

Kansas Early Childhood Comprehensive Systems Plan

INPUTS

Guiding Frameworks

KECCS Grant
School Readiness Framework
Governor's Priorities

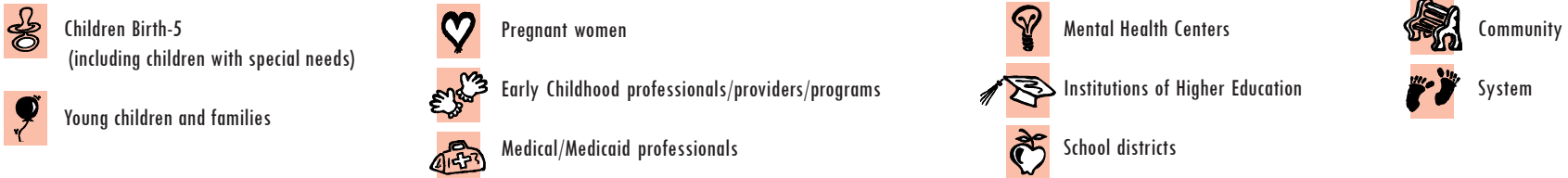
Plan Partners

Early Learning Coordinating Council (ELCC)
Governor Sebelius
KECCS Stakeholders
Foundations
Institutions of Higher Education
Business Consortium

Communication Mechanisms

Website
Implementation Tracking Tool
Monthly ELCC meetings
Semi-annual KECCS meetings

TARGET POPULATIONS



GOALS

Health Insurance and Medical Homes

- Increase the percent of births to women having received adequate prenatal care.
- Increase the number of children in Kansas who have medical insurance a medical home.

Mental Health and Social-Emotional Development

- Increase the ability of providers to identify, address, and prevent social-emotional problems in early childhood.
- Increase the early identification of children who need mental health services.
- Develop a system to provide mental health services so that young at-risk children and families receive needed services.
- Increase the State's ability to assess social-emotional readiness outcomes.

Early Care and Education Services

- Increase the number of children receiving high quality early childhood education.
- Increase the number of early childhood programs that are available.
- Increase the number of schools that provide high quality learning environments.
- Increase the quality of classroom learning environments.
- Strengthen relationships schools have with families and communities.

Parent Education

- Increase the number of programs that promote parent education on the school readiness developmental domains: physical health, social-emotional development, communication and literacy, mathematical knowledge, and symbolic development.
- Increase the quality of parent education programs.

Family Supports

- Increase the numbers of mothers who are high school graduates.
- Increase the number of children living in homes free of violence.
- Increase the number of children living in families that can afford basic necessities.
- Increase the affordability of early childhood programs.

Kansas is a ready State

with an infrastructure to support communities, families and schools.


Children are prepared to succeed in school.

Goal 1 - Health Insurance and Medical Homes

Objective 1.1

Increase the percent of births to women having received adequate prenatal care (81.1% in 2003, Vital Statistics).

Strategies

-  Assure outreach, education and ongoing support for pregnant women in underserved populations through collaboration with community providers.
-  Ensure that all women receive early and comprehensive health care before, during and after pregnancy through public awareness.
-  Expand State-funded insurance to provide coverage to all uninsured pregnant women.






Outcomes

- All 2,000 home visitors in Kansas have access to home visitation training.
- Improved birth outcomes for mother and baby.
- Increase in prenatal care.
- Plan for universal prenatal screening for all pregnant women.
- Increase in the number of children with health insurance.
- Increase in the number of Medicaid providers.

Objective 1.2

Increase the number of children in Kansas who have medical insurance and a medical home.

Strategies

-  Assure outreach and enrollment of all children eligible for HealthWave (Medicaid/SCHIP program).
-  Assure that all children, including children with special needs, have care and have a regular source of care (medical home).
-  Strengthen health programs to expand access to services (i.e. oral and mental health.)
-  Develop a health consultation model in Kansas.
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Outcomes

- Increase in the number of children with health insurance.
- Increase in the number of CSHCN care within a medical home.
- Increase in the number of child care providers trained to provide care to CSHCN.
- Increase in child care slots for children with special needs.
- Increase in physician knowledge about early intervention services and increase in referrals.
- Increase in number of families reporting medical homes.
- Improve % of children 0-3 leaving EHS cavity free.
- Increase % of children/families receiving oral health education.
- Increase in health literacy knowledge of parents.
- Decrease in number of unnecessary ER visits.
- Increase in use of telemedicine to facilitate high quality care.
- Increase in oral health and mental activities across the State.
- Availability of pharmacy program.

Goal 2 - Mental Health and Social-Emotional Development

Objective 2.1

Increase the ability of providers to identify, address, and prevent social-emotional programs in early childhood.

Strategies



Integrate mental health into professional development activities for providers.

Outcomes

- Best practices in infant-toddler mental health identified.
- Modules developed.
- Increase in referrals.
- Increase in provider awareness of social-emotional development.

Objective 2.2

Increase the early identification of children who need mental health services.

Strategies



Provide assessment training for early childhood professionals to increase early identification.

Outcomes

- Early childhood professionals trained in infant toddler mental health issues.
- Increase in number of screenings and referrals for evaluation.
- Increase in number of children qualifying for and receiving services.

Objective 2.3

Develop a system to provide mental health services so that young at-risk children and families receive needed services.

Strategies



Partner with institutions of higher education to develop courses focusing on early childhood mental health.



Partner with mental health centers to develop a Mental Health Consultation Model.

Outcomes

- A Mental Health Consultation Model developed.
- Increase in participation of mental health providers in KECCS.
- Professional development for mental health providers on infant-toddler mental health.

Objective 2.4

Increase the State's ability to assess social-emotional readiness outcomes.

Strategies



Develop additional items on School Readiness Assessment to measure social-emotional readiness.



Outcomes

- Additional items developed for School Readiness Assessment.

Goal 3 - Early Care and Education Services

Objective 3.1

Increase the number of children receiving high quality early childhood education.

Strategies

-  Implement Kansas Quality Rating System statewide.
-  Maintain, and where possible, expand the current *Professional Development Initiative*.
-  Strengthen community collaboration to promote and ensure high quality childcare.
-  Coordinate public awareness campaigns and messages to increase public and political investment in early childhood development.
-  Support the needs of providers who serve children with special needs to identify and increase quality services.
-  Support community economic development.

Outcomes

- A quality rating system is developed.
- Increase in quality of child care.
- Increase in parental access to information about quality child care.
- Increase the number of Smart Start grantees and collaborators.
- A coordinated public awareness message and campaign developed.
- Articulation agreements developed between community colleges and four-year institutions.

Objective 3.2

Increase the number of early childhood programs that are available.

Strategies

-  Promote universal all-day, every day, voluntary kindergarten.
-  Promote universal community-based, school-based, and faith-based preschool programs.
-  Promote early intervention for children with special needs.
-  Promote early intervention for children at-risk.
-  Provide adequate funding for core childcare services of quality early child care, health care, developmental intervention, and education.

Outcomes

- Increase in the number of press releases, web links, and other public awareness strategies.
- All day voluntary kindergarten is funded.
- A tiered system of SRS childcare subsidies is linked to KQRS ratings.
- A workforce strategy is developed.
- Increase in enrollment of PreK students 100% of facilities that partner with universal PreK meet 3 stars on the KQRS rating scale.
- Increase in funding for four year old programs.
- Increase in Part B and Part C referrals.
- Increase in community-based services, appropriate and timely services, and enhancement of child's potential.
- Increase in family awareness of resources available for at-risk children.
- Increase in referrals for at-risk children and children with special needs due to increased cross-discipline collaboration.
- Increase in physician awareness of intervention services.
- Increase in the number of children served by Early Head Start.
- Child welfare and foster care professionals become involved in the KECCS.
- Infants and toddlers receive high quality childcare.

Objective 3.3

Increase the number of schools that provide high quality learning environments.

Strategies

-  Provide developmentally appropriate, inclusive and culturally sensitive training for teachers.
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Objective 3.4

Increase the quality of classroom learning environments.

Strategies

-  Utilize Early Learning Guidelines to align curriculum and standards between community and early childhood programs and public education to cover developmental domains.
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-  Utilize Kansas Quality Standards and Core Competencies for early childhood programs to promote high quality, developmentally appropriate learning environments.
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Outcomes

- Increase in the number of teachers trained in school readiness domains.
- Early Learning Guidelines completed and distributed.
- Increase in the number of providers trained on the Early Learning Guidelines.
- Increase in the number of high quality care as determined by the KQRS.
- Professional developmental modules developed based on Kansas Quality Standards, Core Competencies, and Early Learning Guidelines.

Objective 3.5

Strengthen relationships schools have with families and communities.

Strategies

-  Develop local and regional range of options for promoting and providing high quality learning environments through collaborations with local school districts.
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-  Target hard-to-reach parents and engage them in the education of their children.
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Outcomes

- Technical assistance needs of communities are identified.
- Communication strategy to engage hard-to-reach parents is developed.
- Increase in family involvement with schools.

Goal 4 - Parent Education

Objective 4.1

Increase the number of programs that promote parent education on the school readiness developmental domains: physical health, social-emotional development, communication and literacy, mathematical knowledge, and symbolic development.

Strategies



Promote school readiness on the developmental domains.

Outcomes

- Increase in public awareness of school readiness domains.
- Increase in parental awareness of school readiness domains.
- Increase in number of parent education programs.

Objective 4.2

Increase the quality of parent education programs.

Strategies



Promote, evaluate, and enhance Parents as Teachers and Early Head Start programs.



Implement evidence-based practices that increase parental involvement.

Outcomes

- Best practices to increase parent involvement identified and distributed.
- Increase in parental and family literacy.
- Increase in access to earned income tax credits for low income parents.
- Increase in parental involvement.
- Significant decrease in unnecessary use of hospital ER and clinic visits.
- Increase in parental knowledge of child development, parenting skills, and confidence in advocacy.





Goal 5 - Family Supports

Objective 5.1

Increase the number of mothers who are high school graduates.

Strategies

-  Provide comprehensive services to pregnant and parenting youth to help them complete their high school education.
-  Provide funding for child care for all youth with children to complete their high school education.

Outcomes

- Increase in graduation rates.

Objective 5.2

Increase the number of children living in homes free of violence.

Strategies

-  Develop a State comprehensive Child Abuse Neglect and Prevention plan.



Outcomes

- A Strengthening Families Plan is developed.

Objective 5.3

Increase the number of children living in families that can afford basic necessities.

Strategies

-  Partner with Kansas Department of Social and Rehabilitation Services (SRS) to ensure that eligible families are receiving services.
-  Improve efficiencies in referrals to food assistance programs.

Outcomes

- Increase in the number of eligible families receiving services.
- Increase in the number of children enrolled in Head Start, including foster children.
- Increase accessed to child care for low income children.
- Increase in coordination of services between SRS and State agencies.
- Inventory of food assistance programs completed and brochures disseminated.
- Food assistance website created.
- A plan for universal newborn screening developed.

Objective 5.4

Increase the affordability of early childhood programs.

Strategies

-  Define financing structures for early childhood services including both public and private financing.
-  Remove policy barriers to funding at the State and federal levels.

Outcomes

- Financing structures for early childhood services developed.
- Early childhood policies supported and barriers removed.