STRATEGIC PLAN EVALUATION



JULY, 2020

EXECUTIVE SUMMARY: ECHO and Family Center Strategic Plan Evaluation 2020

The ECHO and Family Center Early Childhood Council is a 32-member organization dedicated to the needs of approximately 2,013 children and their families in Fremont County. Membership represents licensed childcare sites and homes, human services agencies, school districts, medical and mental health providers, direct service providers, parents, business and community volunteers. The Council has long been respected as the repository of all things "early childhood" in the county. Their 44 year history of strategic planning is the hallmark of successful community engagement and advocacy for early childhood. Funders have made special note of ECHO and Family Center as the "Early Childhood Mental Health Referral Hub" in the region – a system unique to all of Colorado.

Methodology "Strong systems are there for a crisis. They are even better when you have to do things differently – no need to start over." During the Covid-19 era, Council has begun to work remotely; the past history of data sharing and collaborative work has contributed to continued success within the early childhood system of supports and services. Early contact within Council entities insured the movement of supplies to centers, community supports and even directly to families. Scrutiny of the Strategic Plan will continue throughout the fall. While objectives and strategies may change, the core principles and outcomes, closely aligned with the Early Childhood Colorado Framework, remain in effect.

Description of Goals Echo and Family Center Council maintains their strong commitment to three goals. **Family Support and Education** encompasses social emotional skills building and supports for families and caregivers. Included are expectations for timelines, service coordination and leadership opportunities. **Health and Well-Being** addresses social emotional competencies, child health measures, maternal wellness and nurturing relationships. **Learning and Development** is directed to screening, identification of risk factors and interventions with children ages 0 to 6. Included are objectives aimed at quality-rated licensed childcare centers, homes and preschools. All three goals include a staff training component.

The Statement of Progress is formatted as an annual report on year three of the five-year plan. Notations on the report will indicate those objectives still gathering data.

Key Strategies For each of the three goals, a comprehensive analysis has been provided by the Statement of Progress. This section highlights those programs of note. Objectives and Indicators of concern have been noted. Insights provided by ECHO and Family Center staff will be helpful in determining the steps needed as Council enters the 2020-21 planning year. Adherence to Covid-19 regulations has wrought changes and likely will bring more as the health crisis continues to develop.

How Strategies Change/Next Steps For each of the three goals, new and changing developments are further explained. The work of Council has assimilated many of the LAUNCH Together initiatives; changes and additions to programs have been listed. The economic state of Fremont County has further deteriorated leading to additional burdens of care and concern for families and their children. Council is ever tuned to these needs. Using the Statement of Progress as a starting point, each month from August to October the Council will consider one goal at a time, prepared to revise, retain or develop new strategies to carry the work into 2021. As in each previous year, funding and grant research, staff retention and replacement for childcare centers, training, and referrals to service will continue as vital Council work.

METHODOLOGY

ECHO and Family Center Council functions as the early childhood network leader in Fremont County. The Council Strategic Plan is closely aligned with the Fundamentals, Strategies and Outcomes of the Early Colorado Childhood Framework.

Until the March Covid-19 shut down, Council had maintained their monthly meeting schedule. Attendance was steady and participatory. The programs affiliated with and supported by the ECHO and Family Center Council include: ECHO Screening and Access Program; PIECES linking children in Child

Welfare with early childhood programs; IDEA, Part C; Preschool Special Education; IDEA, Part B; Children First Resource and Referral; Crib to Kindergarten Early Childhood Mental Health; First Steps Early Head Start; First Steps Parents as Teachers; Fremont County Head Start; Colorado Preschool Program; Colorado Shines; LAUNCH Together Grant and Results Matter Child Outcome Project. As per Covid-19 regulations in March, Council began meeting using the Zoom platform. Council members are signing in and continue to give updates on their programs and services. The goal is to maintain vital services for children and their families in a



coordinated, effective and adaptive system of supports. During this time Council and member agencies facilitated the distribution of needed materials and supplies to childcare centers, local food banks and to families themselves. Allowances and adjustments to services continue to be necessary to meet regulations and cope with developments as they occur.

Council continues to adhere to these Guiding Principles:

- Memorandums of agreement and contracts with participating agencies
- Data-sharing agreements
- Adoption of research-based programs
- Maintenance of agency representation as personnel changes
- Providing high quality professional development
- Providing some level of service to all children and specialized service to those in need
- Single point of access to the early childhood system of supports and services
- Collaboration to create easy access to Early Childhood Mental Health services

These principles have served to build confidence, commitment and longevity to the work of the Council over the past 44 years.

The **Logic Model** was designed to provide a concise look at the totality of services and programs. It continues to be useful as an introductory tool with funders. Currently all portions of the model remain viable with exceptional attention to the section entitled "External Factors." The Covid-19 crisis and the subsequent economic downturn have deepened all the risk factors for families, children and early childhood programs. The Statement of Progress will more completely describe both the impacts and the system responses.

The current Strategic Plan was developed in 2017; yearly internal evaluations have been done. The planned revisions in 2020 will focus on many of the initiatives begun with LAUNCH Together; most of those activities will now be sustained within the ECHO and Family Center Strategic Plan. From August to

November, Council will work to revise objectives and strategies for each of the three goals, taking into account the Covid-19 health crisis and its effect on children, families and programs.

DESCRIPTION OF GOALS

The ECHO and Family Center Council's 2017-2022 Strategic Plan has retained the three stated goals which are aligned with the Early Colorado Childhood Framework. Each goal is designed with objectives, outcomes, indicators and strategies.

Family Support and Education Goal states: Family knowledge and skills support children's health, development and learning. The objectives and outcomes for this goal are to build competencies and provide supports for the families, caregivers and significant adults in the lives of the children enrolled in ECHO programs. Timely and coordinated service delivery, access to knowledge, capacity building and leadership opportunities are the main components.

Health and Well Being Goal states: ECHO and Family Center Council programs and services promote early childhood health and mental health through early identification, consultation and intervention. The objectives and outcomes address nurturing relationships, social emotional competencies in all early learning environments, child health, maternal wellness and staff training. Objectives are designed utilizing well-researched assessment tools for determining social emotional skills. Emphasis is on childcare centers, homes and preschools with training and support. There is a maternal wellness component to address pregnancy related depression.

Learning and Development Goal states: Children enter kindergarten with age appropriate development and the school readiness skills they need to succeed. The objectives call for screening of all children and enrollment of those children into early childhood programs who meet the Colorado Department of Human Services at-risk criteria, including CCCAP. The Council encourages and supports participation in the Colorado Shines Quality Rating Improvement System for licensed preschools, childcare homes, and centers. This participation is specifically designated within their Contracts / MOUs with the Council. Their staff members are supported through multiple professional development opportunities. Within the goal, outcomes are concerned with ratings of enrollment sites and numbers. Training of professionals in the field adheres to Colorado Shines QRIS with a focus on social emotional competencies.

It should be noted each goal has a crossover point with all three domains of the Early Colorado Childhood Framework. Each goal, in either outcomes or objectives, addresses access, quality and/or equity. Close examination of the language of the plan will show the Council's commitment to the characteristics of the Early Childhood Colorado Framework.

STATEMENT OF PROGRESS

The following segment of the Strategic Plan Evaluation is charted to align with the numbering system of the plan itself. Data, sources, timelines and explanatory statements are listed in the second column of each entry. The alpha-numeric system allows for simplified cross-referencing.

Health and Well-Being Goal: ECHO and Family Center Council pro through early identificatior	Center Council programs and services promote early childhood health and mental health early identification, consultation and intervention.
Objective A: Increase awareness and support to p	Objective A: Increase awareness and support to promote nurturing relationships in families and caregivers
Indicator A.1.1: Parent Infant Relationship Global Assessment Scale (PIRGAS) and Parenting Interactions with Children: Checklist of Observations Linked to Outcomes (PICCOLO) scores will increase between pre and post testing in specific programs.	The Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood Manual, Version 0-3R, contained the Parent-Infant Relationship Global Assessment Scale (PIR-GAS) which was used to assess any changes in the parental relationship throughout the course of treatment. In 2016, ZERO TO THREE released a new version, DC: 0-5 Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood, which does not contain the PIR-GAS scale. We are currently training Mental Health Specialists and other identified professionals in this tool. In addition, PICCOLO scores are no longer collected.
Indicator A.1.2: Social Emotional child scores increase on Teaching Strategies GOLD Assessments .	Due to Covid-19 closures, only the Fall and Winter Checkpoints are available. Four-year-olds meeting or exceeding Widely Held Expectations (WHE) for the 2019-20 school year through February, 2020 in the Social Emotional area of development are 67.2%. This is in comparison to the Winter checkpoint for the 2018-19 school year for the spring checkpoint of 55.9%.
Objective B: Promote a positive social-emotional environment fo	Objective B: Promote a positive social-emotional environment for children in all early learning environments, childcare centers and homes
Indicator B.1.1: Initiate Kid Connects model in 2017 with one site pilot. By 2023, sites and trained staff will increase beyond 2017 levels through provisions of the LAUNCH Together grant.	The Kids Connects model was replaced by DECA/Pyramid due to the counselor that was implementing the program becoming ill and moving out of state.
Indicator B.1.2: Increase child growth in social and emotional competence by 20%, fall to spring, in early learning environments, as measured by the TS Gold Assessment.	Due to Covid-19 closures, we can only compare Fall and Winter TS Gold checkpoint information. Social/Emotional Competence increased by 44.1% from Fall to Winter during the 2019-20 school year. In comparison, growth from the Fall to Winter Checkpoints for the 2018-19 school year was 31.1%. From Fall to Winter, intermediate TS Gold assessments are at or above expectations.
Indicator B.1.3: Identify and address behavior challenges in a timely manner by writing and successfully completing formal behavior plans.	There was a significant increase in reports and support plans for challenging behavior issues. Fifteen Behavior Support Plans were written and continued throughout the school year. There is an incrased pressure on systems for Counselors (ECMH Specialists) due to levels of trauma for chldren and families. DECA data was collected from Fall to Winter only due to Covid-19. Numbers indicate that there was some increase in total protective factors and in attachment for some children, providing increased capacity for them to manage stressful circumstances at home and school. Social-emotional learning needs to continue to be a focus for teachers and students.
Objective C: Train and support social-emotional competencies	Objective C: Train and support social-emotional competencies for those individuals and providers engaged in early childhood services
Indicator C.1.1: Annual Council training records will reflect social-emotional professional development for 85% of staff for each center, serving children in CPP, Special Education and CCCAP	Required courses for directors and lead teachers in 2019-20 were: Teaching Strategies Gold, The Creative Curriculum - Teaching in the Interest Areas (2 days), and Pyramid Refresher/PTR-YC (2 days). Of required staff, 100% attended two or more trainings.

Objective D: Increase access and education to prenatal and maternal wellness ca	and maternal wellness care for women enrolled in ECHO Council and Family Center Council programs or services
Indicator D.1.1: 75% of women who have high Pregnancy Related Depression screening scores from a variety of referral sources receive services for Pregnancy Related Depression be coordinated by FCPHE and ECHO *Updated 8/18/20: Pregnancy related depression services benefit from Centura Health and of Valley Wide social worker connections; resources for aiding healthy mother-child trelationships are many and varied; referrals have increased significantly; personalized pathways to service are in place (refers to D.1.2 as well)	In partnership with the ECHO & Family Center EC Council, Fremont County Department of Public Health and Environment and the Maternal Wellness Committee, a system has been developed to address Pregnancy Related Depression & Anxiety referrals from community partners. During committee meetings, a rotational calendar is discussed and mental health providers are assigned to take referrals during the work week. A project coordinator employed by FCDPHE receives referrals from community partners (Nurse Family Partnership, DHS, and Medical Practices). Referrals are then sent out to mental health providers according to the rotational calendar. After making initial contact with the families, the mental health providers then reports the outcome back to the project coordinator. Two weeks after the date of the initial referral, the FCDPHE project coordinator reaches out to the family to ensure they have been followed up with regarding any needed services, and to see if any further referrals would benefit the family and/or if the family is interested in additional referrals being made. From July, 2019-June, 2020, 32 referrals were made.
Indicator D.1.2: All women who receive Pregnancy Related Depression services also receive support for developing secure mother/child relationships if they desire; tracked and reported by FCPHE and ECHO data base	This year we have worked to streamline the referral process to ensure that families are receiving the appropriate services that will foster a secure mother-child relationship. Mothers being referred by community partners are offered a variety of services that address the parent-child relationship. Through the Early Childhood Mental Health Hub, referrals are triaged to identify the appropriate program to meet each family's individual needs. Mothers can opt to have private therapy sessions set up with Solvista, or other agencies in the Fremont County area, as well as referrals to Starpoint's two home visitation programs, Early Head Start or Parents as Teachers. Both programs are trained in the Circle of Security curriculum, and Edinburgh Screening for Postpartum Depression and Anxiety. Additionally, Circle of Security classes for parents are offered during the year. Crib to Kindergarten Early Childhood Mental Health services to support young children's emotional health through a continuum of comprehensive individualized culturally sensitive services that focus on promotion, prevention, and intervention.
	In 2019-20, 3 practices with 7 physicians/health care providers screened development and referred. This is a significant increase in numbers of referring physicians and health care providers.
Indicator D.1.4: Fremont County enrollment in Medicaid or CHP+ will remain at or above the state level per Kids Count statistics: Baseline FY 14-15: CHP+7.4%, Statewide 6.3%; Medicaid 58.7%; Statewide 41.6% Learning and Development Goal: Children entering kindergarte	cator D.1.4: Fremont County enrollment in Medicaid or CHP+ will remain at or above the 2018-19 CHP+ enrollment - 8.6% Fremont County, 7.4% Statewide, Medicaid - 62.3% Fremont celevel per Kids Count statistics: Baseline FY 14-15: CHP+7.4%, Statewide 6.3%; Medicaid County, 42.7% Statewide. Medicaid and CHP+ enrollments exceed state averages, which is an indicator of young children in poverty. Learning and Development Goal: Children entering kindergarten with age appropriate development and the school readiness skills
they ne. Objective A: Identify children who meet the Colorado Department of Human Servic Program and enroll the	they need to succeed Objective A: Identify children who meet the Colorado Department of Human Services at-risk criteria including CCCAP eligible children through the ECHO Screening and Access Program and enroll them in early childhood services
Screened 524 unduplicated children with 23 volunteers from community agencies from 7/1/1 children served - 83; CPP/ECARE children served - 199 with 77 of those in full day Pre-K, to Welfare and CAPTA - received information on 131 children and made 202 referrals; Home N protocol compliant screening methods have prove	Screened 524 unduplicated children with 23 volunteers from community agencies from 7/1/1 to 6/30/20; Children served in Early Intervention - 134 in county - RE-1 - 93, RE-2 - 37, RE-3 - 4; SPED children served - 83; CPP/ECARE children served - 199 with 77 of those in full day Pre-K, to fill a total of 276 slots; Crib to Kindergarten served - 161 unduplicated children, discharged 16; Child Welfare and CAPTA - received information on 131 children and made 202 referrals; Home Visitation served - 149 families with 196 children; Head Start - funded for 157, served 172; Covid-19 protocol compliant screening methods have proved to ease child stress and yeield strong relational insignts

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Indicator A. I. I.: 90% of children in ECHO Council associated child care centers and preschools entering kindergarten will meet "Widely Held Expectations" for school success on the prekindergarten TS Gold	From Fall to Winter 2019-20, 89% of all 4-year-olds were meeting or above the Growth Range in TS Gold. For the same time period during 2018-19, 60% of all 4-year-olds were meeting or above the Growth Range. In the 2019-20 Winter Checkpoint, 70.25% of children met or exceeded WHE and in 2018-19, the number was 59.6%. Partial TS Gold social emotional competency data is positive.
Objective B: Maintain and strengthen Colorado Shines quality rated preschools, c childhood professionals who have ongoing edi	Objective B: Maintain and strengthen Colorado Shines quality rated preschools, childcare homes, and centers that are accredited , accept CCCAP and are staffed with early childhood professionals who have ongoing education and professional developmental opportunities
July 2019-June 2020 - ECHO sponsore	2020 - ECHO sponsored 10 trainings with a total attendance of 305.
Indicator B.1.1: 80% of directors/assistant directors and lead teachers in licensed centers and preschools hold a Colorado Early Childhood Professional Credential 2.0 +	Of the 4 sites that reported, approximately 87% of directors/assistant directors and lead teachers hold a Colorado Early Childhood Professional Credential 2.0 +.
Indicator B.1.2: 80% of lead teachers in licensed childcare centers serving ECHO and Family Center Council supported programs will develop a professional development plan in PDIS within 90 days of employment	Of the 8 centers that Canon City Schools contracts with for CPP and/or Special Education, 71% of lead teachers currently have a professional development plan in PDIS.
Indicator B.2.1: The Council will encourage and support licensed preschools, child care homes and centers to participate in the Colorado Shines Quality Rating Improvement System in order to achieve target numbers as determined by the Colorado Department of Human Services.	There are currently 10 sites rated Level 2-5 - 6 Level 2 sites, 1 Level 3 site, and 3 Level 4 sites. Two of these Level 2 sites are currently preparing for a Level 3-5 rating. This total reflects a drop of 3 sites from 2018-19 due to the drop of one site from a Level 4 alternate pathway to a Level 1, and the other two not renewing their Level 2. Colorado Shines Quality Ratings show a drop in the number of sites with 4 or higher and additional non-renewal of programs. Contracts will require a commitment to CO Shines.
Indicator B.2.2: 75% of licensed childcare centers and homes will be quality rated L2-5; Council will report by site and location	Level 4 sites - Rocky Mountain Children's Discovery Center, Fremont County Head Start, and Mountain View Core Knowledge Preschool. Level 3 site - Starpoint SPIN on the North Side, Level 2 sites - The Ark (Florence), Penrose Kits, New Child Montessori, Santilli's Childcare and Preschool, The Giving Tree, Cotopaxi Early Learning Center. This accounts for 56% of licensed childcare centers and facilities serving children 0-school age in Fremont County. This is a drop of 16% from 2018-19. Colorado Shines Quality Ratings show a drop in the number of sites with 4 or higher and additional non-renewal of programs. Contracts will require a commitment to CO Shines.
Indicator B.2.3: Annually the Council will prepare an analysis of QI strategies, number of jobs created, and barriers to QI at each participating ECE facility	Our QI strategies continue to include full implementation of The Creative Curriculum and utilization of the Pyramid Framework. The council offers professional development opportunities and coaching to help support the implementation of The Creative Curriculum, Pyramid, Gold Assessments, and Colorado Shines Ratings. Barriers reported to us are: Recruitment and retention of qualified staff, upgrading playgrounds, lack of funding, and increased expenses due to minimum wage.
Indicator B.3.1: Document improved child social-emotional scores from the 2017 baseline from a variety of valid measurement tools used by evidence-based programs, such as Parents As Teachers, Kid Connects, ECMH Specialists, CPP, Preschool Special Education, Head Start, EHS, and others	Ninety percent of children showed they were meeting or above the Growth Range for the 2019-20 school year in the Social-Emotional area. In comparison, 87% of children were at the same level for the 2018-19 school year as reported in TS Gold. Partial TS Gold social emotional competency data is positive.

Family Support and Education Goal: Family knowledge a	Family Support and Education Goal: Family knowledge and skills support children's healthy development and learning
Objective A: Enroll families in high quality early cl	Objective A: Enroll families in high quality early childhood programs to build their knowledge and capacity
Indicator A.1.1: Increase enrollment by 20% in home visitation and parent education programs from baseline 2017 of 99 families	Home Visitation programs enrollment 2019-20 - 149 families with 196 children. Parents and others are also provided with Early Learning & Development Guidelines information via approximately 45 shopping cart ads at a local grocery store, Facebook posts, newspaper ads, monthly council agendas, minutes, and promotional items.
Objective B: Provide access for parents and caregivers or important adults in childre col	Objective B: Provide access for parents and caregivers or important adults in children's lives for family engagement and leadership opportunities within programs, schools and communities
Indicator B.1.1: Expand the use of Vroom based on 2017 as initial program year	Vroom posters and learning materials are displayed at local childcare sites and businesses. Facebook posts from the ECHO & Family Center Council's Facebook page, including Vroom posts from July 1, 2019-June 30, 2020, show that 166,804 people were reached and 13,739 engaged with the posts. Home Visitors continue to provide each of their families with Vroom information and assist parents with signing up for the app if they are interested. Home visitors also use the app on their work cell phones to support each child on their caseload. Vroom is used to expand on information shared through primary curriculum to build on parent's understanding of their child's development. Vroom usage is more virtual and public sites showcase it's availability.
Indicator B.2.1: Decrease the number of founded child abuse cases with children 0 to 5, baseline 2016 from DHS children 0-5 =37, Previous year 2015 =42 children	From 1/19-12/19, there were 23 founded cases of child abuse for children birth to five. Cases of child abuse from 1/20-6/20 (6 months), the same number, 23 children, were founded cases. From 3/20-6/20, the Covid virus protocals of staying at home and social distancing tended to isolate families.
Objective C: Assure that families, including those with high	including those with high needs, experience timely and coordinated services and supports
Indicator C.1.1: 20% more parents will be in volunteer leadership roles in early childhood programs, specifically Head Start, Early Head Start, child care and preschools beyond 2016 levels	Head Start currently has 20 parents and Early Head Start has 6 parents that serve on their Policy Councils. Childcare centers reported an increase of 5 parents in volunteer leadership roles. The ECHO & Family Center Early Childhood Council retained two parent representatives. Parent opportunities for volunteering or assuming leadership roles was severely hampered due to Covid-19.
Indicator C.2.1: Utilize program surveys of families to measure parent participation and satisfaction in programs	From parents that responded to the CPP Parent Survey, 99% reported that the program was helping their child gain skills and get prepared for kindergarten. LAUNCH Together parent surveys are currently being conducted and will be reported at a later date. High parental positive survey results were reported in 2019-20.
Indicator C.2.2: Families in the Colorado Community Response (CCR) program identify and access community resources appropriate to their needs. Baseline Year 2016	In 2019-20, 23 families were served and accessed a number of local resources through the Colorado Community Response Program, a decrease from 45 families in 2018-19 due to a change in the referral process. Currently, the number of families enrolling in CO Community Response is decreasing as there is a challenge of making "cold calls" in person due to Covid restrictions. This also affects second and third sets of eyes not being available due to restrictions.
Indicator C.2.3: Greet families of all newborns at St. Thomas More Hospital and provide them with the Child Health Passport, including the book, "What to do When Your Child is Sick."	Indicator C.2.3: Greet families of all newborns at St. Thomas More Hospital and provide them with the Child Health Passport ended due to a lack of interest from parents and OB nurses at them with the Child Health Passport, including the book, "What to do When Your Child St. Thomas More Hospital and the use of electronic health records. The remainder of funds were used to provide Welcome Baby bags filled with "goodies" for new mothers. Centura Health Pediatrics and a family practice are currently distributing these bags.

KEY STRATEGIES

Key strategies in the 2020 Plan Evaluation timeframe are derived from the data as well as continuing collaboration and insights offered by members of Council and staff. Specific objectives of concern or attention are listed for each goal.

Family Support and Education: This goal is dedicated to building healthy and resilient families through high-quality, timely and coordinated services. The challenge to families during the Covid-19 crisis is real. Unemployment is higher than ever; closing of centers for children of non-essential workers and stoppage of in-home visitation all contribute to the pressures on families at this time. Home Visitation is now delivered remotely either by Zoom or phone connections. Opportunities for family members to volunteer or move into leadership positions are hampered by in-person restrictions. The Emergency Child Care Cooperative gave assistance to essential employees looking to secure childcare. Essential supplies for both centers and families were secured through ECHO and Family Center Council and other community partners. Council initiated contacts with Centura Health and the Chamber of Commerce to notify non-essential employees of free or low cost child care options. It should be noted that CPP parent surveys indicated very high positive levels of respect, support and follow-up for referrals. A most serious concern however has been the rise in DHS referrals concerning child abuse over the first half of the year. Numbers equal or exceed case numbers from all of 2019. Strategies for this objective will be closely scrutinized. (Reference Objectives B.1.1, B.2.1, C.1.1, C.2.2. Objective C.2.3. has been discontinued.)

Health and Well-Being: Council believes social emotional well-being deserves attention before almost anything. Training for mental health specialists continues to be a priority. Using Fall – Winter figures, children are scoring beyond 2018-19 scores for both TS Gold growth and WHE; both measures meet expectations. Obtaining second half-year data amid the Covid-19 restrictions will be a challenge. Early reports indicate an increase in challenging behaviors both in frequency and severity. Such occurrences are the likely result of children directly impacted by adverse conditions such as caregiver/parental unemployment, crowded or uncertain housing, food insecurity, etc. Strategies will continue to look at support for families and center staff. Targeted coaching has replaced in-person support for mental health professionals as they deal with classroom challenges. The strategies connected to pregnancy related depression have benefitted from new connections with the Integrated Behavior Health System

through Centura Health and Valley Wide Health System social workers. Referrals are streamlined and individually tailored, with Early Childhood Mental Health Specialists making call-backs. A significant increase in the numbers of physicians/health care providers making referrals was also noted. Medicaid and CHP enrollments continue to climb throughout the county. (Reference Objectives A.1.2, B.1.1, B.1.2, B.1.3, D.1.1, D.1.2)



Learning and Development: The heart of this goal has always been screening for early identification and referrals to services for young children and families. If there is a "silver lining" to Covid-19 it would be the revamping of the screening process. With social distancing and sanitizing protocols, screening is now taking place with parents actively leading the process rather than observing. Staff is able to observe both the child and the parent interaction just as effectively. This new format has proven to be less stressful for children and more engaging to parents. Using Fall – Winter figures, WHE exceeded 2018-19 numbers as did TS Gold growth measures of social emotional competencies. A significant challenge for Council has been to maintain Colorado Shines Quality-rated sites. One site has permanently closed unrelated to Covid-19. Management issues and changes in Quality ratings led to Colorado Shines non-renewals. Directors / assistant directors as well as lead teachers are meeting

professional development goals for credentials and training but centers continue to struggle with staff retention and recruitment. (Reference Objectives A.1.1, B.2.1, B.2.2., B.3.1)

HOW STRATEGIES CHANGE

Members of Council will be rewriting strategies during the strategic planning update in consideration of the current early childhood environment and the current state of our county. There are concerns, issues and new resources to be taken into account.

For <u>Family Support and Education</u> the "Ready Rosie" on—line games and lessons, as well as family activity packets, will maintain contact with families through at-home or stay-at-home learning. One parent remarked, "I was lost until the activities came. It's hard to be at home." "Creative Curriculum-digital" will be available for teachers in centers. Social media platforms need to be incorporated as vehicles to connect with and support families. Enhanced Home Visitation with Early Childhood Mental Health supervision works on a media platform. Installation of a VROOM kiosk at the local Prison Museum will reach parents and families as well as inform visitors about the early childhood network in Fremont County. The "Seedlings" class, an outgrowth of LAUNCH Together, assists families at risk due to ACES factors and Circle of Security concerns. The Home Visitor program is liable to be impacted by qualification changes in Head Start regulations.

Health and Well-Being strategies will refine assessment measures, expand training and continue to maintain a cadre of mental health professionals. Activities begun with LAUNCH Together will continue as Council-sponsored work. The DECA/Pyramid Model will continue to replace the Kids Connects Model due to the counselor that was implementing the program becoming ill and moving out of state. The high number of reported child abuse cases will engender a great deal of scrutiny. The collaboration with Centura Health has broadened the ability to refer clients with pregnancy-related depression and anxiety to appropriate services. The hope is to close the circle from referral to services. A grant opportunity with 2 additional behavioral health agencies is in the works. Continued funding from the Department of Education has allowed some child care facilities to remain open while adding childcare services to those families of essential workers.

<u>Learning and Development</u> strategies will continue to accommodate the social distancing and mask protocols for Covid-19 for those face-to-face activities such as screening. Training is a hallmark of the Council Strategic Plan; such training is well attended. Methods of program delivery may need to change. Accounting for at-home and stay-at-home learning will be more difficult to obtain precise data. Expectations for growth in WHE and TS Gold may need to be adjusted.

NEXT STEPS

To insure fidelity to the Strategic Plan, Council will continue to meet monthly using social media platforms. In the upcoming months, small groups of Council members will review one goal at a time; all objectives and strategies for that goal will be scrutinized. The Statement of Progress document will form the basis of that work. With the closing of the LAUNCH Together grant in December, it falls to Council to articulate those programs which will be absorbed by the Strategic Plan. Data collection is ongoing. Improved measurement tools are being researched and evaluated by one of the Harris Fellows connected to Council. Screening and professional development will continue; in classroom delivery of services will depend on state-wide regulations and in-district decisions about instruction. Many of the modifications in place during the health crisis are likely to be maintained. To quote Kathleen Kennedy, Council President, "Our people stepped up. In spite of the virus we have been able to do many good things for children and families."