. Sara San Juan and Seasonal Head Start have translated the card into Spanish. It is also available electronically and Ellen requested a copy to use as a teaching lesson.

It was asked how we can promote this to the general public. Lorraine said we can link the card to the Clearinghouse eventually. Sherry promotes it in her new mom support group and Carolyn says good dental hygiene has been a part of Head Start for years. She offered up more materials also.

Lorraine reported the Coeur d'Alene region has been a good model with engaging the community. Gary said they have been stretched to do other things and have not concentrated on this issue.

Lorraine reminded everyone to please be a friend to EC3 and “Like” them on Facebook. Also, post comments and “like” individual posts. It is difficult to know what will peak the public's interest, so if you have any ideas, please pass them on to Lorraine.

The “Books to Go” program where the Idaho State Commission for Libraries put together book bags has been successful. ITP is starting to put literacy in the Individualized Family Service Plans.

Sherry is meeting with students working on a needs assessment to evaluate social media and its role in health education. They are assessing eight social media outlets and trying to see if it has an impact on behavior. She will share the outcome with the Council.

### **Agency/Program/Organization Updates**

#### **Shannon – State Department of Education**

New Early Childhood IEP training was held for 300 special ed teachers and directors this summer. They have taken early childhood outcomes, social and emotional, and put them into the IEP. It will include the parent’s perspective on how they feel their child’s needs are being met. They are looking at more of a strengths perspective and have now built it into the system. They worked with IPUL and tested statewide and from now on all IEP’s will be on the new forms. The goal of imbedding early childhood outcomes into the early childhood IEP was to reinforce districts’ capacity to change curriculum and instruction if the child is not moving toward typical development. This IEP piece will go into kindergarten, hopefully close to their 6<sup>th</sup> birthday. Head Start Interagency Agreement – she has been working with Carolyn and it is under review by legal departments. Funds will be withheld from school districts if agreement is not signed by January. The goal is this spring ITP, Head Start and the Dept. of Ed. go regionally and train on interagency agreements. Statewide Trainings – Shannon is on the road doing trainings on early childhood IEPs and how to write them. School-based Medicaid – She is doing district trainings on the changes effective July 1, 2013. National Work Groups Graphic – Idaho and Pennsylvania are the only states with both Systems Framework and IDEA Early Childhood data system work groups in the nation. Upcoming work will be to come up with examples and offer guidance and offer best practices. Idaho will represent all of western US.

#### **Jacquie Watson and Deborah Drain – Maternal Child Health Home Visiting**

They are collaborating with the CHIC project and local health districts bringing more medical home coordinators to rural areas. The coordinators will be traveling to help identify children for medical home demonstrations which will leads to sustainability of medical homes. This means better care for children and better tools and strategies for staff. The contract was signed in July with medical home coordinators in eastern (2) and southern (2) Idaho. The long term goal is to take to other health districts and have a medical home coordinator in each district. Jacquie introduced Deborah who is new to the program. Deborah reported they are waiting on word if they received an expansion grant.

#### **Melissa – Medicaid/CHIC**

Their medical home demonstration, which is a separate pilot from Jacquie’s, involved comprehensive care plans and data taken on; what type of visit? Was care plan updated? Was copy given to parent/guardian? Where is the care plan kept? Has it been helpful?

CHIC is also involved in a depression screening learning collaborative with 47 providers in 14 different sites consisting of pediatricians and general practitioners. Core measures: total % of patients 12-18 yrs. of age who have been screened in last 6 months; screening results given and documented; appropriate follow-up documents; if positive, did substance abuse screen follow. This will be 6 months of active data collection and

post data and sustainability for total of 9 months. They also are working on an Idaho Health and Wellness collaborative for children and the infrastructure building continues a search for partnership opportunities. Hopefully, the logo and website will be complete this month.

### **Kathy – Department of Insurance**

“Your Health Idaho Health Exchange: website is up and running and in less than a month, the public can use it. This is to support the Affordable Care Act and the requirement that all Americans have some type of health insurance and the mandate that all states create an exchange/market for shopping of health insurance. The website is not being run by the Dept. of Insurance. People can also apply for financial assistance for insurance on the website. First, they will be screened for Medicaid eligibility - if income is less than 400% of poverty line they can get help with an advanced tax credit or choose to have an advanced tax credit be sent to the insurance company. Those who are at 250% of poverty line can get a discount on co-pays which are helpful for children of families if their income is too high to qualify for CHIP. All health insurance plans available through the exchange have to contain 10 essential health benefits and is very comprehensive; pediatric dental and pediatric vision have to be included. First enrollment period is October 1<sup>st</sup> though coverage will not begin until January of 2014.

On the Dept. of Insurance website there is information on health care reform with facts for families and seniors and is being updated.

### **Stan – Head Start**

Reporting on the Good, the Bad and the Ugly; The Ugly is 2012 numbers there were 6 million children living in poverty and Head Start was able to serve 1.4 million. The recent cut in funds pulled 405 million out of Head Start and translates to 57,000 children who did get service in the past and will not be getting service in the future. Also, 18,000 staff will lose jobs or take pay cuts. In Idaho 335 child slots will be lost.

The Bad, in the face of all this, is a faction of Head Start nationally is not unified. A section of the country has split off with old liners thinking of it as a poverty program to serve as many children as possible which is not where the agency is headed. It has to establish itself as a quality program and need to shift gears. They will end up serving less, but better.

The Good is that the national Head Start organization is a very effective advocate and has a new chair, Vanessa Rich from Chicago.

### **Carolyn – Head Start Collaboration**

Stan represents the Head Start Association and sees a different perspective and she sees it from being part of state government and federal office of Head Start and it is still pretty grim. It is very discouraging with the laying off of people and closing classrooms and how sad it is to see people dedicated to the lives of children losing their jobs.

Early learning guidelines are a piece of her work. She and Shannon had two superb teams from around the state edit the guidelines over a year ago. Following 1,100 pages of revisions they are getting close to launching to the next level. Another critical part through this editing process has been Dr. Janice Fletcher. It is divided into 5 domains: Cognitive, Health and Well Being, Social and Emotional Development, Content Knowledge, Communication with 64 goals. They had to change the electronic software program. It is can be read 2 ways; either by age range or goals and means it is dual access and means everything has to be entered

twice. It is an important document and is being used in higher ed and by special ed teachers. Hopefully, at an upcoming meeting she and Shannon and possibly Julie, can do a presentation.

### **Sara – Community Council of Idaho**

Forty-four EHS/HS slots had to be dropped due to sequestration. They are seeing a change in patterns with migrant vs. seasonal with migrant numbers being down. Last year they weren't able to meet funded enrollment for migrant and had to request converting to seasonal. This gave us the opportunity to look at why the numbers were dropping in eastern Idaho, but increasing in western Idaho. We were able to take 34 slots last year and run a winter program and we were full with migrant children from the first day. Now they are looking at that again this year, especially in the eastern part of the state where there is difficulty recruiting migrant children, but the season list is long. In central Idaho one of the reasons is more and more parents are working in dairy and dairy is not a qualifying activity. This is something we are addressing through the National Migrant and Head Start Association. As we lose more funding, one of the realities is closing one of the centers. We just went through our 3-year federal review and there no issues at any of the centers. She is now focusing on disability and mental health and partnerships with school districts and looking forward to trainings with Shannon. One of our challenges in the rural areas is the interagency agreement where we show them the template and show them piece by piece.

This year we went from education coordinators to more of an instructional coach model. There will be growing pains so we are looking at a 3-year goal to make it work. The shift is that the coaches are in the classroom helping the teachers with lesson planning and modeling because of high turnover of staff. Being a seasonal program, we serve children from June through October and some teachers leave to get full-time work. With our Maternal Infant Early Childhood Home Visiting Program, we have 18 children and do have a waiting list. Sara was in a home that saw so much need it left her drained. She told her supervisor how much she appreciates the two women who do the home observations day after day. Future projects include grant writing with assistance from the University of Idaho. They will be looking at writing a grant for an after-school program at one of the migrant housing areas. Also, a study done by the University found a lack of understanding of the importance of science education in Latino families and what the child might need if they want to go to college. We want to focus on professional development in the area of science for our teachers so they are able to promote this with the families. This will be another grant we will look into.

### **Sherry – AAP/St. Luke's**

There is potential bad news on the horizon come Monday regarding immunizations due to creative funding to insure that all children receive their immunizations. Physicians can order all vaccines (2-3) needed. This could be a disaster regarding the storage as different sources of vaccines cannot be stored together meaning new refrigerators will be needed and will be huge burden on small offices. It will affect the health districts, also. They are collaborating with midwives regarding the bill passed requiring them to become professionally certified and identify a scope of practice. Before the legislation was passed, anyone could call themselves a midwife. There is an ongoing discussion whether twins can be managed by a midwife.

### **Erika – Child Welfare/Foster Care**

We have created new positions and hired people to fill those positions with one being a retention specialist focusing on efforts to recruit foster parents and keep them once they are licensed. Another position is a workforce development specialist and just refilled our child well-being position. An initiative that is rolling out

is with our preference standard which is where we place foster children when they are taken into care and who adopts when the parents' rights are terminated. The goal is to prioritize relative placements. We have to rule out fit and willing relatives first before we will consider non-relative adoptive parents. This will create a rumble with our general foster care population of resource parents because historically, we have placed with a non-relative then went looking for a relative and had to make a choice between the two. We will put a priority on an early search for and engagement with a relative instead of waiting until after termination of rights. This is based on research that children do better with relatives through this traumatic time. November is adoption month and we will have celebrations across the state. We have also been working on strengthening and updating our safety assessment tool which is what we use when we first go into a family's home to report child abuse or neglect. The focus will be on providing services and interventions to children who not safe in their homes. Another emphasis we have is on trauma informed practice and recognizing that entering in foster care is in itself a trauma in addition to any trauma they may have suffered in the home. We will also be working on management of psycho-tropic medication with our foster children because it was discovered many of them are on multiple medications that adversely affect one another. Erika wanted to remind everyone of the Work Press blog site for foster parents and to please email her with information and events to post on the site.

**Beth – Idaho AEYC**

Conversations behind the scenes are ongoing at this time regarding the "Race to the Top" grant which sounds positive. She is feeling encouraged. This is a huge new round of funding and need the opportunity to apply.

**Sherry –** We need to vote on the facility used for this meeting. Does it meet everyone's needs? The staff has been wonderful. It was a good space for Carolyn, and David was the Guest of the Day with upgrading to a suite. Everyone seems happy with the site.

Regarding the next meeting scheduled for November 7<sup>th</sup> and 8<sup>th</sup>, she has doubled booked and is asking to change the dates. It will be taken under advisement and discussed via email.

Meeting adjourned at 2 pm