
Universal Access to Early Childhood Care, Education & Health Services

Children, Seniors, and Family
Committee
Santa Clara County
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Photo credit: SOMOS Mayfair

Background

In President Dave Cortese's 2017 State of the County Address, he called for actions to "strengthen, scale, and develop new investment strategies in early learning and development." On March 28, 2017, Supervisor Ken Yeager then offered a referral to the Board of Supervisors that addressed prioritizing access to early learning and health systems through a Whole Child Approach that will eliminate barriers and support the healthy development of children within the county.

Supervisor Yeager recommended a pilot study with Alum Rock Union Elementary School District (ARUESD) and Franklin-McKinley School District (FMSD), with the goal of providing comprehensive health care, quality early learning, and quality child care from birth to age 8; and an evaluation of the feasibility, costs, and actions needed to provide all County residents with universal access to comprehensive health care, quality early learning, and child care from birth to age 8.

These requests align with the recommendations stemming from Santa Clara County Public Health Department's Children's Health Assessment, Santa Clara County Office of Education's Early Learning Master Plan, and FIRST 5 Santa Clara County's Strategic Plan. Cross-system and community partners have joined to develop strategies that support early learning and health.

With over thirty years of experience as an early childhood provider, college instructor, policy advocate and leader in the early childhood and health community in Santa Clara County, Frederick J. Ferrer was hired in September, 2017 to work with all the partners to develop a set of recommendations for the pilots.

It should be noted that both the Alum Rock and Franklin-McKinley School Districts not only have the largest number of low income young children in the County but also have a track record over the past few years of investing and focusing on early childhood. While the districts are working in partnership directly with the child care/preschool providers, there was a strong sense that unfortunately the County's services were being offered to families outside of this partnership. One example of this is the County's School Linked Services (SLS), which offers strong support to families if they're enrolled in the school. Young children and their families not connected to a school-aged sibling therefore do not get SLS attention or support. It was everyone's desire to integrate the County's services as creatively and as much as possible into the work of the partners.

Alum Rock School District with support from FIRST 5 Santa Clara County (FIRST 5) has invested in a universal preschool goal as well as embraced the implementation of Transitional Kindergarten (T-K). They have a strong and active Family Resource Center (FRC) operated by SOMOS Mayfair (SOMOS) funded by FIRST 5. California State Department of Education (DOE) subsidized child care is provided in the district by Kidango, a large and well funded child care agency. Grail Family Services also offers a State Preschool program within the district. There are also family child care services offered throughout the district in an uncoordinated manner. Alum Rock just completed its Early Learning Strategic Plan and will be bringing it to their Board of Trustees for adoption. The district uses the Kindergarten Readiness Assessment and uses evaluators from Applied Survey Research (ASR).

Franklin-McKinley School District with support from the David and Lucile Packard Foundation has supported the district's *Starting Strong and Smart Initiative*, universal preschool and T-K plan. Educare California at Silicon Valley also provides child development services in the district in conjunction with the Santa Clara County Office of Education, Head Start and Eastside Union High School District. The district also has a strong and active FRC funded by FIRST 5 and operated by Catholic Charities of Santa Clara County (Catholic Charities) at Educare. The Franklin-McKinley Children's Initiative is also part of the service mix. There is also a partnership with the San Jose Public Library at this FRC. There are plans to expand and open an additional FRC in the Seven Trees community. State subsidized child care is provided by SJB Child Development Centers as well as Kidango. Franklin-McKinley just completed its Early Learning Strategic Plan and their Board of Trustees unanimously adopted it at their January 10, 2018 meeting. The district uses the Early Development Instrument (EDI) as their assessment and works with the evaluators from University of California Los Angeles (UCLA).

Working Assumptions and Guiding Principles

It is important to note that there are a number of guiding principles and assumptions that were made in preparing this report and the recommendations to the Board of Supervisors.

The goal is to have an **universally accessible early learning system** that meets the highest standards as measured by the QRIS Rating scale.

A clear Pathway to Success must be adopted by the Districts so that all players are clear on the contributing factors to success, as well as factors and processes to which they are accountable in order for all children to be ready for school and proficient in language arts and math by third grade.

Maximum amount of integration is needed of all the current, new and about-to-be released studies and plans in early childhood. Duplication is to be avoided. “We don’t need one more Strategic Plan”, we need a path forward to implement all the various plans that have been proposed.

Deep engagement among the numerous community partners is essential for not only buy-in but ultimately adopting changes needed to improve the system as we approach universal accessibility.

Must have **clear measurable outcomes** to test the pilot’s success or failings. Common metrics between the two districts are necessary. Adopting metrics based on data already collected is preferred for efficiency and staff buy-in.

Leveraged or braided-funding where possible is desired. The goal is to maximize the amount of leveraging of different sources of dollars in the current system. Any future resources or funding should consider how they might be leveraged against existing funds.

Family support principles should guide all system and program designs. Engagement of hard-to-reach families in the districts is essential if there is to be true universal access.

Maximum integration of Santa Clara County services into the early childhood providers and districts' early childhood delivery system is a primary goal.

Health services need to be integrated into early childhood care and education services, especially as articulated by the goals of the Santa Clara County Children's Health Assessment.

Whatever systems or program reforms are suggested **family navigation** services are essential for true access.

Engagement Process

With these guiding principles in mind there were four major types of meetings convened to inform the recommendations in the report:

- School District Strategic Planning Meetings (for each district) including district staff, FIRST 5, child care providers, Family Resource Center providers, County Public Health staff, as well as evaluators and any other district specific partners.
- Internal County departments. For example, Social Services Agency, Behavioral Health, Office of Supportive Housing, Family and Children Protective Services
- Individual meetings with key stakeholders and thought leaders: Superintendents and their early childhood and enrollment staff from each district, Santa Clara County Office of Education Interim superintendent and Director of Early Childhood Services and Head Start, each of the four major child care providers, Educare leadership, Family Resource Centers' staff and leadership, SVO, David and Lucile Packard Foundation, Silicon Valley Community Foundation, Working Partnerships, Silicon Valley Council of Nonprofits, the ROOTS Clinic, Walter Wilson, FIRST 5 staff and leadership, Director of the San Jose Public Library, Early Care and Education Local Planning Council, Strong Start Coalition, Kids in Common. Further meetings with the Policy Director for the City of San Jose and the Behavioral Health department and providers are scheduled.
- Parents in both districts, both consumers of district and FRC services, as well as families not eligible for services that they felt they were needed.

Engagement Findings

In the present section, key positions and comments from various constituencies are summarized.

PARENTS: In focus group meetings as well as individual conversations with parents from both Districts, there seemed to be a fairly universal experience described. It should be noted up front that by no means is this parent input indicative of all parents as the sample was in no way scientific. However, no conflicting feedback was received from providers or the district about the input the parents shared.

There was a need for better customer service on the part of County services. There were repeated stories of how the systems of eligibility, certification, and recertification were difficult to navigate, burdensome and inefficient. This came from parents who were currently receiving services as well as parents who found out after going through the application process that they were not eligible for services. In focus group meeting with parents who were not being served, they illustrated how their low income status was yet too high to meet the State or Federal government's qualification guidelines. Some mothers who were not employed were frustrated that their children were not eligible for preschool, which they considered critical to preparing them for Kindergarten. They could not afford the full cost of preschool.

Parents also were unclear about eligibility guidelines, enrollment priorities and services available. Much word of mouth communication was the key way they kept informed. Immigration fears also play a role in today's environment for parents.

DISTRICTS LEADERSHIP AND STAFF: In meeting with both superintendents and their senior early childhood staff, there was a deep commitment to early childhood as a major strategy to improve children's success in school. Both districts have lower than desired numbers of children coming to school ready and proficiency levels in third grade were also below district goals. After numerous edits, both districts have agreed on the Pathway to Success as the model to be utilized in the pilots. This is an agreed upon pathway on what needs to happen in order for a child to be

successful by third grade and the model also illustrates the foundation that must exist to support the success of the Pathway goals. A copy of Pathway to Success is attached to this report.

In Franklin-McKinley, there is a very strong desire to improve the relationship with the County's Behavioral Health Division. They are seeing more younger children struggling earlier with severe behavioral health challenges. They also observe a disconnect with School Linked Services and getting children assessed and served by the Continuum of Care. There is also confusion by parents about services they may be eligible for and the schools are challenged because they are not expert in all services available in the community. The district believes in a decentralized system that offers requests for services, information and enrollment at school sites. Training of current staff is needed but not sufficient to meet the myriad of needs families come to the school in search of support.

In Alum Rock, there is a strong desire to further develop health services available to families at their campuses. There are families who may have MediCal but are not utilizing all the prevention services available because of lack of connection to a health home. In Alum Rock they believe in centralized systems of enrollment and information dissemination.

Both districts are committed to dental screening and still need protocols for how to establish and maintain a dental home. In addition there is great concern for hard-to-reach families. Families who may have been in a program and are no longer enrolled was another concern. "Floating families" tend to have the most challenges and without support the issues get worse. Both districts have agreed to utilize common metrics and have participated in a number of meetings to identify proposed milestones that could be measured and are metrics that are already being collected. These can be fed into DATA Zone. We are working with the evaluators and are close to agreement on the actual metrics.

SANTA CLARA COUNTY STAFF: We held a large focus group/informational meeting with numerous department directors and staff. They gave us specific feedback about the Concierge Model and were supportive. There were numerous individual appointments held to try to understand the possible barriers and complications to universal access. Income eligibility rules governing social services are not always friendly to

families living in our high cost County. Families are denied services, that they feel they can't afford, due to earning too high an income. Efficiencies are always being examined by County staff and providers don't always understand the County's rationale for their practices. A need for greater understanding of eligibility by providers and consumers was recognized. County staff also suggested specific work already underway that may be a good fit with the pilots.

PROVIDERS: The major child care providers in the districts are experienced and were in consensus about the priority of needs. From their perspective facilities is *the* greatest barrier to universal access. They recognize the needs for improved staff compensation, professional development and training but continued to come back to the need for facilities. An average cost for a double-wide modular unit is about \$1.5 million and would provide preschool services to 96 preschoolers. There remains available State Department of Education subsidies for low income families but without facilities there is no capacity to draw down these funds and State subsidy monies have had to be returned to the State due to lack of service. Providers also desire better connections to County services for the families they serve. In terms of the Family Resource Center providers, there seemed to be universal agreement with the Concierge Model and the desire for deeper collaboration with the County. They expressed the explicit need for additional staff in order to carry out the model and move toward universal access.

COUNTY OFFICE OF EDUCATION and the STRONG START COALITION: There is a desire on the part of the SCCOE to integrate DATA Zone into the pilots. Both Districts are DATA Zone participants and they should be able to utilize currently collected data for the pilots. The staff was concerned that while the pilots place necessary focus on preschool age children, there would not be enough attention to newborns through three year olds. They also raised serious concerns about staff compensation. While holding the line for the highest quality standards, they recognize that government contracts are inadequate to meet the compensation needs of staff living in our high cost county. The Strong Start Coalition that represents over 30 early childhood organizations and gave direct input into the Concierge Model. They expressed great support for further and deeper collaboration with providers, the districts and the County.

The following set of recommendations are derived from these key informant meetings and interviews:

Recommendations

1. Develop strategies to increase universal access to early care, education and health.
 - a. Recommendation: Expand child care subsidized slots by investigating the County's role in financing facilities to take advantage of available State Department of Education child care subsidies. The Santa Clara County Facilities Needs Assessment is due for publication by late January, 2018.
 - b. Recommendation: Working with the Districts, early childhood providers, charter schools in these districts and family child care provider networks with the Healthy Kids Foundation and FIRST 5 develop a Coordination Plan to include a process for universal health screening, medical and dental home establishment protocol and data tracking input into Data Zone for all children 0 through third grade in the two districts.
 - c. Recommendation: Apply for funds from the California Department of Social Services in partnership with the Social Services Agency, FIRST 5 Santa Clara County to fund the Nursing Home Visitation program and the expansion of the current Home Visitation program for CALWorks parents to serve children birth through three years old.

2. Provide an overview of how the various Early Learning plans may tie together and what role the County could play in to improve early learning, well-being and health.
 - a. Recommendation: Facilitate the implementation of the School Districts' Early Childhood Strategic Plans utilizing the *Pathways to Success* model. Work to support the implementation of the Santa Clara County Office of Education's Early Learning Master Plan and soon to be released Facilities plans by:
 - i. Integrating County services into the program enrollment processes by collocating enrollment efforts with the early learning providers (on site, enrollment fairs, online info kiosks).

3. Develop an improved universal enrollment model for multiple early care and education programs.

a. Recommendation: Adopt a Concierge Model of universal enrollment and enhanced referral that coordinates early childhood care, education and health services at the Family Resource Centers in conjunction with the school district, the early childhood providers and Santa Clara County services. Pilot a hub model and a decentralized system in the two districts.

i. Fund two positions in each school district's Family Resource Centers to be a lead concierge.

ii. Implement a plan for current Family Resource Center to adjust staffing and assignments to align with the new Concierge model.

4. Integrate early learning supportive services especially, County services, into the early childhood offerings for families.

a. Recommendation: Develop implementation plans for how each County service, serving 0- third grade, will participate in the School Districts' strategic plans. Codify current processes and protocols and make systems revisions where necessary. (especially CalWorks, School LInked Services, Housing and Behavioral Health enrollment and services)

b. Recommendation: Support the increased staffing budget proposal for expansion of School Linked Services with staffing to include early childhood into the scope of SLS.

5. Ensure family voice continuously informs recommendations, design, and implementation.

a. Recommendation: Continue meeting with parents in both districts to gain their feedback and suggested solutions.

6. Design process to reach and engage less represented communities in the pilot sites.

a. Recommendation: Continue the involvement of under represented communities through additional outreach and gaining their participation on the Districts' Implementation of Strategic Plans work groups. (specifically African ancestry and Asian families, LGBTQ parents, families with children with special needs).

7. Improve funding sources and leverages for early learning opportunities.

a. Recommendation: Investigate any possible major foundation and philanthropic support within these Districts for early childhood work, continue to explore all possible funding partnerships including with FIRST 5, foundations and City resources and any leverage opportunities for the County. (See Recommendation 1.c. as an example)

8. Explore options for increased revenues to early childhood programs especially to meet the needs of working families not eligible for subsidized services.

a. Recommendation: Strongly support current efforts for a local revenue measure that would increase the supply of early learning opportunities to accomplish Universal Access for all families. This should include: targeted universal funding for subsidized eligible families, support for families that do not qualify for subsidized preschool due to income, improved workforce compensation, facilities quality enhancements, professional development and program quality improvements.

9. Develop training models for providers for greater awareness of programs available for families.

a. Recommendation: Develop and implement a training module to inform all service providers of the scope, eligibility and nature of programs available for children 0 through third grade and their families.

b. Recommendation: Fund the provision of family engagement training to providers and County staff to improve their communication and assistance skills working with families.

10. Develop strategy to improve communication between services providers, to families and consumers and among policy makers.

a. Recommendation: Fund the development and implementation of a marketing campaign as well as the collateral to inform providers and consumers of all services available to children 0 through third grade.

b. Recommendation: Utilize the monthly School Linked Services Coordination meetings to include early childhood families so as to improve coordination of services and reduce duplication of services to the same families.

Participants

Thanks to the following for their time and expert input into this process.

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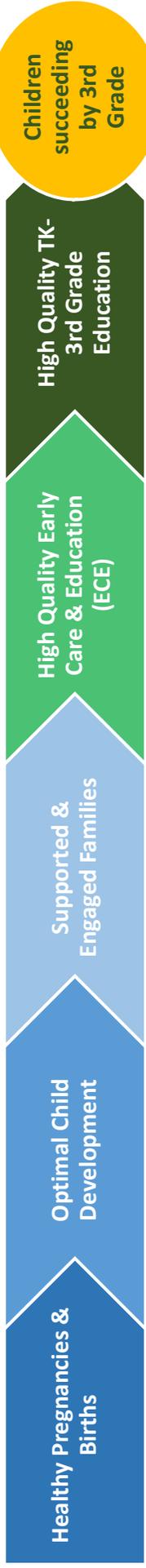
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Alma Borell, Director, ROOTS Clinic
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Charmayne Moore, Probation, County of Santa Clara
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Jill Bourne, Director, San Jose Public Library
Strong Start Coalition members (approx. 40)

Respectfully submitted:

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Winter, 2018

Prenatal – 3rd Grade Pathway to Success



INTEGRATED & ALIGNED SERVICES & SUPPORTS THROUGHOUT THE LIFE COURSE (PARTIAL LIST)

						
→ Health & dental insurance	→ Medical & dental homes	→ Family Resource Center programs	For children/families	→ Transition, articulation and alignment across ECE and TK-3 rd systems	Children are:	✓ Meeting developmental milestones
→ High-quality, continuous prenatal care, beginning prenatally	→ Comprehensive health care	→ Economic supports	→ Universal access to high quality infant & toddler care, preschool & Transitional Kindergarten	→ Assessments to set student learning goals & measure growth	✓ Demonstrating growth in multiple domains	✓ Meeting grade-level benchmarks
→ Access to healthy food, beverages, physical activity, & environments	→ Screenings (health, dental, vision, hearing, developmental, social-emotional, behavioral)	→ Parent education programs	→ Developmentally-rich language & learning opportunities	→ Differentiated instruction	✓ Proficient in reading & math by 3 rd grade	✓ Fluent in academic language
→ Screenings (parental depression, substance abuse, domestic violence)	→ Linkage to early intervention services	→ Health & wellness programs	→ Inclusive ECE programs	→ Assessments of program & teacher quality	Families are:	✓ Informed, healthy, strengthened, engaged and valued
→ Other pre- & perinatal services	→ Linkage to other supports & services	→ Equitable, inclusive resources for special needs	→ Centralized, family-friendly enrollment	→ Quality improvement supports	Partners are:	✓ Skilled, responsive, aligned & interdependent
→ Linkage to other supports & services	→ Linkage to other supports & services	→ Promotors (peer educators/community workers)	→ Community-based early learning opportunities	→ Linkage to health, social, emotional, behavioral and/or academic supports & services for students & families, particularly English Learners & students with special needs		
			For providers			
			→ SEEDS of Early Learning			
			→ Quality ratings			
			→ Quality improvement supports			



SYSTEM PILLARS: THE FOUNDATION OF A HIGH QUALITY PRENATAL – 3RD GRADE HEALTH & EARLY LEARNING SYSTEM

Strategic Goals: 2017 – 2025

Partners in the Alum Rock and Franklin-McKinley communities have identified the following strategic goals to guide their collaborative efforts to build a Prenatal – 3rd Grade Health & Early Learning System:

GOAL 1: Align and Integrate Systems

- **Align policies, programs, standards, practices, professional development, evaluation, funding and other “pillars” of the Prenatal – 3rd Grade Health and Early Learning System.**

GOAL 2: Provide inclusive, equitable and universal access to high-quality early learning experiences

- Ensure all children and families have inclusive, equitable and universal access to high quality early learning experiences prior to entering kindergarten

GOAL 3: Address social determinants that impact children’s health and learning

- Ensure children and families have access to a **comprehensive system of services and supports that meet the needs of the whole child and family** – physical, social, emotional, behavioral, academic, economic – and prepare children to be ready for and successful in school.

GOAL 4: Strengthen family-school-community partnerships

- Ensure early learning providers, educators, service providers and families **engage with each other as equal partners to foster children’s health, well-being and learning** at home, at early learning sites and elementary schools, and in their surrounding networks of families, friends, neighbors and community.

GOAL 5: Demonstrate impact and achieve sustainability

- Ensure the Prenatal – 3rd Grade Health and Early Learning System is **an effective, sustainable, replicable model for closing the opportunity, readiness and achievement gaps** for all children.

Early Childhood Concierge Model for Universal Access

