Health Resources and Services Administration
Maternal and Child Health Bureau

MCHB / ECCS February 2006 Webcast:

Spending Smarter: How State Early Childhood Comprehensive Systems (SECCS)

Grantees Can Maximize Existing Funding Streams to Promote Social-Emotional Health for School Readiness

Health Resources and Services Administration
Maternal and Child Health Bureau

- **Moderator:**
- **Phyllis Stubbs**

Health Resources and Services Administration
Maternal and Child Health Bureau

MCHB STRATEGIC PLAN FOR EARLY CHILDHOOD

GOAL 1.

To provide leadership to the development of cross service systems integration partnerships in support of children in early childhood and enhance their ability to enter school healthy and ready to learn.

Health Resources and Services Administration
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MCHB STRATEGIC PLAN FOR EARLY CHILDHOOD

Health Resources and Services Administration
Maternal and Child Health Bureau

GOAL 2.

To support States and communities in their efforts to build early childhood service systems that address the following five critical components:

- access to medical homes
- mental health/social-emotional development of young children
- early care and education
- parenting education
- family support.

MCHB STATE EARLY CHILDHOOD COMPREHENSIVE SYSTEMS GRANTS

Health Resources and Services Administration
Maternal and Child Health Bureau

Purpose:

To support States to plan, develop and ultimately implement collaborations and partnerships that support families and communities in their development of children that are healthy and ready to learn at school entry.

To provide opportunities for State MCH agencies to engage in Statewide, cross-agency early childhood systems development planning activities.

To sustain the work accomplished through the "Healthy Child Care America" (HCCA) State grants program by integrating the HCCA program objectives into the SECCS planning and implementation activities.

MCHB STATE EARLY CHILDHOOD COMPREHENSIVE SYSTEMS GRANTS (SECCS)

Health Resources and Services Administration
Maternal and Child Health Bureau

Characteristics of the SECCS Grants:

- Phase I: planning grant
  - $100, 000 per year
  - Funding limited to the 59 State, jurisdiction, or Territory Title V agencies
  - 48 States, Puerto Rico, Palau, District of Columbia receiving planning grants in 2003
- Phase II: 53 States/territories submitted phase II applications for SECCS grants beginning in September, 2005

3 States :	Begin planning
30 States:	Continue planning
20 States:	Begin implementation

MCHB STATE EARLY CHILDHOOD COMREHENSIVE SYSTEM GRANTS (SECCS)

Health Resources and Services Administration
Maternal and Child Health Bureau

Anticipated Outcomes: Our Vision for the Future

- Strong State MCH leadership and participation in early childhood systems development.
- Every State will have in place a statewide early childhood comprehensive systems plan and a three year systems implementation schedule.
- Strategic partnerships are created among critical State stakeholders for sustainability of their state early childhood comprehensive systems plans.

Building Early Childhood Comprehensive Systems that Spend Smarter:

Maximizing Resources to Serve Vulnerable Young Children

Presentation by Kay Johnson, Project Director
Project THRIVE at NCCP

February 1, 2006

MCHCOM.com

Web-based learning sponsored by the Maternal and Child Health Bureau, Health Resources and Services Administration, U.S. DHHS

PROJECT THRIVE
www.nccp.org

National Center for Children in Poverty (NCCP)

- Since in 1989 at the Mailman School of Public Health, Columbia University.
- One of the nation's leading university-based public policy center.
- Conducts and synthesizes research to promote the health, well-being and economic security of America's most vulnerable children and families.

PROJECT THRIVE

Linking Policies for Child Health, Early Learning, and Family Suppor

Supported through a cooperative agreement with the Maternal and Child Health Bureau, HRSA-DHHS.

Mission of Project THRIVE

www.nccp.org

Mission: To ensure that young children and their families have access to high-quality health care, child care and early learning, early intervention and parenting supports by providing policy analysis and research syntheses that can inform state efforts to strengthen and expand state early childhood comprehensive systems (ECCS).

THRIVE: Linking Policies to Improve Results

www.nccp.org

Improved Policy and Finance Context

- Better use of existing resources across programs and funding streams.
- Improved coordination of eligibility and outreach processes.
- Better mechanisms to integrate service systems.
- Cross-system approaches to serve and support families.

Improved Child / Family Services Across Systems

- Better implementation of critical components.
- More children with medical homes linked to system of care.
- Earlier identification of special needs.
- Cross-system training and professional development.
- Better family support.
- Services in settings families rely on and trust.
- More access to coordinated services for those with greater risks and needs.

Improved Outcomes

- Improved child health and development.
- Reduced family stress.
- Improved parenting.
- Improved work attendance for parents.

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What are the policies and finance strategies intended to support?

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Do we know what works?

"*The overarching question of whether we can intervene successfully in young children's lives has been answered in the affirmative and should be put to rest.*

However, interventions that work are rarely simple, inexpensive, or easy to implement."

Source: Institute of Medicine. *From Neurons to Neighborhoods: The Science of Early Childhood Development*, 2000. p.10.

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Its not one size fits all

- Early detection and prompt interventions can improve outcomes (i.e., "shift the odds") for both children living in high-risk environments and those with biologically based disabilities. (IOM)
- Interventions tailored to specific needs are more effective than services that provide generic advice and support. (IOM)
- Pediatric child development, universal preschool, and services to promote healthy mental development are complementary. All are needed.

Framework: Three Levels

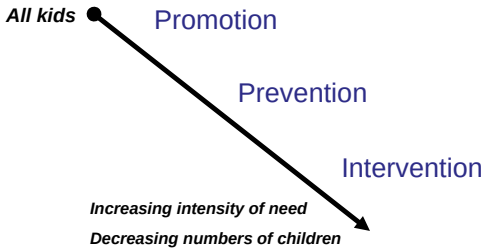
Level 1. ALL CHILDREN – to strengthen caregiver skills and relationship with child.

Level 2. AT-RISK CHILDREN – to intervene early with those having identified risks, delays, and disabilities.

Level 3. DIAGNOSED CHILDREN – to treat children diagnosed with mental/behavioral problems.

Source: *Infant Mental Health Services for Young Children and Families.* Florida State University, Center for Prevention and Early Intervention Policy. © 2000

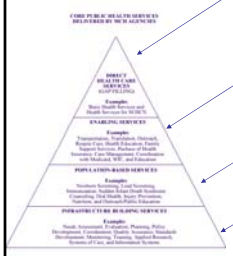
A Continuum of Services



Title V Framework

- HRSA-MCHB defines four core public health services for state Title V MCH agencies, using this pyramid as guidance.
- States can use the pyramid to design strategies for promoting early childhood development.

ECCS &Core MCH Functions



1. **Direct health care services**
   - Maternal depression screening
   - Parent-child interventions and therapies
   - Financing services for CSHCN with social-emotional needs
2. **Enabling services**
   - Home visiting
   - Case management and care coordination
   - Family support services
3. **Population-based services**
   - Public education about ECCS
   - Promoting knowledge of child development
4. **Infrastructure:**
   - Quality standards for CSHCN or EI
   - Program evaluations
   - Professional training
   - Information systems to monitor children at-risk

Spending Smarter

Using Federal Programs and Policies to Promote Healthy Social and Emotional Development Among Our Most Vulnerable Young Children

Kay Johnson and Jane Knitzer. NCCP, 2005.

Common Challenges related to Finance and Policy

- Restrictions on eligibility and benefits.
- Failure to screen for and identify risks.
- Lack of reimbursement for early intervention services without a diagnosed condition.
- Too few dollars available for services to low-income, uninsured parents.
- Too few providers.
- Gaps between health, mental health, early intervention, child care, and other systems of care.

See: Johnson and Knitzer, 2005. Johnson and Kaye, 2003; Johnson and Knitzer, 2002.

Spending Smarter Checklist

1. Convene a cross-cutting strategic planning group – including public and private sector -- to review current funding.
2. Create a cross-system agenda/plan mapping services, tracking dollars, and showing SWOT.
3. Maximize the potential of Medicaid/SCHIP health coverage for screening, diagnosis, and treatment.
4. Maximize flexibility in Title V MCH Block Grant.
5. Maximize impact of CCDF, particularly training and targeting.
6. Maximize potential of IDEA programs, especially for at-risk children.
7. Use CAPTA rules to leverage change for children affected by abuse, neglect, or domestic violence.
8. Maximize impact of TANF, foster care, and other programs serving the most vulnerable families.

Moving Ahead in Finance and Policy to Support Comprehensive Early Childhood Systems

Giving kids a leg up

Five Core Components of ECCS

Title V State Early Childhood Comprehensive System Grants require that each state plan include focus on:

1. **Health coverage and medical homes**
2. **Social-emotional development**
3. **Early care and education**
4. **Parent education**
5. **Family support**

Examples from State ECCS Projects
Health Coverage and Medical Homes

- Improve Medicaid
  - Recommend age appropriate screening and diagnostic tools in EPSDT.
  - Use appropriate diagnostic codes
  - Cover services delivered in a range of settings.
  - Separate development screen and diagnostic evaluation.
  - Payment for parent-child (family) therapy.
- Develop common screening protocol across payers
- Pay for medical home care coordination

Examples from State ECCS Projects:
Social-Emotional Development

- Promote collaboration across child protection, Part C, health, and mental health systems.
- Training clinicians and ECE professionals
- Assure components of EPSDT & Part C screening
- Develop from CAPTA a systematic approach for referral and assessment of young children who experience abuse or neglect and/or witness domestic violence.

Examples from State ECCS Projects:
Early care and education

- Focus on child care quality
  - TANF and CCDF dollars
  - Quality rating systems
  - Professional training
- Support health and mental health child care consultation
- Build on Head Start strategies
  - Better use of health and mental health consultants.
  - Enhance and better use the skills of parent-involvement coordinators, parent educators.

Examples from State ECCS Projects: Parent education and family support

- Create web-based information systems and telephone “warm” lines for parents
- Offer family development training and credentialing
- Fund a family-driven, family support alliance
- Focus family resource centers on early childhood developmental needs
- Systematically offer home visiting, particularly for higher risk families

Early Childhood Comprehensive Systems that Spend Smarter: Maximizing Resources to Serve Vulnerable Young Children

Kay Johnson and Jane Knitzer.
Project THRIVE Issue Brief #1. NCCP, 2006.

Opportunities to Act through ECCS

(1 of 3)

- **Environmental Scans and Critical Analyses of Existing Programs and Resources**
  1. Include finance scan, budget analysis, and fiscal mapping in the ECCS planning process.
  2. Use the ECCS planning process to create a statewide definition of factors that place young children at high risk for social, emotional, and behavioral delays and conditions.

Opportunities to Act through ECCS

(2 of 3)

- **State-level, multi-agency partnerships, including resources and commitments to advance and sustain them**
  3. Support priority financing strategies with interagency plans and written agreements.
  4. Use opportunities created when Congress makes changes in federal programs.

Opportunities to Act through ECCS

(3 of 3)

- **Concrete methods to align funding streams, program resources, and policies to support system development and effective integration**
  - Use the more flexible block grant or smaller federal grant programs to build cross-system linkages and fill gaps.
  - Clarify eligibility and payment mechanisms among Medicaid, IDEA, child welfare, mental health, etc.
  - Adopt mechanisms that encourage providers to do developmental screening with age-appropriate tools and follow-up referrals and treatment.

Together we can build coordinated systems of care to help our youngest children be ready to THRIVE.

PROJECT THRIVE
www.nccp.org

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Websites of Interest

- Commonwealth Fund -- www.cmwf.org
- Georgetown University Center for Child and Human Development www.gucchd.org
- National Academy for State Health Policy -- www.nashp.org
- National Center for Children in Poverty -- www.nccp.org
- State Early Childhood Policy Technical Assistance Network -- www.finebynine.org
- School Readiness Indicators Initiative -- www.gettingready.org
- UCLA Center for Healthier Children, Families, and Communities -- http://www.healthychild.ucla.edu/

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www.nccp.org

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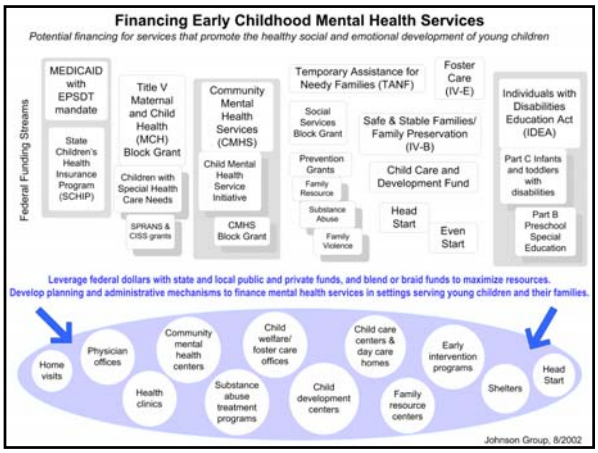
- Markus A, Rosenbaum S, Stewart A, and Cox M. *How Medical Claims Simplification can Impede Delivery of Child Development Services*. New York: Commonwealth Fund. 2005.
- Perkins, J. & Olson, K. (1999). *Medicaid Early and Periodic Screening, Diagnosis and Treatment as a Source of Funding Early Developmental Services*. National Health Law Program.
- VanLandeghem K, Curtis D, and Abrams M. (2002). *Reasons and Strategies for Strengthening Childhood Development Services in the Healthcare System*. Portland, ME: National Academy for State Health Policy.



Financing Strategies for ECCS: Using an Early Childhood Budget

Geoffrey Nagle, PhD
Louisiana ECCS State Coordinator
Tulane University Infant Institute
February 1, 2006

What is a budget?

A document with a bunch of numbers and dollar figures.

What is a budget, really?

- Yes, it is a document with a bunch of numbers and dollar figures.
- More importantly, it is the most significant POLICY DOCUMENT used in government planning.

Basic Premises

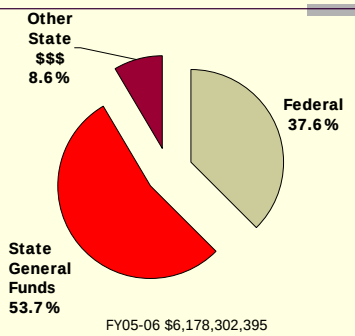
- ECCS initiatives must achieve a deep understanding of the budget in order to influence the policy decisions that impact young children ages 0-5.

Basic Premises

- ECCS initiatives must achieve a deep understanding of the budget in order to influence the policy decisions that impact young children ages 0-5.
- A cross-system plan without a cross-system budget is difficult to implement.

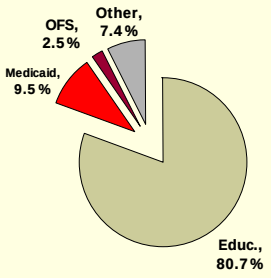
Beginning to Understand the Budget

Source of Funds: Expenditures for children's services in Louisiana



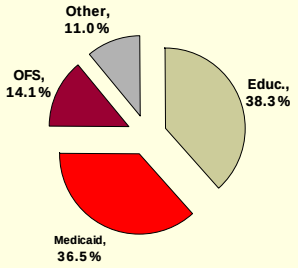
FY05-06 $6,178,302,395

How are state funds used?



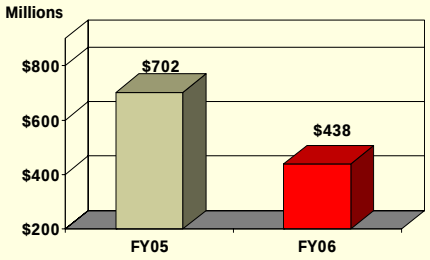
FY05-06 $3,319,631,965

How are federal funds used?

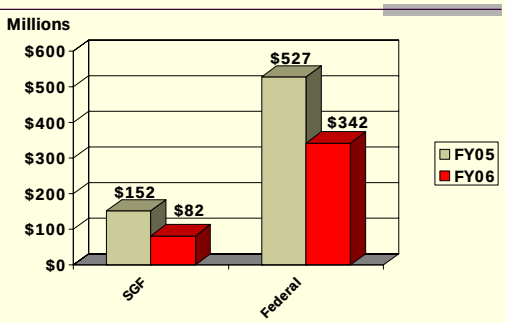


FY05-06 $2,326,056,308

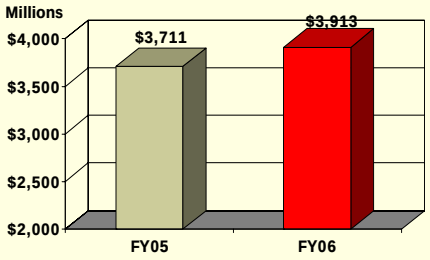
Department of Social Services



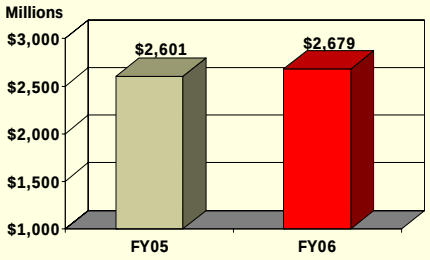
Department of Social Services



Department of Education

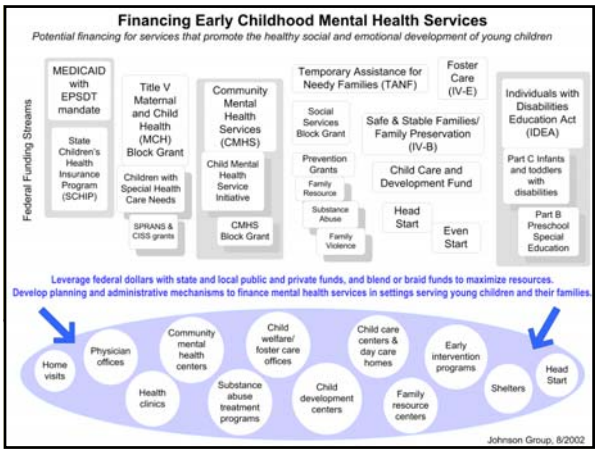


Department of Education – State General Fund



Primary Funding Goals

- Coordinate funding for all components of the early childhood system.
- Foster flexibility in use of federal and state funding to address the needs of children birth through five.



Primary Funding Goals

- Coordinate funding for all components of the early childhood system.
- Foster flexibility in use of federal and state funding to address the needs of children birth through five.
  - Create an Early Childhood budget

Traditional Children's Budget

DHH – Office of Public Health	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds

Traditional Children's Budget

DHH – Office of Public Health	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds
Nurse Home Visiting (NFP)	$0	$1,998,800	$0	$0	$1,361,200
Part C	$6,423,296	$15,190,617	$0	$0	$6,935,492
Immunization	$3,131,608	$450,000	$1,858,392	$0	$3,100,000

Major Federal Funding Sources that Support Early Childhood

Early Care and Education		
Funding Source	Type	Department

Major Federal Funding Sources that Support Early Childhood

Early Care and Education (Partial List)		
Funding Source	Type	Department
Child Care and Development Fund		
TANF		
Title I		
Even Start		

Major Federal Funding Sources that Support Early Childhood

Early Care and Education (Partial List)		
Funding Source	Type	Department
Child Care and Development Fund	Formula/Block Grant	
TANF	Formula/Block Grant	
Title I	Formula/Block Grant	
Even Start	Discretionary/ Project Grant	

Major Federal Funding Sources that Support Early Childhood

Early Care and Education (Partial List)		
Funding Source	Type	Department
Child Care and Development Fund	Formula/Block Grant	DSS
TANF	Formula/Block Grant	DSS
Title I	Formula/Block Grant	DOE
Even Start	Discretionary/ Project Grant	DOE

Major Federal Funding Sources that Support Early Childhood

Mental Health/Social Emotional Development (Partial List)		
Funding Source	Type	Department
Community Mental Health Services Block Grant	Discretionary/ Project Grant	DHH
MCH Block Grant (Title V)	Formula/Block Grant	DHH
Title IV-E (Training)	Entitlement Program	DSS
Social Services Block Grant (Title XX)	Formula/Block Grant	DSS

Major Federal Funding Sources that Support Early Childhood

Family Support/Parenting Education (Partial List)		
Funding Source	Type	Department
Even Start Family Literacy (Title I, Part B)	Discretionary/ Project Grants	DOE
MCH Block Grant (Title V)	Formula/Block Grant	DHH
Head Start/Early Head Start	Discretionary/ Project Grants	Direct federal to local
Title IV-E (Adoption Assistance)	Entitlement Program	DSS

Major Federal Funding Sources that Support Early Childhood

Access to Medical Homes (Partial List)		
Funding Source	Type	Department
CHIP (Title XXI)	Formula/Block Grant	DHH
MCH Block Grant (Title V)	Formula/Block Grant	DHH
Child Support Enforcement	Entitlement Program	DSS
Medicaid (Title XIX)	Entitlement Program	DHH

New Early Childhood Budget

Early Care and Education	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds

New Early Childhood Budget

Early Care and Education	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds
Pre-K program					
Subsidy Program					
Quality Initiatives					
Foster Care Program					

New Early Childhood Budget

Early Care and Education	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds
Pre-K program	$35,000,000				$17,000,000
Subsidy Program	$5,000,000				$70,000,000
Quality Initiatives	$200,000				$800,000
Foster Care Program	$500,000				$1,500,000

New Early Childhood Budget

Early Care and Education – Child Care	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds

New Early Childhood Budget

Early Care and Education – Child Care	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds
Subsidy Program					
Quality Initiatives					
Head Start/ State Collaboration					
Foster Care Program					

New Early Childhood Budget

Early Care and Education – Pre-K	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds

New Early Childhood Budget

Early Care and Education – Pre-K	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds
Public Pre-K					
Private Pre-K					

New Early Childhood Budget

Mental Health – Social/Emotional Development	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds
Early Childhood Supports and Services					
NFP – Mental Health Component					
MH Consultation to Child Care					
Foster Care Program					

New Early Childhood Budget

Mental Health – Social/Emotional Development	State General Fund	Inter-agency Transfers	Self-Generated Revenue	Statutory Dedications	Federal Funds
Early Childhood Supports and Services	$750,000	$2,500,000			$2,000,000
NFP – Mental Health Component	$200,000				$400,000
MH Consultation to Child Care	$25,000				$70,000
Foster Care Program	$150,000				$450,000

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