

ECLIA AREA BOARD STRATEGIC PLAN

BASIC INFORMATION:

Overview of CGHW Area:

2019 Area Priorities the area Board has set:

- *Empower parents through parent support and education programs.*
- *Improve the quality of child care and preschool for all families with young children.*
- *Enrich the network of community resources to promote a healthy start for all children.*

2019 Area Board Indicators:

The following indicators have been identified by the CGHW Board and have been updated during 2015. The following priorities are supported by the CGHW Board:

- *Childhood Immunizations*
- *Child Preventative Dental Services*
- *Child Abuse 0-5*
- *Childhood Obesity*
- *Quality Child Care/Preschool*

ECLIA board, in cooperation with community partners, other agencies, programs, or services, use the plan to move the local early care, health and education system forward

The board is dedicated to creating a fair and equal process to get yearly applications from programs that are interested in affecting the area priorities/indicators in our community. The applications determine if programs can connect to the indicators that the board has determined through community input and community assessment. The board promotes collaboration with local community schools, health systems and childcare systems to ensure that no duplication is created.

Public can access the plan

The plan can be publicly accessed by the board's website at www.nichildrensalliance.com, or any requests from the public can be obtained from the office.

Vision

"Working together so every child is happy, healthy, and ready to learn."

Mission

Building strategies to improve the lives of young children and their families through collaboration, coordination, and planning in Cerro Gordo, Hancock, and Worth Counties.

Describe the process the ECLIA board used to develop the vision

The board gathers together yearly to review mission, vision and to create a strategic plan for the area. The board created a matrix of what the priorities of the area board and state was with early childhood issues. The

board created a statement that should be long lasting with the priority of the board in the future and present. Board continues to revisit annually to ensure the relevance to current board activity.

ECIA BOARD DESIRED RESULTS/ PRIORITIES:

<p><i>Empower parents through parent support and education programs.</i></p>	<p><i>The board determined that this it is very important to focus on parent education and support due to the area indicators and that this method would be the most effective. An overwhelming response from previous assessments are that parent support and education is very important and not easily accessed in the local area.</i></p> <p><u>Current Strategies:</u></p> <ul style="list-style-type: none"> • Increase coordination among child and family services. • Provide information to parents. • Increase awareness of family support programs. • Maintain quality through the Iowa Family Support Credential or National Accreditation process. • Promote access to family support programs.
<p><i>Improve the quality of child care and preschool for all families with young children.</i></p>	<p><i>The board did not change this statement. The board wants to continue to educate providers and families the importance of quality child care and quality preschool. A lack of knowledge and understanding of quality has and will continue to create a challenge for this priority.</i></p> <p><u>Current Strategies:</u></p> <ul style="list-style-type: none"> • Provide preschool tuition scholarships for families in need. • Enforce standards set for quality preschool programs for the tuition program. • Promote the statewide voluntary preschool program. • Address barriers to transportation for preschool aged children. • Assist early care environments in meeting standards through support and education. • Support high quality professional development services and opportunities for early care and education programs. • Support incentives for quality improvement efforts for early learning environment
<p><i>Enrich the network of community resources to promote a healthy start for all children.</i></p>	<p><i>The board decided to keep this priority the same. The reviewed needs assessments resulted in that more resources and education needs to be provided in order to create a more healthy community to promote the wellbeing of young children in the community.</i></p> <p><u>Current Strategies:</u></p> <ul style="list-style-type: none"> • Support programs that provide awareness regarding health awareness and action in the areas of need. • Increase understanding of what children need for healthy living.

FUNDING PLAN:

The Area Board is committed to moving the early care health and education system forward. During the next several years the Board will:

- Review current programming/services on a regular basis
- Review quarterly reports and continue quarterly on-site visits
- Continue to review the process to award funding
- Continue to communicate to the community, providers, and policy makers about gaps and needs
- Continue to enhance Board policies and procedures

Process of Awarding Funds

Currently the board holds a request for proposals every year based on the indicators in the community plan. The process is started in February with a time line and a formal procedure to ensure fairness in a competitive process for the funds to make the greatest impact on the funds.

How the board connects the identified priorities to their funding decisions

All Existing Programs that apply for funds must fill in a table provided in the application that states past program performance achievement. They need to report previous year outcomes for program and state if the program is on track to meet outcomes. If not, why not? and if on track, why have they been successful. They need to report # to serve according to the previous year application, and then report # served as of April 1, of that year, and finally number anticipated to be served by June 30, of that year. The application also requires that a program write a narrative briefly list how that program will directly affect the baseline data for the priority(s) indicator. The board uses this information to ensure that any program accepted will follow the community plan, and if a program is not performing to the community plan, then the board will have reasoning to why not to continue funding for that program.

The board has been a strong leader in early childhood funds for the past 20 years. They continue to support established quality programs in the area. However, the board has identified that the RFP process needs to be updated and modified in the future to better establish stronger programs that can find other ways to financially expand and support their programing outside of ECI.

Currently CCR&R are working with area chambers of commerce to establish a stronger business partnership to establish a stronger employer/employee partnership to expand quality care for their children. Mercy Medical Center continues to expand the Family Connections program for the past few years. They have expanded the program beyond just ECI funding, and are finding benefits of the program for their birth center.

COMMUNITY COLLABORATION:

Early Care Environments Collaboration

The Quality Improvement, Child Care Nurse Consultants, and Child Care Resource and Referral meet on a regular basis to coordinate services, assure that there is no duplication of services, and collaborate for service delivery. Through this collaboration early care environments are supported so that the spread of infectious disease, childhood injuries are prevented, emergency protocols are developed, and help with medication and the care for children with special health needs are being provided

Preschool Collaboration

The Area board surveys each preschool every spring for numbers of students served in the three counties so the board can determine the number of children served by a preschool in any given year. During this survey information is gathered for the following year's scholarship program (tuition, program, quality). Each child that is served by the scholarship program has a survey sent to the preschool about screening, attendance and educational quality given to that child. The Area Board also serves as a location parents can contact about the available preschool programs in the area with the tuition costs at hand to direct them to what fits their needs. The board has a strong belief that a preschool should be a parent's choice and it is the board's goal to make them quality programing through collaboration.

Family Support Collaborative

A family support collaborative is comprised of home visitation and parent education programs that provide services to children and families ages 0-5. Family Connections and Parent Education Program, Head Start, and Early Access have been identified in which to collaboration needs to address duplication, quality. Coordinated intake has been established with collaboration between Family Connections and Lutheran Services of Iowa.

Early Childhood Committees

The Area Board has tried to be a part of the early childhood committees that have been developed in the past, but have always disbanded after time due to lack of interest. The board continues to meet with CCR&R, Nurse Consultant to create some connection to the early childhood community to ensure quality programing. The board utilizes their expertise during decision making when related to Early Childhood issues in the three county area.

Coordination of Services

Below is a list of agencies/organizations that may be involved with one or more collaborative meetings mentioned and/or receive information in the form of an email distribution list.

- County Public Health Services

- County Board of Supervisors
- Area Education Agencies
- Child Care Resource & Referral
- Department of Human Services
- Preschools
- Central Point of Contact for Mental Health
- Community Action Agency
- Iowa State Extension
- United Way North Central Iowa
- Child Abuse Prevention Councils
- Private and Public Schools
- Multiple Human Service Agencies

Communication

The Board has developed communication and marketing strategies. A website has been used for the last 13 years to provide up to date communication regarding board meeting dates, community meeting notices, minutes, agendas, and a plethora of information for the community.

Collaborative Funding

Preschool Programming - The board has had a long-standing effort in the local communities to utilize the voluntary preschool programs, Head Start and private preschools to work together to ensure every child that is in need of preschool can be served. Due to these efforts Mason City Schools have partnered with several private preschools to provide voluntary preschool program outside of the district buildings and now are serving more children in the voluntary programing. It is thought that about 90-95% of all 4-year olds are served in a preschool and have a quality experience in the three-county area.

Early Care Environments - United Way of North Iowa and the Kohl’s charity both have created a long-standing funding initiative in the three county area to provide better quality to early care environments. In the past years other grants and corporations have funded various project in the three counties. (Aliant Energy, Mason City Clinics, and Muse Norris).

Adopted Indicators

Complete the following matrix for the indicators adopted by the ECIA Board, and link each indicator to the state result areas.

For column 2 of the matrix, use the following key:

- A – Children Ready to Succeed in School*
- B – Healthy Children*
- C – Secure and Nurturing Families*
- D – Safe and Supportive Communities*
- E – Secure and Nurturing Child Care Environments*

Illustrate how the identified priorities link with State results area, corresponding goals, indicators, and strategies:

Community Empowerment Area Indicators	Identify the State Results Linked to the Indicator by A, B, C, D, E	Identify Source of data for each Indicator	Baseline Data (date & numerical value)	Subsequent Year's Data (Trend Line) Identify Year					Goal (numerical value & projected timeline)	Progress Update (Brief Analysis of data)
				2014	2015	2016	2017	2018		
Childhood Immunization	B	Iowa Department of Public Health-% Fully Immunized by 24 months	2009 CG-89% H-60% W-100%	2014 CG-77% H-74% W-70%	2015 CG-86% H-72% W-65%	2016 CG-87% H-84% W-70%	2017 CG-86% H-77% W-69%	Goal By 2022 95% Immunized by 24 Months	In the three county area the number of immunizations have increased in past years. Current programs, have seen an increase in clinics auditing patients and doing more follow up immunizations. The area continues to see a rise in immunizations in the 3 counties. <u>2-4 Years Strategies:</u> -Continue to promote programing that helps identify immunization needs, and connects with parents to get immunizations updated and completed.	
0-5 WIC Children Defined Overweight	B	IDPH Pediatric Nutrition Surveillance %%≥95 th At risk Overweight children in the WIC Program.	2017 CG-911 H-119 W-33 New Baseline Data due to changed					Goal By 2022 8% or less to be above the 95% percentile by the age of 5.	In past data with WIC, the trend shoed some decrease in the three county area. However data is no longer provided. The area partnered with CGDPH, and Mercy to get numbers that are reported obese under the age of 5. The new data is hopefully will be more accurate due to a larger portion of the area reported. <u>2-4 Years Strategies:</u>	

			<i>data source.*</i>						<p>-Continue to promote programing that targets healthy eating, exercise and increased nutrition.</p> <p>-Promote expansion of data gathering to gain true numbers of the 3 county area.</p>
0-5 Children Receiving Preventative Dental Services	B	IDPH-EPSTD Dental Services Reports. Percent Receiving any Dental Services	<p>2010</p> <p>CG-46.81%</p> <p>H-50.47%</p> <p>W-42.35%</p>	<p>2014</p> <p>CG-44.47%</p> <p>H-51.42%</p> <p>W-39.17%</p>	<p>2015</p> <p>CG-45.39%</p> <p>H-48.89%</p> <p>W-46.12%</p>	<p>2016</p> <p>CG-51.4%</p> <p>H-49.82%</p> <p>W-39.35%</p>	<p>2017</p> <p>CG-48.11%</p> <p>W-49.26%</p> <p>W-47.49%</p>	<p>Goal By 2022</p> <p>90% of children by age 5 Receiving Preventative Dental Services</p>	<p>The number of those children 0-5 receiving preventative dental care has increased on average. More services are available due to state and local grants for Dental screenings in school environment. More children's dental centers have opened in the past few years within the area. A new community Health Clinic has opened providing Medicaid Dental services.</p> <p><u>2-4 Years Strategies:</u></p> <p>-Continue to promote programing that opens opportunities to dental care.</p>
Child Abuse	C, D	IDHS Age range of child victims of confirmed or founded child abuse	<p>2008</p> <p>CG-67.3%</p> <p>H-54.1%</p> <p>W-51.7%</p>	<p>2014</p> <p>CG-50.0%</p> <p>H-45.5%</p> <p>W-66.7%</p>	<p>2015</p> <p>CG-46.8%</p> <p>H-42.3%</p> <p>W-80.0%</p>	<p>2016</p> <p>CG-52.1%</p> <p>H-76.9%</p> <p>W-60.0%</p>	<p>2017</p> <p>CG-57.9%</p> <p>H-48.1%</p> <p>W-52.28</p>	<p>Goal By 2022</p> <p>5% decrease in the three county area.</p>	<p>In 2008 data was the highest year in the three county for child abuse with 57.7% average. Overall the area as a whole is higher than the state abuse rate. Current trends show a decrease in child abuse rates in the three counties 2008 to 2015. However rates are starting to rise as of 2016, and continued in 2017.</p> <p><u>2-4 Years Strategies:</u></p> <p>-Continue to support programing to reduce child abuse by increased parent support.</p>

Quality Childcare/Preschool	E, A	CCR&R QRS Numbers Home & Centers, Level 1-5	2009 CG-20 H-3 W-2	2014 CG-23 H-6 W-4	2015 CG-19 H-3 W-4	2016 CG-19 H-3 W-3	2017 CG-21 H-4 W-3	Goal by 2022 is to maintain 28 participants with the new QRS system.	<p>In 2010 the area had a large increase of participation. During that period a lot of financial incentives caused providers to sign up for QRS. Since that time those incentives have decreased and so have the numbers of participation. In 2017 there was an increase in the number of participants in Cerro Gordo and Hancock Counties.</p> <p><u>2-4 Years Strategies:</u></p> <p>-Continue to promote quality child care and Preschool through supporting programs that promote quality.</p>
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