

Smart Start

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**Joint Legislative Oversight on
Health and Human Services**

**Early Education and Family Support
Programs Subcommittee**

Program Comparison

	Smart Start	Child Care Subsidy	PreK
Mission	School Readiness	Provide needs based child care assistance	School Readiness
Target Population	Children from birth to age 5	Low income families with children under age 12	At-risk four-year-olds who have not been exposed to other early education programs such as public or private preschool, Head Start, Early Head Start, or early intervention programs.

Program Comparison

	Smart Start	Child Care Subsidy	PreK
Eligibility	<ul style="list-style-type: none"> Varies by activity Local partnerships have flexibility for some activities 	<ul style="list-style-type: none"> Age 0 to 5, and Special Needs children, 200% of federal poverty level Age 6-12, 133% of federal poverty level Need child care for an eligible activity such as employment, high school or post-secondary education 	<ul style="list-style-type: none"> Income eligible at 75% of state median income Eligible without regard to income: some military families; children with Limited English Proficiency, IEP, some health conditions, or educational need identified by screening
Funding and Administration	<ul style="list-style-type: none"> Nonprofit organization at state and local levels Public/private partnership State and private funding Local decision-making to address local needs 75 local Smart Start Partnerships 	<ul style="list-style-type: none"> Combination of State and Federal funding from Block Grants and the General Fund. Locally administered program with State level support 100 local county departments of social services 	<ul style="list-style-type: none"> State program with state funding, plus other sources of funding contributed according to local decisions Standard program; local decision-making about location of pre-k classrooms; all classrooms meet state standards 91 contractors

Smart Start

Smart Start's Vision

Every child reaches his or her potential and is prepared for success in a global community.

Smart Start's Mission

Advance a high quality, comprehensive, accountable system of care and education for every child beginning with a healthy birth.

Source: <http://www.smartstart.org/>

Smart Start Evaluation

What Works For Health Database

Expected Beneficial Outcomes

- Increased school readiness
- Increased vaccination
- Increased access to health care
- Increased child care quality

Ratings:

- Evidence Rating: Some Evidence
- Impact on Disparities: Likely to Decrease Disparities

Source: <http://whatworksforhealth.wisc.edu/index.php>

Smart Start Evaluation

- There is some evidence that Smart Start improves school readiness, especially for disadvantaged children. Additional evidence is needed to confirm effects.
- Children who attend centers participating in Smart Start appear better prepared for kindergarten than children who receive no child care. For low income children, these centers can increase school readiness (e.g., cognitive, language, social, and motor skills) more than other day care centers.

Source: <http://whatworksforhealth.wisc.edu/index.php>

Smart Start Evaluation

- The quality of centers participating in Smart Start appears to improve over time, especially when centers adopt Smart Start's quality improvement strategies. Centers may increase kids' language, reading, and math skills as quality increases. Through Smart Start's health services, participating children are more likely to receive a DTP vaccination and to have a regular source of care than non-participants.
- Research suggests that Smart Start partnerships work best when communities assess their baseline needs and develop plans locally, but set goals that can be evaluated by both communities and state officials. Communities can expect a multi-year collaborative process before they achieve measurable outcomes.

Source: <http://whatworksforhealth.wisc.edu/index.php>

Recent Smart Start Evaluation

Impact of North Carolina's Early Childhood Initiatives on Special Education Placements in Third Grade

“We find that access to early childhood programs in North Carolina significantly reduces special education placements in third grade. At 2009 funding levels, the SS reduces placements by 10% and the MAF program by 32%. Together, at these funding levels, the two programs reduce the odds of special education placement by 39%.”

Source: Impact of North Carolina's Early Childhood Initiatives on Special Education Placements in Third Grade; Clara G. Muschkin, Helen F. Ladd, Kenneth A. Dodge, *Duke University*

Smart Start Evaluation

Sample of Programs Funded by Smart Start

Program	Description	Evidence Rating	Clearinghouse
Incredible Years	Seeks to prevent and reduce challenging behavior of children up to age 12, while increasing their social skills by offering parent, teacher, and child training.	Scientifically Supported	What Works for Health
Reach Out and Read	Partners with doctors, nurse practitioners, and other medical professionals to incorporate literacy support into regular well-child visits. From the 6-month checkup through age five, medical providers give children developmentally appropriate books and give parents guidance and encouragement on reading with their children.	Scientifically Supported	What Works for Health
Parents as Teachers (PAT)	Educators visit parents' homes to teach them about early childhood development and promote effective parenting strategies. The program also includes developmental screenings of children, parent group meetings, and a resource network that links families with community resources.	Some Evidence	What Works for Health

Smart Start Evaluation

Sample of Programs Funded by Smart Start

Program	Description	Evidence Rating	Clearinghouse
Nurse-Family Partnership	Voluntary home-visiting program that targets low income, first-time mothers and their babies. Home visits begin during pregnancy and continue through a child's second birthday. The program aims to improve prenatal, birth, and early childhood outcomes.	Scientifically Supported	What Works for Health
The Triple P (Positive Parenting Program)	A system of parenting interventions for families with children ages 0-8, which seeks to strengthen parenting skills and prevent dysfunctional parenting, so as to prevent child maltreatment and emotional, behavioral, and developmental problems.	Supported, Promising, Near Top Tier	Results First (Pew Center) reported in 6 of 8 clearinghouses

Smart Start Certified Budget

	State	Child Care Development Fund (CCDF)	Total
FY 2008-09	\$ 209.7	\$ -	\$ 209.7
FY 2009-10	\$ 193.7	\$ -	\$ 193.7
FY 2010-11	\$ 188.3	\$ -	\$ 188.3
FY 2011-12	\$ 150.7	\$ -	\$ 150.7
FY 2012-13	\$ 143.6	\$ 7.0	\$ 150.6
FY 2013-14	\$ 140.0	\$ 7.0	\$ 147.0
FY 2014-15	\$ 140.0	\$ 7.0	\$ 147.0
FY 2015-16	\$ 140.0	\$ 7.0	\$ 147.0

S.L. 2012-142 replaced \$7 million in State funding for \$7 million in CCDF block grant funding with no reduction in total funding.

The Department of Health and Human Services allocated \$3.6 million of the \$5 million non-profit reduction in S.L. 2011-145 to Smart Start. This is reflected in 2013-14.

Note: The total does not include the local match.

Source: BD307 for FY 2008-09 through 2012-13 and FY 2015-16; and BD 701 for FY 2013-14 and 2014-15.

Local Partnership Expenditures

	2010-11	2011-12	2012-13	2013-14	2014-15
Child Care Subsidy	\$75.5	\$66.7	\$66.8	\$64.8	\$64.3
Health Support	\$5.9	\$2.9	\$2.9	\$2.8	\$2.5
Program Support	\$7.4	\$6.4	\$6.3	\$6.4	\$6.6
Administration	\$13.9	\$11.5	\$11.5	\$11.3	\$11.3
Family Support	\$19.6	\$14.4	\$15.7	\$16.1	\$16.7
Other Early Childhood Related Activities	\$54.5	\$43.8	\$41.6	\$40.5	\$40.7
Total	\$176.8	\$145.7	\$144.8	\$141.9	\$142.2

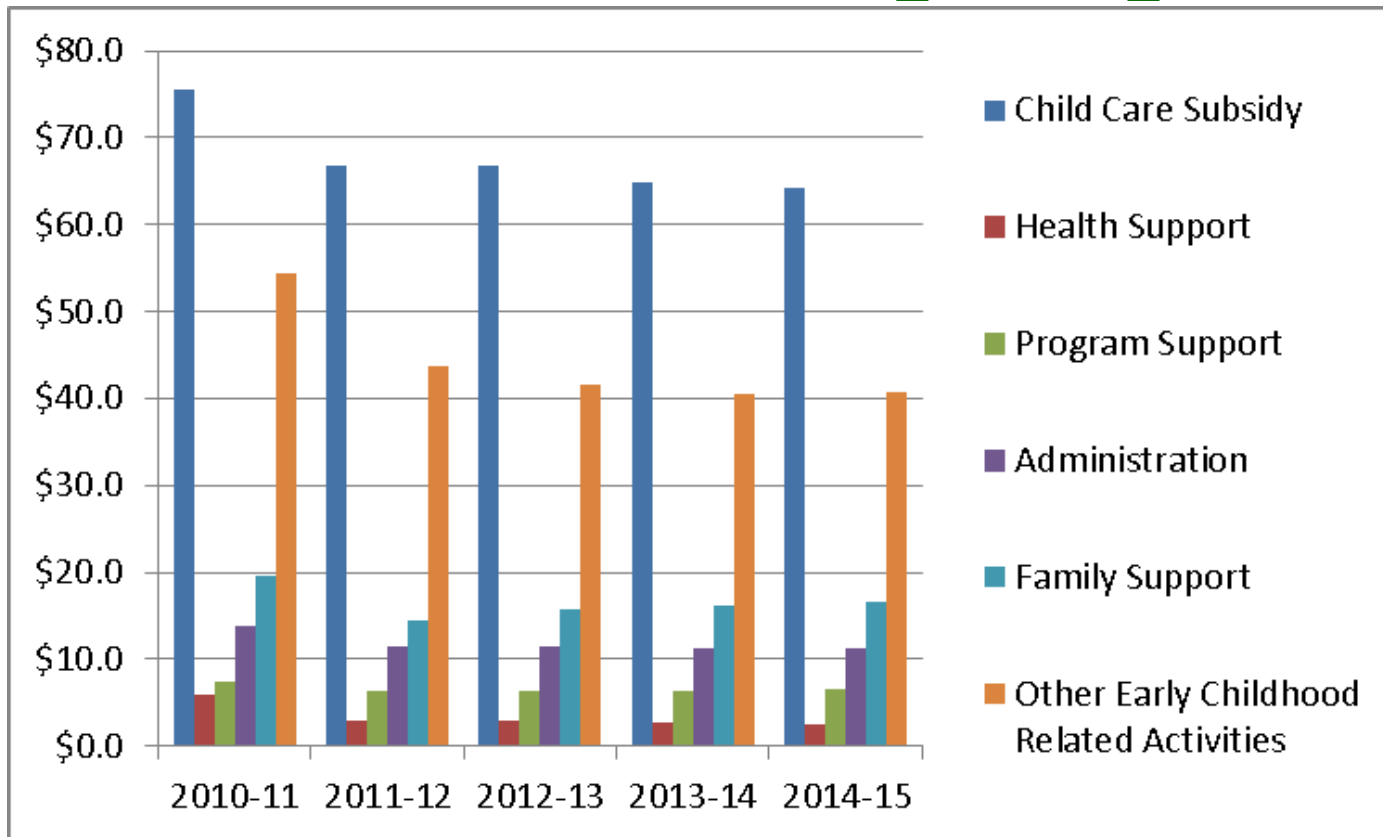
Dollars are in millions.

Program Support includes technical assistance, monitoring of all services, evaluation to ensure appropriate implementation of services and coordination across service providers.

Other Early Childhood Related Activities include but are not limited to working with child care programs to improve and maintain quality, supporting teachers to attend early childhood college courses and providing professional development.

Source: Smart Start Annual Reports 2010-11 through 2014-15

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Source: Smart Start Annual Reports 2010-11 through 2014-15

Smart Start Match Requirements

- Match requirements were increased for FY 2013-14 and 2014-15.

	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17
In-Kind	3%	3%	3%	4%	5%	6%
Cash	10%	10%	11%	11%	12%	13%
Total	13%	13%	14%	15%	17%	19%

- In-kind donated resources that are counted toward the total required match can be equal to no more than the percentage listed for the applicable fiscal year.
- Failure to obtain the match by June 30th of each year results in a dollar-for-dollar reduction in the appropriation for the Program for a subsequent fiscal year.

Smart Start Match

	2012-13		2013-14		2014-15		2015-16	2016-17
	Required	Actual	Required	Actual	Required	Actual	Required	Required
In-Kind	\$4.4	\$8.2	\$4.4	\$8.7	\$5.9	\$8.5	\$7.4	\$8.8
Cash	\$14.7	\$17.7	\$16.2	\$20.0	\$16.2	\$20.5	\$17.6	\$19.1
Total	\$19.1	\$25.9	\$20.6	\$28.7	\$22.1	\$29.0	\$25.0	\$27.9

Note: Dollars shown are in millions.

Source: Smart Start Annual Reports to the General Assembly

Smart Start Services and Number Served

Service	FY 2010-2011	FY 2011-2012	FY 2012-2013	FY 2013-14	FY 2014-15
Quality of Care & Access					
Child Care Programs receiving support to improve or maintain the quality of care	2,804	2,575	2,558	2,229	2,342
Children receiving subsidy assistance from Smart Start.	38,763	31,460	31,070	30,096	27,757
Teachers receiving an education-based salary supplement	10,019	7,193	6,351	5,797	5,596
Teachers participating in Smart Start-funded programs that help them to study early education at the college level	5,053	4,024	2,911	2,094	2,151

Source: Smart Start Annual reports and North Carolina Partnership for Children..

Smart Start Services and Number Served

Supporting Parents	FY 2010-2011	FY 2011-2012	FY 2012-2013	FY 2013-14	FY 2014-15
<i>Families participating in ongoing parenting programs</i>	<i>6,189</i>	<i>3,930</i>	<i>3,684</i>	<i>3,283</i>	<i>2,456</i>
<i>Parents receiving assistance through the evidence-based Parents as Teachers program.</i>	<i>6,257</i>	<i>4,146</i>	<i>3,723</i>	<i>3,235</i>	<i>2,088</i>
Child Health and Nutrition					
Children with special needs or at-risk for developmental delay receiving Smart Start health-related enhanced services	6,365	5,850	5,720	4,923	1,394
Child Care facilities receiving child health consultation services	3,318	2,303	2,447	2,333	2,318
Children that participated in Shape NC initiatives	483	1,044	946	1,158	7,171

Note: Services that are italicized have an evidence-based rating or include services that have an evidence based rating.

Source: Smart Start Annual reports and North Carolina Partnership for Children.

Smart Start Services and Number Served

Promoting Early Literacy	FY 2010-2011	FY 2011-2012	FY 2012-2013	FY 2013-14	FY 2014-15
Classrooms participating in the Raising a Reader program	425	373	555	490	493
<i>Children participating in the Reach Out and Read program</i>	<i>Program started in FY 2011-12</i>	<i>9,109</i>	<i>20,557</i>	<i>37,673</i>	<i>45,907</i>
<i>Medical offices participating in the Reach Out and Reach program</i>	<i>Program started in FY 2011-12</i>	<i>39 offices in 20 counties</i>	<i>51 offices in 22 counties</i>	<i>66 offices in 29 counties</i>	<i>74 offices in 40 counties</i>

Note: Services that are italicized have an evidence-based rating.

Source: Smart Start Annual reports and North Carolina Partnership for Children.

Questions?

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