



**Hartford Area
Child Care Collaborative**

**Judith G. Goldfarb
Executive Director**

June 24, 2009

Mr. Michael P. Starkowski, Commissioner
Connecticut Department of Social Services
25 Sigourney Street
Hartford, Connecticut 06106

Dear Commissioner Starkowski,

The Hartford Area Child Care Collaborative (the Collaborative) has been successfully developing and implementing projects to improve the quality of child care services for more than 20 years in the Capitol Region. The Collaborative is currently seeking **\$160,000** from the Department of Social Services (DSS) to continue this work over the next year. Below you will find the brief concept, rationale, expected outcomes and request for each of three projects.

“Literacy Ambassadors”. Research and experience has shown that the quantity and quality of talking with young children develops their language, reading, and writing abilities (Snow, 1998 and Hart and Risley, 1995); improves their ability to problem-solve (Blakeslee, 1997); and prepares them effectively for school. This is the case because of the well-documented link between the size of a child’s vocabulary and his/her reading comprehension. Moreover, the importance of vocabulary development extends far beyond reading comprehension; it is a key component in achieving positive outcomes related to IQ scores, socio-emotional health, and school-readiness.

Since 2005, the Collaborative has been concerned about children starting preschool with limited vocabulary. We developed a national model (*Walkers & Talkers*) to support getting infants and toddlers ready for school by providing home visitors with tools to support families in their understanding of child development and to encourage a family focus on language development. This proposal builds upon *Walkers & Talkers* by delivering targeted workshops to help parents and child care providers become: 1) aware of the link between talking and literacy development; 2) motivated to talk more to their children, and 3) intentional in the way they use oral language. DSS funding will allow the Collaborative to recruit and train a cadre of six “literacy ambassadors”, neighborhood residents from diverse language backgrounds, to be literacy coaches within their language communities. Our expectation is that at least 100 parents and home-based child care providers will be actively engaged in talking and reading to our youngest children over the course of 12 months as a result of the project. We seek **\$45,000** for a one-time start-up to: 1) recruit and train a corps of “literacy ambassadors”; 2) provide educational materials and books for families; and 3) conduct local training with families and providers.

10 Columbus Boulevard, Hartford, CT 06106 phone: 860.241.0411 fax: 860.524-8346 jgoldfarb@haccc.info
a project of the Hartford Foundation for Public Giving

Working together to ensure effective child care

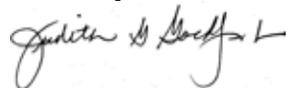
Child Care Health Consultation and Training in Home-Based Settings. Many families in Connecticut share an urgent need for quality and affordable child care. In order to meet this need, families often turn to relatives or neighbors for care, particularly if the child is under 3 years of age (Dellert, 2003). In fact, the majority of our youngest children are in home-based care (i.e., licensed family child care or kith & kin care). Research shows the quality of home-based care varies greatly (Child Welfare League of America, 2005). Moreover, in challenging economic times, families are often forced to choose less expensive and often lower-quality home-based care for their children. The proposed project is a partnership with the CT Nurses Association to increase the knowledge and skills related to early childhood health in family child care settings. A nurse consultant, in partnership with a home visitor, will provide training, health consultation and follow-up to improve the health conditions and outcomes for our youngest children. The Collaborative seeks **\$60,000** to improve health outcomes for 200 young children by providing health consultation and training to 75 home-based providers in Hartford.

Director Succession Planning. Nearly 30% of Connecticut's child care directors are reaching retirement age (Who are CT's Directors, 1999). Many are founders of their programs and/or have been in business for more than 20 years. CT's families and children will be losing the skilled administrators whose leadership has led programs into the 21st century. The Collaborative is currently piloting a model that helps programs with *Director Succession Planning*. This training and technical assistance conducted in partnership with Third Sector New England covers the basic components of departure-defined succession planning to ensure a positive change experience for both the departing leaders and the organization. Child care directors and representatives from their boards will: 1) learn the various components of succession planning; 2) create emergency leave plans; and 3) understand how to access additional support, when appropriate. The funds from DSS will enable the project to: 1) recruit and train six coaches to work with new directors, building upon the skills and knowledge of the retiring directors; and 2) build a small corps of four interim directors who can step into the role of director during the time when a program may have lost a director and has been unable to fill that sudden vacancy. The Collaborative seeks **\$55,000** to work with 30 child care directors and their boards.

I'd be happy to discuss any of these options further. Please do not hesitate to call.

Thank you for your continued support of children and families.

Sincerely,



Judith G. Goldfarb

Copy: P. Palermino, Program Manager, Bureau of Assistance Program, Division of Family Services

R. Sussman, Director, Brighter Futures Initiative, Hartford Foundation for Public Giving

From: Sherry Linton
Sent: Monday, June 15, 2009 2:41 PM

Having reviewed the CCDF P and the attachments, I'm left with a void concerning the 2009 Rate Survey. On Attachment Page 24, the Plan states that child care subsidies are reimbursed at payment levels established through the 2001 market rate survey, yet implies that a 2009 survey was utilized "for the purpose of meeting State Plan requirements concerning equal access." How was the 2009 survey utilized to address families' access to at least 75% of child care options in Connecticut, with the reimbursement rates are currently based on the 2001 survey? The Plan provides a methodology for the 2009 survey, but no results, yet the "Rationale for Equal Access Provision" implies that the 2009 survey was utilized. Please clarify.

I noticed that the Plan list 1,374 Center participants and 3,715 family home participants. What is meant by "participating?" Are those the number of providers in the database that the survey was sent out to, or an actual number of "participants"—defined based on respondents?

Are the results of the 2009 survey available as public record? How can I go about accessing those results?

Sherry Linton
Early Care and Education Policy Analyst
Connecticut Association for Human Services (CAHS)
110 Bartholomew Ave, Suite 4030
Hartford, CT 06106
(860) 951-2212 x233
slinton@cahs.org

Child Care and Development Fund (CCDF) 2009 Proposal Summary

Having had the opportunity to review the 2009 Child Care Development Fund Plan now available on the DSS website, www.ct.gov/dss, below are some key points from the document.

The Plan is a comprehensive document that covers elements of the CCDF that range beyond the points covered in this summary. This summary focuses on the elements of the Plan that addresses the issues most frequently voiced by early care providers convened by CAHS.

Funding

• CCDF	\$51,394,873
• CCDF State Maintenance of Effort Funds	\$18,738,357
• CCDF State Matching Funds	\$18,178,031
• Total Funds Available	\$88,211,325
• ARRA Funds	\$13,685,524

DSS estimates that 3.3% (\$3M) of the CCDF and state matching funds will go toward administrative costs

- The United Way CT will continue to administer the Child Care Assistance Program (Care 4 Kids)

The Plan outlines the Department's procedures for addressing payment errors. (p. 12-14)

Coordination & Consultation

DSS is mandated to coordinate and consult with federal, state, local and private agencies that provide child care or early care and education services. DSS lists the Department of Children and Families, School Readiness Councils, State Child Day Care Forum, Head Start, the Early Childhood Education Cabinet, and the United Way among those entities with whom they coordinate and consult around early care services (see p.16-19 for a complete list of collaborating agencies).

DSS indicates that the state is in the "Planning" stage for a Connecticut Emergency Preparedness and Response Plan for Child Care and Early Childhood Programs and outlines the progress of those plans.

The Plan states that Connecticut is in the "Developed—written but not yet implemented" status for Early Childhood Coordination. The Early Childhood Investment Plan, Ready by Five and Fine by Nine, First Words First Steps are among the initiatives referenced as evidence that such coordination is developed for the following funding streams:

1. Care 4 Kids
 2. Lead Agency [DSS] Child Care Center Contract Program (state & federal funding), state pre-k school readiness (state/TANF funds)
 3. Charts a Course professional development program (state & federal CCDF fund)
 4. Statewide Resource and Referral program (state & federal CCDF fund)
- DSS list the Early Childhood Education Cabinet as a partner in ensuring coordination.

CCDF Hearings Summary

The Plan provides a summary of the comments from the public hearings. You are encouraged to review the overview of the hearings. (See p. 26-28 of the Plan).

Payment Rates

The "***Payment Rates for Provision of Childcare***" section of the Plan indicates that, the Lead Agency [DSS] "is required to establish payment rates for child care services that ensure eligible children equal access to comparable care." The Plan indicates that the rates for 2001 are being utilized, but a recent market rate survey was completed in May 2009. ***In response to the question of what percentile of the current market rate survey is the state payment rate ceiling set, DSS indicates a status of, "Still Completing Analysis."*** (See p. 33).

This Plan is apparently in compliance with federal guidelines because a market rate survey has been conducted. The methodology of the survey is shared, indicating that 1,374 Centers and 3,715 family child care homes participated in the survey. No survey results are present in the Plan. (See Attachment, p 23 & 24 for Survey methodology narrative)

The question has been posed to DSS as to whether those numbers reflect actual respondents or the number of providers in the DSS database that were sent the questionnaire, awaiting response. If you were a participant in the survey, please contact Sherry Linton at slinton@cahs.org.

Regarding the "***Rationale for Equal Access Provision***," the plan confirms use of the 2001 market rates and reasserts the completion of a recent survey in May 2009, being mindful that the requirement is only for the completion of a survey, without mandate of the need to utilize survey results to determine market rates that ensure families' equal access to care.

The Plan acknowledges that the results of the current market rate survey are not being used.

Eligibility

Income eligibility criteria are outlined. The information implies families "allowance to remain eligible until income reaches 75% SMI. While that has

been the case prior to May 12, when the Care 4 Kids program imposed immediate changes, this Plan is speaking to the future status of eligibility. This sentence is not clear to me. \The Plan does indicate that a wait list is established if the projected Program spending exceeds the state fiscal year budget allocation, as it has for the past few years. (See 3.3.2 (a) on p. 35-36.)

Please feel free to contact me with any thoughts or points of clarification. If you would like to share your responses to the Plan with DSS, submit those comments to Julie.bisi@ct.gov.

Sherry Linton
Early Care and Education Policy Analyst
Connecticut Association for Human Services (CAHS)
110 Bartholomew Ave, Suite 4030
Hartford, CT 06106
(860) 951-2212 x233
slinton@cahs.org

June 24, 2009

Dear Julie,

I would like to take this opportunity to formally submit my comments regarding funding for our childcare center, Life Haven Childcare Center. We have been in operation for the past 5 years, funded by SAMSHA upon opening and then by the DSS Pilot Program which ends this month, June 2009. Combined with the Care 4 Kids freeze, we have begun to feel the effects of the cuts and recession in our shelter and center. This week culminated in us laying off childcare staff and cutting our Infant/Toddler room down from 8 slots to 4 slots (with one teacher) because of the limited amount of funding. *Our childcare center needs to be supported.* Without the money available for a teacher's salary, we laid off an Infant/Toddler teacher, the reason why we are cutting down the slots to 4 children (and also transitioning families to other centers because of our cut back).

Above any other childcare center, I feel that our center deserves *first* consideration if there are funds available. In cutting down our Infant/Toddler room we are not leaving any room for 4 of our in-house homeless families to access those slots. Those are 4 homeless mothers in need of a safe, reliable, and high-quality childcare center to leave their child while they seek to have their most basic needs met—housing and a job that leads to a consistent income for their food needs and their children's food needs. Four mothers that will not be able to leave their children with us and will have an even greater hurdle in finding a job and employment. We have seen, with the recession, that our mothers coming in are already having a harder time finding a job (or not finding one when they transition out), a harder time keeping a job if her children do not already have childcare, and even if she gets a job will not necessarily be accepted by Care 4 Kids. We have established an extremely low flat-fee for our families if they do not have Care 4 Kids, but now with our slots cut back, we cannot accept them in. We do not know what kind of effect the Care 4 Kids cuts will have on our Infant/Toddler room, but shutting down the classroom is an option.

Our mothers need all the assistance they can get to get their lives back on track and take care of their children. Studies of children living in poverty, have shown that the effects of poverty on a child by age nine is similar to that of the damage done to the brain of a victim of a stroke. For our mothers to get the help they need, our childcare center and especially the Infant/Toddler room must receive funding for the teacher's salaries, the children's food, and materials and supplies. For the children, we provide a mentally healthy, happy and secure environment, full of nutritious food, safe from hazardous conditions they may find if not in our care, kind words, a focus on developmental skills or concerns that are looked at daily, and we instill in them a love of learning (and especially books) that they will take with them into their next school.

Without the funding to Life Haven Childcare Center, the effects are felt on those most vulnerable and in need of the most assistance in the New Haven community: the portion of the homeless population that are young females that are pregnant and

have one or more children. We cannot ensure that these children will be “successful by six” or “fine by 9” if their developmental and educational needs are not met when they step through the doors of Life Haven women’s shelter only to find they cannot access the childcare center.

Please accept my comments and thank you for taking the time to read through them.

Sincerely,

Jennifer Butler

*Jennifer Butler, Childcare Director
Life Haven, Inc.
447 Ferry St.
New Haven, CT
phone (203) 776-6208 x36
fax (203) 777-5949
www.lifehaven.org*