

**2008**

**LEGISLATIVE STUDY  
COMMISSION ON  
CHILDREN & YOUTH**

**MINUTES**

***North Carolina General Assembly***  
***Legislative Study Commission on Children and Youth***  
***UnExpired Positions Only***

G.S. 120-215

***Pro Tem's Appointments***

Sen. Eleanor Gates Kinnaird                      Co-Chair  
North Carolina Senate  
16 W. Jones Street, Room 2115  
Raleigh, NC 27601-2808  
(919) 733-5804

Sen. Robert C. Atwater                              Member  
North Carolina Senate  
300 N. Salisbury Street, Room 312A  
Raleigh, NC 27603-5925  
(919) 715-3036

Sen. Doug Berger                                      Member  
North Carolina Senate  
300 N. Salisbury Street, Room 622  
Raleigh, NC 27603-5925  
(919) 715-8363

Sen. John J. Snow Jr.                                  Member  
North Carolina Senate  
16 W. Jones Street, Room 2111  
Raleigh, NC 27601-2808  
(919) 733-5875

Sen. Richard Yates Stevens                          Member  
North Carolina Senate  
300 N. Salisbury Street, Room 406  
Raleigh, NC 27603-5925  
(919) 733-5653

Mrs. Barbara Bradley                                  Public Member  
NC Child Advocacy Institute  
1300 Saint Mary's Street, Suite 500  
Raleigh, NC 27605

***Speaker's Appointments***

Rep. Alice Louise Bordsen                              Co-Chair  
North Carolina House of Representatives  
300 N. Salisbury Street, Room 530  
Raleigh, NC 27603-5925  
(919) 733-5820

Rep. Beverly Miller Earle                              Vice Chair  
North Carolina House of Representatives  
300 N. Salisbury Street, Room 634  
Raleigh, NC 27603-5925  
(918) 971-5253

Rep. Dale R. Folwell                                      Member  
North Carolina House of Representatives  
300 N. Salisbury, Room 508  
Raleigh, NC 27603-5925  
(919) 733-5787

Rep. Verla C. Insko                                      Member  
North Carolina House of Representatives  
300 N. Salisbury Street, Room 307B1  
Raleigh, NC 27603-5925  
(919) 733-7208

Rep. Linda P. Johnson                                      Member  
North Carolina House of Representatives  
16 W. Jones Street, Room 1006  
Raleigh, NC 27601-1096  
(919) 733-5861

Ms. Paula G. Carden                                      Public Member  
Jackson Co. Dept. of Public Health  
538 Scotts Creek Road, Suite 100  
Sylva, NC 28779

## ***Legislative Study Commission on Children and Youth***

### ***UnExpired Positions Only***

Ms. Helen T. Brantley PhD  
UNC Forensic Psychiatry Service  
109 Connor Drive  
Chapel Hill, NC 27514

Public Member

Dr. M. Austin Connors Jr.  
8325 Nantahala Drive  
Raleigh, NC 27612

Public Member

Ms. Mia Day Burroughs  
110 Cedar Hills Drive  
Chapel Hill, NC 27514

Public Member

Hon. Mark Galloway  
PO Box 1077  
Roxboro, NC 27573

Public Member

Mrs. Selena Berrier Childs  
Child Fatality Task Force  
1928 Mail Service Center  
Raleigh, NC 27699-1928

Public Member

Ms. Dianna Wiggins Goforth  
816 Longview Drive  
Fayetteville, NC 28311

Public Member

Mr. John Cox  
112 West Harden Street  
Graham, NC 27253

Public Member

Dr. Jennifer L. Lail  
Chapel Hill Pediatrics & Adolescents  
205 Sage Road, Suite 100  
Chapel Hill, NC 27514

Public Member

Mr. Johnnie Ray Farmer  
142 Ray Farmer Road  
Aulander, NC 27805

Public Member

Mr. J. Glenn Osborne  
Wilson Co. Dept. of Social Services  
PO Box 459  
Wilson, NC 27894-0459

Public Member

Hon. H. Paul McCoy Jr.  
Halifax County Court House  
PO Box 66  
Halifax, NC 27839

Public Member

### ***Governor's Appointments***

### ***Other's Appointments***

Dr. June St. Claire Atkinson  
Superintendent of Public Instruction  
301 N. Wilmington Street  
Raleigh, NC 27601-2825

Ex Officio

Mr. Dempsey E Benton Jr  
Secretary, DHHS  
2001 Mail Service Center  
Raleigh, NC 27699-2001

Ex Officio

# ***Legislative Study Commission on Children and Youth***

## ***UnExpired Positions Only***

Hon. W. Britt Cobb Jr.  
Secretary of Administration  
Mail Service Center  
Raleigh, NC 27699

Ex Officio

Hon. Ralph A. Walker  
AOC Director  
PO Box 2448  
Raleigh, NC 27602-2448  
(919) 890-1000

Ex Officio

### ***Staff to Committee***

Wendy Graf Ray, Research Division

Brenda Carter  
(919) 733-2578

### ***Contact***

Michelle Hall

Committee clerk

(919) 733-5820



## ATTENDANCE

## **Legislative Study Commission on Children and Youth**

(Name of Committee)

[illegible]

**MINUTES**  
**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

September 10, 2008  
Room 1027/1128 Legislative Building  
Raleigh, NC  
10:00 a.m.

The Legislative Study Commission on Children and Youth met on Wednesday, September 10, 2008 at 10:00 a.m. in Room 1027/1128 LB. The following Senate Members were present: Co-Chair Senator Ellie Kinnaird, Senator Robert Atwater, and Senator Doug Berger. The following House Members were present: Co-Chair Representative Alice Bordsen, Vice-Chair Representative Beverly Earle, Representative Dale Folwell, Representative Verla Insko, and Representative Linda Johnson. The following Public Members were in attendance: Barbara Bradley, Paula Carden, Dr. Austin Connors, Mia Day Burroughs, Judge Mark Galloway, Selena Berrier Childs, John Cox, Dr. Jennifer Lail, and Johnnie Ray Farmer. Commission Staff Brenda Carter, John Poteat, Michele Alishahi, Sara Kamprath, and Lisa Wilks were also in attendance. A visitor registration sheet is attached and made part of these minutes.

The presiding Chair, Representative Bordsen called the meeting to order. She welcomed Commission members and members of the public to the meeting. She offered background for the Commission and reviewed the agenda for the meeting. An agenda is included and made part of these minutes.

Co-Chair Senator Ellie Kinnaird was recognized. She stressed the important work the Commission had to do and thanked everyone for being willing to serve.

Cyndie Bennett, Director of the Division of Child Development was recognized for a presentation. Her handouts are included and made part of these minutes. Ms. Bennett reviewed child care facts in North Carolina including the total number of children in the State, as of July 2008. Ms. Bennett also outlined some important changes to early childhood care from the perspective of the Department of Health and Human Services: daycare center licensure, the star rating system, and child care subsidy services. Ms. Bennett concluded by showing the Commission the number of children on the NC Child Care waiting list.

John Dornan, Executive Director for the Public School Forum of North Carolina was recognized for a presentation about the North Carolina Center for Afterschool Programs (NCCAP). His handout is included and made part of these minutes. Mr. Dornan informed the Commission that after school programs have recently been referred to as "extended day" programs because programs that occur before school are also part of NCCAP. He emphasized the importance of extended day programs and stressed the results that children get from participating. He concluded with two main thoughts: reinforce afterschool programs after kindergarten, and keep an eye on collaboration. If the state can reach an agreement on models and standards, better results will be seen throughout North Carolina.

The Chair opened the meeting for questions.

Representative Earle was recognized. She stated that Cyndie Bennett had identified a lot of kids not covered by NC Health Choice. She inquired as to whether the Division was making sure that all kids that are eligible are getting covered.

Ms. Bennett responded that the local folks would likely address that question in their presentations later in the meeting.

Barbara Bradley was recognized for a question. She inquired about the overall capacity for daycare licensing and how fast the Division was moving.

Ms. Bennett responded that it does take time for centers to reach five stars but the Division was down to the last 1% of transition. The Division did have a backlog and was running three to four months behind for new licensures. They continue to look for ways to make the system more efficient.

Henrietta Zalkind, Executive Director of the Down East Partnership for Children (DEPC) was recognized for a presentation. Her presentation is included and made part of these minutes.

Ms. Zalkind gave an overview of DEPC and the area and types of children being served by the Partnership. She stressed that the Partnership is not a program; it is a model with the goal of maximizing subsidy resources for low-income and at-risk families. For the families, DEPC helps with awareness of resources and a simpler process to get what is needed. For participating agencies, DEPC allows them to focus on the same goal and builds trust without competition. DEPC also improves the ability for staff to serve families.

Ms. Zalkind continued by outlining some of the results of DEPC. Children who have accessed this system have been shown to have smoother transitions into school, increased kindergarten readiness, and at or above-level performance on kindergarten or first grade assessments. Ms. Zalkind concluded with an overview of DEPC supported initiatives including Ready Schools, Ready Families, and Ready Communities.

The Chair opened the meeting for questions.

Representative Johnson was recognized. She asked whether the Partnership worked with afterschool programs.

Ms. Zalkind responded that DEPC was trying to. They do have a school age component. The quality of afterschool care varies but they are working on it; quality of afterschool programs is the most important factor.

Senator Kinnaird was recognized. She inquired whether DEPC works with pediatricians.

Ms. Zalkind responded that DEPC engages in outreach to through pediatricians, the Department of Social Services and other agencies through their Board.

The Chair recognized Ann Stalnaker, Director of Curriculum for Hickory City Schools and Amy Herman, Program Manager for Catawba Social Services for a presentation about improving educational continuity and school stability for children in out-of-home care in Catawba County. Their presentation is included and made part of these minutes.

Ms. Stalnaker gave some background on the breakthrough series collaboration in Catawba County and why the work is so important to children in foster care. She described the unique approach that empowers community partners who are the most knowledgeable on the issues facing those involved in the collaborative. Specific steps taken in the collaborative include: establishing and training school personnel as foster care designees in every school; sharing data between foster care and the school systems to identify common children; negotiating transportation enabling students to remain in their school of origin; capturing information regarding student achievement in court reports; and involving birth parents and youth in analyzing system needs.

Ms. Stalnaker informed the Commission of some of the lessons learned in the initiative and some of the measurements of success. The next steps, as well as where the State might be helpful include: funding for transportation back to foster children's school of origin even when they move; school information accessible by Child Welfare and parents; State level commitment to promote partnerships between school systems and Child Welfare; sponsorship of Breakthrough Collaborative in North Carolina; and ensuring the faces and voice of children are heard.

Amy Herman, Child Welfare Program Manager for Catawba Social Services shared a case story of a foster child with the Commission. Her remarks are included and made part of these minutes.

The Chair opened the meeting for questions.

Representative Insko was recognized. She asked if Catawba County has school-based child/family teams.

Bobby Boyd, Director of Catawba Social Services, responded that in the case of children with difficulties, there is a Multiple Response System, in which the team decides what is best for the children.

The Chair recognized Bobby Boyd for remarks.

Mr. Boyd informed the Commission of three issues that might make the system work better. He began by stating the development of policy at the state level is lengthy, detailed, and cumbersome. It ties the hands of those who are trying to help children. He also noted the overrun of mandates. In Catawba Social Services in the last twelve months, there have been over 65 occurrences of audits for financial penalties. Finally, he noted that reimbursement levels have been declining since Mental Health services were divested.

The Chair recognized Representative Insko for a question.

Representative Insko agreed with the complaint about outpatient reimbursement rates. She stated that as policy is being made, community partners should speak out and make recommendations about how to streamline said policies. At times, the Legislature overreacts and creates problems, where it should be creating solutions.

The Chair recognized Patti Long of the Juvenile Justice Treatment Continuum for a presentation about an integrated continuum of care for court involved youth. Her handouts are included and made part of these minutes.

Ms. Long gave the Commission background on the Juvenile Justice Treatment Continuum (JJTC). She stressed that it is not a program, but a platform. JJTC is a comprehensive intervention strategy for court referred youth specifically designed to treat co-occurring mental health and substance abuse disorders. JJTC provides a full continuum of integrated services for court-involved youth. It depends upon one dedicated provider specializing in working with the population of court-involved youth. Services meet court supervision requirements and continue only as long as needed. JJTC is designed to meet the specific needs of youth and families.

Ms. Long outlined the platform structure and process. She informed the Commission of the continuum of services which include assessment, structured family therapy, parent education, community support, intensive in-home support and therapeutic foster care. The funding for JJTC comes through existing sources include Medicaid, Health Choice, private insurance, and state funding for uninsured consumers. The JJTC Steering Committee provides oversight to support program implementation and represents the entire district to better address the needs of its communities. Ms. Long concluded by naming the future needs of JJTC: funds for offsetting the cost of bringing provider staff off line for trainings, and agreement on a state-wide model for delivery of services to court-involved youth as a special population.

The Chair opened the meeting for questions.

Representative Insko was recognized. She noted JJTC is doing a great job and inquired as to what team picks up the child when they no longer need the JJTC continuum of services.

Ms. Long responded that they need to figure out how to partner on this issue and try and find more ways to help children. They also need to work with schools for alternatives to suspending and expelling students.

Representative Insko noted that this is an issue the Commission needs to look into. If children and troubled and still need services, especially mental health services, there needs to be a transition among teams.

Representative Johnson was recognized. She noted that in Committees, Members typically look at big issues and have budgetary restrictions. She asked if it was possible to see where the savings are with JJTC; she would be interested in seeing the numbers because funding is such a hurdle.


Senator Kinnaird was recognized. She requested that in future meetings, all acronyms be explained for the benefit of Commission Members and the public. She also noted that she was startled to find out that 130,000 kids are suspended every year in North Carolina. There is a need to find out why kids are suspended and where they land.

Representative Bordsen thanked the presenters and asked the Commission to submit any questions and written materials they would like the Commission to discuss.

Having no further business, Representative Bordsen adjourned the meeting at 1:00 p.m.

Respectfully submitted,

  
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Representative Bordsen  
Presiding Chair

  
\_\_\_\_\_  
Michelle Hall  
Committee Assistant

# VISITOR REGISTRATION SHEET

Study Comm. on Children & Youth 9-10-08  
 Name of Committee Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME	FIRM OR AGENCY AND ADDRESS
Jane Smith	DHHS
Linda Piper	NC Licensed Child Care Assn (NCLCCA) PO Box 7118 Wilson NC 27895
Kevin Campbell	Smart Kid Child Care NC Licensed Child Care Assn, 14022 Pritchley Lane, Charlotte, NC 28273
Tammy Ramey	Grandchildren/Grandparents Right of NC
Barbara Hammer	GRANDCHILDREN/GRANDPARENTS RIGHTS OF NC P.O. Box 550040 GASTONIA, NC 28055
Betty D. Oates	"
Cathie Feild	NC Assoc. for the Educ. of Yng. Children (NCAEYC) 3733 National Dr, Suite 115 Raleigh, NC 27612
Dempsey Benton	Secretary, NC Dept of Health & Human Services
Charisse Johnson	Section Chief Child Welfare DHHS - DSS
Chris Minard	State Bd of Ed
Jami Fitzgerald	N.C. Family Policy Council

## VISITOR REGISTRATION SHEET

Study Comm. on Children & Youth  
Name of Committee

9-10-08  
Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME	FIRM OR AGENCY AND ADDRESS
Caszy Wyant	Hunt Institute
Martin Phares	NC DJJDP
Collette Meador	The North Carolina Partnership for Ch.
Vivian Muzyk	The North Carolina Partnership for Children, Inc.
Anna Ward	The North Carolina Partnership for Children, Inc.
John Cox	Juvenile Defense Attorney
Caroline Lee	Wake County Human Services
Tammy Ramsey	GGRNC Gaston County
Linda Foxworth	Kidscope, CHTOP Orange: Chatham Co.s
Alexandra Morris	Kidscope, CHTOP Orange: Chatham Co.s
Brandy Bynum	Action for Children NC



## VISITOR REGISTRATION SHEET

Study Comm on Children &amp; youth

Name of Committee

9-10-08

Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Myra Wooten	SOUTHEAST PARTNERSHIP for Children PO Box 1245 Rocky Mount, NC 27802
Patti Lay	Meredith BHS 804 Medical Park Loop, Sylva NC 28779
Brendon Comer	Orange County Partnership for Young Children
Ken Melton	Ken Melton & Assoc. P.O. Box 669
Bobby Boyd	CATAWBA Social Services Newton, N.C. 28608
Anthony Anon	NRCC
John Pruette	DPI / office of School Readiness
Kristen Guillory	DPI / office of School Readiness
Janice Fain	Div. Child Development (DHHS)
Cyndie Bennett	DCD
Deather Gaffler	DCD

VISITOR REGISTRATION SHEET

Study Comm: on children & youth 9-10-08  
Name of Committee Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Iceni Ryan

Division of Public Health

~~McKenley Wooten, Jr.~~ DOA



## **LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

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### **AGENDA**

September 10, 2008  
Room 1027/1128, Legislative Building  
10:00 AM

### **WELCOME AND INTRODUCTION**

Rep. Alice Bordsen, Co-Chair  
Sen. Ellie Kinnaird, Co-Chair

- Cyndie Bennett, Director, Division of Child Development  
John Dornan, Executive Director, Public School Forum of North Carolina
- Henrietta Zalkind, Executive Director, Down East Partnership for Children
- Ann Stalnaker, Director of Curriculum, Hickory City Schools
- Patti Long, System Development Program Coordinator, Meridian Behavioral Health Services, Inc.

### **Committee Discussion**

**Public Hearings**  
September 24  
October 8

# Child Care Facts in North Carolina

July 2008

## Children

Total Number 0-5 in State	743,351
Total Number 0-12 in State	1,609,869
Number in Regulated Child Care	273,593
Number Receiving Subsidized Care	89,888
% of All Children in Care Enrolled in 3-5 Star Care	70%
% Children Receiving Subsidy Enrolled in 3-5 Star Care	77%

## Regulated Arrangements

Child Care Centers	5,043
Family Child Care Homes	3,846

Division of Child Development Overview

State of North Carolina  
Department of Health and Human Services  
Division of Child Development

## Three Star Child Care License



**ABC CHILD CARE CENTER**

123 ANYWHERE ST  
RALEIGH, NC 27777

In each area rated, this facility earned:

Staff Education: 4 out of 7 points

Program Standards: 4 out of 7 points

Quality Point: 1 out of 1 point

☒ Education Option ☐ Programmatic Option  
Total: 9 out of 15 points



Age Range: 0 - 12 years

Capacity: 1st shift: 58; 2nd shift: 0; 3rd shift: 0

Effective Date: July 1, 2007

Restrictions:

Daytime care only

Children in care on ground level only

ID Number: 92999999

Type of Facility: Center

Issued to: CHILD CARE, SUZIE

In accordance with Article 7, Chapter 110 of the North Carolina General Statutes, the above named child care facility is issued a rated license. Licenses vary from an overall rating of one to five stars, based upon their cumulative points in the three categories above.

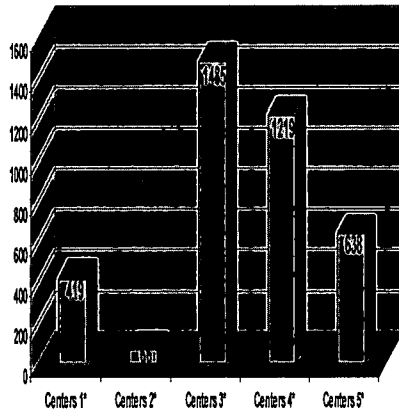
This license must be displayed in a prominent place so it may be available and shown to each child's parent or guardian when the child is enrolled. This license cannot be bought, sold or transferred. It is only valid for the location/address noted above. This permit is the property of the State of North Carolina and must be returned to the Division of Child Development in the event of termination or revocation.

Dempsey Benton, Secretary, Department of Health & Human Services

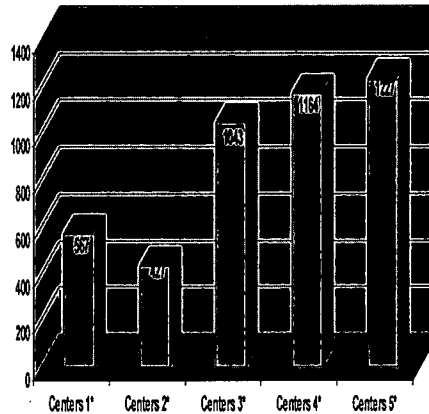
Cynthia L. Bennett, Director, Division of Child Development

## Evaluation of the System

Child Care Center License Type  
June 2005

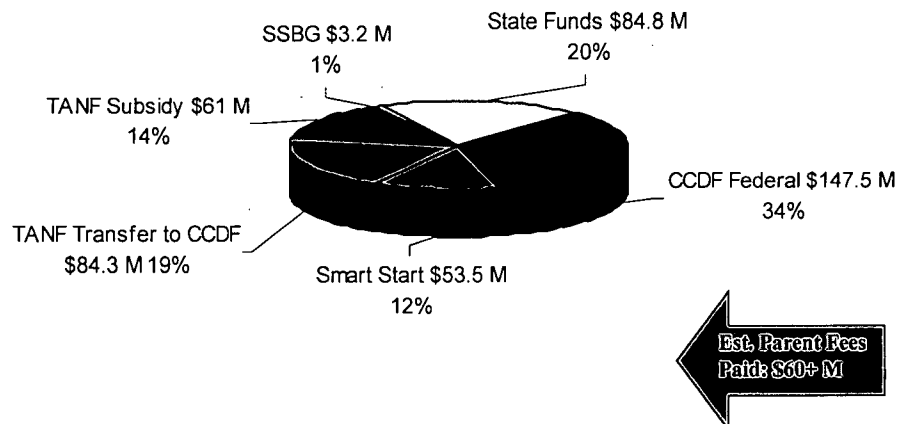


Child Care Center License Type  
June 2008



### SFY 08-09 Child Care Subsidy Services Funding

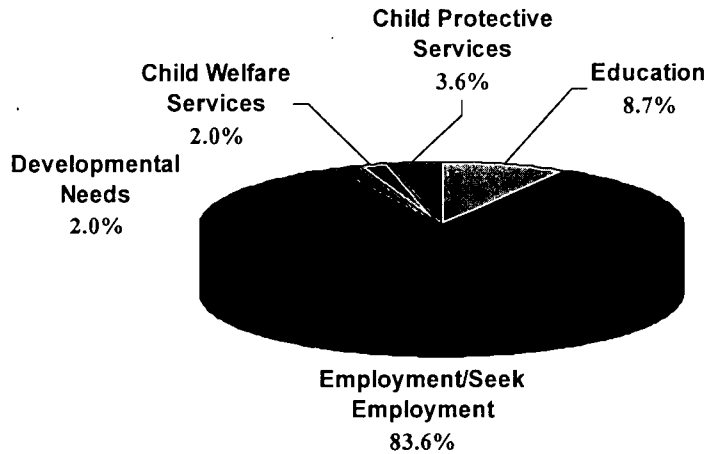
Total Non-Smart Start	\$380.8M
Total Smart Start*	\$ 53.5M
Total Funds	\$434.3M



\* Reflects Smart Start funds estimated as of 07/01/2008. Not all funds have been allocated.



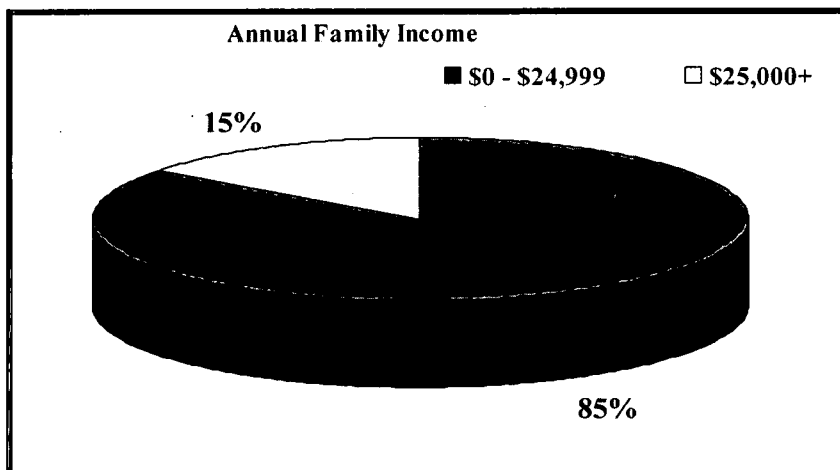
## Reasons Families are Receiving Subsidized Child Care in NC (SFY 07-08 Expenditures)



Division of Child Development Overview



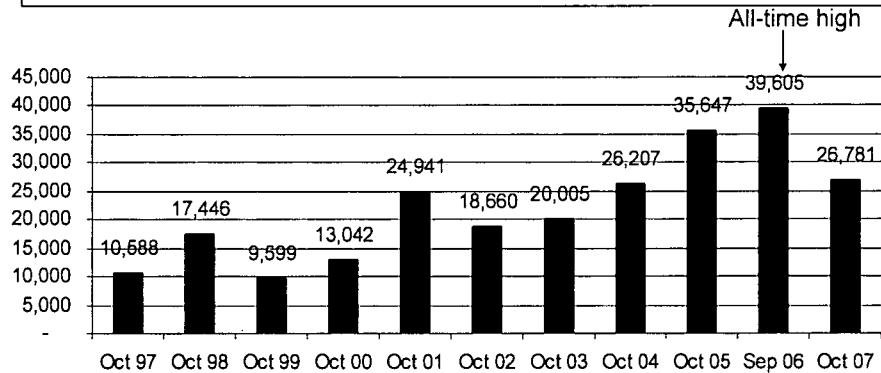
## Recipients of Subsidized Child Care by Family Income



Division of Child Development Overview

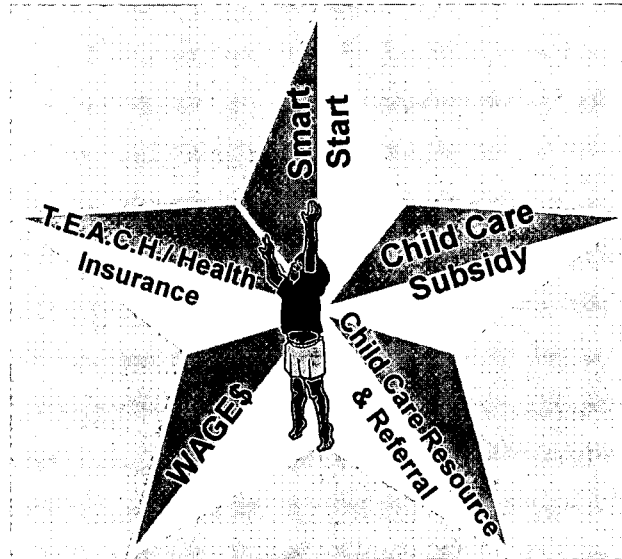


## Growth in the NC Child Care Waiting List 1997- 2007



Division of Child Development Overview

## Supporting the Stars



Division of Child Development Overview

## Down East Partnership for Children

### 0-8 Service Model for Early Care & Education



Hervietta Zakind, Executive Director



## Who Is DEPC?



- Serving Nash & Edgecombe Counties; DEPC started in 1993 with a vision that "all children and their families can reach their full potential when surrounded by a united and supportive community."
- Committed to building "a strong foundation for children and families by advocating and supporting both high quality early care and education and a coordinated system of community resource."
- Facilitate collaborative planning with diverse stakeholders to develop strategies to launch every child as a learner by the end of 3<sup>rd</sup> grade
- Diverse Board, Staff and Volunteers working collaboratively toward overall impact on the healthy growth and development of children in the 5 domains of child development

## Who Is DEPC?



- Developing the communities' financial and human resources to provide:
  - Unique Support for Each Child and Family
  - High Quality Early Care & Education Environments
  - Access to Coordinated Community Resources
- Funding for DEPC primarily comes from Smart Start, More at Four, Child Care Development Block Grant, Family Preservation & Support, State & National Foundations, and Local Support and is used to fund 28 activities within DEPC and through performance-based contracts with 11 other agencies
- Guided by a Strategic Plan that is evaluated through annual program outcomes and long-term (3-5 year) indicators of success
- Prioritizes Services for Children 0-8 and their Families

## State of Our Children



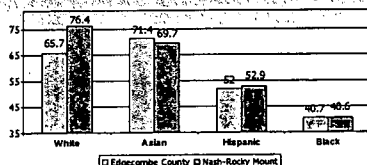
- 17,987 children 0-8
- At-Risk Factors
  - 19% Children 0-8 Living in Poverty
  - 65% of First Time Moms were Medicaid clients
  - 27% Births to Mothers with Less than High School Education
  - 54% Births to Single Parents
  - 16% Births to Teens (13-19)
- 29% of 2-4 year olds are overweight or at-risk for obesity

## End-of-Grade Testing



Children performing at or above grade level on both Math & Reading tests for grades 3-8:

- Edgecombe County: 50.3%
- Nash-Rocky Mount: 55.1%



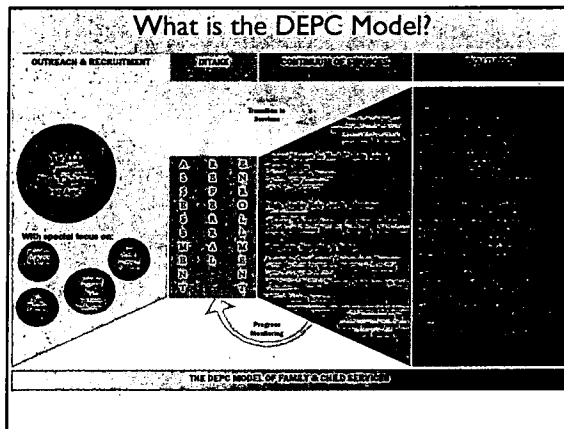
## Why 0-8?




### Research Says...

- 80% of human brain development occurs during the first three years of life
- "By age 8, children have acquired a range of both academic and social competencies that form the foundation for later learning and development."
- Without alignment between early care environments for 05 year olds and the K-3 system, children lose gains made during the early years
- Children being launched as learners by the end of the 3<sup>rd</sup> grade is predictive of their longterm success educationally and economically






### Coordinated Subsidy




- A work in progress since 2002
- Purpose: To maximize subsidy resources for low-income, at-risk families
- Tools:
  - Monthly workgroup with members representing More at Four, Smart Start, Departments of Social Services, Title I Pre-K, Head Start, and other community stakeholders
  - Coordinated recruitment process and timeline
  - Universal early care & education application, which includes release of information across subsidy programs
  - Online database that can calculate eligibility, manage the enrollment process, and create a coordinated waiting list
  - System of Early Childhood Contacts that help educate families about their options and connect them with subsidy & family support services
- Serves as a foundation for bring families into system of services

### The Value of Coordinated Subsidy

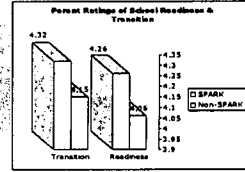


- For Families:
  - More awareness of what's available
  - More families enrolled in the right programs
  - Greater transparency
  - A simpler process
  - Better able to get families what they need
- For Agencies:
  - All focused on the same goal
  - More trust and less competition
  - Improved ability of staff to serve families
  - Quality referrals for families
  - Multiple services connected

### Results




- Children who have accessed this system have been shown to have:
  - Smoother transitions for children
  - Increased Kindergarten readiness
  - Performance at or above grade level on Kindergarten & First Grade assessments

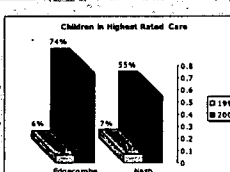


Category	SPARK	Non-SPARK
Transition	4.25	4.15
Readiness	4.30	4.20

### Results


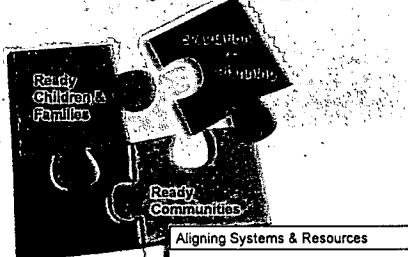


- Expanding access to quality child care annually:
  - 650 child care referrals
  - Child care subsidies for 750-900 children per year
  - Over 1,000 children entered into Coordinated Subsidy database every year to link them with subsidy or other family support resources
- Creating a vehicle for local system's integration and alignment



Category	1993	2007
High-quality care	0.75	0.7
Low-quality care	0.05	0.02

### Putting the Pieces Together

## Ready Children



Research says that children who have participated in high quality early care & education programs have increased school readiness and long-term academic achievement. DEPC supports access to high quality child care by:

- Improving access to and quality of all early care & education opportunities, which includes:
  - Programs implementing early education program standards, including developmentally appropriate practices
  - Educated early childhood professionals
  - Stable and sustainable programs
  - Strong partnerships with parents

## Ready Families



- Bundle services for children and families in a manner that is sufficient enough to make an impact.
- Intake into Family Management System to assess families' needs and connect them to continuum of services, including high quality early care & education
- Coordinate a network of Family Resource Centers
- Provide parent support and education opportunities, including evidence-based programs to increase parenting skills
- Modeling developmentally appropriate early learning experiences through community playgroups
- Family literacy training and activities
- Empowering and educating parents to support their child's development and be involved in their education

## Ready Schools



- Supporting elementary schools in meeting the needs of all children by modeling the 9 pathways of a Ready School:
  - Children succeed in school
  - Welcoming atmosphere
  - Leadership
  - Connections to early care and education and across grades
  - Connections culturally and linguistically with children and families
  - Partners with families
  - Partners with community
  - Uses assessment results
  - Quality assurance

## Ready Schools



- Ready Schools Initiative Includes:
  - Strength-based school assessments and planning, utilizing community-based teams
  - Expert coaching and networking
  - Financial & resource support
  - Staff development
  - Policy alignment
- 11 of 24 elementary schools to-date

## Ready Communities




- Creating systems that support successful transitions:
  - Collaborating with school systems and early care providers to align early care & education 0-8
  - Implementing transition strategies between home, providers, and schools
  - Establishing ongoing parental involvement
  - Defining K-2 services to support children's educational success
  - Establishing a Healthy Kids Collaborative
- Expanding the greater community's ability to understand:
  - Why zero to 8 is a priority in launching children as learners
  - The impact of race, class and culture on the success of young children
  - What human, financial, and political resources are needed to actualize the desired outcomes
  - How to be leaders who successfully participate in community and educational change


## Lessons Learned



- Invest in Deep & Diverse leadership
- Start where there is Common Ground
- Work from a Strategic Plan that includes Organizational Development
- Evaluate Progress & Identify Opportunities to move forward
- Think Long-term
- Be Solution-Oriented and Stay Flexible

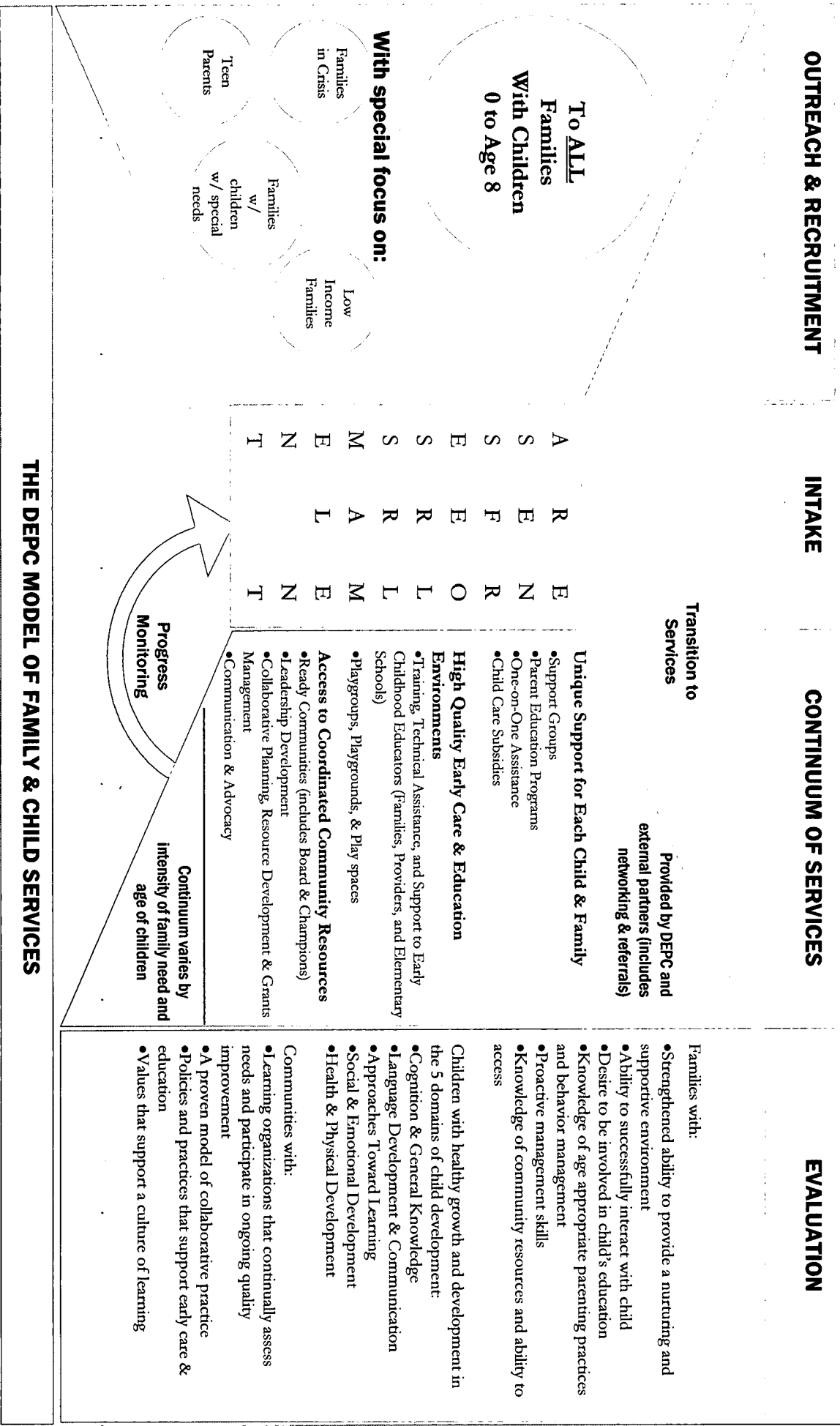


Questions?  
Down East Partnership  
for Children  
215 Lexington Street  
Rocky Mount, NC 27802  
252-985-4300  
[www.depc.org](http://www.depc.org)



The Down East Partnership  
for Children

# What is the DEPC Model?



## Breakthrough Series Collaborative on Improving Educational Continuity and School Stability for Children in Out-of-Home Care

### Why This Work Matters

- ▶ Less than 70 percent of youth in foster care finish high school before leaving care.
- ▶ Children and youth in out-of-home care experience an average of one or two placement changes per year.
- ▶ Students in foster care score 16 to 20 percentile points below others in statewide standardized tests (Washington state study).
- ▶ Only about 3 percent obtain a bachelor's degree within a few years of emancipation.

Source: National Working Group on Foster Care and Education, December 2006

## **Who is involved in the National Casey Project?**

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► **The participating jurisdictions are:**

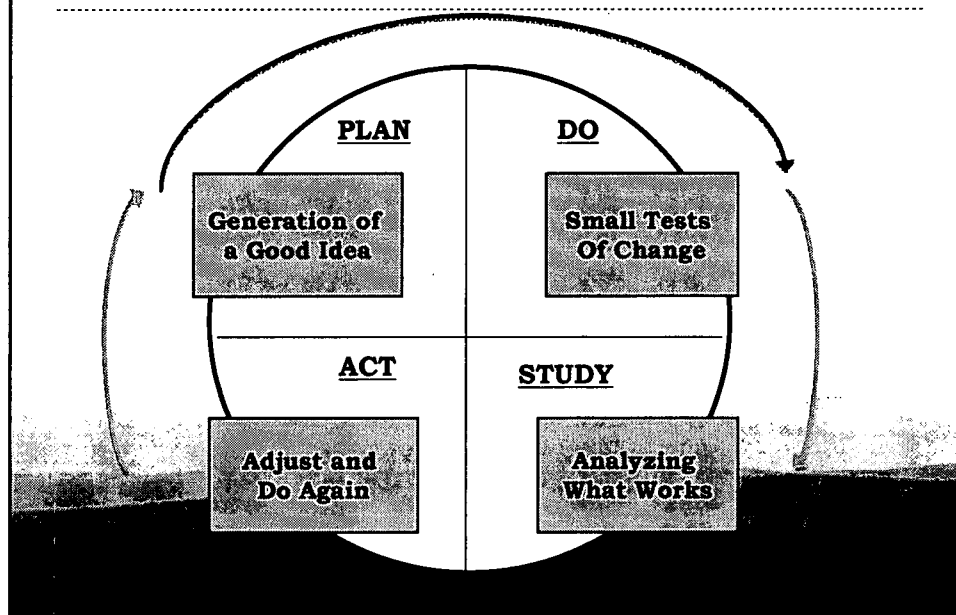
- Catawba County, NC
- District of Columbia
- Fresno County, CA
- Los Angeles County, CA
- Commonwealth of Massachusetts
- Sacramento County, CA
- San Diego County, CA
- Vermont
- Virginia Beach, VA

## **The Unique Approach of a Breakthrough Collaborative**

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- A unique approach to system improvement-Casey Breakthrough Series Collaborative
- Gives a different way to engage all levels of organizations
- Empowers line staff and community partners who are closer to real issues
- Every person can be an innovator and a learner
- The core team must have representation from senior leadership, a youth and a birth parent

## Methodology to Test Change



## Focus of the Educational BSC

1. Develop Measurable Systems of Agency/Interagency Accountability
2. Establish School Stability and Seamless School Transition Procedures
3. Implement Best Practices to Maintain School Continuity and Manage Transitions
4. Empower Youth, Family, and Community Actions
5. Increase Stakeholder Investment through Training and Education
6. Improve Court's Knowledge, Engagement, and Oversight
7. Ensure Equal Access to Quality Education and Educational Support Services
8. Advocate and Influence Policy and Legislation

## What we did...

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- ▶ Established and trained school personnel as foster care designees in every school
- ▶ Shared data between Foster Care and the school systems to identify common children
- ▶ Negotiated transportation enabling students to remain in their school of origin
- ▶ Captured information regarding student achievement in court reports
- ▶ Involved birth parents and youth in analyzing system needs

## What we learned...

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- ▶ Communication- hold principal's meetings at DSS, provide training for school front office workers, establish a protocol for information exchange
- ▶ Relationships- regular meetings, knowing who to call, a child's face and story
- ▶ Joint Planning- transportation across district lines, educational liaison position
- ▶ Transportation-Even when you want to provide transportation, it's difficult without funding
- ▶ Difficult to limit school moves (transportation and placement resources)
- ▶ There is no interface for child specific data between Child Welfare and schools computer systems.
- ▶ Engage bio parents and foster parents in educational issues



## **Measurements**

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- ▶ 92% during the month of May who had a placement change had no change in school
- ▶ 85% (79 of 93) school-aged foster children demonstrated individual progress in at least one academic area of need measured by school records.
- ▶ 40 % of identified child welfare stakeholders have attended a training on school stability as a means of improving educational outcomes
- ▶ Establishment of policy for information exchange
- ▶ New format for court reports that captures educational status (achievement, school of origin, future plans)

## **What Kids in Foster Care Need: Strategic Next Steps**

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- Funding for transportation back to their school of origin even when they move
- Their school information to be accessible (NCWise access by Child Welfare and parents)
- State level commitment to promote partnerships between school systems and Child Welfare
- Sponsor a Breakthrough Collaborative in North Carolina
- Ensure the faces and voices of children are heard...

## Amber's Journey The Educational Experience of a Youth in Foster Care

My name is Amber and I am currently 16 years old and I have been in DSS custody for three years. I attend school at a new early college high school. I have been through a lot since... since I came into DSS custody - being separated from my family and friends and moving placements and most important, moving around to different schools.

School is very important and I need supportive adults in my life to succeed. I expect those adults to help me succeed in school by keeping me in the same school, helping me understand the concept of school, encouraging me to do extra-curricular activities, and treating me like everyone else.

Since I have been in care I have moved several times. For most kids that wouldn't be a good thing because they would get behind or have a difficult time developing a social life; however, in my situation, I was put into schools that didn't challenge me. Almost every school I moved to in DSS custody was at least one year behind my other school. It also turned out that every school that I moved to I knew someone - so I really didn't have trouble fitting in.

I have had many adults in my life that have helped me with school. They all have been very clear about helping me understand the concepts of school, why school is so important and how it will help me. I understand that school will make a big impact on my life and how I succeed as a young adult - so I try my best to make it fun and interesting.

I have never been able to do extra-curricular activities in school until I was placed into custody. I really enjoy doing other things in school. I think when you do extra things like that and get involved with your school you get more excited about school and you put forth your best effort to do good in each class. I am playing volleyball and basketball this year. It's hard to get all my work done on time but I try my hardest to get it done and do it right so I can continue to play my favorite sports. I think extra-curricular activities are a big part of success in school.

Another thing that has helped me be successful is that I look at myself as a normal person. I don't think that being in DSS custody makes me different. I don't hide the fact that I'm in DSS custody and I don't let it bother me. I don't let it keep me from doing the things that others can do because I don't want others to treat me different.

Since I have been in care I haven't had any problems with school. I have been working my way up the ladder of success. I am currently attending the new Challenger Early College High School (affiliated with Catawba Valley Community College) and I wouldn't have been able to do it without the supporters in my life now. I am glad they have tried to help me stay in the same school, helped me understand the concepts of school, and encourage me to do extra-curricular activities. I have had a wonderful experience in school and I hope that it will continue.

- Amber attended 9 schools prior to coming into care the summer before 8<sup>th</sup> grade.
- She attended 4 more schools during 8<sup>th</sup> and 9th grades, while in care.
- Amber now attends Challenger Early College High School and plans to graduate in 2010. She plans to attend college in North Carolina.
- Amber, age 16<sup>1/2</sup>, will be adopted by her current foster family this fall.

09.1008

# JUVENILE JUSTICE TREATMENT CONTINUUM (JJTC)

An Integrated Continuum of Care for  
Court Involved Youth

“Despite the large numbers of youth with mental health needs in the juvenile justice system, the current landscape of service delivery for these youth is often fragmented, inconsistent and operating without the benefit of a clear set of guidelines specifying responsibility for the population.”

Skowyra & Coccozza, 2006

What is JJTC?

JJTC is a comprehensive intervention strategy for court referred youth specifically designed to treat co-occurring mental health and substance abuse disorders.

The JJTC platform of service delivery depends upon is the collaboration and support of the Chief Court Counselor, a behavioral health provider specialized in working with court-involved youth, a restorative justice provider, LME's, and Judges.

## JJTC

- Provides a full continuum of integrated services for Court-involved youth
- Depends upon one dedicated provider specializing in working with the population of court involved youth
- Services meet court supervision requirements and continue only as long as needed
- Addresses the specific needs of youth and families
- Is data driven in provision of services and supervision

JJTC is not a program; rather it is a series of processes that ensure:

- Access for court involved youth to a comprehensive, integrated continuum of care within existing resources and funding streams
- Accurate consistent reports of progress through services
- Outcome-driven, data-driven services that end when the goals of the treatment contract are met
- Interagency collaboration and partnership resulting in increased supervision and accountability



# JJTC Platform Structure

- Referral
- Assessment Report
- Treatment Contract
- Weekly clinical staffing
- Service Components
- Progress Evaluation Report
- Child and Family Team Meetings
- Quarterly Meetings
- Supervisory Meetings

# JJTC Process

- Referral by Court Counselor
- Restorative Justice referral
- Screening/Triage and CSS Orientation
- Assessment
- Court Report
- Treatment Contract
- Begin Services

# Continuum of Services

- Assessment
- Structured Family Therapy
- Multi family group
- Parent education
- Community Support
- Intensive in-home
- Therapeutic foster care

# How JJTC Works

# Funding

All services are funded through existing resources:

- Medicaid
- Health Choice
- Private Insurance
- State funding for uninsured consumers (through contract arrangement with participating LME).

# Steering Committee

- Causes essential collaboration across community agencies, informal support systems, and families.
- Provides oversight to support program implementation
- Represents the entire district to better address the needs of its communities
- Meets only as needed

# Shared Supervision and Increased Accountability

- Supervisors Meetings
- Quarterly meetings
- Child and Family Team Meetings
- Weekly Joint Staffings

# Data Driven Treatment

- Progress reports completed weekly
- Data for reports comes from the JJTC Interagency Shared Information System (ISIS)
- Data is shared at weekly joint staffings to enable monitoring of behaviors and adjustments in treatment according to data
- Data provides reports to court counselors and judges on progress of youth and family



# JJTC Outcomes Evaluation

- Duke University Center for Child and Family Policy is the JJTC research partner
- Utilizing ISIS and other archived information, data on aggregate outcomes will be collected and analyzed
- Results will be published and disseminated
- Efforts to attain Best Practice designation will be based on research results

# The JJTC Difference

# JJTC is

- A platform of specialized services specifically designed for court involved youth with co-occurring mental health and substance abuse disorders.
- Evidence-Based, Data-Driven service provision
- A means to ensure accountability through joint supervision
- Available within existing resources

“JJTC offers me the assurance that each recommendation is offered as a product of collaboration between the court counselor, the parents and all other agencies involved with serving the family.” Chief District Court Judge  
Danny Davis, 30<sup>th</sup> District

# Future Needs

- Case Rate
- Funds for offsetting the cost of bringing provider staff off line for trainings
- Agreement on a state wide model for delivery of services to court involved youth as a special population

# JUVENILE JUSTICE TREATMENT CONTINUUM

Joining with Youth and Families in Equality, Respect, and Belief in the Potential to Change

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JJTC is a comprehensive intervention strategy for court referred youth that originated in the 30<sup>th</sup> Judicial District and represents collaboration between DJJDP-30<sup>th</sup> Judicial District, Project Challenge, Smoky Mountain Center (LME), Duke University-Center for Child and Family Policy and Meridian Behavioral Health Services.

- JJTC is an integrated treatment continuum for court involved youth with co-occurring mental health and substance abuse disorders grounded in best practice methods and operated with shared responsibility between consumers and agencies.
- The JJTC platform assumes a tight partnership with shared responsibilities between the juvenile justice office for the selected judicial system, a designated primary provider of mental/behavioral health services for all court involved youth, and a court-ordered community service/restitution service provider.
- All referred youth and families receive an assessment, meet with Court Counselors and providers to develop a Treatment Contract, and participate in an individualized blend of intervention services.
- Based on acuity, clinical services include individual and family therapy, multi-family group, parent education groups, specialized case management and skill-building through community support service, intensive-in-home and therapeutic foster care. The JJTC platform includes specialized treatment for sexually aggressive youth.
- All services are provided in a strength-based, collaborative model following Systems of Care principals.
- Youth receiving court-ordered community service are provided the opportunity to learn the value of giving back to their communities through a restorative justice model.
- Staff and supervisors from juvenile justice, community service and mental health care providers meet weekly to review individual cases, develop interventions and provide the treatment continuum components.
- Supervisory staff from partner agencies meet monthly to discuss issues and monitor program operation.
- All agency staff involved in JJTC meet together quarterly for joint training and program review.
- Evidence based practice (EBP) such as Motivational Interviewing, Seven Challenges (S/A intervention), and Restorative Justice, are integrated into the platform. Trainings in EBP are shared among all involved staffs to provide a common language and structure for service delivery from all agencies.
- A steering committee in each district made up of representatives from child serving entities and consumers guides the selection of a provider and implementation of the JJTC project.
- Fidelity to the platform, implementation of EBP, supervision of staff, and data driven service delivery are assured through the integrated shared information system (ISIS), an interactive database that tracks activities of staff, child and family teams, and youth as well as specifically tracking the behaviors of youth in their home, school and community to better assess progress and needs.
- Funding for two years from GCC allows JJTC partners to develop, implement, and manage specialized services for court involved youth in four judicial districts, utilizing existing resources except for the cost of training, supervision and conducting research.
- Evaluation of the program is being carried out by the Center for Child and Family Policy, Duke University, with the support of a comprehensive database that tracks outcomes on all enrolled youth.

## Project Goals

- Reduce recidivism
- Increase high school graduation or GED attainment
- Decrease YDC commitments and days in Secure Detention
- Decrease out-of-home placement
- Improve individual and family health (evidenced by decrease in violent and serious disruptive behavior)
- Improve individual life skills (demonstrated by standardized measures)

9/9/2008

**MINUTES**  
**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

September 24, 2008  
Civic Center  
Vance-Granville Community College  
Henderson, NC  
10:00 a.m.

The Legislative Study Commission on Children and Youth met on Wednesday, September 24, 2008 at 10:00 a.m. in the Civic Center at Vance-Granville Community College in Henderson, North Carolina. The following Senate Members were present: Co-Chair Senator Ellie Kinnaird and Senator Doug Berger. The following House Members were present: Co-Chair Representative Alice Bordsen and Representative Linda Johnson. The following Public Members were in attendance: Paula Carden, Dr. Austin Connors, Mia Day Burroughs, Judge Mark Galloway, John Cox, and Dr. Jennifer Lail. Commission Staff Wendy Graf Ray, Brenda Carter, Michele Alishahi, Sara Kamprath, and Lisa Wilks were also in attendance. A visitor registration sheet is attached and made part of these minutes.

The presiding Chair, Representative Bordsen called the hearing to order. She welcomed Commission members and members of the public to the meeting. Representative Bordsen thanked Vance-Granville Community College for hosting and recognized Randy Parker, President of Vance-Granville Community College (VGCC) for remarks. Senator Kinnaird and Senator Berger also offered welcoming remarks to the Commission and the public.

Representative Bordsen gave background on the Commission and the Commission Members introduced themselves. Representative Jim Crawford was recognized as a Member of the Vance County delegation.

Representative Bordsen noted that those who wished to address the Commission would be limited to five minutes and would be called to the microphone in the order by which they signed in. The list of speakers and their remarks (if submitted to the Commission) are included and made part of these minutes.

Representative Bordsen recognized the first speaker, Edith Locke with the Early Childhood Services Association.

Ms. Locke stressed the importance of better compensation for teachers which would lead to higher retention. She stressed the importance of T.E.A.C.H. and early childhood health insurance.

The Chair recognized Anna Mercer-McLean, a childcare director in Chapel Hill. Ms. Mercer-McLean stressed the importance of high-quality early care and education. Centers need support for early childhood development and school readiness. A low ratio of students to teachers and qualified teachers to meet the needs of children in the classroom are key for the success of young children. She urged the continued funding for SmartStart and for rates to be

kept fair for everybody. She noted that over 400 families in Orange County are on the wait list for childcare.

The Chair recognized Donna Stearns a representative from the Vance County Juvenile Crime Prevention Council (JCPC). Ms. Stearns thanks the Commission on behalf of Vance County, for the restoration of \$23 million to the JCPCs across the state and for the additional \$500,000 in funding for JCPCs. She encouraged continued support for JCPCs.

Senator Kinnaird noted that the Legislature would try to do even better for JCPC programs in the upcoming Session.

Cindy Watkins from the Alamance County Partnership for Children was recognized. She thanked the Commission for the additional funding for SmartStart in the budget and noted it has helped expand programs including parenting programs to address challenging behaviors. Her concern for SmartStart is the waiting list. In Alamance County, 400 families are on the waiting list. Due to the economic conditions, it is expected that number will continue to increase. SmartStart needs additional funds to help those families because the children's needs do not wait.

Renee Betancourt, Child Welfare Supervisor for Vance County Department of Social Services was recognized. She noted that 407 families were on the waiting list in Vance County for daycare services. One of the needs for Vance County is the ability to recruit and retain social workers. Vance County is competing with other larger counties that can offer better pay. She asked the Commission to evaluate the effectiveness in the collaborative and whether it works for smaller counties. She noted the restriction that social workers must have a Master's Degree and even if they have 10 years of experience, they are still barred from working in childcare.

Vernon Mason, director of a 5-star center in Vance County was recognized. He noted that one broad issue is that More-at-Four seems to be taking some punch of out subsidy dollars. At Mr. Mason's center, they had to terminate twelve kids due to lack of funding. There is a finite number of dollars; working families are losing childcare. More-at-Four does not require a work element. Another issue Mr. Mason stated is with the Division of Child Development. Transcripts that have been submitted for review are not being reviewed in a timely fashion. This is costing his center \$4,000 per month. The Division is understaffed, but there is still a loss for centers waiting for transcripts to be reviewed.

Linda Piper, Executive Director for NC Childcare Licensure Association (NCCLA) was recognized. She noted the growth in private childcare providers in recent years. 77% of NCCLA members have 100-or-more capacity centers and 6,000 taxpayers are employed in the system. North Carolina is a national leader in terms of standards, but funding has not kept up with the times. Ms. Piper noted the Division of Child Development is not reviewing documents fast enough. Technical assistance is not being provided by the agency, it is being provided by SmartStart. This creates a situation where centers are unsure of where to pose questions; they might be penalized if they ask the wrong question to the wrong person. She noted NCCLA wanted to be partners, not complain, but the organization does see some problems in the current system.



Deryl VonWilliams was recognized. She informed the Commission that she had opened a learning center for at-risk youth who are habitually suspended. She stressed the need for a place for suspended children. She noted the opposition she faced when starting her center at the same time the drop out rate is increasing. Truancy laws must be enforced.

Peggy Grey from Vance County was recognized. She echoed the remarks of Deryl VonWilliams.

Lorrie Crawley was recognized. Ms. Crawley represents a SmartStart provider. She noted that centers are competing with the school system for dollars. There is a great need to educate children ages 0-5. She informed the Commission that Warren County needed subsidy dollars more than ever; families cannot afford childcare. We need to get children ready for school and schools ready for children.

Judy Johnson, Executive Director for Boys and Girls Club for Central North Carolina was recognized. She thanked the Commission for the State's support for Boys and Girls clubs. They serve children ages 6-18 and provide mentoring and after-school programs. The main issue faced by Boys and Girls clubs is staffing.

Ervin Stokes from First-Step Mentorship Program was recognized. He noted that there is nowhere to go for funding if one has a good idea. There is no help for turning an idea into a non-profit organization.

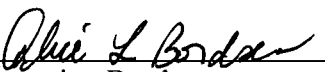
Kevin Leonard, representing YMCAs of North Carolina was recognized. He asked the Commission to evaluate statutes surrounding childcare. YMCA after-school programs serve children ages 6-13. To serve those children, facilities must be licensed programs. In Asheville, 17 new facilities were able to be opened in the past year. One of the problems in the regulations involves jurisdiction over playgrounds. YMCAs are required to have playgrounds inspected, but are not allowed to use them due to the change in jurisdiction after school hours. There is a need to break through the silos.

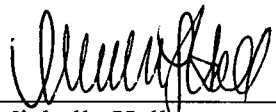
Commission discussion ensued.

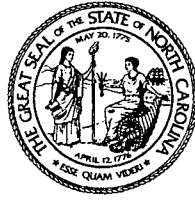
Representative Bordsen thanked the public for attending and speaking out. The remarks were recorded and the Commission had some great areas of concern to address.

Hearing no further business, the Chair adjourned the hearing at 12:00 p.m.

Respectfully submitted,

  
\_\_\_\_\_  
Representative Bordsen  
Presiding Chair

  
\_\_\_\_\_  
Michelle Hall  
Committee Assistant



## **NORTH CAROLINA GENERAL ASSEMBLY**

LEGISLATIVE BUILDING  
RALEIGH NC 27601

September 10, 2008

### **MEMORANDUM**

**TO:** Members, Legislative Study Commission on Children and Youth

**FROM:** Representative Alice Bordsen, Co-Chair  
Senator Ellie Kinnaird, Co-Chair

**SUBJECT:** Public Hearing Notice

The Legislative Study Commission on Children and Youth will hold a public hearing on the following date:

DAY: Wednesday  
DATE: September 24, 2008  
TIME: 10:00 a.m. – 12:00 p.m.  
LOCATION: Civic Center  
Vance-Granville Community College  
200 Community College Road  
Midway between Henderson, NC & Oxford, NC

Directions to Vance-Granville Community College can be found at  
<http://www.vgcc.edu/About-VGCC/campus-directions.cfm>

If you have any questions concerning this meeting, please contact Michelle Hall at 919.733.5820. If you cannot attend, please contact Michelle, [bordsenla@ncleg.net](mailto:bordsenla@ncleg.net).



## *The Legislative Study Commission on Children and Youth*

**For Immediate Release**

September 10, 2008

Contact: Michelle Hall

(919) 733-5820

### **COMMISSION TO HOLD PUBLIC HEARING ON ISSUES INVOLVING CHILDREN IN Vance County, North Carolina**

**Vance-Granville Community College** – The public is invited to address the Legislative Study Commission on Children and Youth during a public hearing on issues involving children in North Carolina. The hearing will be held from **10:00 a.m. until 12:00 p.m. on Wednesday, September 24, 2008**, at the **Civic Center at Vance-Granville Community College**.

The Commission Co-chairs, Representative Alice Bordsen and Senator Ellie Kinnaird, invite parents, family caregivers, agency representatives, service providers, and members of the public with experience related to issues involving children to attend. The Legislative Study Commission on Children and Youth was created in 1997 to study and evaluate the system of delivery of services to children and youth and to make recommendations to improve service delivery to meet present and future needs of the children and youth of this State. The Commission includes: members of the North Carolina House of Representatives, members of the North Carolina Senate; as well as advocates and providers of various services to children and youth in North Carolina.

Each year the Commission will examine a variety of issues and make recommendations to the General Assembly on ways to improve the delivery of services to children and youth in North Carolina. As part of the information gathering process, the Commission members are interested in public input on ways to improve the quality and delivery of services to children and youth in North Carolina. Individuals who wish to address the Commission may sign-up immediately prior to the hearing and are asked to limit comments to three minutes. Speakers are also asked to furnish a written copy of their comments if possible.

For more information on the public hearing contact Representative Bordsen's office at 919-733-5820 or Commission Staff: Wendy Graf Ray, Brenda Carter, or Sara Kamprath, at 919-733-2578; John Poteat or Michele Alishahi, at 919-733-4910; or Lisa Wilks, at 919-733-6660.

Directions to Vance-Granville Community College Civic Center can be found at:  
<http://www.vgcc.edu/About-VGCC/campus-directions.cfm>.

###

# VISITOR REGISTRATION SHEET

Legislative Study Commission on Children and Youth      09/24/08  
 Name of Committee      Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME	FIRM OR AGENCY AND ADDRESS
Angela Crawford	Granville Co. Dept. of Social Serv. P.O. Box 966 Cary, NC 27565
Manuela Inman	CCR & R of FGV 125 Charles Rollins Rd Henderson NC 27536
Kimiko Knight-Somerville	CCR & R of FGV P.O. Box 142; 125 Charles Rollins Rd Henderson, NC 27536
Katrina Boone	CCR & R of FGV PO Box 142 125 Charles Rollins Rd Henderson NC 27536
Katherine Anderson	FGV Partnership for children PO Box 142 / 125 Charles Rollins Rd. Henderson NC 27536
Annie Perry	FGV Partnership for children P.O. Box 142 / 125 Charles Rollins Rd Henderson, NC 27536
Paula Richardson	FGV Partnership for Children PO Box 142 / 125 Charles Rollins Rd Henderson, NC 27536
Brenda Yancey	FGV Partnership for children P.O. Box 142 Henderson NC 27536
Denise McDaniels	FGV Partnership for Children PO Box 142 Henderson NC 27536
Nanessa Henderson	FGV Partnership for Children P.O. Box 142 Henderson, NC 27536
Sherree Edgerton	CCR & R of FGV P.O. Box 142, 125 Charles Rollins Rd Henderson, NC 27536

# VISITOR REGISTRATION SHEET

Leg. Study Comm. on Children & Youth      9-24-08  
Name of Committee      Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Deborah Chilton	The Sunshine House
Jeanne Arnwine	The Sunshine House
Cindy Watkins	Alamance Partnership for Children
Vivian Muzyk	The North Carolina Partnership for Children, Inc.
Mallory Hatcher	McGuire Woods Consulting LLC
ANN WARD	The North Carolina Partnership for Children, Inc.
Collette Meador	The North Carolina Partnership for Children, Inc.
Debbie Gupston	Franklin County Health Department
Mary Ragland	FGV Partnership for Children
Kimberly Tisdale	FGV Partnership for Children

# VISITOR REGISTRATION SHEET

Leg. Study Comm. on Children & Youth  
Name of Committee

Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

	1611 Meadowood Lane, Mebane, NC 27302
LORRAINE GARRISON	CHILDCARE NETWORK
Vernon H. Mason Jr	2305 Madison Dr. Wilson NC 27893
	WEC SCHOOL CDC's
Linda Piper	NC Licensed Child Care Association PO Box 7118 Wilson NC 27895
Linda Rudolph	Safe Space Inc P.O. Box 240, Louisburg, NC 27549
Mildred Hightower-Boyd	P.O. Box 241 FGV Partnership for Children Henderson NC
Sharon Bryant	FGV Partnership for Children PO Box 241, Henderson, NC 27536
Luther Curtis	NGCC, Friends of Youth INTERNSHIP PROGRAM
Carolyn M Payton	FGV Partnership for Children P.O. Box 241 Henderson NC 27536
Janita Yancy	FGV Partnership for Children P.O. Box 241 Henderson NC 27536
Larry D. Murray	Alternative Family Svcs. 120 E. Belle St., Henderson, NC 27536
Lillian M Matthews	NC-ADD Tammy Lynn Center for Dev Dis 739 Chappell Dr Raleigh, NC 27606

# VISITOR REGISTRATION SHEET

Legislative Study Comm. on Children and Youth      09/29/08  
 Name of Committee      Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Latomya Carter	Sugar n Spice Preschool Henderson, NC 825 Horner St. P.O. Box 965 27536
Jaye M. Stewardson	KidsWorld, Inc. & KidsWorld Too, Inc 420 Red Oak Rd. ? 150 Burwell Ave Henderson NC 27536
Teressa Woodard	KidsWorld, Inc & KidsWorld Too, Inc 420 Red Oak Rd 150 Burwell Ave Henderson 27536
Nina Rogers	FGV Partnership for Children Smart Start 125 Charles Rollins Rd Henderson, NC 27537
Lora Durham	FGV Partnership for Children P.O. Box 142 / 125 Charles Rollins Rd Henderson NC 27537
Donna Stearns	Henderson-Vance Recreation Youth Serv (JCPC funded programs) 3005. Garnett St., Henderson, N.C. 27536
Stokes, ERVIN	1ST STEP MENTORING PROGRAM
Kay Fields	Vance Co OSS, Director Rain Creek Rd, Henderson
Lori Hawkins	NC Oral Health Section Serving Franklin, Granville & Vance Granville Co. Health Dept. Oxford, NC
Magda Baligh	Halifax-warren Smart Start Partnership PO Box 339 for children Roanoke Rapids NC 27870

# VISITOR REGISTRATION SHEET

Legislative Study Commission on Children & Youth 09/24/08  
 Name of Committee Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Sheril Scott	Little Troupers Child Development Center 44 Allen Rd Henderson 27537
Margarette Jeffers	
Deryl von Williams	Vance County Learning Center 319 S. Garnett St. NC
Deborah C Nelson	NC Division of PH Raleigh NC 27612
Ruth Alexander	Learn and Grow Child Care
Christine Hawkins	Learn and Grow Childcare
Trishana Jones	Youth Advocacy & Involvement Office
Martie Phann	NC DJJDP
Angela Dunlap	Warren Co. Manager's Office 252-257-3115
Keri Leavelle	YMCA of North Carolina



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Name of Committee

09/24/08  
Date

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NAME

FIRM OR AGENCY AND ADDRESS

Lynette Fuller

Five County MHA  
134 S. Garrett Street  
Henderson 27536

Garry Dackie

FGV Partnership for Children

Judy B. Johnson

Boys & Girls Clubs of North Central North Carolina  
P.O. Box 5094  
Henderson, NC 27534

April Scott

Boys & Girls Clubs of North Central NC.  
PO Box 5094  
Henderson, NC 27536

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Leg. Study Comm. on Children & Youth 9-24-08  
Name of Committee Date

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NAME

FIRM OR AGENCY AND ADDRESS

Wynona Thomas

Guardian ad Litem Program  
Po Box 722 Henderson NC 27536

Larry C. Taylor

Vance County Schools

Elaine Charis Young

Dept of Correction  
Concern Parent

DEMETREA TOWNS

PLEASE CHECK ISSUES YOU PLAN TO ADDRESS. If "OTHER," PLEASE SPECIFY.

Name	Phone	Email Address	Written Notes?	General Health	Juvenile Justice	Mental Health	Education	Child Protection	Funding	Other
1. EDITH LOCKE	919 967-3272	edith@childcareseries.org	✓				✓		✓	
2. Anna Mercer-McLean	919 619-9187	csix@bellsouth.net	✓				✓		✓	
3. Donna Stearns	(252) 431-6092	dstearns@c.c.henderson.nc.k5	✓						✓	
4. Cindy Watkins	(336) 513-0063	cwatkinse@advancechildren.org					✓		✓	✓
5. Renee Betancourt	252 436-0406	Rene.Betancourt@ncmail.net	✓					✓		
6. Vernon Mason Sr	252 237 5599	weschool@vol.com					✓		✓	✓
7. Linda Piper	(252) 296-5717	pipelinda@nc.vr.com					✓			✓
8. Deryl VonWilliams	438 6900	vonwilliams@empiremail.com					✓			
9. Peggy Gray	430- 6037				✓				✓	
10. Lorrie Crawley	251-4124	Kitarajanay@yaho								

PLEASE CHECK ISSUES YOU PLAN TO ADDRESS. IF "OTHER," PLEASE SPECIFY.

Name	Phone	Email Address	Written Notes?	General Health	Juvenile Justice	Mental Health	Education	Child Protection	Funding	Other
11/ ✓ Judy B. Johnson	252-430-1874	judybjohnson@bgcnc.org embargo@mail.com	NO				✓			
12 Stokes, Devin	919 728 4816	devin.stokes@us.army.mil	NO							

**PLEASE CHECK ISSUES YOU PLAN TO ADDRESS. IF "OTHER," PLEASE SPECIFY.**

[illegible]



***Henderson - Vance County  
Recreation & Parks Department  
Youth Services Division  
300 South Garnett Street  
Henderson, NC***



Donna Stearns  
Youth Services Supervisor/Finance Manager

Phone: (252) 431-6092  
dstearns@ci.henderson

**T H A N K S**

On behalf of the Vance County Juvenile Crime Prevention Council, we would like to thank Representative Alice Bordsen, Senator Ellie Kinnaird, along with their House and Senate delegations, including our local Representatives Jim Crawford, Michael Wray and Senator Doug Berger for the restoration of approximately \$23 million and recurring funds status for Juvenile Crime Prevention Councils Programs and also for the additional \$500,000 allocated to be distributed to JCPCs. Again we relay a big thanks.

Donna Stearns, Vance Juvenile Crime Prevention Council Secretary  
Representative for JCPC funded Programs through Youth Services

***Phone: (252) 431-6090***

***Fax: (252) 492-1229***

09.24.08

# Investing in Early Childhood Teachers Makes a Difference for Children and Communities



## Key Facts about North Carolina Early Childhood Teachers:

- More than 99% are women
- Earnings average around \$16,640 per year
- About 29% do not have health insurance
- More than 49% are women of color
- More than 73% have children of their own



Child Care Services Association®  
(919) 967-3272  
[www.childcareservices.org](http://www.childcareservices.org)

## Investments for Fiscal Year 2007/2008:

### T.E.A.C.H. EARLY CHILDHOOD® PROJECT

- Comprehensive college scholarships, most at community colleges where the money returns to the general fund
- Average annual cost of \$912 per participant
- More than 5,228 different individuals participated in 99 of NC's 100 counties
- Funded by state, federal and private dollars

### CHILD CARE WAGES® SALARY SUPPLEMENTS

- Graduated annual supplements linked to educational achievement
- Average six-month supplement of \$710 per participant
- More than 8,700 early childhood providers paid from 63 NC counties
- Funded by Smart Start and federal child care block grant

### T.E.A.C.H. EARLY CHILDHOOD® HEALTH INSURANCE

- Partial health insurance reimbursement linked to educational commitment
- Average monthly reimbursement of \$75.36, which is approximately 1/3 of the cost
- More than 3,300 participants from 73 NC counties
- Funded by federal child care block grant

## The Benefits of Investing:

### FOR CHILDREN

- Increased teacher education leads to better child outcomes such as increased language, math and social skills
- Higher star ratings indicate higher quality child care
- Higher quality care is linked to better child outcomes
- Statewide turnover is reduced from 42% to 24%
- Lower turnover leads to better child outcomes
- Increased education of teachers who are mothers leads to increased educational success of their own children
- More children statewide will receive a higher-quality early education

### FOR THE COMMUNITY

- Children who are better prepared for school will have greater school success
- The child care workforce is better educated and more stable
- Child care businesses are more economically stable
- Employee productivity is increased because of stable, high-quality care
- Community college/university early childhood departments are strengthened to serve more teachers

## **T.E.A.C.H. Early Childhood® North Carolina**

Susan Tuttle, director of the Pritchard Child Development Center in Mecklenburg County, expressed her appreciation for the opportunity to participate in the T.E.A.C.H. Early Childhood® Project. She has sponsored staff on T.E.A.C.H. scholarships since 1996, which has allowed teachers to work toward degrees in early childhood education. She is currently sponsoring nine teachers and explains, "Our staff would have truly struggled to attend college without the T.E.A.C.H. program. The financial challenge would have been too great for most early childhood teachers to carry. Knowing that they receive assistance with tuition, fees, books, and even travel expenses has made all the difference. The assistance with release time to provide substitutes in the classrooms has allowed the center to support the teachers in their efforts." The center earned a five star enhanced license in 2007 and attributes qualifying for this rating to the support of T.E.A.C.H., which allowed staff to increase their college education.

—Susan Tuttle, director of a child care center in Charlotte, North Carolina (Mecklenburg County)

## **T.E.A.C.H. Early Childhood® Health Insurance Program**

Island Grove Day Care has been on the Health Insurance Program for just over two years. Participating has allowed their center to do more for their staff. "We have been able to add life insurance, disability, and retirement to the benefit package we offer our staff. Before TEACH, we could barely afford the insurance." They have seen the double benefit of support for school as well as support for insurance. "New staff members have been encouraged to enroll in school, and we have two teachers who have completed their BS degrees in Early Childhood. One teacher we were able to retain as our More at Four teacher, and our teacher assistant for More at Four is completing her associate degree soon!" Overall, their experience has been extremely positive. "Self-esteem among these ladies is higher and they see a brighter future for themselves. What more can we say except this is a marvelous program?"

—Lanette Locklear, director of a child care center in Robeson County

## **Child Care WAGE\$® Project**

"WAGE\$ helps participants pursuing their education. It makes us want to stay at our jobs. Everybody is talking about the WAGE\$ program and how it keeps them positive because it shows that someone cares for the children in our community. They care enough to say thank you and that they appreciate what you are doing for the children in our community."

—Teacher, Pender County

"Our center recently transitioned from the three-component to the two-component NC licensing system. Since the emphasis is on staff education in the two component system, we are delighted that the WAGE\$ Project is available to us. We were able to maintain our points in education!"

—Director, Halifax County

"It is important because the men and women teaching at the early childhood level do not receive the salaries they deserve. Most child care centers do not provide medical benefits and have little or no sick leave pay. So the monies we receive from WAGE\$ helps the teachers try to stay afloat financially. I really need the funds."

—Teacher, Wilson County



From: Anna Mercer-McLean, Director  
Community School for People under Six  
400 Caldwell Street Ext.  
Chapel Hill, NC 27516  
(919) 929-1543

Residence:  
809 Hurley Road  
Durham, NC 27704  
(919) 683-1966

Thank you for the opportunity to speak with you today about the issues of children and their families; and those who support our children.

I have been a child care director in Orange County for almost 17 years serving ages 2 months to 5 year olds. It has been a focus of my program to provide high quality early childhood education for children, support their families and our 17 teachers. It is important that we have a system in North Carolina that supports each child's development and enhances school readiness opportunities. The North Carolina system should be one in which state and local agencies work together to assure that the early childhood issues and funding needs are resolved and supported in a way that supports all children. There should not be major differences on quality versus quantity. Our 5 star, NAEYC accredited program has low staff/child ratios in all classrooms with 75% degreed teachers. As an example, we currently have 11 children (full class is 16) enrolled in our 4/5- More at Four Program with 54% of those enrolled being Hispanic/Latino. We have 3 teachers working with this group to support the needs of all the children with a special focus on the language support needs. We want to assure that our children achieve a high quality education and are ready for school; however, if I served a high number of children with limited staff, I don't feel the children would achieve the same success as they currently do.

I fully request that you support the NC Child Care Coalition Position. It is important that we fully fund Smart Start, increase child care subsidy for working families, improve the child care reimbursement rate, and expand the T.E.A.C.H. Early Childhood Project, Improve publicly funded Pre-Kindergarten Programs, and Support Infant and Toddler Early Childhood Development. We have over 400 families on our waiting list in Orange County, and I see the need for help from families struggling every day. They cannot go to work because they don't have child care; and they cannot fully support their families without working. Centers cannot fully meet the needs of high quality without funding to support the true cost of care. We need fair market rates. Teachers on already low salaries in counties throughout the state cannot pay for higher education without support for higher education.

We need to step up to the plate and assure that children, families, teachers and those who work with children in the early care and education field are supported.

Thank you for your support.

**Legislative Commission for Children and Youth**

**Good morning to members of the legislative study commission on children and youth, early childhood leaders and advocates, my name is Edith Locke. I am from Child Care Services Association, a nonprofit organization working to improve the access to quality child care for all of North Carolina's young children. Thank you for the opportunity to talk with you today.**

**Research tells us that one of the most critical components to quality is the education, compensation and retention of the early childhood workforce. Yet the reality is that many of North Carolina's young children still have teachers who do not even have a two-year degree in early childhood education. And many of these teachers are earning poverty level wages, struggling to take care of their own children. About one-third of these teachers do not have health insurance from any source. Yet they love their work, want to learn more about how to be better teachers and hope for better salaries and benefits.**

**In North Carolina, thanks to a direct appropriation from the NC General Assembly, state Smart Start and More at Four funds and the federal Child Care and Development Block Grant, we lead the nation in efforts to provide strategic resources to the early childhood workforce to improve its education, compensation and retention.**

**Last year T.E.A.C.H. Early Childhood® scholarships were awarded to 5,200 North Carolina early childhood educators who completed over**

**33,000 credit hours at one of our 58 community colleges or 20 universities with early childhood programs. On average, T.E.A.C.H scholarship recipients working on an associate degree completed 13-14 credit hours, experienced a 10% or more increase in earnings and, despite all of the challenges facing them, only left their workplaces at a rate of 9%.**

**The T.E.A.C.H. Early Childhood® Health Insurance program, using federal block grant funds helped 370 child care programs afford to provide health insurance for their staff. In exchange those programs had to support the continuing professional development of their staff. Linking workforce incentives with continuing professional development has been the key to these initiatives.**

**The support of Smart Start has enabled counties across the state to offer education-based salary supplements through the Child Care WAGES® Project to teachers, directors and home providers to help make it possible for qualified professionals to work with young children. These supplements encourage them to stay in their early childhood programs rather than seeking higher paying employment and also encourages them to pursue additional education, often with the assistance of a TEACH scholarship. Smart Start Partnerships can elect to fund WAGES supplements and the Division of Child Development, with Federal dollars, pays for program administration. In 2007/2008, more than 8,700 professionals received WAGES supplements tied to their levels of education for providing consistency in their programs. These educators worked in more than 3,000 different child care programs and**

**thus helped these programs sustain their stars or reach higher star ratings. Only 16% of the WAGES population left their child care programs and these individuals have education and thus have more job opportunities available to them. Nearly one third of the participants verified their pursuit of additional coursework.**

**More education, higher retention and better compensation. The outcomes these three programs have achieved would not have been possible without the continued support from North Carolina's General Assembly. You understand that investing in the state's early childhood workforce does make a difference for young children and their families statewide.**

**Thank you for your time and for your continued interest and support.**

**MINUTES**  
**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

October 8, 2008  
Ferguson Auditorium  
Asheville-Buncombe Technical Community College  
Asheville, NC  
10:00 a.m.

The Legislative Study Commission on Children and Youth met on Wednesday, October 8, 2008 at 10:00 a.m. in the Ferguson Auditorium at Asheville-Buncombe Technical Community College in Asheville, North Carolina. The following Senate Members were present: Co-Chair Senator Ellie Kinnaird. The following House Members were present: Co-Chair Representative Alice Bordsen and Vice-Chair Representative Earle. The following Public Members were in attendance: Paula Carden, Dr. Austin Connors, Judge Mark Galloway, John Cox, and Johnnie Ray Farmer. Commission Staff Wendy Graf Ray, Brenda Carter, Sara Kamprath, and Lisa Wilks were also in attendance. A visitor registration sheet is attached and made part of these minutes.

The presiding Chair, Representative Bordsen called the hearing to order. She welcomed Commission members and members of the public to the meeting. Representative Bordsen thanked Asheville-Buncombe Technical Community College for hosting and thanked President Betty Young for helping to make the hearing possible. Representative Bordsen recognized Representative Susan Fisher and thanked her for attending.

Representative Bordsen gave background on the Commission and the Commission Members and staff introduced themselves.

Representative Bordsen noted that those who wished to address the Commission would be limited to three minutes and would be called to the microphone in the order by which they signed in. The list of speakers and their remarks (if submitted to the Commission) are included and made part of these minutes.

Representative Bordsen recognized the first speaker, Kevin Campbell, operator of three childcare centers.

Mr. Campbell noted three issues of importance. The rated license for childcare centers; the system is evolving, but still needs more work. Mr. Campbell also expressed a desire for increased customer service from the Division of Child Development; there are delays in paperwork in the Division and an increase in customer service would benefit providers. He also asked for a review of the way abuse and neglect cases are handled and stressed the importance of reducing the childcare subsidy waiting list and fully funding of More at Four.

Alison Jordan, Executive Director of Children First was recognized. She thanked the Commission for providing funds for Juvenile Crime Prevention Councils. She stressed the need for more funds. She also noted there needed to be a re-evaluation of state law: 16 and 17 year

olds need to receive developmentally appropriate services. Raising the age of juvenile jurisdiction from 16 to 18 is important. The juvenile system is where 16 and 17 year olds belong.

Pat Wallenborne, Board Member of Children First and concerned parent was recognized. She related to the Commission her experience as a single parent, working as a nurse, with no sick days. She noted that 42% of North Carolina works have no sick days. She stressed the importance of allowing workers the benefit of sick days when their children are in need of care.

Jenny Eblen was recognized. Ms. Eblen expressed her belief that the General Assembly does not allocated enough funds for child care subsidy. She noted the market rate formula is too complicated and not equitable. The formula does not take into account the cost of living. Her three most important issues: North Carolina must continue to promote high quality care and increase funds, lobby Congress to increase federal funds, and restructure the market rate forumula to make it more transparent and equitable.

Jackie Pennett, Executive Director of Mountain Area Child and Family Center was recognized. She stressed that more public money must be dedicated to the child care subsidy system. The market rate forumula is broken: Buncombe County salaries are the lowest in the state while the cost-of-living is the highest. She asked the Commission to demand the subsidy form be based on the cost of services.

Representative Earle was recognized. She noted that the Department of Health and Human Services put \$9 million into Child Care Subsidy during the Short Session. She urged the public to be loud advocates during the Long Session. Because the DHHS budget is so large, in difficult budget times, it is always victim to massive cuts. Without community voices, those cuts are hard to stave off. She asked that advocates make their voices heard at the General Assembly.

Ron Bradford of Smart Start Buncombe County was recognized. He offered perspective on Buncombe County. Early childhood education takes many groups working together instead of in separate parts. Without program funding of all of the childcare players (More at Four, Smart State, child care subsidy, etc.), the system will not work. If any piece of funding goes away, the work of others is made very difficult.

Alan Kirkpatrick, concerned parent, was recognized. He urged the Commission to study the subsidy formula and noted that the subsidy rate does not cover the full cost of child care.

Michael of Asheville City Schools noted that the AVID program (Advancement Via Individual Determination) is giving great success in Asheville and the school system would benefit if it had the money to expand the program.

Jennifer Simpson, Executive Director of Mitchell Yancy Partnership for Children was recognized. She noted the importance of system of care for children and expressed her concern over the child care subsidy waiting list. She echoed the suggestion from others for the Commission to revisit the subsidy funding formula.

Carolyn Rodier was recognized. She also suggested the current methodology for market rates be revised.

Sheila Hoyle, child care provider, was recognized. She noted that the teachers are the most important people in the classroom and thanked the Commission for the T.E.A.C.H. funds. She noted that the workforce and turnover is a problem and asked the Commission to continue to support TEACH. She noted that early childhood education is fragile and all programs work together and are necessary; she asked that funding not be cut.

Lori Jones from the Child Care Research and Referral Council was recognized. She noted the NC School Age Quality Improvement Project the Council had been working on. She wants North Carolina to be a leader for school age children. She noted that only 28% of population eligible for subsidy for school age children was actually served. This is a huge problem.

Lanier DeGrella was recognized. He noted that research has shown that age 0-3 are formative years. Child care has a profound impact during this time. His recommendation would be to please continue to fund programs such as his called "Who's Caring for Our Babies Now?"

Jerry Rice was recognized. He asked the Commission to request more latitude from the Governor and demand that the Governor listen to the Commission more. He asked the Commission to advocate for special needs children. He noted that outlying counties aren't getting anything. Money is not the answer, we need to get benefit out of the money we already have. Stop putting money into administration, this money is not getting the job done. Parents' needs need to be interpreted into the law.

Tami Greenwell was recognized. She noted the importance of Health Centers, specifically school-based health centers. Healthy students learn better.

Paul Tax, Executive Director of ARP (Addiction Recovery Program) Phoenix, was recognized. The Phoenix program is a private nonprofit. He noted that child abuse and substance abuse are increasing. He noted that a holistic approach needs to be taken in dealing with children; treat the family together. The return investing in prevention is proven; every dollar spent saves ten dollars. He also noted that the amount of funding for Mental Health has not changed; the only funds for prevention are federal. This is a huge problem. The State needs to step up efforts.

Holly Jones, Executive Director of YWCA Asheville, was recognized. At the childcare center, 80% are on subsidy. The market rate system is broken. She noted her sympathy to the plight for legislators in the budget process, but urged Members to look at childcare as an economic issue. Job retention and job recruitment are vital. In hard budget times, she noted there are some things that could be tightened up. More efficiency in programs could be brought through less paperwork. Tight budgets offer an opportunity to improve efficiency.

Theresa Morgan, Executive Director of CARE Haywood County Child Advocacy Center, was recognized. She thanked the Commission for direct funding, which is funding for

prevention. She noted that multidisciplinary teams ensure appropriate response to abusive situations; her group helps families get through these situations. Prevention works: Parents as Teachers program helps educate parents. Parent education and childcare are vital.

Linda Pase from the Leadership Team at Mission Children's Hospital, was recognized. She thanked the Commission for funding Kids' Care and Health Choice and Juvenile Crime Prevention Councils. She urged the Commission to look at increasing the Earned Income Tax Credit to 5%. She noted several health issues; despite progress, it remains difficult to access mental health services especially psychiatry. There needs to be better reimbursement. Cigarette tax should be increased. Comprehensive sex education would make a huge difference. Make the minimum wage a living wage. Child poverty is a common denominator for many continuing problems. She asked the Commission to work towards a single goal: ensure each child grows up in an economically sound family.

Senator Kinnaird was recognized. She urged the public to help Legislators get important issues and legislation passed.

Patti Long and Gordon Keith of Project Challenge were recognized. Mr. Keith spoke of the Juvenile Justice Treatment Continuum. He noted the conversation with regards to 16-18 year olds and urged the "funds to follow the children." He noted that every JCPC is strapped financially and there is a pot of money, Section 69 money for "at-risk" funds, that goes to education. The amount is double that of funds going to JCPCs. He stressed the need for a conversation between the Department of Public Instruction and the Department of Juvenile Justice and Delinquency Prevention to discuss how the funds are being used. He asked the Commission to look at the formula for disbursement of JCPC funding. He noted that in Mental Health reform, there was a way found to make a continuum; this can be done with existing resources.

Ellen Clark, Executive Director for Western Carolinians for Justice, was recognized. She urged the Commission to raise the age of juvenile jurisdiction to 18. Treatment works; incarceration does not get good results for our young people. She urged the Commission to keep young women out of the adult system and in community based programs; this will give women better prospects for life. There are supporters of this idea in the adult correctional community.

Elisha Freeman of the United Agenda for Children was recognized. She outlined priorities for the Commission: provide school nurses at nationally recommended levels; increase safe, affordable housing; and increase access to preschool education.

Shay Henderson of Smart Start Henderson County was recognized. He urged the Commission to increase preschool education access and slots. There are over 300 children on the waiting list in Henderson County. Workers cannot find childcare; infant and toddler care is scarce. He urged the Commission to consider childcare an economic issue.

Kate Pet of Asheville City Schools Foundation was recognized. She noted that Asheville City Schools had seen an increase in youth violence in the community. She started a listening project to find out how to engage teens; this will help design programs to steer youth from crime.



They will need greater resources to implement effective programs. She informed the Commission she is looking forward to seeing the recommendations.


Jennifer Sphfenster of YMCA programs was recognized. She noted that license and regulation as related to the school system support early childhood care but not school-aged child care. Education requirements do not always match up to the type of staff people that YMCA is looking for in their after-school programs. YMCA runs eighteen after-school programs; it is difficult to find staff as some of the applicants' backgrounds are not recognized by state regulations.

Stephanie Fanjul, Executive Director of Smart Start, was recognized. She informed the Commission that she had heard of the confusion over Smart Start and More-at-Four. She noted that each county decides how funds are allocated.

Representative Bordsen thanked the public for attending and speaking out. Hearing no further business, the Chair adjourned the hearing at 12:10 p.m.

Respectfully submitted,

  
\_\_\_\_\_  
Representative Bordsen  
Presiding Chair

  
\_\_\_\_\_  
Michelle Hall  
Committee Assistant

# VISITOR REGISTRATION SHEET

Legislative Study Commission on Children & Youth Oct. 8 2008  
Name of Committee Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME	FIRM OR AGENCY AND ADDRESS
<u>UnBeyed</u>	<u>Partnership For Children of Sampson Co</u>
<u>Caroline Rodier</u>	<u>McDowell Partnership for Children</u>
<u>Matthew Davis</u>	<u>YMCA Child Care Services</u>
<u>Jennifer Sverstrup</u>	<u>YMCA of WNC</u>
<u>Rosalind Johnson</u>	<u>Child Care Network Inc</u>
<u>Linda Poss</u>	<u>Mission Children's Hospital</u>
<u>VANCE DAVIDSON</u>	<u>REGION A PARTNERSHIP FOR CHILDREN - SMART START</u>
<u>Lamin M. Edgerton</u>	<u>Region A Partnership for Children</u>
<u>Tammy Greenwell</u>	<u>Blue Ridge Community Health Services</u>
<u>Julie B. Ransom PA-C</u>	<u>Blue Ridge Community Health - <sup>Middle School</sup> Apple Valley</u>
<u>Jenny H Rice</u>	<u>Advocate</u>

## VISITOR REGISTRATION SHEET

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Name of Committee

\_\_\_\_\_  
Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE  
CLERK

NAME	FIRM OR AGENCY AND ADDRESS
Michelle Spevak	Children First / CIS of Buncombe County
Jennifer Hampton	Children First / CPS
Grog Boron	" "
Alan Kirkpatrick	Parent
Sheila Hoyle	Southwestern Child Development Comm. P.O. Box 250 Webster, N.C. 28788
Ila Teague	Div of Child Dev. 319 Chapanoke - Raleigh
Luanne Roberts	Div. of Child Dev. 319 Chapanoke - Raleigh

JT Children / Youth 10/8/08  
 Name of Committee Date

NAME \_\_\_\_\_

FIRM OR AGENCY AND ADDRESS

Martin Pham

NC DJJD P

Brenda Logan

NC AJDP - 28th Dist

Karen McDonald

NC DSDP-

## VISITOR REGISTRATION SHEET

LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH. 10-8-08

Name of Committee

Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Holly Jones	YWCA of Asheville
FRAN THIGREN	Buncombe County Child Care Services 59 WOODAN PLACE ASHEVILLE, NC 28801
Amy Pike	Buncombe County Child Care Subsidy Program PO Box 7408 Asheville 28802
PAUL TAX	ARP/PHOENIX 257 BILTMORE AVE, STE 200 ASHEVILLE, NC 28801
Mary McGlaughlin	North Carolina Cooperative Extension Buncombe County Center 94 Cope Ave., Asheville, NC 28801
Theresa Morgan	KIDS ADVOCACY RESOURCE EFFORT (KARE) PO BOX 1392 Waynesville, NC 28786
Lori M. Jones	Southwestern Child Dev Comm PO Box 250 Webster NC 28788
Lanier DeGrella	Child Care Services Association 1829 E. Franklin St. Bldg 1000 Chapel Hill, NC 27514 Project Challenge NC 2548 ME Spruce Pine NC 28777
Gordon Heath	Meridian Behavioral Health/JJTC 104 Medical Park Loop Sylva NC 28779
Pat Long	

# VISITOR REGISTRATION SHEET

Legislative Study Commission on children and youth

10-8-08

Name of Committee

Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Juanita Wilson

Region A Partnership/Children

Jane McKenzie-Matthews

Children's Dev. Services

PLEASE CHECK ISSUES YOU PLAN TO ADDRESS. IF "OTHER," PLEASE SPECIFY.

Name	Phone	Email Address	Written Notes?	General Health	Juvenile Justice	Mental Health	Education	Child Protection	Funding	Other
Kevin Campbell	704 634-5345	Campbell/K @AOL.com							✓	✓
Allison Jordan	828-259-9117	allisonj@childcarefirstthe.org			✓					
Pat Wallenborn	828-259-1414	patwallenborn@charter.net			electronic					✓
Jennie Zelen	828-684-5330	jendden@aol.com					✓			
Jacques Rebeck	828-298-8808	jpernick@macfc.org	✓				✓		300 in. street	
Ron Bradshaw	828-285-9333	SMITH Start	✓							leg. of front porch in 2003
Alan Kirkpatrick	828-299-9717									
Michael Lodico	828-350-6140	michael.lodico@ashewille.nc.us					✓			
Jennifer Simpson	828-682-0047	mypfe@starcourttech.us	✓				✓			
Caroline Rodier	828-659-2462	caroline@mcidsmartstart.org	✓				✓			

The President has been

Name	Phone	Email Address	Written Notes?	General Health	Juvenile Justice	Mental Health	Education	Child Protection	Funding	Other
Sheila Boyle	828-586-5561	Sheila Boyle AAdol.com	No							Early Childhood Education
Lori Jones	828-286-8185	lorijones@hughes.net	Yes							Early Childhood School age
Lanier DeGrella	919-967-3272	lanierd@childcare services.org	Yes							Infant-toddler Early Care
Jerry Rice	828-667-3022	Jerry Rice Advocate@Adol.com	No						TAU	IL TO THIS
Tammy Greenwell	828-697-6755 ext 2288	tgreenwell@brchs.com	Yes							
Paul Tax	828-398-2200	Paul Tax somsc.org	No							Substance Abuse
Holly Jones	281-4804	hollyje@uncombe.org	No							Early Childhood
Theresa Morgan	456-8995	tmorgan@rarehoze.org	No							
Linda Poss	213-1763	linda.poss@msj.org	No							Economic Security
Pat' Lay	828-508-2256	Patricia Long@meridianbhs.org	No							



**PLEASE CHECK ISSUES YOU PLAN TO ADDRESS. IF "OTHER," PLEASE SPECIFY.**

**PLEASE CHECK ISSUES YOU PLAN TO ADDRESS. IF "OTHER," PLEASE SPECIFY.**

[illegible]

House Pages

LEGISLATIVE STUDY COMMISSION ON  
CHILDREN AND YOUTH

Name Of Committee: \_\_\_\_\_

Date: 10-8-08

1. Name: \_\_\_\_\_

County: \_\_\_\_\_

Sponsor: \_\_\_\_\_

2. Name: \_\_\_\_\_

County: \_\_\_\_\_

Sponsor: \_\_\_\_\_

3. Name: \_\_\_\_\_

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County: \_\_\_\_\_

Sponsor: \_\_\_\_\_

Sgt-At-Arms

HOUSE { 1. Name: John BRANDON

2. Name: FRANK PREVO

3. Name: CHARLES MARSHALL'S

SENATE { 4. Name: LESLIE WRIGHT

5. Name: \_\_\_\_\_

24  
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120  
95

## **School-Based and School-Linked Health Centers in North Carolina as Safety Nets**

*School-based and school-linked health centers are a part of the Healthcare Safety Net as described by the North Carolina Institute of Medicine. North Carolina's 59 centers were founded in communities with high at-risk populations as a direct result of identified needs for access to adolescent and child health care.*

### **RECOMMENDATIONS:**

**I. Funding:** Increase the state funding for centers by doubling the budget from 1.5 million dollars to 3 million dollars over the next four years. This will expand services and assure sustainability in existing centers, while increasing the number of new centers in other interested counties. State funds for centers have remained stagnant since the early 90's with the exception of one increase in 2001.

### **II. Policies:**

**A. Mental Health Referral Requirement:** Eliminate the mental health service referral requirement in Medicaid. Most centers have been Credentialed by the state, and previously up to 2006 could provide mental health services to students without requesting authorization from the patient's assigned Primary Care Provider. A change occurred that requires centers to obtain authorization from PCP's in order to provide mental health services. The centers exist to deliver immediate access to care which is critically important to adolescents. They are being blocked from providing easy access to mental health care.

**B. Health Risk Assessment:** There should be a reimbursable code for time required in formally assessing needs from the patient questionnaires. Annual age appropriate health risk assessments are required by the State and health agencies for quality adolescent health care. They are very important in identifying behavioral and other health issues, but time-consuming to providers. .

**C. Provider Reimbursement:** Provider reimbursement should not be reduced in centers that provide comprehensive services. Changes were made that decreased by 15% the reimbursement for health services when a physician is not present in the center, affecting most mid-level providers and counselors employed by centers. School-based and school-linked centers utilize mid-level providers, such as nurse practitioners, to provide quality care while holding costs down. Similar to physicians, they provide

physical health care and consultations on mental health medications as support to mental health providers.

- D. School Health Program Funds:** Schools that receive funds that are directed toward school-health programs such as substance abuse prevention, mental health services, violence prevention, etc., should be encouraged to support these activities within school-based health centers where they exist with that funding.
- E. Health Insurance for 18-25:** School-linked centers recognize the health insurance lack in the 18-25 age group . This access issue needs to be thoughtfully addressed beyond the Reproductive health Care Waiver.
- F. Study Legislation:** Legislation (HB 1476 and SB 622) was passed in 2005 to fund a study on school-based and school-linked health centers. The Study Committee has not been appointed to look at the advantages centers provide in relation to resources utilized as safety net providers. The Study Committee should be appointed to substantiate the need for and success of these centers and provide data for the increase in funding requested.

## School-Based and School-Linked Centers in North Carolina Talking Points for Legislature

*Governor Easley proclaimed the school week of February 17 - 23, 2008 to be North Carolina Association of School-Based/School-Linked Health Centers Week! If you have not already visited, a similar week in 2009 would be a good time to plan to take a look at one of the state's best kept secrets and safety-net providers for our children.*

*Call or email Connie Parker, Executive Director of the newly named NC School Community Health Alliance, to arrange a visit to a center in or near your District. 910 254-1245 or [cparker@ncscha.org](mailto:cparker@ncscha.org)*

### WHY ARE THESE CENTERS NEEDED IN NORTH CAROLINA?

- 1) 10-25% of adolescents experience mental health or substance abuse related problems.
- 2) 10% have a chronic health condition.
- 3) More than 26% of NC adolescents who are seen in public health settings are overweight.
- 4) High school graduations rates have fallen from 64% in 1990 to 60% today.
- 5) Accidents and injuries are the leading cause of death for both male and female adolescents.
- 6) Homicide and suicide are the cause of 23% of all adolescent deaths.
- 7) Though teen pregnancies were on an overall downward trend, they are again trending up in NC
- 8) Risky behaviors co-occur and are initiated in adolescence – smoking, substance abuse, physical inactivity, and early sexual behavior.
- 9) Healthy students learn better. Students who are hungry, sick, troubled or depressed, cannot function well in the classroom, no matter how good the school.  
– *Carnegie Council on Adolescent Development*

**\*\*North Carolina has 59 school-based and school-linked centers in 22 counties...**  
Founded by the people in the communities where there were identified needs for access to health care for high risk populations.

**\*\*They provide access to care for school-age children in or near school grounds.**

**\*\*NC provides limited funding to 28 adolescent school health centers. Most were started with a "Making the Grade" grant from the Robert Wood Johnson Foundation to the state in the early 90's.**

**\*\*They provide preventive primary care, nutrition counseling, mental health services and health education – all with parental consent.**

**\*\*Benefits:**

- Save school staff from having to spend many hours dealing with sick students.
- Keep kids in school rather than missing a day to be seen in a physician's office.
- Contribute to the decrease in school suspensions.
- Increase attendance rates and desk time.
- Prevent parents from missing work to take a child to the doctor or urgent care.
- Decrease in numbers of Emergency Room visits.
- Contributed to the past overall downward trend in teen pregnancy rates.

**\*\*The individual numbers of patients served in the centers range from 211 to over 1800. The average is 400 in school-based centers and 1300 in school-linked centers.**

**\*\*The centers funded by the state report for 2007 a total of 14,709 students enrolled, with a total of 105,774 services provided in those 28 centers. (Not including the other 31)**

**\*\*The average total budget is \$200,000 for school-based centers and one million dollars for school-linked that have a number of other outreach prevention education programs.**

**\*\*Staff numbers range from 3 to more than 20 specially trained school health professionals. Providers are mid-levels such as nurse practitioners or physician assistants, who provide a more economical model of care with a physician supervisor who is not on site full time. They also have Licensed Clinical Social Workers or Licensed Psychological Associates for mental health counseling, Registered Nurses, and the availability of nutritionists and health educators.**

**\*\*Enrolled students range from 48-63% Medicaid and Health Choice. Between 10 and 22% are uninsured.**

**\*\*Start-up for centers is sponsored by health departments, hospitals, Federally Qualified Health Centers, and other non-profit organizations.**

**\*\*Funding typically comes from a combination of foundation and state grants, and the resources of the sponsoring agencies, school district and community. As centers mature the start-up funds fade away and financial stability comes from patient revenues, state and government funds, in-kind community contributions, and individual contributions.**

**\*\*The NCDHHS School Health Center Initiative has created a credentialing process with standards of performance to assure that funded centers deliver comprehensive, quality care.**

**\*\*Many children remain uninsured—almost 12% of children in NC in 2003. 19% with family incomes below 200% lack insurance despite Medicaid and Health Choice. These centers and more like them need your support to help our kids succeed in school and become contributing citizens in our state.**



...ensuring affordable, accessible, high quality child care for all young children and families.

Date: October 8, 2008

Submitted By: Lanier DeGrella, Manager, North Carolina Infant Toddler Enhancement Project,  
Child Care Services Association

Data Source: *Who's Caring for Our Babies Now? Revisiting the 2005 Profile of Early  
Care and Education for Children Birth to Three in North Carolina*

National and state attention has been focused on school readiness and on helping 4 year olds come to school better prepared. It is important to also assess what is happening for our youngest children, as the research identifies the first 3 years of life as critical for setting the foundation for future learning.

There are increasing numbers of infants and toddlers in regulated child care in North Carolina. This includes babies living in poverty and near-poverty whose parents must work and depend on child care to do so.

The data being shared today is from a study just completed in North Carolina by Child Care Services Association to look at child care and children from birth to age three, including how the quality of care infants and toddlers are receiving compares with the care of our three to five year old children. This study also used data from the state subsidy program to examine what type of child care our poorest children receive. This is important as research that has shown that birth to three are critical formative years and that child care has a profound impact specifically for children from low income families.

#### **Findings for all children in regulated care:**

Of the 77,513 infants and toddlers enrolled in regulated child care, 87% are in centers and 13% are in child care homes

Only 44% of 5-star centers enroll infants and toddlers, while 98% of 5-star centers enroll children 3-5 years of age.

In every region the % of infants and toddlers enrolled in 4- or 5-star programs is lower than preschoolers.

At the state level there is a 12% average difference in preschoolers accessing 4- or 5-star care vs. infants and toddlers. Among the regions, however, the differences range from 1% in Region 7 to 29% in Region 1. While there have been overall gains in improving quality, the disparity between the quality of care received by infants and toddlers compared with preschoolers has become larger in the last three years (from 9% to 12%).

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**Wake County Office**  
p. 919-779-2220  
f. 256-3489





### **Findings for children receiving child care subsidy:**

30,932 infants and toddlers receive a child care subsidy. This represents 40% of all IT receiving care in a licensed child care facility.

43% of infants and toddlers receiving child care subsidy are enrolled in 4- or 5-star centers and homes as compared to 50% of three to five year olds receiving child care subsidy.

More than half (63%) of children ages birth to five years of age waiting for a child care subsidy are infants or toddlers.

### **Additional findings:**

The supply of infant and toddler care is not keeping pace with demand. Between 2005 and 2008, the population of children from birth through 4 years of age in NC grew 6%. The percent of preschoolers in regulated child care grew by almost 6% while growth of infants and toddlers in child care only increased by 1.4%.

### **Recommendations to provide a foundation for increasing the quality of care for NC's youngest children:**

Further study is needed, in particular of the early childhood workforce (last done in 2003) and the relationship between the characteristics of child care providers and the age of children in care, etc.

Incentives for expansion of 4- and 5-star slots for infants and toddlers including sufficiently funded grants for expansion or development of high quality IT slots, higher subsidy rates for infants and toddlers slots in four and five star programs, and supplemental rates for high quality care for all children.

Employers and consortia of employers should be encouraged to support the development and/or provision of high quality IT slots for their employees.

Subsidized rates for infants and toddlers in four and five star programs need to be raised to reflect the real rates being charged for that type of care. Funding from More at Four has helped increase the quality of spaces for preschoolers. A similar infusion of dollars needs to be available to ensure that infants and toddlers living in low-income families have access to the very best care. Additional federal HS dollars to support the expansion of EHS could help increase the development of and access to higher quality child care for IT.

NC's Child and Dependent Care Tax Credit needs to be raised to more accurately reflect the high cost of high quality IT care. Currently the max for one child is \$3,000 a year...this is far below the cost/market rate...raising this could help low and middle income families who are not able and/or eligible to access child care subsidy to access higher quality care.

Current efforts, such as the NC Infant Toddler Enhancement Project, to address the accessibility, quality and affordability needs of infants and toddlers in regulated child care need to be continued.

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Laurie Jones

## North Carolina School Age Quality Improvement Project

- The project was established in July 2004 as a special initiative of the NC Child Care Resource & Referral (NC CCR&R) Council. Southwestern Child Development Commission manages this project.
- Funding is provided by the NC Division of Child Development through the Child Care Development Fund (CCDF) Quality Enhancement dollars. Currently, funds to support this project represent 7% of the total CCDF Quality Enhancement dollars available to North Carolina.
- The mission of 20 school age specialists within the 18 NC CCR&R regions is to serve programs providing school age care in all 100 counties.
- First project of its kind whose focus has been on addressing the training and technical assistance needs of school age providers in every county in North Carolina.
- Services have been provided to private child care programs, school based programs, YMCA's, YWCA's, Boys & Girls Clubs, 4-H sponsored programs, faith-based programs, and community-based programs.
- Overall goals of the project are to improve the availability and quality of school age care.
- In the first four years, the project has helped programs provide safe and high quality developmentally appropriate space to serve 59,524 children in afterschool and full day programs such as track-out, school holidays, and summer camps.
- In 07-08, \$104 million child care subsidy dollars, or 28% of subsidy dollars available for school age children through the NC Division of Child Development, were spent to support low/median income families who needed school age care. The vast majority of those subsidy dollars supported working families.
- Promote professional development of a primarily part time workforce with challenges in high turnover rates.
- Actively engaged in strategies to promote professional development of workforce linking to existing systems in NC, most notably The NC Institute for Early Childhood Professional Development.
- We respectfully ask for your continued support as we work diligently to meet the overwhelming needs of school age providers across the state.
- Information provided by: Lori M. Jones, School Age Project Manager  
132 Ed Thompson Road, Rutherfordton, NC 28139 Phone/Fax: 828-286-8185  
Email: [lorijones@hughes.net](mailto:lorijones@hughes.net)



The North Carolina Institute  
for Early Childhood  
Professional Development

**Please join us!**

**North Carolina will be first in the nation! And you can help!** North Carolina is developing an individual education certification system for the early childhood workforce. The NC Institute for Early Childhood Professional Development and Child Care Services Association are teaming up with our state's early childhood partners to create the **first early educator certification system** in the United States! Learn more! Go to [www.nceec.org](http://www.nceec.org) and click on Early Educator Certification!

The certification system will be piloted this summer and fall providing up to 5,000 identified teachers and family child care home providers with an opportunity to become **certified for free!** Just like nurses, hairdressers, accountants and many other professions, individuals who work in the early childhood field will be certified based on their level of education.

**Who created the certification system?** The certification system has been collectively designed by the Institute, Child Care Services Association, the L.E.E.D. Advisory Committee and Institute partners over the past two years. Partners include the NC Division of Child Development, NC Partnership for Children and local Smart Start Partnerships, NC Office of School Readiness, NC Head Start Collaboration Office, NC Child Care Resource & Referral Council and local agencies, Child Care WAGE\$@ Project, T.E.A.C.H. Early Childhood@ Project and many others!

**Who is eligible to be part of the certification pilot project?** A limited number of teachers and family child care providers are able to enter the new education certification system at no charge between now and November 30, 2008. Up to 4,500 participants from the current pool of Child Care WAGE\$@ who work with children ages 0 – 5 in center or home settings and who have worked in the setting for at least one year may participate in the pilot at no charge. In addition, a small pool of non-eligible WAGE\$@ participants from across the state will be identified and certified for free.

**When will the pilot project begin?** The pilot project will take place between July – December 2008.

**What happens after the pilot project?** Teachers and family child care providers who are not participating in the pilot may apply after January 1, 2009. Additional information about Early Educator Certification can be found at [www.ncchildcare.org](http://www.ncchildcare.org), click on the button labeled Early Educator Certification. Applications will be available online from the Institute's website after December 15, 2008.

**Want to learn more?** Attend a free information session to learn more about early educator certification. Space is limited so please send an RSVP to [debra@debratorrenceconsulting.com](mailto:debra@debratorrenceconsulting.com) for more details.

Sept 17	Asheboro	Noon – 2 PM (RCC Campus)
Sept 18	Greensboro	Noon – 2 PM (Koury Convention Center)
Sept 22	Durham	6:30 – 8:30 PM
Oct 8	Statesville	1 - 3 PM
Oct 8	Charlotte	6 - 8 PM
Oct 14	Raleigh	6:30 – 8:30 PM
October 30	Wilmington	6:30 – 8:30 PM
TBD	Pinehurst	

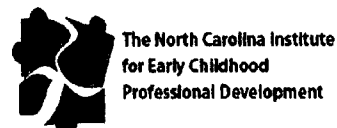
Hope to see you soon as we work together to support North Carolina taking the next step toward professionalizing the early childhood workforce!

Sincerely,

Debra Torrence, Coordinator  
NC Institute for Early Childhood Professional Development

[www.ncchildcare.org](http://www.ncchildcare.org)  
PO Box 959, Chapel Hill, North Carolina 27514

## Early Educator Certification Pilot Project Frequently Asked Questions



**North Carolina is the first in the nation** to increase its workforce professional development standards by certifying the education of those who work directly with, intend to work with, and/or work on the behalf of children ages 0 – 12. Education is the basis for Early Educator Certification. Education is coursework taken at a **regionally accredited** college or university. All public community colleges and universities in North Carolina are regionally accredited.

For a list of regionally accredited college and university programs go to:  
<http://www.chea.org/Directories/regional.asp>

**What is Certification?** Early Educator Certification is the process of verifying college education. A professional certification level will be assigned using the education documentation submitted and an existing scale. Information about the scale can be accessed through project staff.

**Why should I get certified?** As with other occupations, certification will recognize and validate the professional development levels of those working in a particular role in the field of early childhood education. Certification has numerous benefits for children, families, early educators, systems and funders.

**How have other occupations become professions?** School teachers have it, nurses have it, hair dressers have it, even plumbers have it! Almost all occupations in the United States require their workforce to become certified to be part of the profession. It's time for our field to be recognized as a profession with a specialized body of knowledge and defined skills required of each position.

**What organization certifies early childhood educators in NC?** The NC Institute for Early Childhood Professional Development (Institute), founded in 1993, is the certifying body for the early childhood profession in North Carolina. The mission of the Institute is to define and advocate for the implementation of a comprehensive early childhood professional development system that provides supportive, accessible, and individually appropriate education which is linked to compensation in order to ensure high quality care and education services for children and families.

To learn more about the Institute go to: [www.ncchildcare.org](http://www.ncchildcare.org)

**What is a professional certification level?** A certification level is a numbered step on a 10-step Early Educator Scale that reflects the amount of education you have earned in the field of early childhood education (ECE), child development or related/supporting fields of study.

**How do I qualify for certification?** To obtain your certification level you must return your application and official college transcripts for ALL courses taken and/or degrees earned to the North Carolina Institute for Early Childhood Professional Development. Credit for professional work experience is not used to determine your certification level.

**Is a test required to be certified?** No test is currently required to obtain certification.

**How much does it cost?** All pilot participants can become certified at no charge. After the pilot project, initial certification will cost \$50 and the fee for recertification will be \$25.

**Will others help pay for certification fees?** Yes, this is possible. Public and private resources have already been allocated by the NC Division of Child Development, NC Office of School Readiness and the Z. Smith Reynolds Foundation. Partners also include the NC Partnership for Children, local Smart Start partnerships and child care resource & referral agencies and the NC Head Start Collaboration Office.

Early Educator Certification is an individually held certification as in other professions; individuals will be responsible for paying their own fees. Stakeholders and partners may help financially support or encourage Certification, but it is not required.

**What steps are required to become certified?**

Step 1: Complete and sign the certification application.

Step 2: Attach all official transcripts to your application.

Step 3: Include the certification fee (check or money order only)

Step 4: Make a copy of all materials for your files.

Step 5: Mail to: NC Institute for Early Childhood Professional Development, PO Box 959, Chapel Hill, NC 27514

## Early Educator Certification Pilot Project Frequently Asked Questions

**When can I apply?** The pilot for Early Educator Certification will continue through December 31, 2008. Pilot participants have already been identified. The general population of teachers and home providers may apply any time after January 2009. Fees will be required at that time to process your application and issue your certificate. Turnaround time will vary based on the number of applications.

**What will I get when I am certified?** A personalized Certification card for your wallet and two official certificates (with a gold or silver seal) ready for framing will be sent to you.

**How long is my certification valid?** Certification is valid for a period of time based on the amount of education you possess when you become certified for the first time. The validity period ranges from 2 to 5 years. If you obtain more education in between recertification periods you may choose to submit your official transcripts to the Institute to increase your certification level. For example, a paraprofessional with no coursework in ECE will need to renew her/his certification every 2 years; a teacher with a 2 year degree in ECE will have up to 5 years to renew her/his certification.

**Who is responsible for submitting education information?** Individuals are responsible for submitting documentation of ongoing education.

**Will I be required to continue my education?** As with all professions, certified individuals must continue their education to maintain their professional certification. For those who do not have a 2 year degree in ECE, college coursework will be required to remain certified. Those with an Associate's Degree in ECE or higher may complete college coursework or Continuing Education Units (CEUs).

**Can I apply if I am not currently employed as an early childhood educator in North Carolina?** All persons who are currently or considering working in the field of early childhood education are eligible to become certified by submitting the required paperwork. Out-of-state applicants may apply for North Carolina Early Educator Certification with the submission of the required paperwork.

**Is the early childhood teaching workforce valued for its work and paid well?** Even with a college degree, the work of an early childhood teacher is not acknowledged by society for its important role in supporting child development and the early care and education needs of thousands of families every day.

**Will my wages increase if I become certified?** Certification helps to professionalize the field and is an important step toward better compensation. In addition, your education will be verified through Early Educator Certification and may then lead to a salary supplement! Salary supplements and education bonuses are available in over 90% of North Carolina's counties through the Child Care WAGES® Project or other Smart Start-funded efforts. These supplements increase as you earn more education. Of those participating on WAGES®, 32% submitted documentation to verify their pursuit of additional coursework and 20% earned a higher award due to those efforts. Child Care WAGES® supplemented salaries for nearly 1/3 (9,300) of the teaching workforce in 2007. For a teacher with a Bachelor's Degree in ECE, it added \$3,000 - \$6,250 to her/his annual salary. Local Smart Start partnerships can raise income limits up to \$17.00/hour. Participants can encourage local partnerships with lower income limits to raise them. As with all professions, the more education you have the more you are likely to earn.

**Will Certification recognize the CDA, credential, diplomas and certificates?** Certification will recognize benchmarks associated with credit hour completion.

**Is Certification required?** The NC Institute for Early Childhood Professional Development does not have regulatory authority to require certification. Certification is a voluntary process.

**Are child care teachers leaving the field once they get an education? How can Certification help?** Child Care WAGES® data indicate that participants with an Associate's Degree in ECE, its equivalent or more left their programs at a significantly lower rate than participants without degrees. The WAGES® supplements had a notable impact on turnover of all participants. Only 16% left their child care programs in 2007/2008.

**How can I learn more?** Information sessions are being offered across the state. Pilot participants are not required to attend an information session to participate in the Certification pilot project. Visit [www.ncchildcare.org](http://www.ncchildcare.org), click on Early Educator Certification and open the list of information sessions. Space is limited so email Debra Torrence, Institute Coordinator at <http://www.ncchildcare.org/contact.html> to register or contact her with your questions.



**McDOWELL COUNTY PARTNERSHIP  
FOR CHILDREN AND FAMILIES, INC.**



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MARION, NC 28752

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*The mission of the  
McDowell County  
Partnership for  
Children & Families,  
Inc. is to partner with  
the community to meet  
the needs of all the  
children and families  
in McDowell County.*



October 8, 2008

Legislative Study Commission on Children & Youth  
State Legislative Office Building  
300 North Salisbury Street, Room 530  
Raleigh, NC 27603-5925

Dear Commission Members:

Thank you for allowing me the opportunity to address the Study Commission regarding Children and Youth in McDowell County. I hope my comments will be informative and will provide some suggestions on service delivery.

Smart Start, More at Four, and Child Care Subsidy are three essential early childhood programs serving the children and families of McDowell County. Smart Start and the More at Four Pre-Kindergarten Program both help children start school ready to succeed. Child Care Subsidies help parents who meet income-eligibility guidelines access high-quality child care.

These initiatives are not duplicative. While they have the same overarching mission – school readiness – they are quite different in target populations, objectives, strategies, scope, administration and funding for promoting school readiness. Our school readiness goals could not be met without all three components in place.

In McDowell County, More at Four is administered by the McDowell County Public Schools with More at Four classrooms located in each of the county's elementary schools. There are also More at Four slots within Head Start and at private child care facilities. McDowell County Head Start falls under the umbrella of the McDowell County Schools as well. Our children have access to high-quality early care and education programs, with our average start-rating for licensed centers and homes at 4.41 stars.

McDowell County has a long history of collaboration between its child and youth-serving agencies. Not only do Smart Start, More at Four, and the Department of Social Services (the agency that administers our child care subsidies) have strong working relationships, but we also work closely with the McDowell County Schools, the Juvenile Crime Prevention Council, McDowell Technical Community College, the Adolescent Parenting Program, public health, and a wide range of other organizations in order to pool resources and achieve the greatest possible outcomes for all children and youth, no matter what their age. And certainly, the early years lay the foundation for success in school and life-long learning.

If we have any problems with our early care and education system in McDowell County it's due to a lack of funding, which I



understand is not the purpose of the study commission. In McDowell County 295 children are currently receiving child care subsidies and 250 are on the waiting list. Only 24% of all eligible children are receiving subsidized child care service in McDowell County. Child care subsidy is administered by the Department of Social Services in McDowell County. DSS works hard to ensure every dollar allocated to child care subsidy is spent. Last year, the McDowell DSS reverted only \$1.40 of its wait list funds.

Some families receive child care subsidies for many years while other families remain on the wait list for years. One solution proposed by our DSS would be restricting children to 60 cumulative months of subsidized child care, which is the procedure for the Work First Program. A 60-month restriction would be hard for the families who have stayed on the subsidy roles long-term and who continue to only make \$7 per hour, but it would allow other families access to child care subsidies that may never be served. Of the families on the waiting list for subsidies, DSS staff report that they see parents all the time who did plan ahead, who are responsible parents, but who have to make the choice between working and paying for child care. In some cases DSS reports children are being left alone or in questionable care because parents simply can't afford the cost of child care.

We also request that the current methodology for determining market rates be re-evaluated. In some counties, market rates are artificially depressed and providers are not getting paid enough to offer quality services. It has left many infants and toddlers without care across the state. Other counties, like McDowell, have been assigned the state rate which is greater than the actual cost of care. In our county certain child care providers have increased their rates in order to receive the higher subsidy reimbursement – this clearly is not an intended goal of the market rate formula. We need a system that is fair and understandable to providers, parents and the purchasing organizations. We hope that formula is based on local data for the actual cost of care.

Attached is a local report on *Employers and Child Care Subsidies* that I hope you will find useful. We update this report annually and share it with the business community to let them know the value of child care subsidies and how much their employees rely on subsidies to be able to compete in the workplace.

Thank you for the opportunity to allow me to share my comments and opinions with the study commission. I appreciate all of your time and efforts in gathering this information to help make improvements to service delivery for the children and youth of North Carolina.

Sincerely,



Caroline Rodier  
Executive Director

# McDowell County Partnership for Children and Families, Inc.

## EMPLOYERS AND CHILD CARE SUBSIDIES

### 2008 Report

#### Introduction

Child care subsidies offer many benefits. In addition to providing access to quality early childhood educational experiences, the subsidies directly benefit many employers in McDowell County by serving employees who otherwise may not be able to participate in the workforce.

In April 2008, the McDowell County Partnership for Children and Families staff analyzed the child care subsidy data through the Department of Social Services to determine where parents who receive child care subsidies are employed and assess the impact on employers. For the purposes of this report, it is assumed that every child has one parent in the work force. However, the child care subsidy data is organized by the eligible child, not by his/her parent. The data below is derived from the number of children 0-5 years old who are receiving subsidies, and then analyzes where their parents were employed.

#### Total Number of Children Receiving Child Care Subsidies

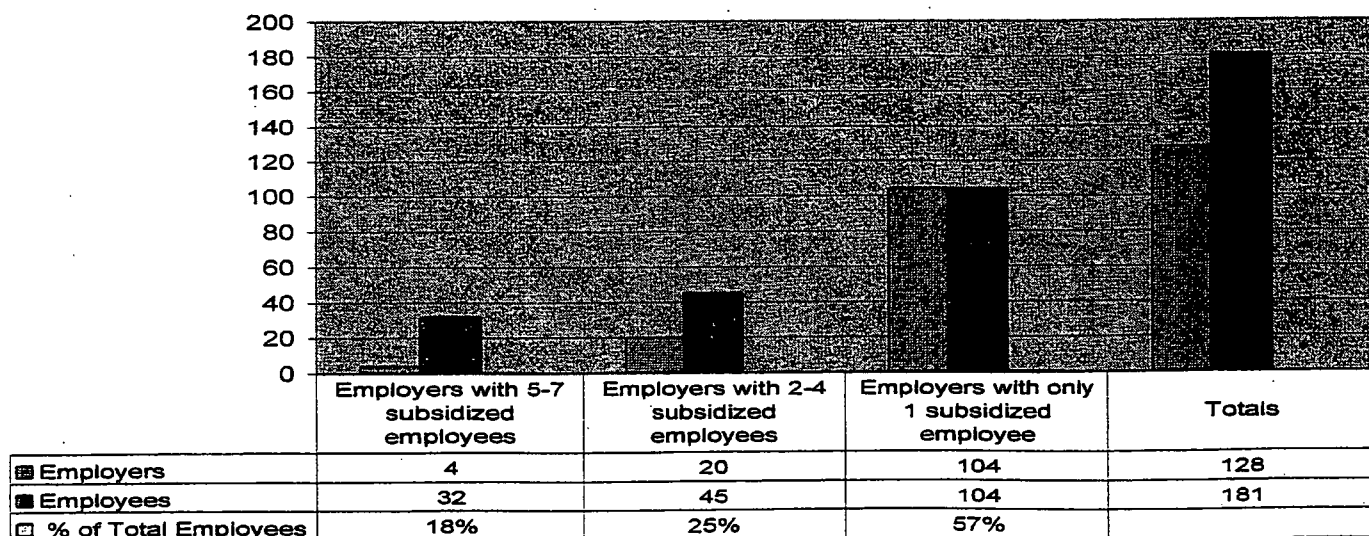
As of April 30, 2008, there were 357 children with employed parents who are McDowell County residents either receiving or waiting for child care subsidies. Two hundred and forty-two children (68%) were enrolled and receiving child care subsidies, and another 115 (32%) were deemed eligible and waiting for child care financial assistance.

#### Employment within the County

The 181 parents receiving child care subsidies for their children were employed by 128 employers in the McDowell County area. The majority of parents (75%) were employed in businesses located in McDowell County, and 25% were employed in surrounding counties, primarily Buncombe, Rutherford, and Burke.

As can be seen in the table below, of the 128 employers in the McDowell County area, 82% had four or fewer subsidized employees, and these tended to be small business employers. However, four employers each had five or more subsidized employees, and accounted for 18% of the total number of subsidized parents.

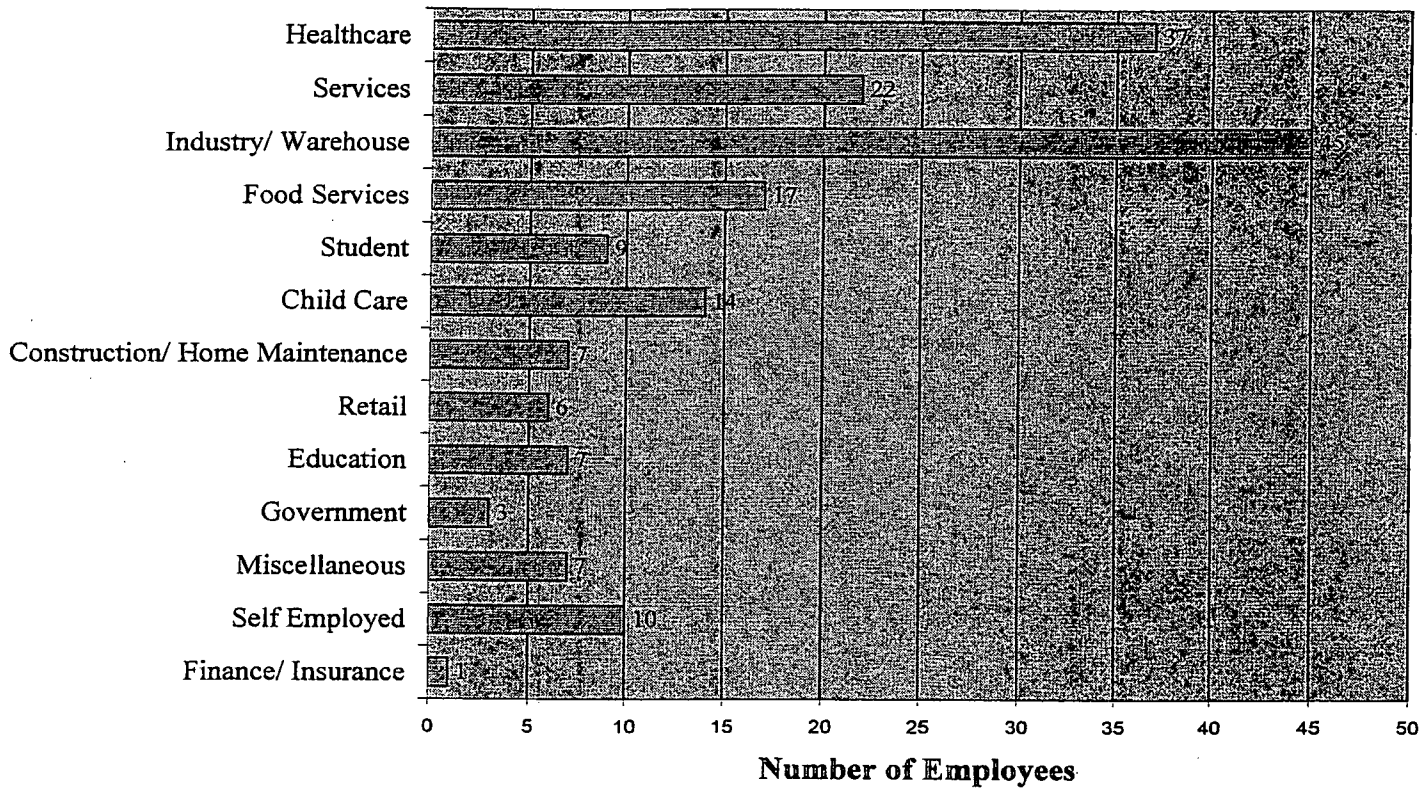
#### Employers with Subsidized Employees





Parents receiving child care subsidies tend to be employed in Healthcare, the Services Sector (which includes personal care services, hair salons, and personnel service companies), Industry/ Warehouse, Food Services, Child Care, Self-Employed, Education, and Miscellaneous. The Industry/Warehouse sector leads with 45 (24%) of the total number of subsidized employees, followed by Healthcare (20%), Services (12%), and Food Services (9%).

**Business Sector with Number of Subsidized Employees**



As seen in the table below, of the different Business Sectors, the Healthcare sector has the greatest benefit with 19 employers that rely on subsidized employees, followed by the Industry/Warehouse sector (17), Service (11), Food Service (10), Child Care (8), Retail (6), and Miscellaneous (6). Together, these sectors account for ninety-four percent of the total number of employers that have employees with children ages 0-5 who receive child care subsidies.

Employment Sector	# of employers with at least one parent receiving child care subsidies	% of total employers
Healthcare	19	23%
Industry/Warehouse	17	21%
Service	11	13%
Food Service	10	12%
Child Care	8	10%
Retail	6	7%
Miscellaneous	6	7%
Construction/Home Maintenance	2	2%
Government	1	1%
Self-Employed	1	1%
Finance/Insurance	1	1%

### In McDowell County

McDowell County has 128 different employers who together rely on 181 employees who are receiving child care subsidies. As can be seen in the chart below, four large employers each have four or more subsidized employees, accounting for 11% of the total number of subsidized employees in the county. These employers are: McDowell County School System, Perfect Air, McDowell County Head Start, and IAC.

However, small businesses are most dependent on these subsidized employees. The great majority (89%) of the total number of businesses has small staff and relies on fewer than four subsidized employees. The table below shows 9 employers in McDowell County that have 3 or more employees that receive child care subsidies. Together, these employers account for more than 19% of all parents who are receiving child care subsidies.

McDowell County Sector	McDowell County Employer	# of Employees
Industry/Warehouse	IAC	7
Education	McDowell County School System	6
Industry/Warehouse	Perfect Air	6
Child Care	McDowell County Head Start	4
Healthcare	Black Mountain Center	3
Child Care	Private Child Care Center	3
Industry/Warehouse	Ethan Allen	3
Healthcare	Rose Hill Retirement Community	3

### Parents Receiving Child Care Subsidies

As of April 30, 2008, there were 190 parents in McDowell County receiving child care subsidies for their children in order to maintain employment or attend school to further their education. Fifty-three percent of these parents have a High School Diploma or GED, 26% have less than a High School Diploma, and 21% have some level of college education (percentages are rounded up). Nineteen parents (6%) were currently enrolled in college level courses, and thirteen parents (4%) were participating in the Work First program and seeking gainful employment.

### Household Demographics

As of April 30, 2008, there were 357 children enrolled and receiving child care subsidies, representing 181 families. Two hundred thirty-two or 65% of these children lived in single parent households, and 63 or 18% lived in two parent households. Sixty-one children (17%) resided with caregivers other than their parents, and of those children, nine were foster children.

### Subsidy Funding

Child Care subsidies are primarily funded by the North Carolina Division of Child Development. Partial funding is also provided through Smart Start and the North Carolina Partnership for Children, Temporary Assistance for Needy Families (TANF), and Federal Emergency Management Agency (FEMA). Local Smart Start funds are administered by the McDowell County Partnership for Children & Families, Inc. through the McDowell County Department of Social Services. Subsidy funding allows parents to continue working by providing a portion of their child care expenses based on income eligibility guidelines.

*For more information about child care subsidies contact*

**McDowell County Department of Social Services**

145 E. Court Street

PO Box 338

Marion, NC 28752

(828) 652-3355 / Fax: (828) 652-9167

Or Contact

**McDowell County Partnership for Children and Families, Inc.**

70 North Main Street

PO Box 158

Marion, NC 28752

(828)659-2462

[www.mcdowellpartnership-smartstart.org](http://www.mcdowellpartnership-smartstart.org)



**McDOWELL COUNTY PARTNERSHIP  
FOR CHILDREN AND FAMILIES, INC.**



**Acknowledgements**

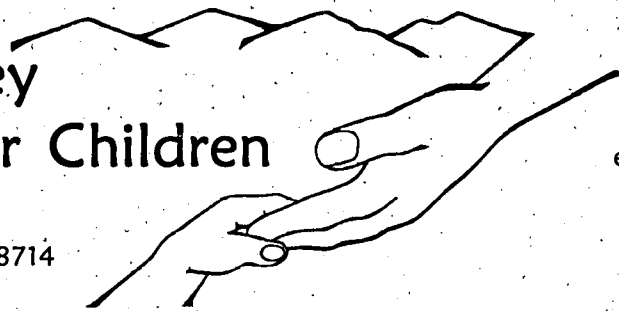
Statistics on child care subsidies were provided by the McDowell County Department of Social Services in April 2008.

The format for this report was created by the Orange County Partnership for Young Children.

# Mitchell-Yancey Partnership for Children

Post Office Box 1387  
Burnsville, North Carolina 28714

Phone (828) 682-0047  
Fax (828) 682-7978  
email: m-ypfc@trccomputing.com



Thank you for allowing me the privilege of speaking to you this morning regarding issues that are critical to the young children in our state. My name is Jennifer Simpson, and I serve as the Executive Director of the Mitchell-Yancey Partnership for Children. Our Partnership is the Smart Start agency for 2 very rural communities here in the western part of our state.

I'd like to talk with you this morning about child care subsidies that help families pay the costs of licensed child care. The child care providers in our community have been very proactive in meeting the highest level of quality indicators in their programs. Many of our child care facilities have achieved four and five star licenses, and they have done a good job in marketing their quality services to the families within the community.

I'm honored to say to you that this month marks 10 years that I have held this position with the Partnership for Children. But over these 10 years of service, there have been only a handful of months that Mitchell County Dept. of Social Services has not had a waiting list of families needing child care subsidies.

A parent called our office about 6 weeks ago with great excitement in her voice. She was a newly-single mom of 2 young children, and had just gotten a call from a business where she had interviewed, and was offered a full-time job. She had recently taken her children out of the home where domestic violence was prevalent, and this would be her first job since recently moving to the area. Things were really looking up for her!

She had picked up one of the Partnership's brochures at her pediatrician's office, and read about our child care resource & referral service. She had already selected the 4\* center where she wanted her 2 young children to be cared for while she was at work, and had already calculated her monthly income, and compared it to the chart for subsidy services that she found in the brochure. The subsidy program she had read about was going to make it possible for her to start this new job next week, and feel really confident about the care her children would receive in this high-quality program.

I'm the one who took this mom's call, as our staff was out at a training that day. So I had the daunting responsibility to talk with her about how our county subsidy allocation wasn't enough to meet the needs of all our local families. I encouraged her to contact the county dept. of social services to go through the subsidy eligibility process, but cautioned her that there was already a waiting list of over 100 children. It was a horribly disheartening conversation to have to go through with someone, and it certainly raised my respect for my staff and those at DSS who are involved in these conversations with desperate parents every day.



I'd like to recommend that the commission revisit the funding formula for subsidy service allocations. Our Partnership Board has closely monitored the subsidy expenditures in Mitchell County, and can attest that Mitchell DSS carefully manages both their state- and Smart Start funded subsidy allocations.

And yet, with

- the historical necessity to establish a waiting list documenting families who are eligible for services, and
- with appropriate fiscal management strategies in place to maintain their subsidy expenditures within the allocation provided,
- in a year when the General Assembly actually added new funding to the subsidy system for this fiscal year...

*The subsidy allocation funding formula not only denied Mitchell County DSS access to any of the new funding, but*

*This small county was faced with a subsidy allocation that was actually reduced by over \$75,000!*

How can we explain to families that yes, subsidy funding was increased at the state level, but that their local service provider won't see any of that new funding, and by the way, they were also REDUCED from previous levels.

This means more families in Mitchell County won't be able to accept that new job. Their children won't be able to benefit from the high-quality care that's readily available in the community, and let's be honest, those small-business owners that operate child care facilities will face harder and harder decisions in how to continue operating their business. The cycle is vicious, and it affects parents, employers, and children.

I'd like to recommend again that the funding formula that allocates subsidy dollars to county departments of social services be reviewed to ensure that counties who are appropriately managing their subsidy expenditures will not be penalized through allocation reductions or be denied access to new funding.

Thank you again for this opportunity to speak with you about services for children.

*Jennifer W. Simpson  
Executive Director*

# The Child Care Subsidy – An investment in early education, family stability, and economic opportunity

## Background:

- North Carolina receives \$296.5 million from the federal government and appropriates an additional \$140.1 million in state funds for subsidized child care that flows to North Carolina counties through the Division of Child Development. (see “Funding Sources for Subsidized Child Care in North Carolina” for details)
- Child care programs are reimbursed based on a rate established by the Division of Child Development. The rates vary according to age of child, Star License level of the child care program, and county of residence.

## The Problem:

- The formula used by the Division of Child Development to determine the reimbursement rate is not equitable for North Carolina’s counties: it is not based on the cost of providing child care, does not factor in cost of living, and has not kept pace with inflation. (see reverse for more information)
- The General Assembly does not allocate enough funds to serve eligible families. 35,963 eligible NC children (472 in Buncombe County) are on the waiting list for subsidized child care
- Child care providers that accept child care vouchers struggle to cover the real cost of providing care and must find other ways to cover the actual cost. This may mean charging higher co-payments, raising outside funds (if the center is a nonprofit), or raising costs for care for non-subsidized children. Some child care centers serving a high percentage of subsidized children cannot remain viable with the eroding value of the reimbursement.

## What is Needed:

1. North Carolina should restructure the funding formula for the child care subsidy program to create a more equitable and transparent funding structure that takes into account the actual cost of care and cost of living in areas across the state.
2. North Carolina should increase the recurring funds for the child care subsidies.
3. North Carolina should continue to invest and promote high quality early childhood education and care.
4. North Carolina leaders should lobby the United State Congress to increase funds available to states for child care subsidy programs such as the Child Care and Development Fund, Social Services Block Grant, and Temporary Assistance for Needy Families.

## Why Affordable Child Care is Important to North Carolina's Future

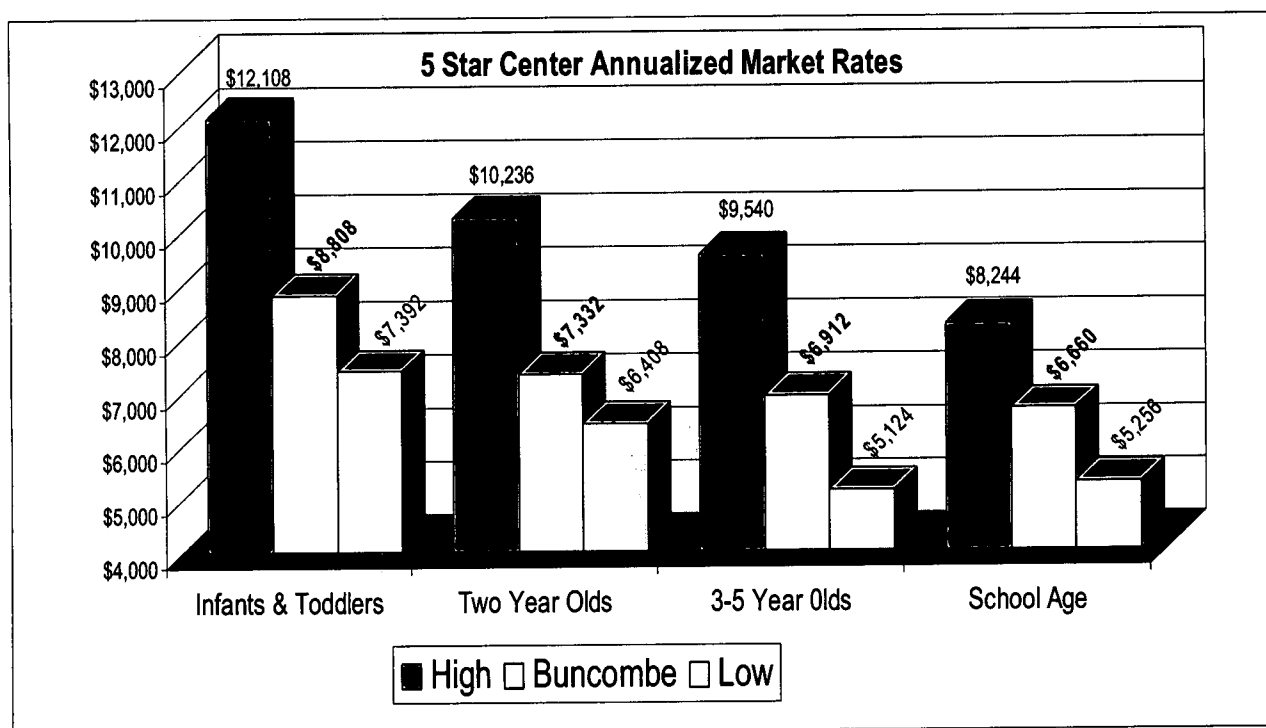
**Early Education and Development:** Studies show that quality child care and early education programs decrease the likelihood of special education enrollment, juvenile delinquency, adult incarceration, and welfare participation. All these increase overall quality of life and reduce government spending. (National Economic Development and Law Center, 2004)

**Family Economic Security:** Accessible and affordable child care promotes employment stability for working parents. Single mothers receiving child care scholarships are 40% more likely to be employed after 2 years than those mothers that don't get scholarships. If families lose jobs they must often rely on public assistance to make ends meet. Every \$1 invested in early childhood programs for low-income children saves the community \$7 later on. (NC Partnership for Children)

## The Equity Gap for Buncombe County

The cost of living in the greater Asheville area and Buncombe County is similar to other urban counties in North Carolina. However, the child care market rate for Buncombe often lags significantly behind other urban counties – undermining the economic stability of both families and child care providers in our community. The market rate is the maximum amount reimbursed to a child care provider for a child eligible for the child care subsidy. The actual cost of care may be higher than the market rate and centers may require parents to pay the difference between the reimbursement (subsidy) and the cost.

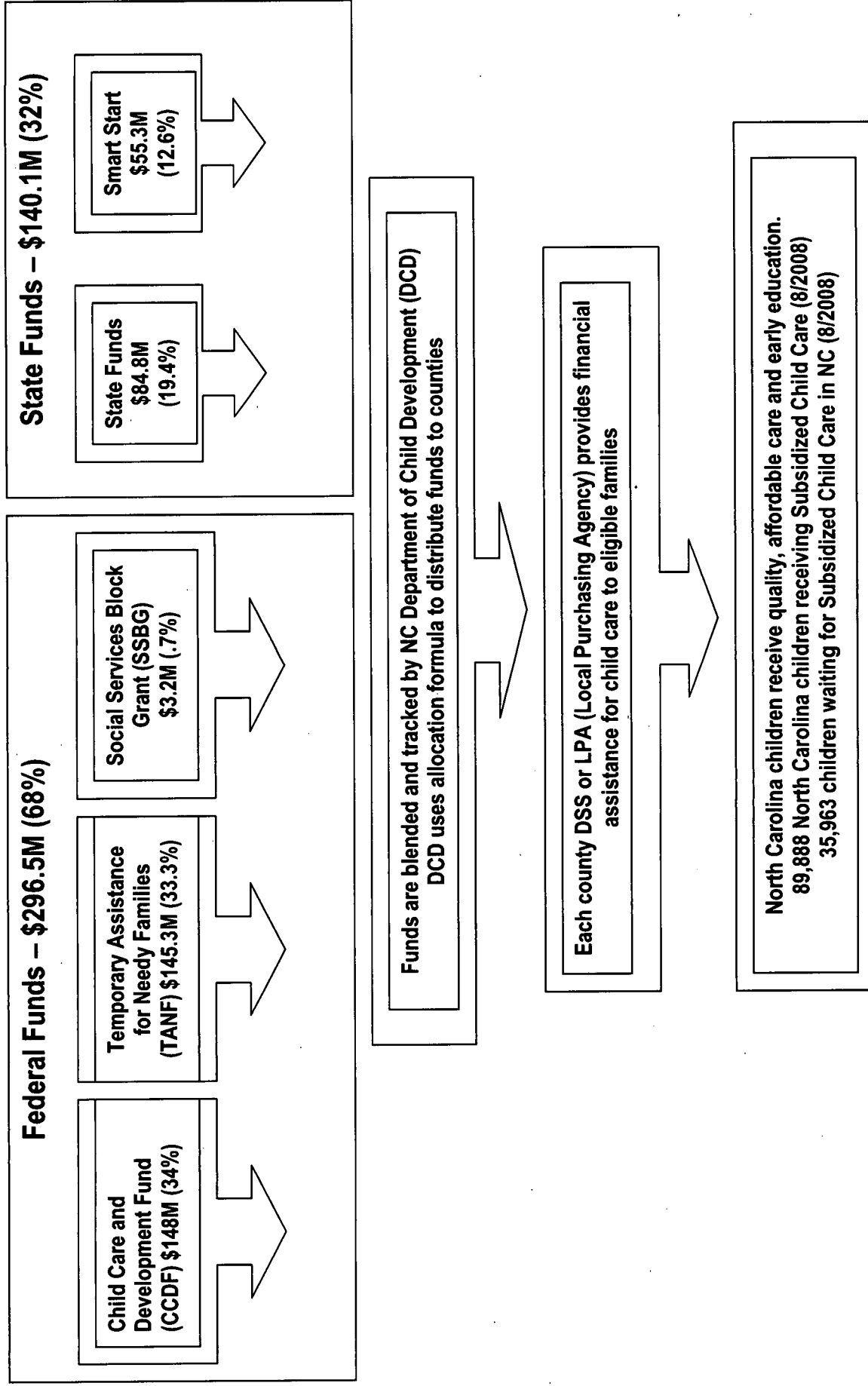
The tables below show the market rate equity gap for high quality child care centers (4 & 5 Star Licensed) in Buncombe County when compared to other counties in North Carolina. According to data from Buncombe County Child Care Services, 38 Five Star Centers and 21 Four Star Centers were operating in the county as of 8/18/08. Based on the average cost of care for a two-year-old at a Five Star Center in Buncombe County, the market rate (subsidy) only covers 82% of the cost – a \$1560 annual difference or over 11% of a full-time minimum wage worker's annual earnings (based on \$6.55 x 52 weeks x 40 hours).



Monthly Rates	Four Stars				Five Stars			
	Infants & Toddlers	Two Year Olds	3-5 Year Olds	School Age	Infants & Toddlers	Two Year Olds	3-5 Year Olds	School Age
High	\$943	\$853	\$752	\$652	\$1,009	\$853	\$795	\$687
Buncombe	\$653	\$551	\$523	\$525	\$734	\$611	\$576	\$555
Low	\$600	\$472	\$396	\$406	\$616	\$534	\$427	\$438

Source: Division of Child Development Subsidized Child Care Rates for Centers, October 2007

# FUNDING SOURCES FOR SUBSIDIZED CHILD CARE IN NORTH CAROLINA





# FUNDING SOURCES FOR SUBSIDIZED CHILD CARE IN NORTH CAROLINA

## Child Care and Development Fund (CCDF) - Federal

- Largest source of federal funding
- Has 3 components: mandatory, matching and discretionary
- CCDF funds must be spent on child care for parents that are in education/training/employment
- 70% of the mandatory/matching funds must be spent on low income families (families receiving or transitioning off of, or at risk of dependency on public assistance)
- Discretionary funds can be spent on other income-eligible families who are working or attending school
- Requires state match for some of the funds
- CCDF also funds quality initiatives
- Requires states to give priority to children with special needs who need child care services. Each county has a "set-aside" that can only be spent to assist children with special needs.

## Temporary Assistance for Needy Families (TANF) - Federal

- Federal block grant funds used to provide financial assistance to needy families; end dependency; encourage formation and maintenance of two parent families.
- States have flexibility to make program and funding decisions. Funds can be used for many services, including child care. States can use up to 30% of their TANF funding to CCDF or SSBG. When this happens, the TANF funds may be used to follow the purpose of that funding source.
- Some TANF funds are included in direct allocation to counties. In this case, the TANF funds can only be used to pay for child care to support employment.

## Social Services Block Grant (SSBG) – Federal

- No state match is required when these funds are used for child care
- SSBG funds are used to fund various social service programs, including CPS, adult day care, foster care/adoption services.
- When used for child care, SSBG funds can be used to pay for child care to support employment/training, for children receiving child protective services or child welfare services; a child's developmental needs; or when a family is facing a crisis.

## State Funds

- Appropriated annually by NC General Assembly
- Can be used for any of the need categories

## Smart Start

- Appropriated annually by NC General Assembly
- Funding flows from the Division of Child Development to North Carolina Partnership for Children then allocated to local partnerships then to LPAs.
- Required to spend at least 30% of their funding to expand child care subsidies.
- Funds can only be spent on children ages 0 through 5.

CCDF, TANF, SSBG, and State funds are blended together at the state level. Each county DSS receives a single annual allocation of funding for child care. The allocation is dependent upon the amount of state funds approved by the General Assembly and funds approved in the federal budget. Funding is issued for the state fiscal year, July 1 through June 30. The Division of Child Development also issues funding authorizations to the LPAs for Smart Start funds designated by the local Smart Start Partnership for subsidy services.

The allocation formula is outlined in state legislation:

1. Estimate each county's need for subsidy funds based on the number of children under age 11 with a parent or both parents working and whose family's income does not exceed 75% of the state median income. This amount is adjusted by subtracting the amount of funding equal to 30% of the Smart Start allocation for that county which must be spent on subsidy services.
2. Since the need is greater than the amount of funding, each county receives a pro-rata share of the funding.
3. A hold harmless factor is applied which requires that a county's allocation shall be no less than 90% of their 2001/02 initial non-smart start allocation.

Funds may be reverted or reallocated during the year depending upon spending patterns

Alan Kirkpatrick  
Concerned Parent of a Child in Day Care  
20 Griffing Cir.  
Asheville, NC 28804  
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c)828-712-7774  
alan\_kirkpatrick1@yahoo.com

Introduction- Alan Kirkpatrick, father of a child, soon to be two children, in day care

Thanks to the Commission for your work on behalf of the children of NC

My concerns revolve around maximizing the quality of child care for my children, the children of Buncombe County, and all children in NC

I am concerned about the formula used to disperse subsidy funds to NC counties

I am concerned that the subsidy rate does not cover the full cost of providing care for participating children

I am concerned that there is a waiting list of eligible families to receive child care subsidy

My wife and I pay \$165 per week, \$660 per month, for our son's day care, a 5 star facility which does a good job of caring for our child but it is not what it could be given the financial restraints placed on it

The formula used to disperse subsidy funding to NC counties unfairly and unethically values the children of Buncombe County less as compared to the children in other NC counties.

In essence thru this formula, the government of NC values children in other counties more than the children in Buncombe County.

The formula is based on the rate paid for child care by families in each county rather than what it costs centers to care for children in each county. Our cost of living is higher in Buncombe County than most other NC counties, so the cost of doing business as a child care center is higher here than in almost every other community in NC. However our reimbursement rate for child care subsidy is lower than almost every other NC county.

My hope is that you will recommend to the legislature that the subsidy formula be studied and changed to distribute funds more fairly and ethically, valuing all NC children equally.

Given the complexity of the subsidy formula and related issues I don't know the dollar amount impact a change would make in my son's day care class. But I am confident that the revenues of the center would go up significantly and that the center would use those funds to increase the quality of my son's care, and that a more ethically correct system for all NC children would be the result.

I do think I know the dollar amount impact of fully funding the subsidy rate would be in my son's class.

I estimate that fully funding the subsidy rate would add \$2,400 annually in revenue to my son's class.

In our class of 12 two year olds I estimate that the center is missing out on \$2,400 per year in revenue because the subsidy rate is not fully funded

I am concerned that our center has to pull back on quality because of this.

I think all children in day care in NC deserve the best care possible and that centers would utilize these additional funds to increase the quality of care for our children.

The resulting increase in quality of childcare is an important and impactful and necessary investment in NC and our citizens.

Welcome to Asheville and Buncombe County – Ron Bradford, Smart Start of Buncombe County

Recognition that a number of questions surfaced at the Vance County Commission meeting re: M@4 and Smart Start.

Remarks will be more strategic in nature and offer a Buncombe County perspective of Smart Start and M@4 in Buncombe County.

Encourage the Commission to look at the early childhood education as a system – a system of a number of players working together in programming, blending of funds and providing in-kind support - rather than as individual parts.

In Buncombe County, Smart Start not only provides funds but also administer the M@4 funds and works directly w/

- Office of School Readiness
- County services, including BCCCS, DSS, Health Center
- Head Start
- Private non profit child care centers (Mt Area Children and Families, Eliada Homes)
- Buncombe County and Asheville City School systems
- AB Tech
- Other local children's services

Each of the above plays a critical role in the system

**For example**, M@4 provides over \$1.6 m to assist w/ serving 331 at risk children (\$501 reimbursements do not cover the cost of care – 3 to 5=\$750)

- Smart Start provides **Quality** services and is the (administrator) for M@4, and provides over \$128k in subsidy to supplement those 331 children
- The above programs provide **Quality** teachers, classrooms, education and training, equipment, supplies and more.
- AB Tech provides **Quality** education for those teachers
- BCCCS provides **Quality** CCR&R and teacher training
- Other local children's agencies provides **Quality** services

Without programming and funding of the all of the above the system is in trouble.

Suggestions:

- Make M@4 year round to provide for continuity in care
- Support for Family Home providers appears to be drying up (less support services for special needs children (Physical), DCD special grants, TA to maintain Star Ratings

**Smart Start and More at Four Pre-K Program:  
Complementary but Unique Early Childhood Initiatives for School Readiness**

	<b>Smart Start Initiative</b>	<b>More at Four Pre-K Program</b>
<b>Mission</b>	<b>School Readiness</b>	<b>School Readiness</b>
<b>Target Population</b>	All children birth to age five	At-risk four-year-olds
<b>Objectives</b>	Planning and funding to: <ul style="list-style-type: none"> <li>• Improve access to child care</li> <li>• Improve the quality of child care</li> <li>• Improve access to health services for children</li> <li>• Improve parenting skills</li> </ul>	<ul style="list-style-type: none"> <li>• Serve children who are not getting the educational preparation they need before starting school</li> <li>• Create a standard, statewide pre-K program</li> </ul>
<b>Strategies</b>	<ul style="list-style-type: none"> <li>• Provide child care subsidies for low-income parents</li> <li>• Provide technical assistance to child care centers to improve quality</li> <li>• Provide opportunities for teachers in child care centers to improve their education in early childhood</li> <li>• Provide parent education and resources</li> <li>• Provide access to health services for children</li> <li>• Provide funding and administrative support to More at Four at the local level</li> <li>• Set performance goals for local partnerships and monitor for results</li> </ul>	<ul style="list-style-type: none"> <li>• Provide high quality pre-K</li> <li>• Set uniform, state standards for pre-K, including curriculum, teacher credentials and class size</li> <li>• Help pre-K teachers improve credentials</li> </ul>
<b>Scope</b>	Umbrella statewide initiative with broad range of activities	Targeted statewide program with narrow focus
<b>Administration and Funding</b>	<ul style="list-style-type: none"> <li>• Nonprofit organization at state and local levels</li> <li>• Public / private partnership</li> <li>• State and private funding</li> <li>• Local decision-making about programs provided</li> </ul>	<ul style="list-style-type: none"> <li>• State program</li> <li>• State funding, plus other sources of funding contributed according to local decisions</li> <li>• Standard program; local decision-making about location of pre-k classrooms; all classrooms meet state standards</li> </ul>

**Comments to the Legislative Study Commission on Children and Youth  
Asheville, NC, October 8, 2008  
Shea Henson, Executive Director  
Smart Start of Henderson County**

Thank you for this opportunity to speak with you today about the status of children in Henderson County.

I want to update you about what has been happening in Henderson County. In October 2007, almost a year ago, the United Agenda for Children, coalition of citizens, civic leaders, businesses, government and community agencies who united to make sure every child in Henderson County is safe, healthy and well educated, held a public forum called "Speak Out for Kids." This day long event was attended by over 280 residents of the county who were demographically representative of the county population as a whole. This group was asked to set priorities for our children.

The number one education priority recognized by this group was the need to *increase access to preschool education through increased subsidies and additional preschool spaces.*

It is this top education priority that I would like to discuss today. The child care subsidy program in Henderson County helps about 1,000 children a month attend quality child care programs which prepare them for later school success. Perhaps just as importantly, this program also enables the parents of these children to work, thereby increasing the family's economic status and contributing to the local, state, and federal tax base. The average cost of child care for a toddler in Henderson County is \$6,600 a year, which is one and a half times the cost of annual tuition at UNC-Asheville.

However, we do not have adequate funding to support all of the children and families who need this valuable service. Almost 300 children are currently on the waiting list for child care subsidy in Henderson County. Statewide, the waiting list is around 36,000 children. These are children who may not be able to ever access the quality early educational experience that will prepare them for success in school and later in life. But this is not just an educational issue for these children. It is also an economic issue for our county and state.

In Henderson County, families with children under six who used licensed child care earned over \$95 million in 2006 and paid over \$28 million in local, state and federal taxes.

Over 350 local businesses in Henderson County rely on employees who receive child care subsidy that enable those employees to work. Small businesses, as a whole, are most reliant on these employees.

The growing waiting list in our county hurts not only the children who can't receive the educational services they need and the families who can't afford the care without child care subsidies, but also the local employers who can not attract and retain a qualified work force because of the lack of affordable child care.

A trend we have seen in Henderson County, and some of my colleagues across the state have indicated they face a similar issue, is a shortage of infant and toddler care availability in

**Comments to the Legislative Study Commission on Children and Youth  
Asheville, NC, October 8, 2008  
Shea Henson, Executive Director  
Smart Start of Henderson County**

particular. Younger children require smaller group sizes and lower teacher to child ratios in the classroom. This makes infant and toddler care more expensive to provide.

As the waiting list for child care subsidy grows, we have seen numerous child care facilities, mostly small businesses themselves, have to close classrooms and reduce the number of infants and toddlers they can provide care for. This has further stressed the child care system and working families in our county, as finding a child care placement for an infant has become nearly impossible.

I have heard more than one employer express their concern with losing quality employees due to the lack of available and affordable child care.

In difficult economic times such as these, we need to be doing all we can to support both working families and employers to keep our citizens in the workplace. I urge you to think of child care subsidy in terms of the economic impact it has at both the state and local level, and consider providing funding to this program at a level that will both adequately support the State's working parents and employers and will ensure the safety and future success of our future generations.

Thank you for your time.

Good Morning. Thank you so much for inviting us to share our opinions with you today. My name is Elisha Freeman and I am here representing the United Agenda for Children in Henderson County, NC. The United Agenda for Children is a coalition of citizens, civic leaders, businesses, government and community agencies who have united to ensure that children in Henderson County are safe, healthy and well-educated.

Last fall, we hosted *Speak Out for Kids*, a citizen engagement event where nearly 300 citizens who demographically represented our county came together to talk about critical children's issues and set priorities for kids in Henderson County. These priorities form a set of common goals for our community to focus on. I'd like to focus on the top four priorities set in our community because I believe they reflect the same needs of communities across our state.

The top priority for our citizens was to **'provide school nurses at nationally-recommended levels.'** We know that a child's health is central to his/her ability to learn. Today's school nurses are managing care for more and more children with chronic health conditions like asthma, life-threatening allergies and Type 2 diabetes. More students are on psychotropic drugs like Ritalin and Prozac, and school nurses are performing involved medical procedures for students with severe disabilities – a population that is newly mainstreamed into the public schools by federal law. Studies have shown that by having a school nurse present in a school, student performance improves and absenteeism is reduced. We also know that it saves valuable teaching time for teachers who, in the absence of a school nurse, are currently struggling to balance the time it takes to address the health care needs of a growing population of children with chronic illness with the time required to teach the expected curriculum. In 2005, North Carolina ranked # 36 in the school



nurse to student ratio, with a ratio of 1 nurse for every 1,571 students. The national recommended average is 1:750. Our neighbor, South Carolina takes the lead in southeastern states by ensuring funding for a school nurse in every school. North Carolina can improve the delivery of services to children and youth by providing funding that at least gets us to the nationally recommended average of 1 nurse to every 750 students and better yet, by ensuring funding for a school nurse in every school.

Henderson County, NC School Nurse Ratio				
School Year	05/06	06/07	07/08	08/09
Henderson County	1: 2538	1:2182	1:1769	1:1480*
North Carolina	1:1,571	1:1,340	1: 1,250	unknown
National Recommendation	1:750	1:750	1:750	1:750
Information provided by Henderson County Department of Public Health				

Our second top priority is to **increase safe, affordable housing**. In Henderson County, there is a growing gap between housing costs and wages. While wages have remained fairly constant, cost of mortgage and rental housing have increased. Lack of affordable housing eventually leads to increased homelessness. This is a need for citizens young and old. Our working families need safe and affordable options for housing.

- **Increasing access to preschool education through additional funding for child care subsidies and additional preschool spaces** is also a top priority

for our community. Child Care is too expensive for many working families. **North Carolina ranks 8th as a least affordable state for preschool care.**

- **Working parents support our economy.** In 2006, working families in Henderson County who had children under the age of six who were enrolled in licensed child care paid over \$28 million in local, state and federal taxes. These tax receipts contribute to the building of bridges, schools, fire and police protection and many other services that benefit all residents in Henderson County.
- **Child Care subsidies support our county's work-force.** A total of 568 Henderson County employees rely on child care subsidy to help them pay for child care that enables them to work. Local health care and assisted living facilities employ 21% of all parents who receive child care subsidy in Henderson County. In order for a parent to receive a child care subsidy, they must be employed or enrolled in school.

Waiting lists for working families who need subsidies to afford quality child care for their children continue to grow. North Carolina can improve the delivery of services to children and youth by providing funding for child care subsidies to working parents who are not able to afford the costs of a safe, quality child care program for their children. By providing subsidies, we keep workers in the workforce.

Finally, **'increasing mental health services for children in the community and in schools.'** We must stop this mental health care crisis which is affecting people of all ages across the state of North Carolina. Ensuring funding for a social worker

in every school and investing in comprehensive, coordinated mental health care services that effectively meet the needs of children, youth and their families is essential to the overall well-being of our communities and our state.

Contact Information

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September 26, 2008

Legislative Study Commission on Children & Youth  
State Legislative Office Building  
300 North Salisbury Street, Room 530  
Raleigh, NC 27603-5925

Dear Commission Member:

Regrettably, I was unable to attend the public hearing on Wednesday, September 24, 2008 at Vance-Granville Community College; however, I have heard from the Smart Start staff who were in attendance that it was a good meeting. I would like to provide additional information on some of the questions that arose during the public hearing related to Smart Start.

First, let me address the discussion related to the relationship between Smart Start and More at Four. Smart Start and the More at Four Pre-Kindergarten Program are both helping North Carolina's children start school ready to succeed. These two important initiatives complement each other in that they each improve the quality of early childhood education available to our state's young children. For your reference, I have attached a chart comparing the two initiatives.

These initiatives are not duplicative. While they have the same overarching mission – school readiness – they are quite different in target populations, objectives, strategies, scope, administration and funding for promoting school readiness. North Carolina's school readiness goals could not be met without **both** Smart Start and More at Four.

Smart Start is a statewide initiative that includes community planning and funding for child care and early education, health and family support. The goal of Smart Start is that all children in North Carolina will arrive at school healthy and prepared for school success. In order to achieve this goal, Smart Start local partnerships develop a plan to address the needs of young children in their communities and Smart Start funds local programs, based on the approved plan, such as child care subsidies, technical assistance to child care programs to improve quality, contributing funds for More at Four, parent education and resources, teacher education and programs that provide access to health services. Thus, Smart Start strategies are locally-determined to meet specific community needs, within parameters and research-based accountability standards set at the state level. Local boards approve and oversee the local activities. Smart Start receives state funding but is a private, non-profit organization.

**The North Carolina Partnership for Children, Inc.**

Stephanie Fanjul, President  
office: 1100 Wake Forest Road  
Raleigh, North Carolina 27604



INNOVATIONS IN AMERICAN GOVERNMENT  
AWARD WINNER

voice: 919-821-9501 fax: 919-821-1021  
e-mail: [sfanjul@ncsmartstart.org](mailto:sfanjul@ncsmartstart.org)  
web: [www.ncsmartstart.org](http://www.ncsmartstart.org)

While Smart Start focuses on all children birth to five, More at Four only serves at-risk four-year-olds – those four-year-olds who are not getting the learning experiences they need to be successful in kindergarten and beyond. More at Four is a statewide, state-funded, high quality pre-kindergarten program. It is more narrow and targeted than Smart Start. More at Four provides a research-supported, tailored educational strategy for preparing four-year olds who would be behind their peers when starting school without it. At-risk four-year olds can be served in four- and five-star licensed child care centers, Head Start programs and public schools. The decision on where to provide More at Four is made at the local level. However, all More at Four pre-K classrooms must meet specific state standards – standards that regulate curriculum, teacher credentials, class size and other factors that affect quality.

During the hearing, additional questions were raised that the Commission members asked for my response. However, I believe these questions would be best answered by the Division of Child Development (DCD) as they related to DCD processes and data. Questions included timely review of child care provider transcripts by the Workforce Section, the average cost of child care in North Carolina, and the number of children on the waiting list for subsidized child care.

I appreciate your interest and concern for the children of North Carolina. Please contact me if you have additional questions.

Sincerely,

Stephanie Fanjul  
President

/gw

Attachment

**Smart Start and More at Four Pre-K Program:  
Complementary but Unique Early Childhood Initiatives for School Readiness**

	<b>Smart Start Initiative</b>	<b>More at Four Pre-K Program</b>
<b>Mission</b>	<b>School Readiness</b>	<b>School Readiness</b>
<b>Target Population</b>	All children birth to age five	At-risk four-year-olds
<b>Objectives</b>	Planning and funding to: <ul style="list-style-type: none"> <li>• Improve access to child care</li> <li>• Improve the quality of child care</li> <li>• Improve access to health services for children</li> <li>• Improve parenting skills</li> </ul>	<ul style="list-style-type: none"> <li>• Serve children who are not getting the educational preparation they need before starting school</li> <li>• Create a standard, statewide pre-K program</li> </ul>
<b>Strategies</b>	<ul style="list-style-type: none"> <li>• Provide child care subsidies for low-income parents</li> <li>• Provide technical assistance to child care centers to improve quality</li> <li>• Provide opportunities for teachers in child care centers to improve their education in early childhood</li> <li>• Provide parent education and resources</li> <li>• Provide access to health services for children</li> <li>• Provide funding and administrative support to More at Four at the local level</li> <li>• Set performance goals for local partnerships and monitor for results</li> </ul>	<ul style="list-style-type: none"> <li>• Provide high quality pre-K</li> <li>• Set uniform, state standards for pre-K, including curriculum, teacher credentials and class size</li> <li>• Help pre-K teachers improve credentials</li> </ul>
<b>Scope</b>	Umbrella statewide initiative with broad range of activities	Targeted statewide program with narrow focus
<b>Administration and Funding</b>	<ul style="list-style-type: none"> <li>• Nonprofit organization at state and local levels</li> <li>• Public / private partnership</li> <li>• State and private funding</li> <li>• Local decision-making about programs provided</li> </ul>	<ul style="list-style-type: none"> <li>• State program</li> <li>• State funding, plus other sources of funding contributed according to local decisions</li> <li>• Standard program; local decision-making about location of pre-k classrooms; all classrooms meet state standards</li> </ul>

**MINUTES**  
**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

October 22, 2008

The Legislative Study Commission on Children and Youth met on Wednesday, October 22, 2008 at 10:00 a.m. in Room 1228 of the Legislative Building in Raleigh. The following Senate Members were present: Co-Chair Senator Ellie Kinnaird, Senator Doug Berger, and Senator Richard Stevens. The following House Members were present: Vice-Chair Representative Earle, Representative Folwell, Representative Insko, and Representative Johnson. The following Public Members were in attendance: Paula Carden, Dr. Helen Brantley, Dr. Austin Connors, Mia Day Burroughs, Judge Mark Galloway, John Cox, and Johnnie Ray Farmer and Glenn Osborne. A visitor registration sheet is attached and made part of these minutes.

The presiding Chair, Senator Kinnaird, called the meeting to order.

Cyndie Bennett, Director of the Division of Child Development was recognized for a presentation on the child care subsidy county allocations and market rates as well as transcript processing in the Division of Child Development. Her handouts are included and made part of these minutes.

Janice Fain, Administrative Section Chief of the Division of Child Development was recognized for a presentation on the subsidized child care waiting list. Her handout is included and made part of these minutes.

Members' questions were answered regarding the number of parents who work and have their children enrolled in subsidized child care.

Discussion ensued about the administration and fraud rates within county social services.


Stefanie Fanjul, President of the North Carolina Partnership for Children was recognized for a presentation on the Smart Start program. Her presentation is included and made part of these minutes.

John Pruette, Executive Director of the Office of School Readiness, was recognized for a presentation on the More at Four program. His presentation is included and made part of these minutes.

The Chair noted future meeting dates of the Commission. She also noted that a summary of issues raised at the public hearings was included in Members' information. The summary is included and made part of these minutes.

There being no further business, the Chair adjourned the meeting at 12:00 p.m.

Respectfully submitted,



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Senator Kinnaird  
Presiding Chair



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Michelle Hall  
Committee Assistant





## **LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

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### **AGENDA**

October 22, 2008  
Room 1027/1128, Legislative Building  
10:00 AM

### **WELCOME AND INTRODUCTION**

Rep. Alice Bordsen, Co-Chair  
Sen. Ellie Kinnaird, Co-Chair

- Cyndie Bennett, Director, Division of Child Development
- Janice Fain, Administrative Section Chief, Division of Child Development
- Stephanie Fanjul, President, North Carolina Partnership for Children
- John Pruette, Executive Director, Office of School Readiness

### **Committee Discussion**

### **Future Meetings**

November 5  
November 19

# VISITOR REGISTRATION SHEET

Legislative Study Commission on Children and Youth

October 22, 2008

Name of Committee

Date

**VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK**

NAME

FIRM OR AGENCY AND ADDRESS

Janice Fair	NC DHHS - Div. of Child Dev.
Heather Laffler	DCD
John Pruette	DPI / Office of School Readiness
Stephan Jaupel	NCFC
Roz Smith	NC Child Care Coalition
Brittany Farrell	NCFC
Martin Pharr	NC DJJDP
Vanisa Warren	NC Justice Center
Blaine Henry	<del>Blaine Henry</del> Blaine Henry -

## VISITOR REGISTRATION SHEET

Legislative Study Commission on Children and Youth      October 22, 2008

Name of Committee

Date

**VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK**

NAME	FIRM OR AGENCY AND ADDRESS
Kevin Ryan	DPH/DHHS
Stephanie Nantz	DOA/YAIO
Jennifer Mahan	MHANC
Soreni Schmidt	Action for Children NC
Kristen Guillory	Office of School Readiness, DPI
ANN WALKER	DUKE
Dan Foster	Duke

# Market Rate Methodology

## Background

Federal law requires that payments to child care providers for child care subsidy services be based on a biennial survey of rates charged to parents, so that payment rates are competitive with the private market. This allows for parental choice to a variety of care. State legislation (S.L. 2007-323, Sec. 10.15) sets the parameters for establishing market rates and states that market rates are the maximum amount that providers are paid for subsidized child care, i.e., providers receive the market rate or their private rate, whichever is less.

All child care market rates are based upon surveyed payment data that is specific to county or regional information. Rates are set for each age category in every county using a two-step process. This process is done separately for family child care homes and child care centers.

### Step 1 – Setting a Base Rate

For each county and for each age category, a **base rate** is set where the majority of children are in care by star rating (1-5). This is done by ranking the rates at this star level from high to low and establishing the 75<sup>th</sup> percentile. The base rate is used as the starting point to build rates for all other star levels within that age category.

For counties with **less than 50** children per age group, a **regional rate** is used to set the base rate. Regions consist of counties grouped by similar surveyed payment data. For counties with **50 or more** children per age group, a **county rate** is used to set the base rate.

### Step 2 – Setting Rates per Star Level

To set the rates for each of the remaining star levels, the statewide slope between star ratings from statewide survey data is applied to the base rate. For counties with less than 50 children per age group, the statewide slope is applied to their regional base rate. For counties with 50 or more children per age group, the statewide slope is applied to their county base rate.

## Implementing Rate Adjustments

Market rates have not always increased after every survey, due to implementation cost. Prior to 2006, the last full implementation of market rates occurred in 2000, based on results from 1997 survey data.

In SFY 06-07, the General Assembly appropriated \$6.7 million for up to 35% implementation of the 2005 surveyed rates. Only 3-5 star rates were adjusted because: almost 75% of children in regulated care are in 3-5 star facilities; focusing on 3-5 star rates helps support the cost of higher quality care; and limiting the adjustment to 3-5 star rates reduced the overall cost of implementation.

In SFY 07-08, the General Assembly appropriated \$5.7 million for up to 30% implementation of the 2007 survey rate recommendations. Again, only 3-5 star rates were adjusted.

A new Market Rate Survey is currently underway for 2008-09. Results are expected by Spring 2009.

## **Child Care Subsidy: County Allocations and Market Rates**

### Allocation Formula

The Division of Child Development (DCD) allocates Non-Smart Start child care subsidy funds to counties via a formula. The formula was developed by DCD based on recommendations from an advisory group that included DSS directors, and is outlined in the state budget bill (S.L. 2007-0323 Section 10.16). It was first implemented in SFY 2003-04. The formula allocates funds based on the projected cost to serve eligible children, as described below.

1. Census data is used to obtain the projected number of children under age 11 in working families who earn less than 75% of State Median Income for each county. This provides an estimate of the number of children who are potentially eligible for subsidized child care in each county.
2. The average subsidy payment for the past year is calculated for each county to obtain an estimate of how much it cost to serve children receiving subsidy.
3. By multiplying the average cost by the number of children potentially eligible, a total cost per county to serve all eligible children is obtained. Counties then receive a prorated share of the available subsidy funds based on this cost.

### Market Rates

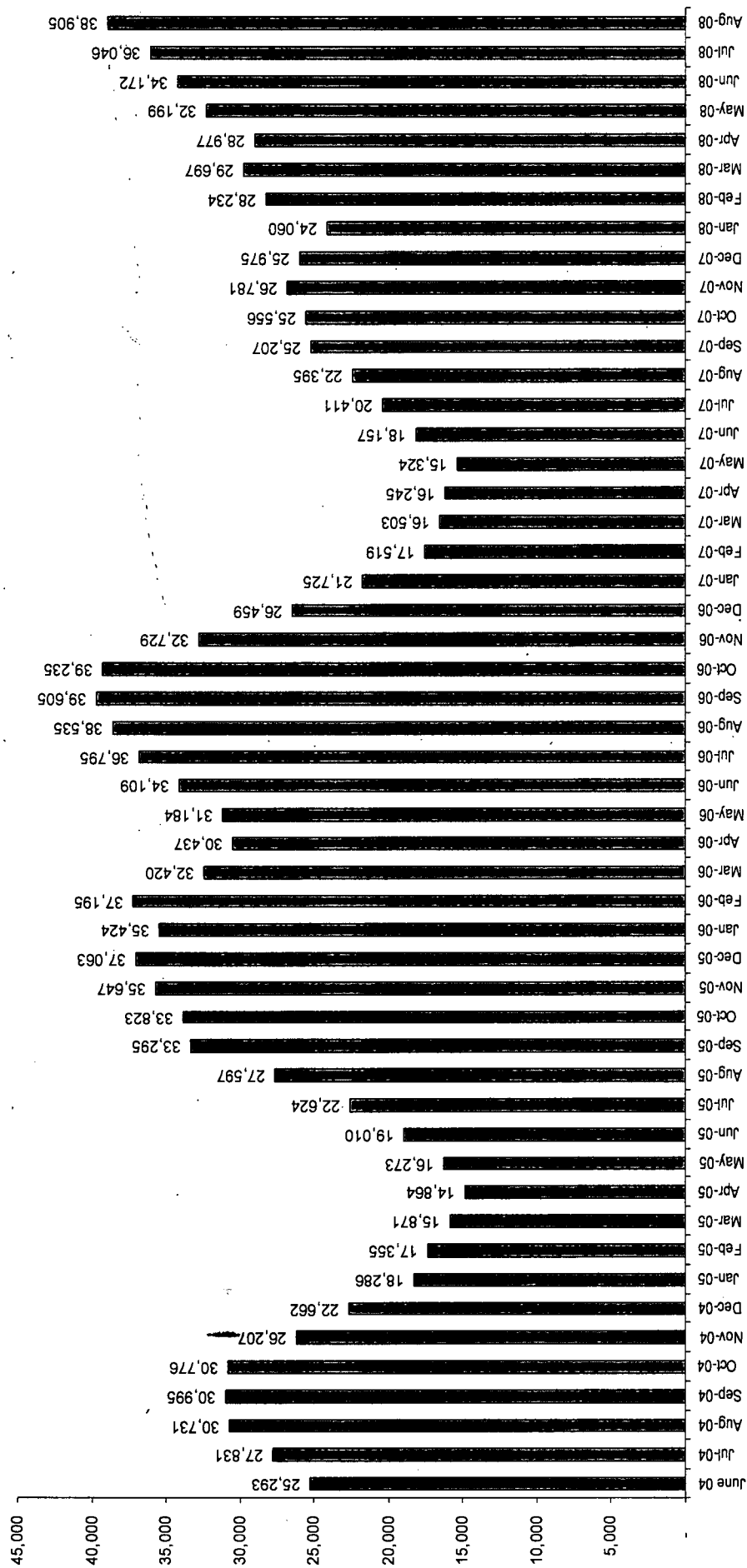
DCD determines the rates that providers will be paid for subsidized child care by surveying the private child care market every two years. In this way, payment rates for subsidized child care can be set that are competitive with the price of care in the private market. There is currently a market rate survey for 2008-09 underway.

- The results from the survey may be used to set market rates for each county, by age group and type of care (center or home-based).
- The county market rate is the maximum amount that providers are paid for subsidized care, i.e., providers receive the market rate or their private rate, whichever is less.
- Market rates have not always increased after every market rate survey, due to the cost to implement them. Prior to 2006, the last full implementation of market rates occurred in 2000, based on results from 1997 survey data.
- The General Assembly appropriated funds for market rate increases in SFY 06-07 (up to 35% implementation of the 2005 surveyed rates) and in SFY 07-08 (up to 30% implementation of the 2007 surveyed rates).
- Market rates are not determined by the allocation formula. However, the average subsidy payment is used in the allocation formula, so market rates can have an impact on that factor of the formula.

## Subsidized Child Care Waiting List

- The number of children on the waiting list is used to gauge the need for subsidized child care over time.
- In SFY 08-09, there is currently \$431 million allocated for child care subsidies through the Division of Child Development. However, that is not enough funding to meet the demand. There continues to be an on-going need for subsidized child care to support low-income working families. The estimated number of potentially eligible children based on population and family income is estimated to be 383,558 children statewide.
- Counties start waiting lists when there are not enough funds available to serve all the families that apply for subsidized child care. A basic screening of the family is done to make sure they are eligible, and periodic contact with families is made to determine if there is a continued need. Counties may establish priorities for serving families based on the reason care is needed (ex: employment, Child Protective Services). Two-thirds of the counties now have waiting lists for services.
- The number of children eligible for subsidy and who are waiting for services statewide is currently 38,905. The all-time high for the statewide waiting list was 39,605 in September 2006.
- The waiting list can vary from month to month, and an increase in children served may not always mean a decrease in the waiting list statewide. While 2300 more children were served in SFY 07-08 (159,457) than in SFY 06-07 (157,119) and the average monthly number of children served increased from 93,531 to 97,509 during the same time, the demand for child care subsidies has not diminished.
- Waiting list numbers tend to increase when there is an increased awareness of the service offered (ex: when a county begins removing children from the waiting list, other families come in to apply that have heard services are now available). Changes in the economy can cause the waiting list to increase when more families need care as they are in school or looking for employment. Finally, the waiting list increases when funding levels remain constant or increases are primarily to maintain services.
- The average cost of care has increased between 2%-3% each year and children are remaining in care for more months within the SFY. The resulting slower turnover in each slot funded with child care subsidies can cause the waiting list to grow as children are added faster than they are removed to fill an open slot.
- In SFY 08-09, counties began entering waiting list data more accurately within the Division's Subsidized Child Care Reimbursement System.

# Number of Children Waiting for Subsidized Child Care Services in North Carolina State Fiscal Year 2004-05 to SFY 2008-09 (YTD)



**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH  
2008 PUBLIC HEARING SUMMARY**

<b>Name/Organization</b>	<b>Hearing *</b>	<b>Issues Addressed</b>	<b>Concerns/Recommendations</b>
Edith Locke (Child Care Services Association)	V-G	Education Funding	<ul style="list-style-type: none"> <li>• Early childhood – workforce education, retention, compensation</li> </ul>
Anna Mercer-McLean (child care director, Orange Co.)	V-G	Education Funding	<ul style="list-style-type: none"> <li>• Early childhood – quality of care/education</li> <li>• Smart Start – continue and expand</li> <li>• Wait list for child care</li> </ul>
Donna Stearns (Vance Co. Juvenile Crime Prevention Council)	V-G	Funding	<ul style="list-style-type: none"> <li>• JCPCs/funding</li> </ul>
Cindy Watkins (Alamance Partnership for Children)	V-G	Education Funding Other	<ul style="list-style-type: none"> <li>• Wait list for child care/Smart Start</li> </ul>
Rene Betancourt (Supervisor, Vance Co. DSS)	V-G	Child Protection	<ul style="list-style-type: none"> <li>• Wait list for child care</li> <li>• Social worker recruiting, retention</li> </ul>
Vernon Mason (day care director, Wilson Co.)	V-G	Education Funding Other	<ul style="list-style-type: none"> <li>• More at Four vs. Smart Start</li> <li>• DCD efficiency/customer service</li> </ul>
Linda Piper (Executive Director, NC Child Care License Association)	V-G	Education Other	<ul style="list-style-type: none"> <li>• DCD efficiency/customer service</li> <li>• Funding not keeping up with increased requirements for day care</li> </ul>
Deryl VonWilliams (Vance Co., learning center for students who are habitually suspended from school)	V-G	Education	<ul style="list-style-type: none"> <li>• Alternatives for students who are suspended from school</li> <li>• Accountability/LEA use of funds</li> </ul>
Peggy Grey (Vance Co., citizen)	V-G	Juvenile Justice Funding	<ul style="list-style-type: none"> <li>• At-risk youth in Vance Co.</li> </ul>
Lorrie Crawley (early educator, Warren Co.)	V-G	Funding	<ul style="list-style-type: none"> <li>• Child care subsidy</li> </ul>
Judy Johnson (Executive Director, Boys & Girls Clubs)	V-G	Education	<ul style="list-style-type: none"> <li>• Children 6-18 – after school mentoring, gang prevention, dealing with peer pressure, drop out prevention, parent involvement</li> </ul>
Ervin Stokes (First Step Mentoring Program)	V-G	Other	<ul style="list-style-type: none"> <li>• Help for people in the community to get programs started</li> </ul>
Kevin Leonard (YMCA of NC)	V-G	Other	<ul style="list-style-type: none"> <li>• Evaluation of child care regulations as they apply to after-school programs for older children</li> </ul>
Kevin Campbell (owner)	A-B	Funding	<ul style="list-style-type: none"> <li>• DCD efficiency/customer service</li> </ul>



of 3 child care centers, President, NC Child Care Association)		Other	<ul style="list-style-type: none"> <li>• Wait list for child care</li> <li>• More at Four funding</li> </ul>
Allison Jordan (Executive Director, Children First)	A-B	Juvenile Justice	<ul style="list-style-type: none"> <li>• JCPCs/funding</li> <li>• Raise juvenile jurisdiction to 18</li> </ul>
Pat Wallenborn (single parent of 2 children)	A-B	Other	<ul style="list-style-type: none"> <li>• Single parents forced to choose between parenting and holding a job with benefits/paid sick leave</li> </ul>
Jennie Eblen	A-B	Education	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Jacque Penick (Executive Director, Mountain Area Child and Family Center)	A-B	Education	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Ron Bradford (Executive Director, Smart Start, Buncombe Co.)	A-B	Other	<ul style="list-style-type: none"> <li>• Smart Start, More at Four, etc. must all work together – funding needed for all parts of the system</li> </ul>
Alan Kirkpatrick (father of child in day care)	A-B	Education	<ul style="list-style-type: none"> <li>• Wait list for child care</li> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Michael Lodico (Superintendent, Asheville City Schools)	A-B	Education	<ul style="list-style-type: none"> <li>• Programs in schools</li> </ul>
Jennifer Simpson (Executive Director, Mitchell-Yancey Partnership for Children)	A-B	Education	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Caroline Rodier (Executive Director, McDowell Co. Partnership for Children)	A-B	Education	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Sheila Hoyle (Southwestern Child Development)	A-B	Other	<ul style="list-style-type: none"> <li>• Early childhood – workforce issues</li> <li>• Smart Start, child care subsidy, etc.– funding needed for all parts of the system for it to work</li> </ul>
Lori Jones (NC Child Care Resource & Referral Council)	A-B	Other	<ul style="list-style-type: none"> <li>• Programs providing care for school age children</li> </ul>
Lanier DeGrella (Manager, NC Infant Toddler Enhancement Project, Child Care Services Association)	A-B	Other	<ul style="list-style-type: none"> <li>• Infants and toddlers up to age 3 – accessibility, affordability, and quality of care</li> </ul>
Jerry Rice (advocate for special needs children)	A-B	General Health Mental Health	<ul style="list-style-type: none"> <li>• Restructure the system, rather than</li> </ul>

		Education Child Protection	putting more money into it.
Tammy Greenwell (Blue Ridge Health Services)	A-B	General Health Mental Health	<ul style="list-style-type: none"> <li>• Need for school-based and school-linked health centers/funding</li> </ul>
Paul Tax (Executive Director, Addiction Recovery Programs)	A-B	Mental Health	<ul style="list-style-type: none"> <li>• Substance abuse prevention programs</li> </ul>
Holly Jones (Executive Director, YWCA, Asheville)	A-B	General Health Funding	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> <li>• Child care is also an economic development issue</li> </ul>
Theresa Morgan (Executive Director, CARE, Haywood Co.)	A-B	Child Protection	<ul style="list-style-type: none"> <li>• Child abuse – prevention/parent education</li> </ul>
Linda Poss	A-B	General Health	<ul style="list-style-type: none"> <li>• Mental health care/psychiatry</li> <li>• Shortages in health care workers</li> <li>• Supportive of several pieces of legislation that would benefit children and youth that were introduced but not passed by the GA</li> </ul>
Patti Long (Meridian Behavioral Health Services, Inc.)	A-B	Juvenile Justice Mental Health	<ul style="list-style-type: none"> <li>• DPI use of funds for at-risk students?</li> <li>• JCPCs/funding</li> <li>• Mental health reform</li> </ul>
Ellen Clarke (Executive Director, West Carolinians for Criminal Justice)	A-B	Juvenile Justice Mental Health	<ul style="list-style-type: none"> <li>• Community based alternatives</li> <li>• Raise juvenile jurisdiction to 18</li> </ul>
Elisha Freeman (United Agenda for Children, Henderson Co.)	A-B	Other	<ul style="list-style-type: none"> <li>• School nurses</li> <li>• Safe, affordable housing</li> <li>• Child care subsidy</li> <li>• Mental health services for children</li> </ul>
Shea Henson (Executive Director, Smart Start, Henderson Co.)	A-B	Education Funding	<ul style="list-style-type: none"> <li>• Increase access to preschool education through increased subsidies and additional preschool spaces</li> <li>• Child care is also an economic development issue</li> </ul>
Kate Pett/Leah Ferguson	A-B	Education	<ul style="list-style-type: none"> <li>• Teens age 11-15</li> </ul>
Jennifer Svenstrup (YMCA)	A-B	Other	<ul style="list-style-type: none"> <li>• Child care subsidy</li> <li>• Evaluation of child care regulations as they apply to after-school programs for older children</li> </ul>

\* V-G = public hearing held at Vance-Granville Community College on 9-24-08

A-B = public hearing held at Asheville-Buncombe Technical Community College on 10-8-08

- ❖ A total of 38 people spoke at the public hearings:
  - 13 at Vance-Granville
  - 25 at Asheville-Buncombe
- ❖ Vance-Granville hearing:
  - 7/13 addressed early childhood care/education, including quality of care and availability of care
  - Most frequently mentioned issue (at least 3) – waiting list for child care
- ❖ Asheville-Buncombe hearing:
  - 13/25 addressed early childhood care/education
  - Most frequently mentioned issue (at least 6) – market rate formula for child care subsidy unfair
- ❖ Subject areas covered (as indicated by the speaker on sign-in sheet)
  - Education (16) – majority dealt with early childhood care/education, but also mentioned: alternatives for suspended students, care for school age children, after school mentoring
  - Other (13) – many dealt with early childhood care/education or overlapped with other categories, but also mentioned: DCD efficiency/customer service, evaluation of child care regulations as they apply to programs providing care for school age children (note: these two issues were raised at both hearings)
  - Funding (10) – most dealt with early childhood care/education, but also mentioned: funding for JCPCs and at-risk youth
  - Mental Health (5) – mental health services and substance abuse services/prevention for children
  - Juvenile Justice (4) – continuing and funding JCPCs, raise juvenile jurisdiction to 18
  - General Health (4) – school-based and school-linked health centers, legislation to increase cigarette tax and to provide comprehensive sex education to students
  - Child Protection (3) – social worker recruiting/retention, child abuse prevention/parent education



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**Legislative Study Commission on  
Children and Youth**

Raleigh, NC

October 22, 2008

Mr. John Pruette, Executive Director

NC Office of School Readiness

## Mission



- **Provide high-quality academic pre-kindergarten for at-risk children.**
    - High-quality pre-k is a research proven strategy to prepare children for school success.
    - Pre-K is critical to the State Board of Education mission that every student will graduate.
    - Return on investment associated with early education is extraordinary.
    - Pre-K is increasingly viewed as an economic development strategy.
-

## Strategies



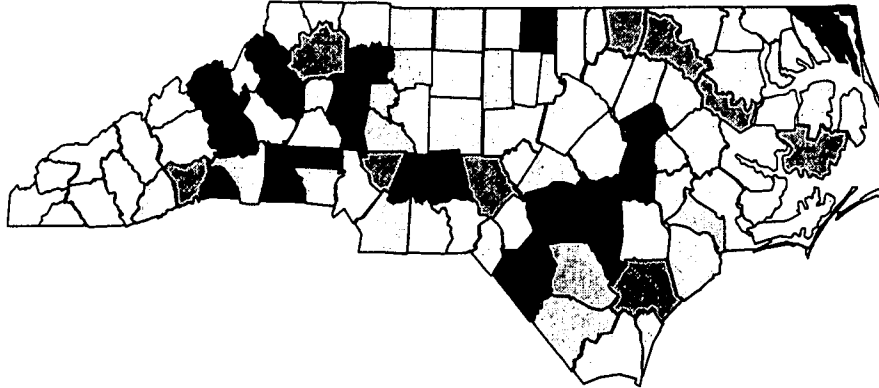
- Define and support standards for pre-kindergarten that align with and support K-12 standards
    - Framework for Change (DPI)
    - Advance pre-k teacher quality
  - Coordinate and leverage state and federal funding for pre-kindergarten services (More at Four, Head Start, Title I, Exceptional Children Preschool, Even Start)
- 

## More at Four



- Populations Served
    - Targeted “at-risk” population
      - Below 75% of State Median Income
      - 20% of slots may serve children above 75% SMI threshold if designated risk factor exists
      - Active duty military
    - Priority of service
      - 1. Unserved
      - 2. Underserved
-

## MAF Counties by Start Date



### 2001-2002

Jan 02, n=15
Feb 02, n=0
Mar 02, n=10
Apr 02, n=4

### 2002-2003

Aug 02, n=7	Dec 02, n=5
Sept 02, n=2	Jan 03, n=9
Oct 02, n=15	Feb 03, n=2

### 2003-2004

Aug 03, n=7
Oct 03, n=1
Nov 03, n=2
Feb 04, n=1

## More at Four

 North Carolina  
 Office of School Readiness  
 Department of Public Instruction

### □ Local Level Implementation

- Local MAF Committees
- Co-chaired by School Superintendent and Local Smart Start Board Chair
- Community early childhood stakeholders at the table
- Local Plan for MAF Implementation
  - Need
  - Capacity
  - Other resources

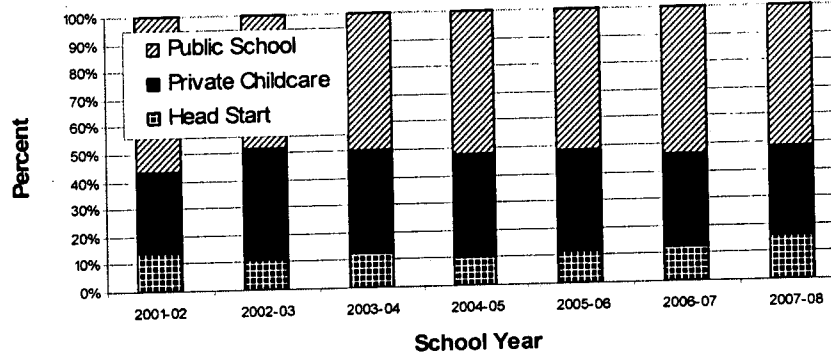
### □ Local Contractors

- LEAs
- Local Partnerships for Children

## More at Four

North Carolina  
Office of School Readiness  
Department of Public Instruction

Percent of Sites by Site Type by Year



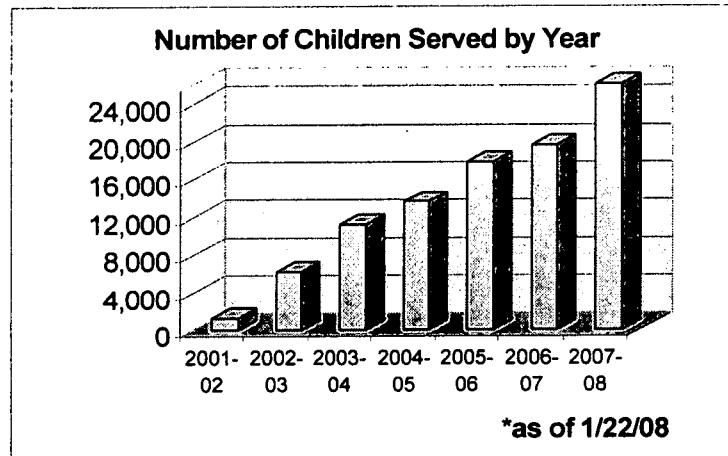
## More at Four

North Carolina  
Office of School Readiness  
Department of Public Instruction

- More at Four is recognized as one of the two highest quality state pre-k programs nationally by the National Institute of Early Education Research (NIEER).
- Evaluation results show that children have exhibited significant growth from pre-k through kindergarten in multiple skill areas.
- Evaluation findings are consistent with other large-scale studies on pre-k.
- More at Four offers "an important and ameliorative experience for children who otherwise may not have such opportunities in the pre-k year" (Peisner-Feinberg and Schaaf, 2008).

## More at Four

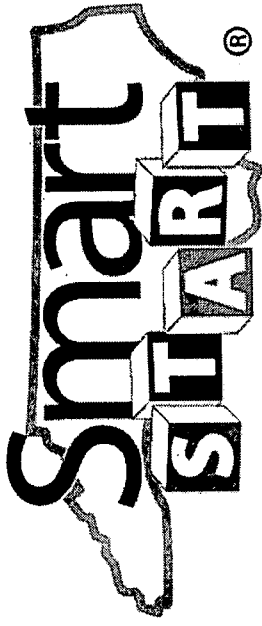
■ North Carolina  
■ Office of School Readiness  
Department of Public Instruction



## MAF – Return on Investment

- The program is proving successful.
  - More children served
  - Target population reached
  - Significant child outcomes
  - Maintained commitment to quality
  - National recognition





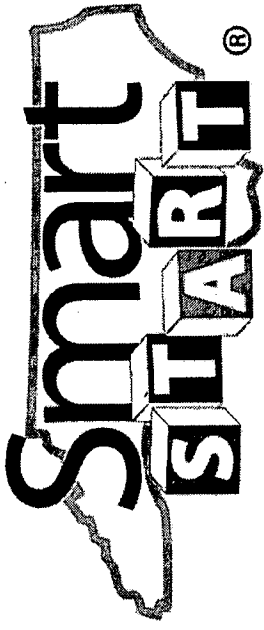
The North Carolina Partnership for Children, Inc.

# **Legislative Study Commission on Children and Youth**

Raleigh, NC

October 22, 2008

Stephanie Fanjul, President  
The North Carolina Partnership  
for Children, Inc.



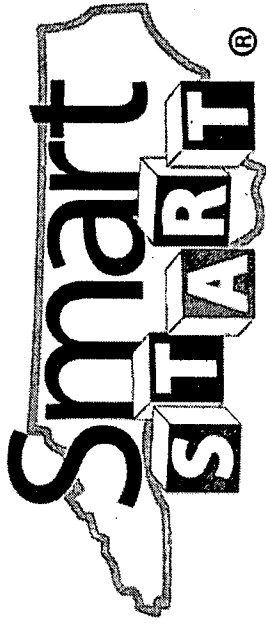
The North Carolina Partnership for Children, Inc.

## **Vision Statement**

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

## **Mission Statement**

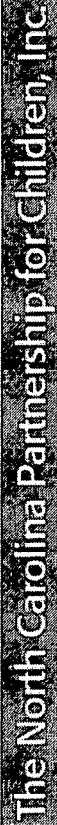
Advance a high quality, comprehensive, accountable system of care and education for every child beginning with a healthy birth.

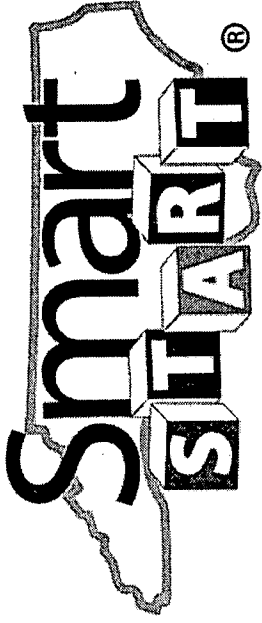


The North Carolina Partnership for Children, Inc.

## **Comprehensive System Approach**

- Established in 1993
- NCPC Board appointed by policy makers
- Over 2000 local board members
- Private match required
- 78 local partnerships in all 100 counties
- Foundation funding provides technical assistance for 12 states

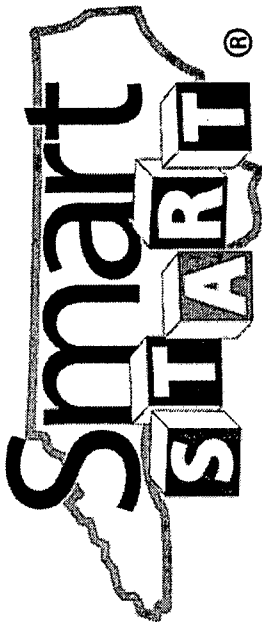




The North Carolina Partnership for Children, Inc.

## Comprehensive System Approach

- All children birth to 5 years
  - Integrated strategies
- Focus
  - 30% on Subsidy
  - 70% on child care related
  - Health
  - Family Support

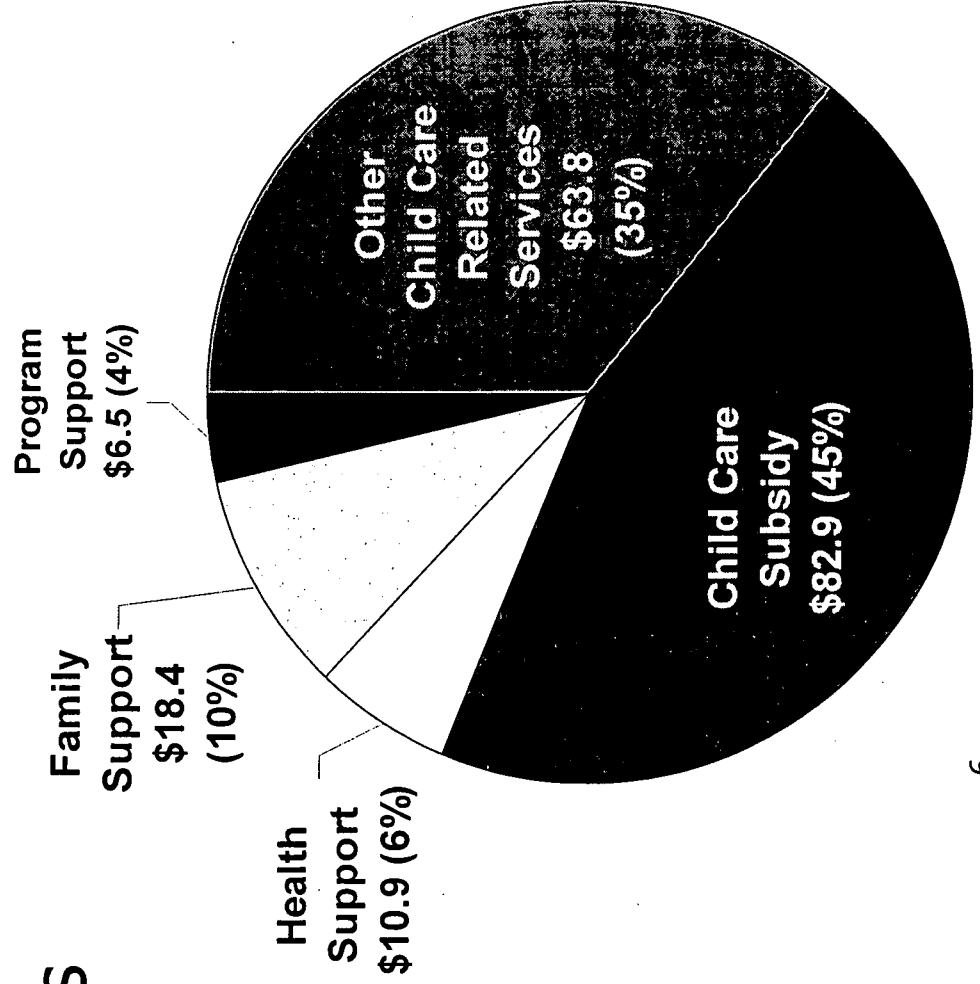


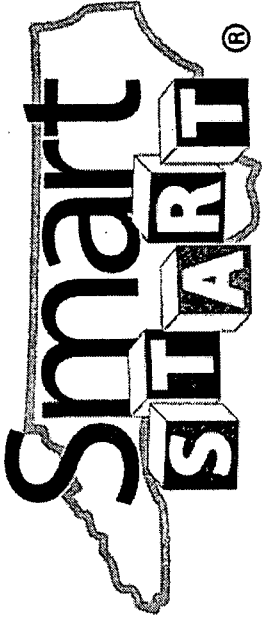
The North Carolina Partnership for Children, Inc.

# Smart Start Services Fiscal Year 2007-08 (\$ in millions)

## Total Services Expenditures

\$182.5 Million

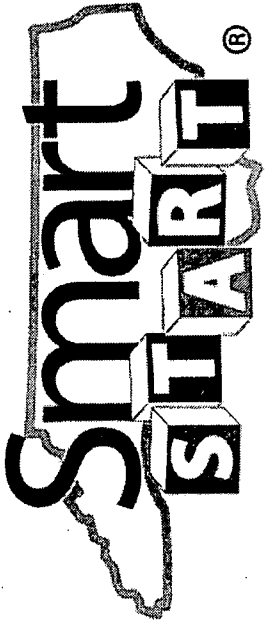




The North Carolina Partnership for Children, Inc.

## Financial Accountability

- Audits by State Auditor
- Monitoring by Division of Child Development
- All partnerships comply with open meetings law, conflict of interest policy, Ethics Commission, State cost principles, Smart Start legislative oversight



The North Carolina Partnership for Children, Inc.

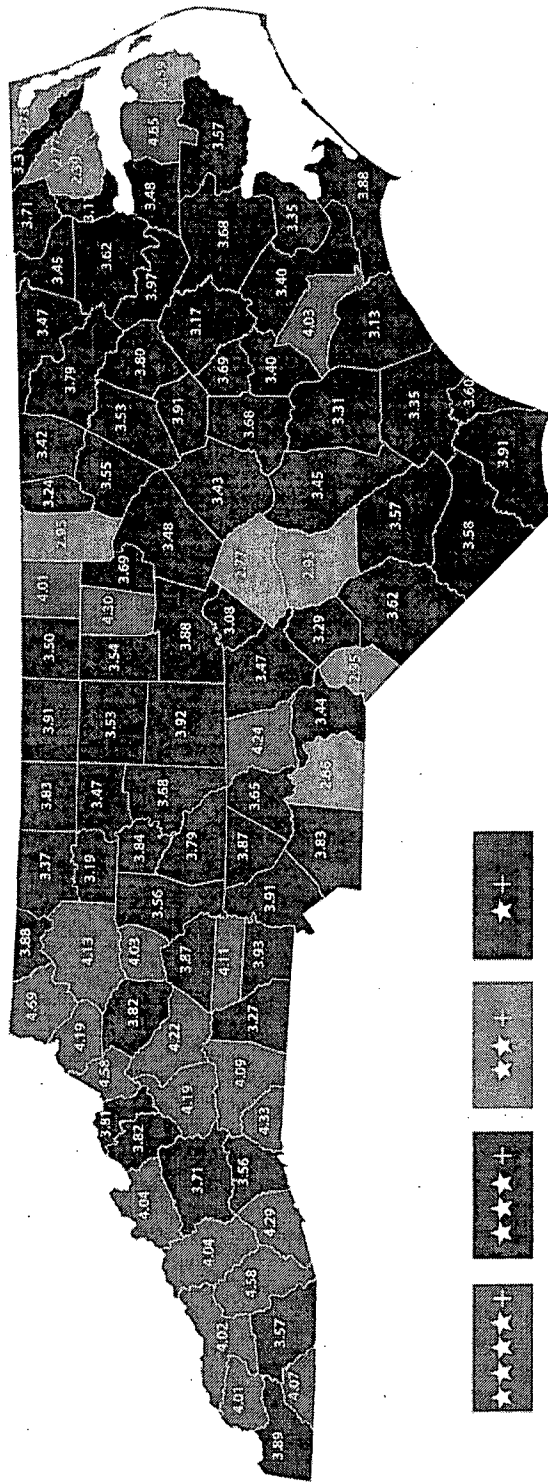
## **Program Accountability**

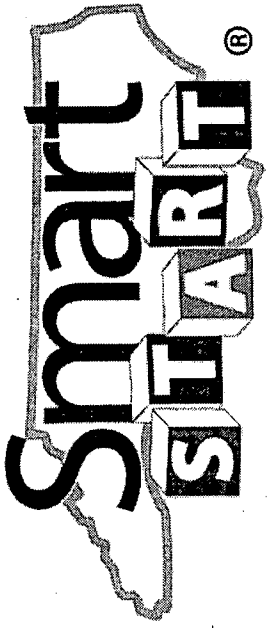
- Performance Based Incentive Program
  - NCPC oversight
- Measures community progress
  - Early Education: Quality, subsidy, workforce
  - Health: Well child visits, dental, body mass
  - Family Support: Literacy, parenting skills





# Average Star Rating for Licensed & Regulated Child Care Facilities





The North Carolina Partnership for Children, Inc.

## System Successes

- 57% of all children are enrolled in 4 & 5 star programs
- 88% of children with special needs in 4 & 5 star programs
- 56% of child care programs actively working on improving quality
- Smart Start contributed \$82 million toward child care subsidy
- MAF has expanded to reach all counties



September 26, 2008

Legislative Study Commission on Children & Youth  
State Legislative Office Building  
300 North Salisbury Street, Room 530  
Raleigh, NC 27603-5925

Dear Commission Member:

Regrettably, I was unable to attend the public hearing on Wednesday, September 24, 2008 at Vance-Granville Community College; however, I have heard from the Smart Start staff who were in attendance that it was a good meeting. I would like to provide additional information on some of the questions that arose during the public hearing related to Smart Start.

First, let me address the discussion related to the relationship between Smart Start and More at Four. Smart Start and the More at Four Pre-Kindergarten Program are both helping North Carolina's children start school ready to succeed. These two important initiatives complement each other in that they each improve the quality of early childhood education available to our state's young children. For your reference, I have attached a chart comparing the two initiatives.

These initiatives are not duplicative. While they have the same overarching mission – school readiness – they are quite different in target populations, objectives, strategies, scope, administration and funding for promoting school readiness. North Carolina's school readiness goals could not be met without **both** Smart Start and More at Four.

Smart Start is a statewide initiative that includes community planning and funding for child care and early education, health and family support. The goal of Smart Start is that all children in North Carolina will arrive at school healthy and prepared for school success. In order to achieve this goal, Smart Start local partnerships develop a plan to address the needs of young children in their communities and Smart Start funds local programs, based on the approved plan, such as child care subsidies, technical assistance to child care programs to improve quality, contributing funds for More at Four, parent education and resources, teacher education and programs that provide access to health services. Thus, Smart Start strategies are locally-determined to meet specific community needs, within parameters and research-based accountability standards set at the state level. Local boards approve and oversee the local activities. Smart Start receives state funding but is a private, non-profit organization.

**The North Carolina Partnership for Children, Inc.**

Stephanie Fanjul, President  
office: 1100 Wake Forest Road  
Raleigh, North Carolina 27604



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web: [www.ncsmartstart.org](http://www.ncsmartstart.org)

While Smart Start focuses on all children birth to five, More at Four only serves at-risk four-year-olds – those four-year-olds who are not getting the learning experiences they need to be successful in kindergarten and beyond. More at Four is a statewide, state-funded, high quality pre-kindergarten program. It is more narrow and targeted than Smart Start. More at Four provides a research-supported, tailored educational strategy for preparing four-year olds who would be behind their peers when starting school without it. At-risk four-year olds can be served in four- and five-star licensed child care centers, Head Start programs and public schools. The decision on where to provide More at Four is made at the local level. However, all More at Four pre-K classrooms must meet specific state standards – standards that regulate curriculum, teacher credentials, class size and other factors that affect quality.

During the hearing, additional questions were raised that the Commission members asked for my response. However, I believe these questions would be best answered by the Division of Child Development (DCD) as they related to DCD processes and data. Questions included timely review of child care provider transcripts by the Workforce Section, the average cost of child care in North Carolina, and the number of children on the waiting list for subsidized child care.

I appreciate your interest and concern for the children of North Carolina. Please contact me if you have additional questions.

Sincerely,

Stephanie Fanjul  
President

/gw

Attachment

**Smart Start and More at Four Pre-K Program:  
Complementary but Unique Early Childhood Initiatives for School Readiness**

	<b>Smart Start Initiative</b>	<b>More at Four Pre-K Program</b>
<b>Mission</b>	<b>School Readiness</b>	<b>School Readiness</b>
<b>Target Population</b>	All children birth to age five	At-risk four-year-olds
<b>Objectives</b>	Planning and funding to: <ul style="list-style-type: none"> <li>• Improve access to child care</li> <li>• Improve the quality of child care</li> <li>• Improve access to health services for children</li> <li>• Improve parenting skills</li> </ul>	<ul style="list-style-type: none"> <li>• Serve children who are not getting the educational preparation they need before starting school</li> <li>• Create a standard, statewide pre-K program</li> </ul>
<b>Strategies</b>	<ul style="list-style-type: none"> <li>• Provide child care subsidies for low-income parents</li> <li>• Provide technical assistance to child care centers to improve quality</li> <li>• Provide opportunities for teachers in child care centers to improve their education in early childhood</li> <li>• Provide parent education and resources</li> <li>• Provide access to health services for children</li> <li>• Provide funding and administrative support to More at Four at the local level</li> <li>• Set performance goals for local partnerships and monitor for results</li> </ul>	<ul style="list-style-type: none"> <li>• Provide high quality pre-K</li> <li>• Set uniform, state standards for pre-K, including curriculum, teacher credentials and class size</li> <li>• Help pre-K teachers improve credentials</li> </ul>
<b>Scope</b>	Umbrella statewide initiative with broad range of activities	Targeted statewide program with narrow focus
<b>Administration and Funding</b>	<ul style="list-style-type: none"> <li>• Nonprofit organization at state and local levels</li> <li>• Public / private partnership</li> <li>• State and private funding</li> <li>• Local decision-making about programs provided</li> </ul>	<ul style="list-style-type: none"> <li>• State program</li> <li>• State funding, plus other sources of funding contributed according to local decisions</li> <li>• Standard program; local decision-making about location of pre-k classrooms; all classrooms meet state standards</li> </ul>

October 13, 2008

Dear Editor:

On the eve of perhaps the most important presidential election in the history of the United States, hard-working families more than ever must carefully weigh the important issues that affect them and their livelihood. With the Dow plummeting on a daily basis, unemployment on the rise and consumer confidence shaken, Americans are increasingly fearful for our economic system.

While issues such as the mortgage crisis, the bailout of banking industry giants, the continuing struggle in the Middle East, and affordable health care seem to dominate the headlines from our news outlets, states are also feeling the crunch and are being forced to tighten their respective spending belts as well.

North Carolina is facing dramatic budget cuts, job losses and reductions in state spending as Governor Easley has recently called for a 3 percent reduction in state funding. While this is a necessary measure to ensure fiscal responsibility, we cannot cut funding for child care. Early childhood care and education is a life line for families and its impact on our economy, and more importantly our future, is immense.

A strong early education system is absolutely essential to economic success, both in North Carolina and across the country. Early childhood development programs stimulate economic growth by allowing parents to stay on the job while providing important educational opportunities for their children. Parents of children in regulated child care in North Carolina earned \$6.4 billion and paid \$2.2 billion in taxes in 2006.

For most families, finding affordable and effective child care continues to be a constant struggle, especially considering that more than half a million workers in North Carolina have at least one child under the age of 6. According to the Division of Child Development's August 2008 report, 36,000 subsidy-eligible children across the state are on the "wait list," unable to access care. Every child on the "wait list" represents one more family that is potentially on the unemployment line.

Financial hurdles often result in parents' inability to work, or miss work, due to lack of affordable, quality childcare. Unscheduled absences cost small businesses an average of \$60,000 annually and large companies an average of \$3.6 million. Nearly 25 percent of the unscheduled absences are due to family issues, including child care needs.

**The North Carolina Partnership for Children, Inc.**

**Ashley O. Thrift, Esq.**  
Chairman of the Board  
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In addition to keeping parents in the workforce, early child care and education prepares future generations for school and workplace success, and helps attract business to North Carolina's skilled workforce. Our youngest citizens are tomorrow's leaders and we need to provide a foundation for them to become productive adults who are capable of providing for themselves and strengthening our economy and our communities. Along with parents, child care workers and educators are instrumental in shaping the hearts and minds of our next generation.

The early years are the most important for developing and maturing brains as what a child learns in the first five years impacts their life path for the next 50. By providing them the opportunity to take part in these programs, we accelerate their intellectual, social and emotional development, which facilitates a smoother transition into school and better overall performance.

Quality child care is part of the world-class education system. Studies have shown that children who participate in early education programs are more likely to attend college and work in high-skill industries. Quality programs, particularly for low-income children, decrease the likelihood of special education enrollment, juvenile delinquency, adult incarceration and welfare participation, which can lessen the financial burden for public services in the long run.

In tough economic times, we depend on our decision makers to take a tactical approach to spending reductions. Protecting vital programs and services that support employment and encourage investment is critical. Smart Start and other early education programs improve the quality of child care and families' access to high quality care. It is imperative that we continue to invest in early education to help both our economy and our children thrive.

Ashley O. Thrift, Esq.

*Ashley Thrift is the Board Chair for The North Carolina Partnership for Children, Inc., which was established in 1993 to provide statewide oversight of the Smart Start initiative.*

**The North Carolina Partnership for Children, Inc.**

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web: [www.ncsmartstart.org](http://www.ncsmartstart.org)

# Ready Schools and PreK-3: Education's Base Camp



## Ready School Facts: Why should we care?

- At least half of the educational achievement gap between poor and non-poor children already exists at kindergarten entry. The larger the gap at school entry, the harder it is to close.
- The lack of ready elementary schools costs NC. In 2001-02, 22,343 students in grades K-3 were retained in NC. This extra year of instruction costs NC more than \$170 million.
- Children are born learning, and the early years (birth through age eight) are critical for learning success for all children. If we don't "get it right early," then it is harder to fix it later on. Children learn best in schools that support academic excellence, link to early care and education providers, and encourage partnerships among staff, families, and the community.

## What is School Readiness?

School readiness is comprised of two key components: (1) the condition of children when they come to school, i.e. ready children; and (2) the readiness of *all* schools to ensure the success of *all* children regardless of their condition, i.e., ready schools. While North Carolina has spent considerable time and effort in helping children become ready for school (Smart Start, More at Four Pre-K, other public preschool, child care standards), we have not had the same kind of sustained focus on helping all schools to be ready for all children.

Additionally, school readiness is characterized by Ready Families and Ready Communities - all components of a system that prepares children for how they begin to learn and enter schooling. The National Governor's Association adds the component of Ready States in order to emphasize the importance of an overall policy context for school readiness.

## What exactly is a 'Ready' School?

A Ready School provides an inviting atmosphere, values and respects all children and their families, and is a place where children succeed. A Ready School is committed to high quality in all domains of learning and teaching and has deep connections with parents and its community. A Ready School prepares children for success in work and life in the 21<sup>st</sup> century.

It is characterized by work in 9 pathways:

1. Commitment to every child's success in school.
2. A welcoming environment focused on children
3. Effective leadership
4. Connections to early care and education, as well as across primary grade levels
5. Meaningful cultural and linguistic connections to children and families
6. Partnerships with families and communities
7. Using assessment results to improve achievement and reduce achievement gaps
8. Quality assurance using a written improvement plan.



## Background on NC's Ready Schools Initiative

Funding from the Kellogg Foundation through the NC Partnership for Children (NCPC), and in collaboration with the NC Department of Public Instruction (NCDPI), is providing the opportunity to focus on the "school" component of school readiness. Superintendent St. Clair Atkinson convened a Ready Schools Task Force in March 2006. This Task Force issued a report in March 2007 with the definition of a "ready school" and other recommendations.

### State Board Action

At its June 2007 meeting, the NC State Board of Education took action to approve three items that support the Ready Schools Initiative, including two of the recommendations from the Task Force. The SBE:

- adopted the definition and 9 pathways of "Ready Schools" developed by the Ready Schools Task Force,
- endorsed the "Power of K" position paper as a Ready Schools foundational support, and
- supported the recommendation that elementary schools develop a "ready school plan", using a ready schools self-assessment tool, to be integrated into the School Improvement Planning Process.

## Isn't Pre-K enough? Expanding our thinking to PreK-3

High quality pre-K programs are essential to early learning success and are founded on solid research showing learning gains and other benefits over the long-term. We also know that, as critical as pre-K is for at-risk students, without sustained focus and appropriate instruction, these children may experience "fade out" - or a loss of learning gains - by grade 3. The gains made by pre-k must be continued into the primary grades.

The term Prek-3 helps us re-vision early education to include the years 3-8 as a continuum of learning. Success breeds success. That means that schools must work closely with early childhood educators, parents, and the community to meet these learning needs; and alignment of appropriate and effective environments, curriculum and instruction must continue through the primary grades.

## Collaborative Partnerships

While Ready Schools is an initiative that is taking hold nationally, North Carolina is the only state to try to take it statewide - exploring both bottom up and top down strategies. Partners joining NCDPI and NCPC in this effort include *FirstSchool* at the UNC Frank Porter Graham Child Development Institute, NCAE, NCPAPA (Principals), NC Association for the Education of Young Children and the NC Parent/Teachers Association.

Schools do not have to start from scratch. Smart Start partnerships already have connections with parents and community partners, as well as with school districts. NCDPI has numerous efforts that are consistent with Ready School principles and pathways, such as the Transitions documents and training, Parent Empowerment Training, K-3 Literacy Training, and the "Power of K" position statement on a 21<sup>st</sup> century kindergarten and its related Kindergarten Teacher Leaders' Academy.

Regional meetings across the state were held in October and November 2007 for school/community teams to learn more about the Ready Schools Initiative and provide a forum to begin talking about what can be done in particular communities. This requires schools, districts, early childhood leaders, and families, working in collaboration, with other community partners, to "re-vision" their early grades and their connections with the early care and education communities.

## Contact Information for Ready Schools

Gerry Cobb, Director, NC Ready Schools Initiative	919-821-9540
Carolyn Cobb, Coordinator, NC Ready Schools Initiative	919-785-0717
John Pruette, Director, Office of School Readiness, NCDPI	919-981-5303

# Education Week

Monday, June 09, 2008

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## Long-Term Payoff Seen From Early-Childhood Education

**Premium article access compliments of Edweek.org.**

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Long-Term Payoff Seen From Early-Childhood Education

By Linda Jacobson

The latest analysis of a long-running early-childhood-education program for children of low-income families in Chicago suggests economic payoffs from such services that continue well into adulthood.

Researchers looking at data from the study, which is now more than 20 years old, say that for every dollar spent on children who attended the Chicago Child Parent Centers, almost \$10 is returned by age 25 in either benefits to society - such as savings on remediation in school and on the criminal-justice system - or to the participant, in the form of higher earnings.

"The study is significant, given it is the only one of a sustained public school program and one of the very few which go into adulthood," Arthur J. Reynolds, a child-development professor at the University of Minnesota-Twin Cities and the lead researcher on the project, said in an e-mail.

He added that the benefits are probably underestimated because he has found some unexpected outcomes, such as participants' being more likely than those in the comparison group to hold private health insurance and less likely to have mental-health problems. ("Chicago Data Bolster Case for Early-Childhood Programs," August 15, 2007.)

But some experts caution that the children served by the Chicago program and similar efforts were very disadvantaged, and that providing such services to middle-class families in universal preschool programs are unlikely to result in the same return on investment.

"The biggest argument against the Chicago economic data is that it is still largely a 'boutique' program that cost more and provided more services than most current universal and preschool programs," said

Lisa Snell, the director of education and child welfare at the Los Angeles-based Reason Foundation, a free-market-oriented think tank. "It is hard to imagine that current programs will have the same kinds of economic payoffs as the Chicago program."

The conclusions were presented late last month at a meeting in San Francisco of the Society for Prevention Research, based in Fairfax, Va.

### **Parent Involvement**

The Chicago Longitudinal Study originally included 1,539 children from low-income African-American and Hispanic families who began in the early-education program run by the Chicago school system at 25 sites in either 1985 or 1986.

The Chicago program began in 1967 at sites in or near elementary schools. Similar to the federal Head Start program, the Child-Parent Centers provide comprehensive education, health, and family-support services to children ages 3 to 9.

Unlike in Head Start, all the teachers in the program have bachelor's degrees and are paid at the same level as K-12 teachers.

In addition, parents are expected to participate in the classroom - a component that distinguishes the Chicago program from other early-intervention initiatives - and the children in the study received home visits from a "school-community representative."

"The parents were expected to get involved, and there were 30 different ways [for parents to participate], so nobody said no," Mr. Reynolds said.

While the study was not designed as a true randomized trial, a comparison group including children who were matched to the participants on socioeconomic factors and demographic variables, such as family size and parents' employment status, has been used to track the effectiveness of the intervention. Children in the comparison group took part in other early-childhood programs, such as Head Start, or full-day kindergarten.

Last year, Mr. Reynolds released findings in the Archives of Pediatrics and Adolescent Medicine, a monthly journal, based on study of participants at age 24. Those findings showed that the adults had acquired more education and were less likely to commit crimes than those who had not received the same level of service.

## **A Body of Evidence**

Because of its evidence of lasting positive effects, such as lower special education costs and less welfare dependency, Mr. Reynolds' study on the Chicago program is often used as one of three long-running research projects to argue for public spending on early-childhood education. The other two are the High/Scope Perry Preschool study, which ran in Ypsilanti, Mich., outside Detroit from 1962 to 1967, and the Carolina Abecedarian Project, in Chapel Hill, N.C., which provided services from birth through age 5 to 112 children from low-income families born between 1972 and 1977.

The Chicago study stands out, however, because it is not a demonstration program as are the others. It has been operated by a public school system and thus is likely more "generalizable to other similar and contemporary locations and contexts," Albert Wat, a state-policy analyst at the Washington-based advocacy group Pre-K Now, wrote last year in the report "Dollars and Sense: A Review of Economic Analyses of Pre-K."

The Chicago program "demonstrates that public schools can effectively implement high-quality pre-K programs that produce long-term positive gains," he wrote.

Still, Mr. Reynolds concludes that the newest "evidence strengthens the findings of a high return on investment of public programs, if they follow the key principles of effectiveness."

Mr. Reynolds' new analysis, which will be released in a research paper later this year, also provides a comparison of the economic benefits of various types of preschool programs.

It uses an average of all the cost-benefit studies that have been conducted on other popular policies, such as full-day kindergarten, class-size reduction, and the federal Women, Infants, and Children, or wic, nutrition program.

The comparison shows that preschool programs have by far the highest return, \$6.02 for every \$1 spent, compared with \$2.47 for small classes, \$3.07 for wic, and nothing for full-day kindergarten.

# SMART START PILOT GRANTS

## Raising a Reader

### May 2008 Evaluation Report

Joy Sotolongo, The North Carolina Partnership for Children, Inc.

Iheoma U. Iruka, FPG Child Development Institute, UNC-Chapel Hill

Kelly Maxwell, FPG Child Development Institute, UNC-Chapel Hill



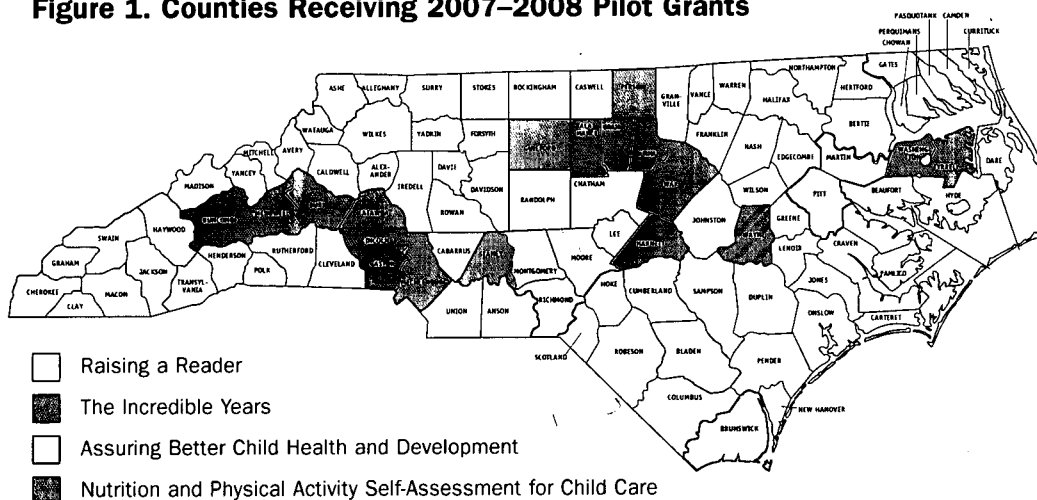
### Overview of the Smart Start Pilot Grant Program

The Smart Start Pilot Grant Program targets four critical issues facing young children and their families (see Table 1). To address these critical issues with limited resources, Smart Start adopted a strategic, high-impact approach by piloting evidence-based programs in a diverse range of communities across the state. To be selected, programs needed to: (1) be innovative, (2) produce clearly defined child or family outcomes, and (3) have the potential to become a state-wide model (see Table 1 for list of programs).

**Table 1. Critical Issues and Pilot Programs**

Critical Early Childhood Issue	Smart Start Pilot Grant Program
Reduce childhood obesity	Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC)
Identify children with developmental delays or concerns	Assuring Better Child Health and Development
Improve children's pre-reading skills	Raising a Reader
Increase parenting skills that address children's challenging behaviors	The Incredible Years: BASIC Parent Training Program—Early Childhood



**Figure 1. Counties Receiving 2007–2008 Pilot Grants****Table 2.**  
**Location of**  
**Participating Centers**

County	Number of Centers
Bladen	10
Randolph	5
Cherokee, Haywood, Jackson, Macon, Swain (Region A)	18
Watauga and Ashe	6

**Table 3. Star Ratings of**  
**Participating Centers**

Star Level	Number of Centers
★	1
★★	1
★★★	17
★★★★	19
★★★★★	0

## Scope

This report focuses on the Raising a Reader Pilot Grant program and provides information about the program and its participants, lessons learned, and next steps.

## Description of the Raising a Reader (RAR) Program

Raising a Reader supports young children's pre-reading skills. Pre-reading skills are important because children who can read are more likely to be successful in school.<sup>1</sup> Data from the 2007 National Assessment of Educational Progress, our nation's report card, suggest that fewer low-income and ethnic minority fourth graders in North Carolina were proficient in reading compared to Caucasian, Asian, and higher-income students. Other data from North Carolina indicate that children whose parents have less than a high school education have poorer reading skills.<sup>2</sup> It is important to ensure that young children in North Carolina have good early experiences that support their later ability to read. Book sharing is one important strategy for improving children's later reading and school success.<sup>3</sup>

Raising a Reader brings together child care teachers, parents, and public libraries in a unique collaboration to promote children's pre-reading skills. Parents learn how to share books with children in a way that is fun and engaging. Child care teachers regularly share books with children in the classroom and every week send home a book bag filled with children's books. Through parent workshops, field trips, and library card applications, parents are encouraged to use the library on a regular basis. In an effort to ensure that children from lower income families participate in Raising a Reader, Smart Start offered the program to child care centers in which a minimum of 25% of the families receive child care subsidies to offset the cost of care.

The intended outcome for the Raising a Reader program is to increase parent practices that promote children's pre-reading skills, including daily reading and visits to the library.

1. Hargrave, A. C., & Senechal, M. (2000). A book reading intervention with preschool children who have limited vocabularies: The benefits of regular reading and dialogic reading. *Early Childhood Research Quarterly*, 15(1), 75-90.

2. North Carolina Department of Public Instruction Reports of Disaggregated State Data. [www.ncpublicschools.org](http://www.ncpublicschools.org).

3. Lonigan, C. J., Burgess, S. R. & Anthony, J. L. (2000). Development of emergent literacy and early reading skills in preschool children: Evidence from a latent-variable longitudinal study. *Developmental Psychology*, 36(5), 596-613.

# SMART START PILOT GRANTS UPDATE

## Raising a Reader

### October 2008 Evaluation Update

After participating in Raising a Reader, parents completed the Raising a Reader Parent Survey. Of the 600 families who completed pre-program surveys, 260 (43%) completed post-program surveys. A few highlights of changes in parent reading practices are presented below.

When looking at changes in reading practices for all families, there were increases in:

- The number of minutes families read with their child.
- The number of times children asked to look at books.
- The quality of the reading experience, such as parents asking the child questions about the book.

## Responses from Low-Income Families

The greatest increases were seen in low-income families, where children are at risk for scoring below grade level on tests of reading achievement. Families were considered low-income if their reported family income was less than \$30,000. Parents of 109 children in low-income families completed pre- and post-surveys.

### Frequency of Reading Practices

Low-income parents reported changes in the following reading practices:

	Jan 08	June 08
Number of minutes spent looking at books, each time parents read with child	19	23
Number of times child asked to look at books in the last week	4	6
% of parents who have a regular routine for looking at books	40%	46%

The average response for the number of times families read with their child each week increased slightly, from just below 5 times a week (4.69) to just above 5 times a week (5.01).



The North Carolina  
Partnership for Children, Inc

# SMART START PILOT GRANTS UPDATE

## Quality of Reading Practices

Asking questions during book sharing has been shown to improve children's pre-reading skills. Low-income families showed increases in these important reading practices.

**Percent of low-income parents  
responding the last time they  
read with their child ...**

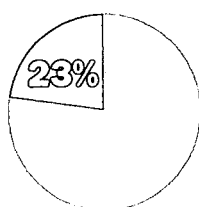
	Jan 08	June 08
Child listened quietly	50%	62%
Parent asked child questions about story	54%	61%
Child asked questions about story	60%	74%

## Library Use

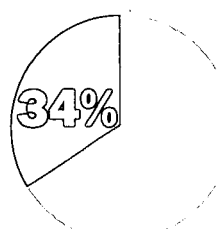
There was an increase in library use and in the likelihood that low-income families will continue to use the library.

**Percent of low-income parents  
responding that they...**

Checked  
out library  
materials

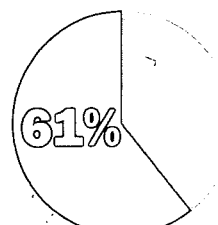
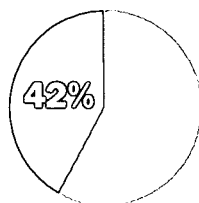


January 2008



June 2008

Definitely/  
Probably will  
visit library in  
the next month



Results presented in this Update were provided in the *Evaluation of Smart Start Family Support and Health Grant Options Quarterly Report: September 29, 2008* authored by Iheoma U. Iruka and Kel Maxwell, FPG Child Development Institute, UNC – Chapel Hill



## Participants

- So far, the Raising a Reader program has reached 514 children between the ages of 3 and 5 years from 39 child care centers in 9 counties.
- Almost all of the participating centers have a 3- or 4-Star Rated License.
- The ethnicity of children enrolled in the program is representative of young children across the state of North Carolina (see Figure 2).
- 46% of children are from families who earn less than \$30,000 a year.
- Almost 40% of parents reported an education level of high school or less.

## Parent Literacy Practices Before the Raising a Reader Program

Before the Raising a Reader program began, parents completed the Raising a Reader Parent Survey in January 2008. The survey measures the quantity and type of reading practices in the home. Highlights of the literacy practices of parents before they participated in the Raising a Reader intervention are provided below.

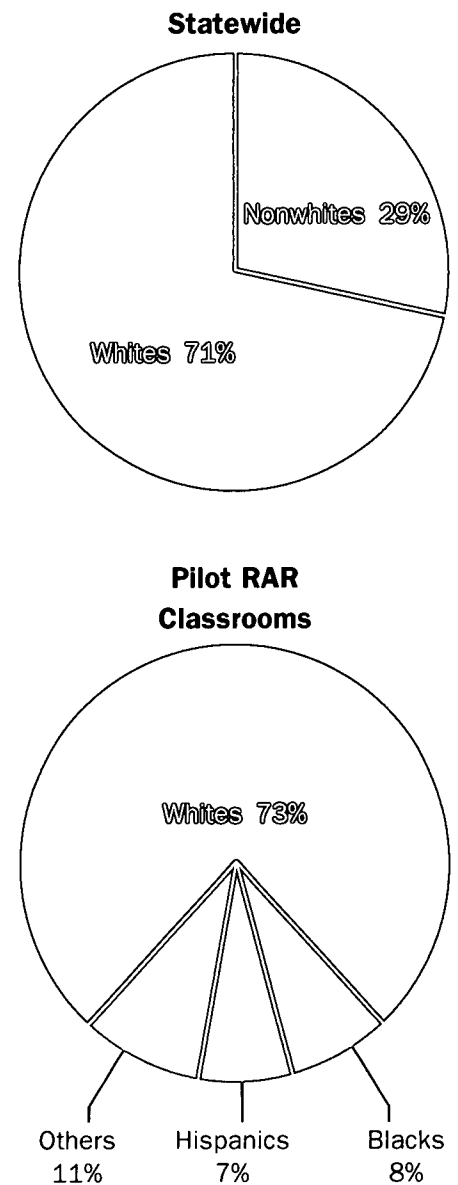
- Parents reported looking at books with their child an average of 20 minutes each time they shared books with their child. Responses ranged from 0 to 2 hours.
- Parents reported visiting the library about once a month, on average, with a range of none to 20 times a month.
- Approximately half of the parents (53%) reported asking children questions during book-sharing. (Asking questions during book sharing has been shown to improve children's pre-reading skills.<sup>4</sup>)
- 49% of parents reported they do not have a routine for looking at books with their children (e.g., reading a book before bedtime).

## Lessons Learned

During the first six months of implementing the Raising a Reader Pilot Grant Program, The North Carolina Partnership for Children, Inc. noted the following lessons:

- Pilot grantees commented that the program is well-designed and materials are easy to use.
- The timeline for getting the program up and running with this first group of parents and child care teachers was too short. More time will be allotted when working with parents and child care teachers in Fiscal Year 2008-09.
- In several counties the libraries were actively engaged as partners from the very beginning, which was helpful given the tight timeframe.

**Figure 2.**  
**Ethnicity of Children, Statewide and in RAR Classrooms**



4. Center for Early Literacy Learning, *CELL Notes* 2007, Volume 1: Number 2

## Success Story

Children in Ms. Amy's Ashe County class of 3- to 5-year olds had just begun taking home the bright red Raising a Reader book bags. As the children arrived at school one morning, a mother came in to the classroom and said to the teacher, "I just have to tell you that this reading program is the best thing I've been a part of." The previous evening, the mother found her husband surrounded by their four children on the bed. He was reading the Raising a Reader books to all the kids. The mother said, with tears in her eyes, that this was the very first time that the father had read to the children.

- It was difficult to find time to train the child care teachers about their role in the Raising a Reader program. Some pilot grantees were able to find substitutes so teachers could attend group training; other grantees trained teachers one-on-one during the children's nap times.

## Plans for Fiscal Year 2008–2009

Parents and child care teachers currently involved in the Raising a Reader Pilot Grant will continue receiving services through June 30, 2008. Data about the quantity and quality of reading practices in the home will be collected after parents complete the Raising a Reader program. These data collected after the intervention has ended will help determine whether the program was effective in increasing parent reading behaviors. Results will be reported in September 2008. Information gleaned from this first group of participants will be used to inform practices with the second group of child care teachers and parents. The second group of child care teachers and parents will begin receiving services in late summer of 2008.

Smart Start thanks  
**Duke Energy** and  
**Piedmont Natural Gas**  
for investing in the  
Raising a Reader program.

For more information about the Smart Start Pilot Grant Program, contact Vivian Muzyk (919) 821-9571 [vmuzyk@ncsmartstart.org](mailto:vmuzyk@ncsmartstart.org).



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The North Carolina  
Partnership for Children, Inc.

# SMART START PILOT GRANTS

## Nutrition and Physical Activity Self-Assessment for Child Care

### May 2008 Evaluation Report

**Joy Sotolongo**, The North Carolina Partnership for Children, Inc.  
**Iheoma U. Iruka**, FPG Child Development Institute, UNC-Chapel Hill  
**Kelly Maxwell**, FPG Child Development Institute, UNC-Chapel Hill



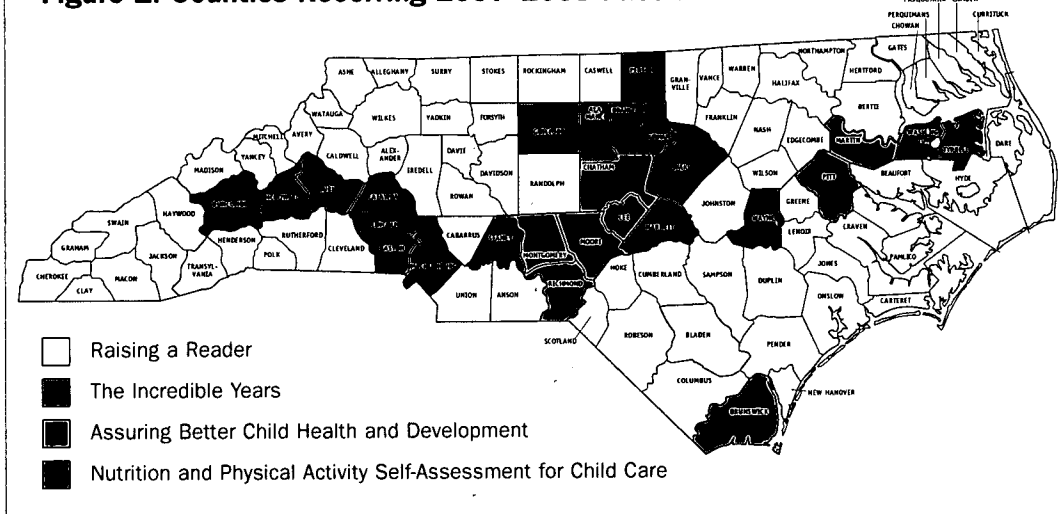
### Overview of the Smart Start Pilot Grant Program

The Smart Start Pilot Grant Program targets four critical issues facing young children and their families (see Table 1). To address these critical issues with limited resources, Smart Start adopted a strategic, high-impact approach by piloting evidence-based programs in a diverse range of communities across the state. To be selected, programs needed to: (1) be innovative, (2) produce clearly defined child or family outcomes, and (3) have the potential to become a state-wide model (see Table 1 for list of programs).

**Table 1. Critical Issues and Pilot Programs**

Critical Early Childhood Issue	Smart Start Pilot Grant Program
Reduce childhood obesity	Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC)
Identify children with developmental delays or concerns	Assuring Better Child Health and Development
Improve children's pre-reading skills	Raising a Reader
Increase parenting skills that address children's challenging behaviors	The Incredible Years: BASIC Parent Training Program—Early Childhood



**Figure 1. Counties Receiving 2007–2008 Pilot Grants**

## Scope

As of April 2008, 23 pilot grant programs began implementation in 36 counties (Figure 1).

This report focuses on the Nutrition and Physical Activity Self Assessment for Child Care (NAP SACC) Pilot Grant Program and provides information about the program and its participants, lessons learned, and next steps.

**Table 2.**  
Location of  
Participating Centers

County	Number of Centers
Burke	6
Catawba	11
Guilford	15
Mecklenburg	6
Orange	4
Person	7
Stanly	4
Wake	10
Wayne	4

Note: McDowell County will begin offering services in FY 2008–2009.

**Table 3. Star Ratings of Participating Centers**

Star Level	Number of Centers
★	1
★★	0
★★★	42
★★★★	17
★★★★★	7

## Description of the Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC) Program

NAP SACC is an intervention in child care centers with the goal of improving nutrition and physical activity practices and policies that impact children between the ages of 2 and 5. In North Carolina, the percentage of children ages 2 to 4 who are overweight or at risk for becoming overweight has increased from 22% in 1995 to slightly less than 31% in 2006.<sup>1</sup> Approximately 52% of North Carolina's children between the ages of 2 and 5 are enrolled in licensed child care centers.<sup>2</sup> These children may consume between 50% and 100% of their Recommended Dietary Allowances while at a child care facility.<sup>3</sup>

To address the steady increase in childhood overweight/obesity among two to five year-olds, the NAP SACC program model uses state-trained child care health consultants who work with child care center directors to improve nutritional and physical activity practices and policies.

The intended outcome for the NAP SACC Pilot Grant Program is that 75% of participating centers completing action plans will demonstrate improvement in nutritional and physical activity practices, as measured by NAP SACC data gathered before and after the intervention program.

## Participants

- So far, the NAP SACC Pilot Grant Program has reached 3,446 children between the ages of 2 and 5 years from 67 centers in 9 counties (Table 2).
- Almost all of the participating centers have at least a 3 Star Rated License (Table 3).

1. North Carolina Nutrition and Physical Activity Surveillance System (2006). *Trends in overweight*. Retrieved on April 1, 2008, from <http://www.eatsmartmovemorenc.com/data/index.html>

2. Source: North Carolina Office of State Planning and the North Carolina Division of Child Development

3. Source: <http://www.napsacc.org/>

# SMART START PILOT GRANTS UPDATE

## Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC)

### October 2008 Evaluation Update

After receiving six months of technical assistance, child care center directors completed the NAP SACC assessment. Of the 67 centers that completed pre-program assessments, 64 (96%) completed post-program assessments. A few highlights of changes in nutritional and physical activity practices are presented below.

## Nutrition Practices

### Changes in Overall Nutritional Practices

Average Score from  
January to June 2008  
Scores range from 1 to 4;  
4 = healthier practices

January 2008

2.6

June 2008

3.1

Some of the biggest changes were seen in the amount of nutrition education provided for children, parents, and child care staff.

### Percent of Centers Offering Nutrition Education To:

	Jan 08	June 08
<u>Children once a week or more</u>	8%	37%
<u>Staff twice a year or more</u>	21%	51%
<u>Parents twice a year or more</u>	11%	56%

There was an increase in the number of centers that followed written policies on nutritional practices. Written policies are important to ensure centers continue healthy nutritional practices.

### Percent of Centers with Policy on Nutritional Practices that is Written, Available, and Followed

January 2008

34%

June 2008

59%



The North Carolina  
Partnership for Children, Inc.

# SMART START PILOT GRANTS UPDATE

## Physical Activity Practices

### Changes in Overall Physical Activity Practices

Average Score from  
January to June 2008  
Scores range from 1 to 4;  
4 = healthier practices

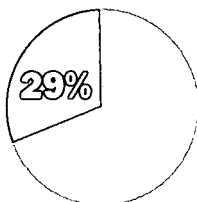
January 2008

2.7

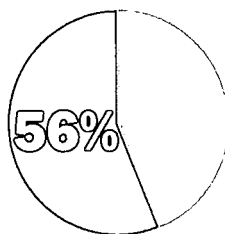
June 2008

3.3

### Percent of Centers Offering More than 90 Minutes of Active Play Each Day



January 2008



June 2008

### Percent of Centers Offering Physical Activity Education to:

	Jan 08	June 08
<u>Children once a week or more</u>	25%	52%
<u>Staff twice a year or more</u>	15%	50%
<u>Parents twice a year or more</u>	5%	58%

There was an increase in the number of centers that followed written policies on physical activity practices. Written policies are important to ensure centers continue healthy physical activity practices.

### Percent of Centers with Policy on Physical Activity Practices that is Written, Available, and Followed

January 2008

12%

June 2008

53%

Results presented in this Update were provided in the *Evaluation of Smart Start Family Support and Health Grant Options Quarterly Report: September 29, 2008* authored by Iheoma U. Iruka and Kell Maxwell, FPG Child Development Institute, UNC – Chapel Hill

Childhood obesity rates are especially high in ethnic minority children and children from low-income families.<sup>4</sup> Data show that the program is reaching children most likely in need of this intervention.

- 43% of children birth through 5 years in the participating centers receive child care subsidies.<sup>5</sup>
- For a breakdown of the ethnicity of children enrolled in NAP SACC participating centers, see Figure 2 at right.

## Nutritional and Physical Activity Practices Before Implementation of the NAP SACC Program

In January 2008 before the child care programs received technical assistance to improve nutritional and physical activity practices and policies, participating center directors completed the NAP SACC assessment. The NAP SACC assessment rates the quality of nutritional and physical activity practices and policies at each child care center. Highlights of practices and policies prior to the NAP SACC intervention are provided below.

### Nutrition Practices

Scores range from 1 to 4, with higher scores indicating healthier practices. The average nutrition practices rating before the program began was 2.6, with a range from 1.9 to 3.5. A few examples of areas of concern are noted.

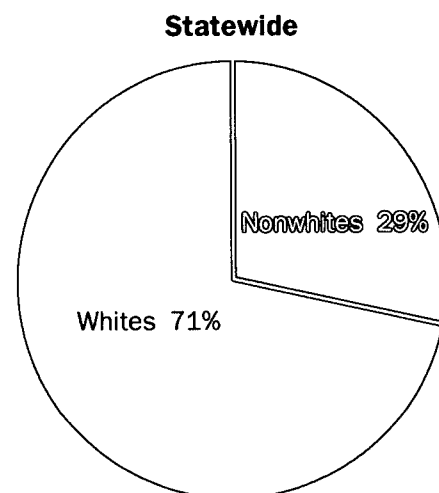
- 76% of the center directors reported that their programs never or rarely offer nutrition education, such as workshops, to families.
- 51% of center directors reported that they do not have a written policy about nutrition and food service.
- 47% of the center directors reported that opportunities for training on nutrition are offered to staff less than one time per year, or never.

### Physical Activity Practices

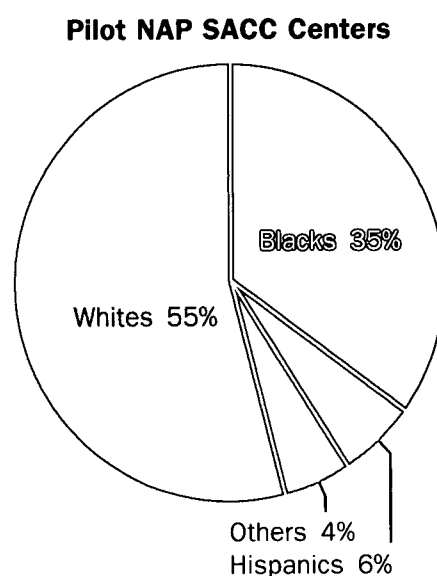
Scores range from 1 to 4, with higher scores indicating healthier practices. The average physical activity practices rating before the program began was 2.7, with a range from 1.8 to 3.5. A few examples of areas of concern are noted.

- 80% of center directors reported that they do not have a written policy on physical activity practices.
- 53% of center directors reported that opportunities for training in physical activity are never or rarely provided to staff.
- 48% of center directors reported that they never or rarely use a curriculum for physical activity education.

**Figure 2.**  
**Ethnicity of Children, Statewide and in NAP SACC Centers**



Source: <http://demog.state.nc.us/>



<sup>4</sup> Kumanyika, S., & Grier, S. (Spring 2006). Targeting interventions for ethnic minority and low-income populations. *The Future of Children*, 16(1), 187-207.

<sup>5</sup> Division of Child Development Report. (January 2008)

## Success Story

As one of their NAP SACC goals, a child care center in Person County selected serving family-style meals instead of having adults serve the food to children. Center staff agreed to try family-style meals once a week. Since the center began to involve the children in serving their own meals, children have begun to ask for second helpings of healthy foods such as tossed salad—something that never happened before the NAP SACC program. With this noticeable improvement in children's eating habits, center staff plan to serve all their meals family-style.

## Lessons Learned

During the first six months of implementing the NAP SACC Pilot Grant Program, The North Carolina Partnership for Children, Inc., noted the following lessons:

- The pilot grantees were able to begin the NAP SACC program in a short amount of time because of the availability of a child care health consultant with previous experience in child care centers. Smart Start's ongoing support of the child care health consultant infrastructure helped the pilot grantees begin this program quickly.
- The pilot grantees found the training and curriculum to be readily available and easy to use.
- In counties where there were few other opportunities for nutrition training, just having access to training was an incentive for center directors to participate in the program.
- Scheduling training for child care staff was challenging, particularly in large counties. Several of the programs had to offer the same training on multiple occasions.
- Pilot grantees pointed to the need for a plan both to continue and to expand the NAP SACC program. Current centers will need more follow-up. In addition, there is a need to expand the program to more centers.

## Plans for Fiscal Year 2008–2009

Child care centers currently involved in the NAP SACC Pilot Grant Program will continue to receive services through June 30, 2008. Data about nutrition and physical activity practices will be collected again in June 2008, after child care centers complete the NAP SACC program. These data collected after the intervention has ended will help determine whether the program was effective in increasing the targeted health practices in the participating centers. Results will be reported in September 2008. Information gleaned from this first group of child care centers will be used to inform practices with the second group of centers. The second group of child care centers will begin receiving NAP SACC services in July 2008.

Smart Start thanks the  
**Apple Gold Group**  
for investing in the  
NAP SACC program.



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The North Carolina  
Partnership for Children, Inc.

For more information about the Smart Start Pilot Grant Program, contact Vivian Muzyk (919) 821-9571 [vmuzyk@ncsmartstart.org](mailto:vmuzyk@ncsmartstart.org).



# SMART START PILOT GRANTS

## The Incredible Years:

## BASIC Parent Training—Early Childhood

### May 2008 Evaluation Report

Joy Sotolongo, The North Carolina Partnership for Children, Inc.

Iheoma U. Iruka, FPG Child Development Institute, UNC-Chapel Hill

Kelly Maxwell, FPG Child Development Institute, UNC-Chapel Hill



The North Carolina  
Partnership for Children, Inc.

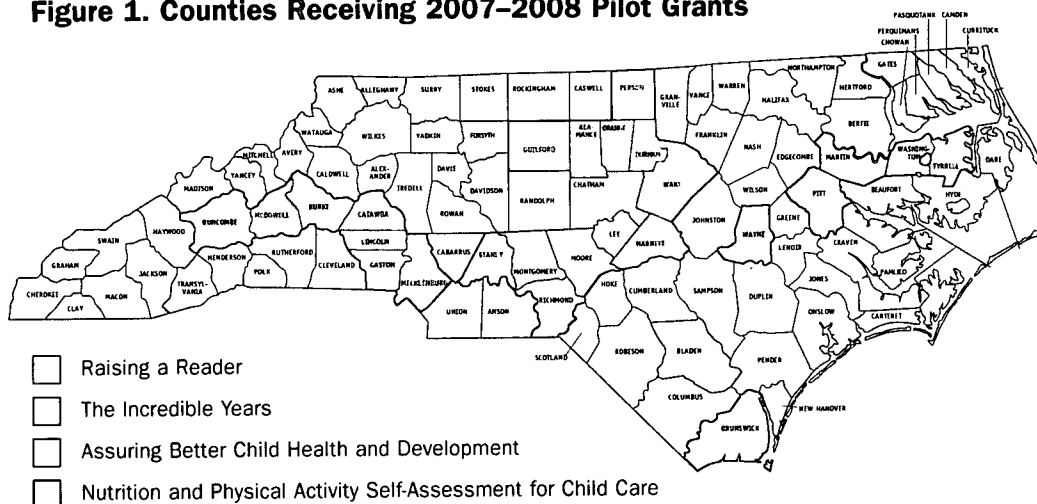
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**Table 1. Critical Issues and Pilot Programs**

Critical Early Childhood Issue	Smart Start Pilot Grant Program
Reduce childhood obesity	Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC)
Identify children with developmental delays or concerns	Assuring Better Child Health and Development
Improve children's pre-reading skills	Raising a Reader
Increase parenting skills that address children's challenging behaviors	The Incredible Years: BASIC Parent Training Program—Early Childhood



**Figure 1. Counties Receiving 2007–2008 Pilot Grants**

## Scope

This report focuses on the Incredible Years: BASIC Parent Training—Early Childhood (referred to as the Incredible Years) Pilot Grant program and provides information about the program and its participants, lessons learned, and next steps.

**Table 2.**  
**Location of Incredible Years Groups**

County	Number of Families
Alamance	10
Buncombe	11
Durham	10
Harnett	10
Lincoln and Gaston	7
Wayne	11

Note: Tyrell and Washington counties will begin offering services in FY 2008–2009.

## Description of the Incredible Years Program

Social and behavioral skills are critical factors in young children's development and school readiness. An estimated 13 of every 1,000 children enrolled in North Carolina's pre-kindergarten programs are expelled.<sup>1</sup> Behavioral issues continue to be a critical issue in older children, where 216 of every 1,000 children enrolled in grades K-12 are suspended.<sup>2</sup>

In an effort to support positive social and behavioral development in young children, Smart Start implemented the Incredible Years program. The Incredible Years has been effective in reducing children's aggression and behavioral problems in early childhood classrooms and at home.<sup>3</sup> The Incredible Years program provides 14 weeks of group training for parents, with an emphasis on positive parenting strategies that promote children's social skills.

The intended outcomes for the Incredible Years program are: (1) an increase in the number of children demonstrating social competence, and (2) an increase in the number of parents using positive parenting strategies, such as effective limit-setting.

## Participants

- So far, the Incredible Years has reached 59 families and children between the ages of 2 and 5 years in six counties (see Table 2).
- 53% of children are in homes where the family income per year is less than \$30,000.
- 25% of parents reported an education level of high school or less.

1. Foundation for Child Development. (2005). *Preschools left behind: Expulsion rates in state pre-kindergarten systems*.

2. Action for Children NC. (2007). *Short-term suspensions; long-term consequences; real life solutions*.

3. Webster-Stratton, C. (1998). Preventing conduct problems in Head Start children: Strengthening parenting competencies. *Journal of Consulting and Clinical Psychology*, 66(5), 715-730

# SMART START PILOT GRANTS UPDATE

## The Incredible Years BASIC Parent Training – Early Childhood

### October 2008 Evaluation Update

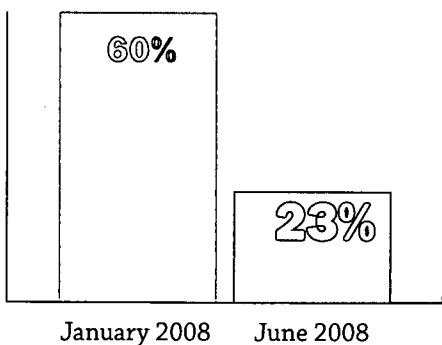
While more than one family member could participate in the program, one set of evaluation surveys was collected for each child. Surveys for 59 children were collected at the beginning of the program, and 49 (83% pre/post survey completion rate) were collected at the end. A total of 66 parent/guardians completed the program.

### Child Behavior

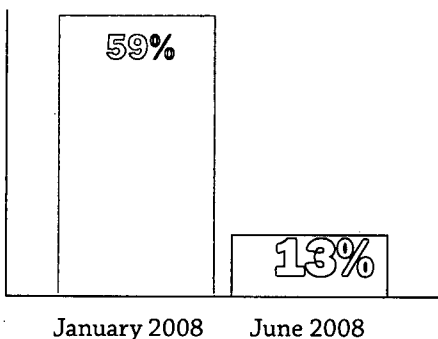
Parents reported a decrease in above normal problem behaviors. Decreased scores show improvement.

#### Percent of Parents Reporting Above Normal Scores For...

Frequency of  
child's problem  
behaviors



Extent to which  
parents perceive  
child's behaviors  
as problematic



The North Carolina  
Partnership for Children, Inc.

# SMART START PILOT GRANTS UPDATE

## Parenting Practices

There was an increase in positive parenting practices and a decrease in negative parenting practices.

### Positive Parenting Practices

	Jan 2008	June 2008
Appropriate Discipline	4.4	4.9
Positive Parenting	4.7	5.3
Clear Expectations	5.4	5.7

Average score from January to June 2008

Scores range from 1 to 7; higher score = more positive parenting practices

### Negative Parenting Practices

	Jan 2008	June 2008
Harsh Discipline	2.9	2.1
Inconsistent Discipline	3.3	2.5

Average score from January to June 2008

Scores range from 1 to 7; higher score = more negative parenting practices

Results presented in this Update were provided in the *Evaluation of Smart Start Family Support and Health Grant Options Quarterly Report: September 29, 2008* authored by Iheoma U. Iruka and K. Maxwell, FPG Child Development Institute, UNC – Chapel Hill

## Parents' Behavioral Management and Children's Behavior and Social Skills Before the Incredible Years Program

Before parents began participating in the Incredible Years, they completed two surveys in January 2008. The two measures were the Eyberg Child Behavior Inventory™ (ECBI™), which measures children's behavioral and social competence, and the Parent Practices Interview (PPI), which assesses parenting practices related to managing a child's behavior. Highlights of children's behavior and parents' behavioral management practices prior to the Incredible Years intervention are:

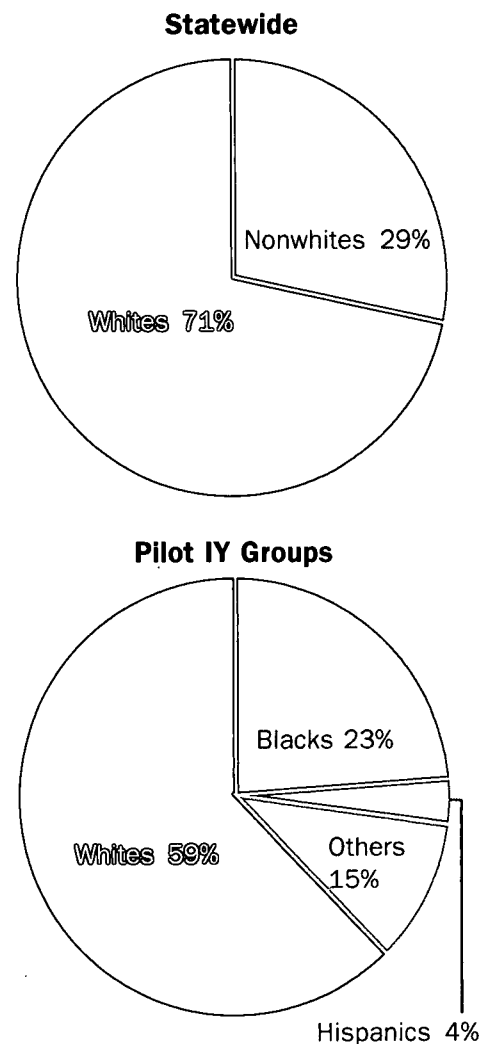
- The average score for children's behavioral and social competence was 62.0 before the program began, with a range of 43 to 79. Higher scores indicate more problem behaviors.
- 81% of parents reported that their children had higher than/normal behavioral problems.
- The PPI assesses parents' positive parenting skills. Scores can range from 1 to 7, with higher scores indicating more sensitive parenting. The average score for *positive parenting* practices was 4.6, with a range of 3.4 to 6.2.
- The PPI assesses how consistent parents are in how they manage their child's behavior. Scores can range from 1 to 7, with higher scores indicating more inconsistent parenting. The average score for *inconsistent parenting* practices was 3.3, with a range of 1.5 to 5.5.
- The PPI assesses parents' use of harsh discipline. Scores can range from 1 to 7, with higher scores indicating more negative parenting. Parents, on average, reported slightly less use of harsh discipline practices. The average score for *harsh discipline* practices was 2.9, with a range of 1.1 to 6.1.

## Lessons Learned

During the first six months of implementing the Incredible Years Pilot Grant Program, The North Carolina Partnership for Children, Inc., noted the following lessons:

- In order for parents to learn about and enroll in the program, Incredible Years needs to be implemented by agencies that are known as a respected source of information and support for families. Grant sites where the implementing agency had a history of developing trusting relationships with families had little difficulty recruiting the minimum number of parents needed for the group.
- Approximately two months are needed to effectively recruit parents for the program.

Figure 2.  
Ethnicity of Children,  
Statewide and in IY Groups



## Success Story

A mother in Durham described the following experience to her Incredible Years group leaders:

"When I came to this class I wanted help with my daughter who was kicking, lying, hitting and throwing fits at home and at school. During the course of these classes, I learned skills that I use at home. The change in my daughter at home and at pre-school is only short of a miracle. My daughter's teacher has noted the positive changes in her daily log.

"I see changes not only in my child but in myself as well. I have patience and skills other than yelling and corporal discipline. I really like the presentations, materials, and facilitators. I am able to hear and share with other parents. I realize I am not alone."

- Parents reported that, because the program provided supports such as child care, meals, or transportation, they were able to attend the weekly meetings.
- In rural areas, travel time to weekly meetings can be a barrier to participation for many families. In some cases, the 30- to 60-minute trip to arrive at the meeting site, coupled with the meeting time, made for a very long day for families and their young children. In these rural areas, a group-based program may be more difficult to implement.
- Due to the limited number of trainers available from the Incredible Years national office, group leaders were unable to attend training until February. There was little time for group leaders to become familiar with the curriculum before starting the groups. They will be more familiar with the curriculum when working with the second cohort of parents.

## Plans for Fiscal Year 2008–2009

Parents currently involved in the Incredible Years Pilot Grant Program will continue attending weekly meetings through May 2008. Data about child and parent behaviors will be collected after parents complete the Incredible Years program. These data collected after the intervention has ended will help determine whether the program was effective in improving children's behavior skills and increasing parenting skills. Results will be reported in September 2008. Information gleaned from this first group of participants will be used to inform practices with the second group of parents. The second group of parents will begin receiving service in late summer of 2008.

Smart Start thanks  
Duke Energy  
for investing in the  
Incredible Years program.

For more information about the Smart Start Pilot Grant Program, contact Vivian Muzyk (919) 821-9571 [vmuzyk@ncsmartstart.org](mailto:vmuzyk@ncsmartstart.org).



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Partnership for Children, Inc.

# SMART START PILOT GRANTS

## Assuring Better Child Health and Development

### May 2008 Evaluation Report

Joy Sotolongo, The North Carolina Partnership for Children, Inc.



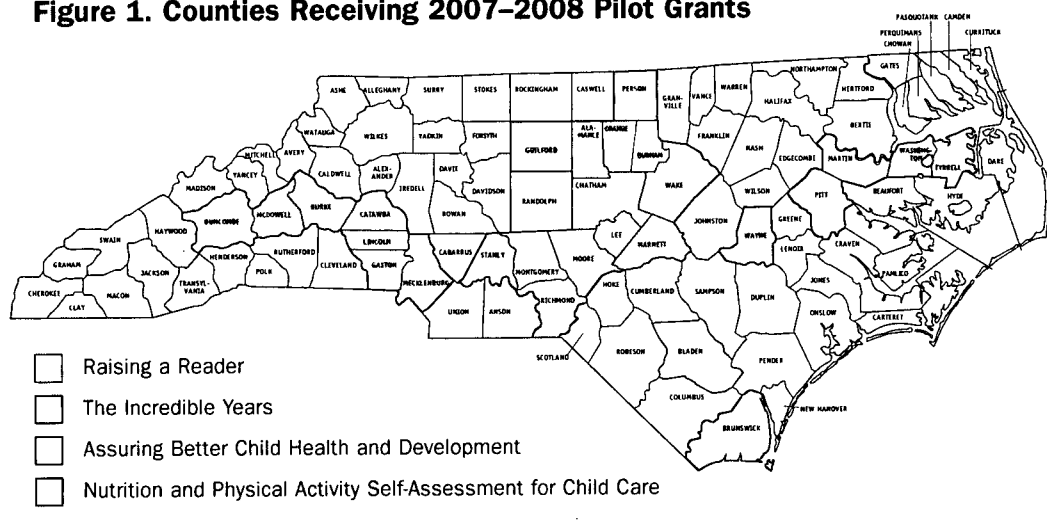
### Overview of the Smart Start Pilot Grant Program

The Smart Start Pilot Grant Program targets four critical issues facing young children and their families (see Table 1). To address these critical issues with limited resources, Smart Start adopted a strategic, high-impact approach by piloting evidence-based programs in a diverse range of communities across the state. To be selected, programs needed to: (1) be innovative, (2) produce clearly defined child or family outcomes, and (3) have the potential to become a state-wide model (see Table 1 for list of programs).

**Table 1. Critical Issues and Pilot Programs**

Critical Early Childhood Issue	Smart Start Pilot Grant Program
Reduce childhood obesity	Nutrition and Physical Activity Self-Assessment for Child Care (NAP SACC)
Identify children with developmental delays or concerns	Assuring Better Child Health and Development
Improve children's pre-reading skills	Raising a Reader
Increase parenting skills that address children's challenging behaviors	The Incredible Years: BASIC Parent Training Program—Early Childhood



**Figure 1. Counties Receiving 2007–2008 Pilot Grants**

## Scope

This report focuses on the Assuring Better Child Health and Development (ABCD) Pilot Grant Program and provides information about the program and its participants, lessons learned, and next steps.

**Table 2.**  
**Locations and Enrollments**  
**of Participating Practices**

County	Number of Primary Care Practices	Number of Children Under 6 Enrolled in Practices <sup>a</sup>
Brunswick	3	2,660
Chatham	6	3,101 <sup>b</sup>
Martin and Pitt	1	6,928
Lee, Montgomery, Moore, Richmond (Sandhills)	4	6,562

a. Number of children estimated by using physician estimates and number of Medicaid children as of August 2007.

b. Two practices were unable to provide any information.

## Description of the Assuring Better Child Health and Development (ABCD) Program

The ABCD program is an intervention in primary care physician offices, with the goal that all children receive appropriate developmental screenings and referrals in the context of the medical home. About 70% of children with disabilities are not identified before they enter school.<sup>1</sup> Although primary care physicians have regular contact with the majority of young children, they face many barriers to offering regular developmental screening and referral services.

The ABCD program offers training and technical assistance to physicians and their office staff so that children can receive screenings and referrals to appropriate developmental services. Based on the success of a pilot of the ABCD program in 2000, North Carolina now requires that physicians regularly provide a developmental screening for Medicaid children, using a valid, standardized assessment tool. The Smart Start Pilot Grant provides assistance to physicians so that all children can receive the same quality and frequency of developmental screening, and so that primary care providers are able to refer children with developmental concerns to the appropriate services.

The intended outcomes for the ABCD Pilot Grant are: (1) an increase in the number of primary care physician practices that use validated developmental screening tools; (2) an increase in the number of children who receive developmental screening in primary health care settings; and (3) an increase in primary health care provider referrals for children with identified concerns.

1. Palfrey, J. S., Singer, J. D., Walker, D. K., & Butler, J. A. (1987). Early identification of children's special needs: A study in five metropolitan communities. *Journal of Pediatrics*, 111, 651-655.



# SMART START PILOT GRANTS UPDATE

## Participants

So far, 14 primary health care practices are participating, impacting approximately 19,251 children. 44% of children in participating practices have been screened.

## Baseline Screening

Prior to receiving technical assistance, the 14 participating primary health care practices reviewed, following Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule guidelines, before ABCD program staff began working with medical practices. Three months later, 391 records were reviewed in the same practices.

## Description of Children in the Sample

- 71% of the children were enrolled in health care coverage or did not have coverage
- The average age was 22 months

## Baseline Developmental Screening

- 78% of children received the screening using a valid, standardized instrument
- 10% of children who were screened were identified as at-risk for developmental delay.

While more than 75% of the children in the baseline data suggest that children in participating practices where every child in the sample was screened.

- In 30% of the participating practices, developmental screening was not performed
- In 8% of the participating practices, developmental screening was performed but not documented

## Baseline Referral and Follow-up

The ABCD program provides assistance with developmental concerns and referral and follow-up service rates.

- 46% of children scored at-risk for developmental delay and were not referred for services (Figure 3)

When a child is referred for services, the program always get information about whether the child is referred for services. This is an additional challenge that

# Ensuring Better Child Health and Development (ABCD)

## October 2008 Evaluation Update

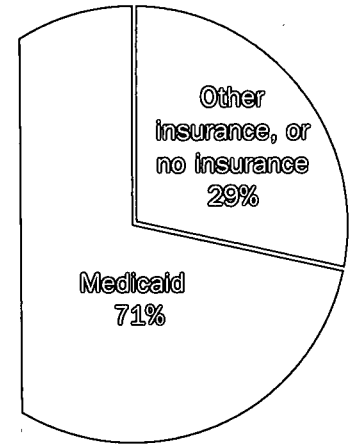
A sample of 357 records were reviewed, following Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule guidelines, before ABCD program staff began working with medical practices. Three months later, 391 records were reviewed in the same practices.

There were improvements in the use of recommended developmental screenings and in the percent of children identified as at-risk for developmental delay.

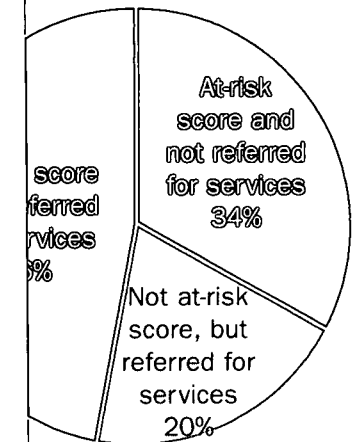
Percent of Children:	March 2008	July 2008
Who receive recommended developmental screening at most-recent well-child visit	79%	97%
Identified as at-risk for developmental delay	10%	12%

ABCD program staff spent the first three months working to ensure medical practices use recommended screening tools with all young children. In the coming months they will focus on ensuring children identified with developmental concerns are referred and linked to appropriate services. There were no changes in the baseline referral and follow-up service rates, but it is too early in the program to expect such changes. This information will be monitored throughout FY08-09.

**Figure 2.**  
Insurance Coverage of Children in Baseline Sample



**Figure 3.**  
Baseline Referral Rates



## Success Stories

One primary care practice in Chatham County was not using a valid, standardized developmental screening tool. Once the practice became involved in the ABCD program, the medical director made the decision to begin using Ages and Stages, one of the recommended tools.

In a primary health care practice in the Sandhills Region, the ABCD Coordinator offered a presentation on the importance and use of developmental screenings. Although the practice had been using a developmental screening tool, children were not referred to services because providers did not know how to score the tool. With help from the ABCD Coordinator, the practice learned how to identify children at-risk for developmental delay. They also learned how to integrate screening results into their existing records system, so that children could be referred to needed services.

- Primary care providers received information about the referral status for slightly more than half (56%) of the children who were referred.
- Of the children for whom information was obtained, 50% were successfully linked to services.

## Lessons Learned

During the first six months of implementing the ABCD Pilot Grant Program, The North Carolina Partnership for Children, Inc., noted the following lessons:

- One grantee was challenged to find an ABCD Coordinator with the appropriate knowledge and skills. Because of ABCD's unique collaboration across the medical and early intervention systems, the ABCD Coordinator needs to have knowledge of the management of a primary health care practice, services for children with developmental concerns, and developmental screening tools. Finding qualified staff is particularly challenging in rural areas.
- More preparation time was needed before working with the practices.
- Larger primary care practices were easier to work with because those practices typically have an office manager. The biggest barrier for smaller practices is the cost of the developmental screening tool.
- Having a physician in each participating practice who is a champion for the program is a key factor for achieving program goals.
- Some grantees view ABCD as a time-limited project. Others envision the program continuing after the grant period, and they are interested in seeking resources to sustain the program.

## Plans for Fiscal Year 2008–2009

Primary care practices currently involved in the ABCD Pilot Grant Program will continue receiving services through June 30, 2008. Data on the use of developmental screening tools, referrals of children to services, and ensuring that children received referred services will continue to be collected quarterly. As this initial group of primary care practices institutes a regular screening and referral process, new practices will participate in the ABCD Pilot Grant Program.

For more information about the Smart Start Pilot Grant Program, contact Vivian Muzyk (919) 821-9571 [vmuzyk@ncsmartstart.org](mailto:vmuzyk@ncsmartstart.org).

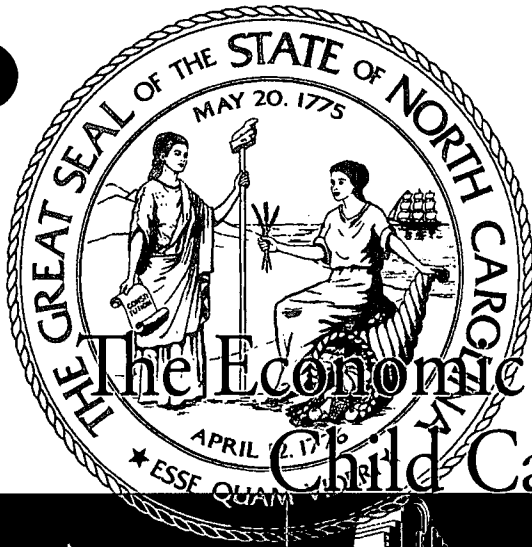


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# The Economic Impact of THE Child Care Industry in *North Carolina*



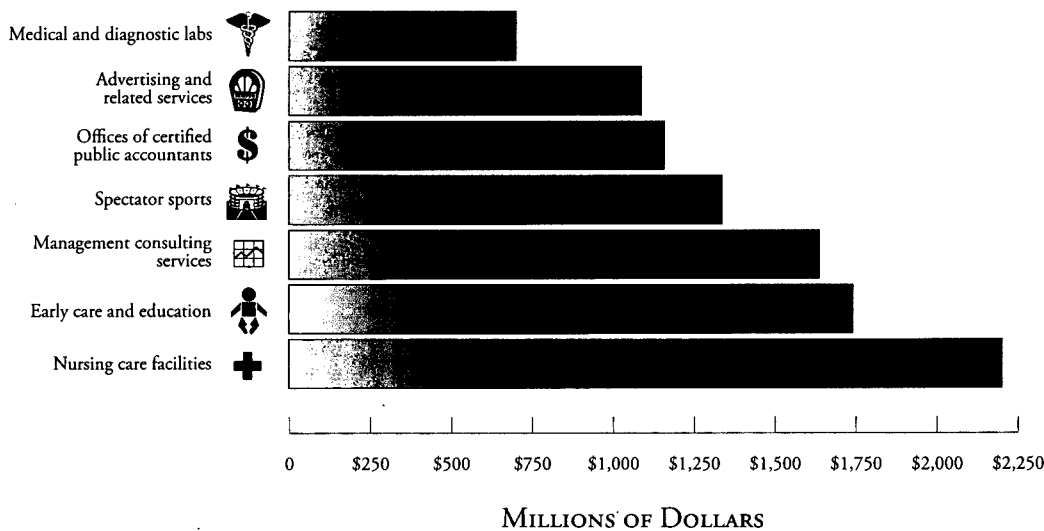
The child care industry is integral to the vitality of North Carolina's economy. It:

- Generates \$1.77 billion annually and provides more than 47,000 jobs.
- Benefits all industries in the state by enabling parents to work productively outside the home and attend higher education programs to update their skills.
- Lays the groundwork for North Carolina's economic future by preparing upcoming generations for school and workplace success and attracting businesses to the state's skilled workforce.

To benefit every North Carolina resident, child care industry stakeholders – businesses, government and the child care industry – must work and plan together to reach innovative solutions to the barriers that the industry and its consumers face.

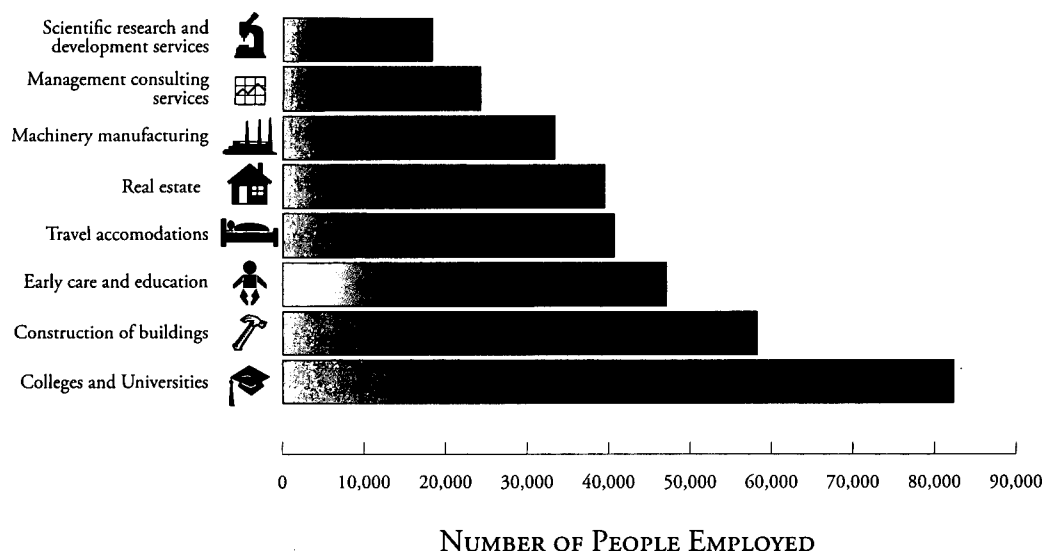
# Child care is a significant industry in North Carolina

To benefit every North Carolina resident, all child care industry stakeholders — including businesses, government and the child care industry — must work and plan together to reach innovative solutions to the barriers that the industry and its consumers face.



**figure 1: GROSS RECEIPTS BY INDUSTRY**

Source: US Census Bureau, 2002 updated to 2008 using Consumer Price Index (CPI), except early care and education receipts based on the results of this study.



**figure 2: EMPLOYMENT BY INDUSTRY**

Source: Quarterly Census of Employment and Wages (QCEW), except early care and education which is based on the results of this study.

■ The child care industry generates \$1.77 billion annually in gross receipts, more than all spectator sports or advertising offices, and on par with all management consulting businesses in the state (see figure 1).

■ The child care industry directly supports more than 47,000 jobs, putting it on par with all travel accommodations and building construction in the state (see figure 2).

■ The licensed child care industry currently has the capacity to serve 413,000 children at any one time — 60 percent of all children between birth and age 5 in North Carolina.



# The child care industry *facilitates the success of other industries* in the state

**Child care benefits all industries in the state by enabling parents to work productively outside the home and attend higher education programs to update their skills.**

- One in ten workers has a child under age 6, and together these working parents earn \$14.4 billion every year.
- Families with children under age 6 using licensed early care and education programs have a combined income of \$6.4 billion.
- Smart Start links families across the state to early education and support services as no other program can.

## Smart Start improves *the quality of and families' access to* high quality child care

**Child care lays the groundwork for North Carolina's future success by preparing future generations for school and workplace success and attracting business to North Carolina's skilled workforce.**

***Helps to prepare young children for opportunities in the new economy***

- Studies of North Carolina's Smart Start initiative find that the quality initiative improved language and math skills that prepare children for kindergarten and future success.
- In a long-term study in North Carolina, low-income children between birth and age 6 who participated in a model child intervention program were more likely to attend college and be in a high-skilled job or in higher education at age 21 than their peers who were not offered the program.

***Comprises an important part of economic development for a healthy future***

- Quality child care is part of the world-class education system that economic development experts believe will attract businesses to the state.
- Long-term studies show that quality programs, particularly for low-income children, decrease the likelihood of special education enrollment, juvenile delinquency, adult incarceration, and welfare participation, which increase overall quality of life and reduce the burden on taxpayers.
- A recent analysis by the Federal Reserve Bank found that one model early childhood program for low-income children generated an overall 16 percent rate of return on investment, 12 percent of which was a public rate of return. As one of the authors later wrote, "This return is too good to pass up—not only for the children but also for the taxpayers."

The child care industry  
*enables future economic*  
success in North Carolina

# The Economic Impact of THE Child Care Industry in *North Carolina*

The original Economic Impact Study of the Child Care Industry in North Carolina, released in 2004, was conducted by Saskia Traill and Jen Wohl of the National Economic Development and Law Center (NEDLC), in partnership with The North Carolina Partnership for Children, Inc., and with a grant from the W.K. Kellogg Foundation. The 2006 update was prepared by The North Carolina Partnership for Children, Inc.

This 2008 update was prepared by Saskia Traill at The Insight Center for Community Economic Development (formerly known as NEDLC) and The North Carolina Partnership for Children, Inc. The principal author worked closely with experts at North Carolina agencies who provided data and expertise to produce the findings in this report.



The North Carolina  
Partnership for Children, Inc.

1100 Wake Forest Road, Raleigh, NC 27604 - 919.821.7999 - [www.ncsmartstart.org](http://www.ncsmartstart.org)

## Smart Start and The North Carolina Partnership for Children, Inc.

Smart Start is North Carolina's early childhood leadership network dedicated to assuring that every child reaches his or her potential and is prepared for success in a global community.

The North Carolina Partnership for Children, Inc. (NCPC), was established in 1993 to provide statewide oversight of the Smart Start initiative. NCPC provides technical assistance and training for local Smart Start partnerships in the areas of program development, administration, organizational development, communication, fiscal management, technology, contracts management and fundraising. NCPC adheres to a comprehensive accountability plan to ensure programs, services and funds reach the children and families of North Carolina.

For *more information* visit [www.ncsmartstart.org](http://www.ncsmartstart.org)

**MINUTES**  
**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

November 19, 2008

The Legislative Study Commission on Children and Youth met on Wednesday, November 19, 2008 at 10:00 a.m. in Room 1228 of the Legislative Building in Raleigh. The following Senate Members were present: Co-Chair Senator Ellie Kinnaird.. The following House Members were present: Co-Chair Representative Bordsen, Representative Folwell, and Representative Johnson. The following Public Members were in attendance: Barbara Bradley, Paula Carden, Dr. Helen Brantley, Dr. Austin Connors, Mia Day Burroughs, Judge Mark Galloway, John Cox, Johnnie Ray Farmer, Dr. Jennifer Lail and Glenn Osborne. A visitor registration sheet is attached and made part of these minutes.

The presiding Chair, Representative Bordsen, called the meeting to order and briefed the Commission on the schedule for the meeting. An agenda is included and made part of these minutes.

Eric Zogry, Office of the Juvenile Defender, was recognized for a presentation on the history of the juvenile court. He noted three different ways that Juvenile Court is different from adult court. Those three ways include the goal of rehabilitating juveniles, protection from public record, and issues of due process. He noted that when juvenile court was first established, the main focus was rehabilitation. Due process was not emphasized at first. The rules and protections in the adult court might get in the way of "helping" children.

In the 1960s, another stage of evolution occurred in the juvenile court system. There were a series of court decisions that influenced the juvenile court. The United States Supreme Court in the Galt decision of 1967 drew a line in the sand and declared that the juvenile system had gone off track. Kids needed the protections of the court. Currently, there is an emphasis on fairness and due process in balance with the protection of the public. In 1994, the General Assembly held a Special Session which reduced the age of transfer at which a juvenile could be put into adult court. There was a prediction in the 1990s that there would be an explosion of violent juvenile crime. At that time, there was a conscious effort to increase sanctions; discretion was pulled back. This was based on the new direction to make the juvenile code protect the public.

Mr. Zogry continued. As a result of increased public safety, the American Bar Association did a national assessment on the quality of council in juvenile court. The study shed light on the fact that attorneys in juvenile court are not being trained and are unsure of their role. In North Carolina, the Office of Indigent Defense created the Office of the Juvenile Defender. Attorneys simply did not focus on juveniles. The Office of the Juvenile Defender is bringing direction and focus to that problem. Mr. Zogry concluded with his hope that the Office can continue efforts to evolve juvenile court.

Senator Kinnaird was recognized for a question. She inquired as to whether or not the Office of the Juvenile Defender hosts a Continue Legal Education.

Mr. Zogry responded that they do host an annual training.

Representative Johnson was recognized. She stated her newness to the juvenile justice arena and inquired about how the whole problem was being addressed with regards to juveniles?

Discussion ensued about the animosity that exists towards juvenile offenders, the ability for the juvenile court to respond to the community, and recent research that shows that brain development in juveniles is not fully realized until their 20s.

Judge Galloway was recognized. He noted that the courts definitely have not gotten it right yet, with regards to juveniles. Some ideas are counter-productive. What juvenile court has is a lot of professionals who are not lawyers. A major part of their job is to read studies and inform the court. One problem is that people tend to have a hard time moving away from ideas that do not work.

John Cox was recognized. He noted that something he gained from the Commission is the different ways jurisdictions deal with juveniles. It seems that a lot of what is going on is experimentation. What is uniform? What is not? If something is not working, who knows about it?

Mr. Zogry responded that the resources are always changing. There does not seem to be a platform for sharing ideas.

Senator Kinnaird was recognized. She suggested the idea of a "clearinghouse." That would be an idea the Commission could support. She also noted that "legislation by headline" is a huge problem. Members have to be careful to be thoughtful and not reactionary.

John Madler of the North Carolina Sentencing and Policy Advisory Commission was recognized for a presentation. He noted that the Sentencing Commission had been mandated to study juvenile recidivism. It had also completed a one-year study on youthful offenders. Currently, they are working on a feasibility study on the effectiveness of Juvenile Crime Prevention Councils. He noted that 16 and 17 year olds are a group in limbo. The consequences for this age group being tried as adults include carrying a conviction. He noted the recommendations the Sentencing Commission made with regard to raising the age of juvenile jurisdiction. He also informed the Commission about another study with regards to expunctions for 16 and 17 year olds.

Nicole Melton, Alamance County Juvenile Court Coordinator was recognized for a presentation on the Alamance County Court Improvement project. Her presentation is included and made part of these minutes.

Senator Kinnaird was recognized for a question. She inquired if the improvement also included the Department of Social Services, or just the court.

Ms. Melton responded that it was DSS Court.



John Cox was recognized. He noted that the program does help use court time more efficiently and asked once the grant money runs out, how can the program be kept?

Sandy Pierce, Administrative Office of the Courts, was recognized. She noted that AOC has been receiving federal grants for juvenile court improvement projects. Two are state funded. There is a possibility there.

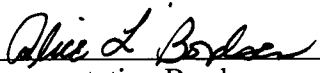
Brett Loftis, Executive Director of the Council for Children's Rights, was recognized for a presentation on the state of children in Mecklenburg County. His presentation is included and made part of these minutes.

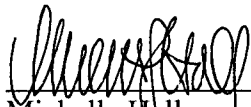
Member questions were answered.

The Chair requested that Members begin emailing suggestions for Commission recommendations and noted the next meeting date.

There being no further business, the Chair adjourned the meeting at 12:10 p.m.

Respectfully submitted,

  
\_\_\_\_\_  
Representative Bordsen  
Presiding Chair

  
\_\_\_\_\_  
Michelle Hall  
Committee Assistant



## **LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

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### **AGENDA**

November 19, 2008  
Room 1027/1128, Legislative Building  
10:00 AM

### **WELCOME AND INTRODUCTION**

Rep. Alice Bordsen, Co-Chair  
Sen. Ellie Kinnaird, Co-Chair

- Eric J. Zogry, Juvenile Defender, Office of the Juvenile Defender
- John Madler, Associate Director for Policy, North Carolina Sentencing and Policy Advisory Commission
- Nicole Melton, Juvenile Court Coordinator, Alamance County
- Brett Loftis, Executive Director, North Carolina Council for Children's Rights

### **Committee Discussion**

#### **Future Meetings**

January 7  
January 14

# VISITOR REGISTRATION SHEET

eg. Study Comm. Youth & Children  
Name of Committee

11-19-08  
Date

**VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK**

NAME

FIRM OR AGENCY AND ADDRESS

Brittany Farrell	NEFPC
R. Patrick Betancourt	NC Division of Social Services
Karen Calloun	NC Sentencing & Policy Advisory Comm.
David Lagos	NC Sentencing & Policy Advisory Comm.
John Madler	" "
Nicky Melton	ALAMANCE COUNTY - 15 - A
Sandy Pearce	NCAOC
Lori Ann Harris	LATA
Karen McLeod	CFSA - NC
Martin Phares	NC DJJ DP
Stephanie Nantz	DOA YAIU

## VISITOR REGISTRATION SHEET

Leg. study Children & youth  
Name of Committee

Name of Committee

11-19-08

Date \_\_\_\_\_

VISITORS: PLEASE SIGN BELOW AND RETURN TO COMMITTEE ASSISTANT

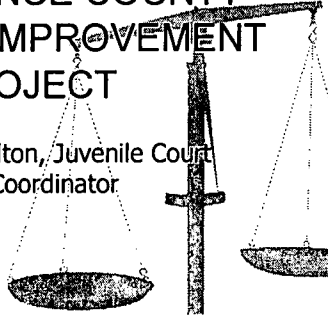
NAME

FIRM OR AGENCY

Jennifer Mahan	MHANC / Covenant
Mari Fitz-Wynn	NCHS
GARRY DAEKE	FGV PARTNERSHIP for CHILDREN
Emily Doyle	NCPAPA
Brandy Bynum	Action for Children NC
Dot Sawitt	NC
Heather Laffler	DCD
Kevin Ryan	DPH / DHHS
Sheryl W.	R W 9 Assoc.
Annex Newkirk	Governor's Office
Rob Thompson	Covenant

# ALAMANCE COUNTY COURT IMPROVEMENT PROJECT

Nicky Melton, Juvenile Court  
Coordinator



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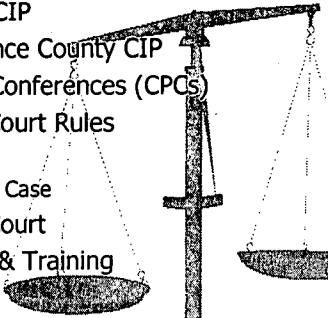
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## AGENDA

- Background of CIP
- Goals of Alamance County CIP
- Child Planning Conferences (CPCs)
- Local Juvenile Court Rules
  - Court Reports
  - One Judge One Case
- Time Spent in Court
- Data Collection & Training



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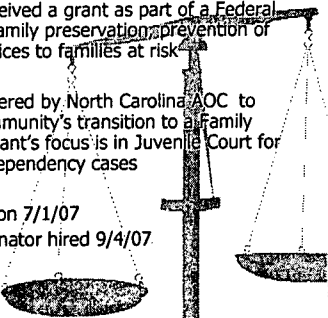
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## BACKGROUND

- Alamance County received a grant as part of a Federal initiative to support family preservation, prevention of child abuse, and services to families at risk
- The grant is administered by North Carolina AOC to support our local community's transition to a Family Court Model. The grant's focus is in Juvenile Court for abuse, neglect and dependency cases
- Began in this county on 7/1/07
- Juvenile Court Coordinator hired 9/4/07



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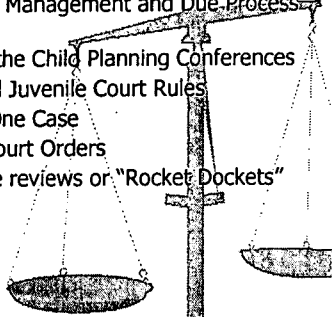
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## GOALS of ALAMANCE CIP

- Improved Case Management and Due Process for Parents
  - Re-institute the Child Planning Conferences
  - Update Local Juvenile Court Rules
  - One Judge One Case
  - Same Day Court Orders
- Begin mini case reviews or "Rocket Dockets"
- Data collection
- Training



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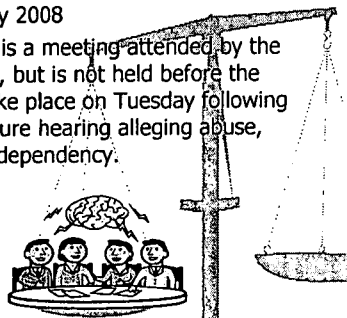
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## CHILD PLANNING CONFERENCES

- Began in January 2008
- This conference is a meeting attended by the parties in a case, but is not held before the judge. It will take place on Tuesday following the first non-secure hearing alleging abuse, neglect, and/or dependency.



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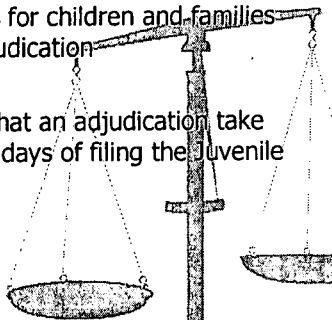
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## CPC PURPOSE

- Initiate services for children and families prior to the adjudication
- Statutes state that an adjudication take place within 60 days of filing the Juvenile Petition



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## COMPLIANCE WITH STATUTE

Days	# of petitions	June 07-Dec. 07	# of petitions	Jan-08-June 08
0-60	10	32%	12	86%
61-90	7	23%	1	7%
91-120	3	10%	1	7%
121-150	3	10%		
Other	8	25%		

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## COMPLIANCE WITH STATUTE

Days	# of petitions	July 08-Nov. 12	
0-60	9	56%	
61-90	7	44%	
91-120			
121-150			
Other			

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## SUCCESS OF CPCs

- The family gets **immediate** service referrals and appointments
- Service providers are a part of the process from the beginning
- By the end of the conference all the parties will know the specific steps to be taken prior to the Adjudication

AND.....

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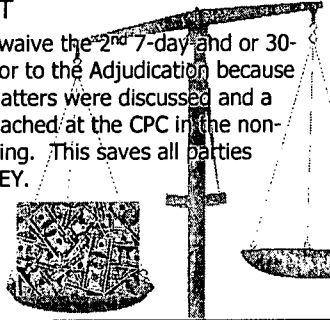
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## SUCCESS OF CPC

### ■ ADDED BENEFIT

- Parties usually waive the 2<sup>nd</sup> 7-day and or 30-day hearing prior to the Adjudication because all necessary matters were discussed and a decision was reached at the CPC in the non-adversarial setting. This saves all parties TIME and MONEY.



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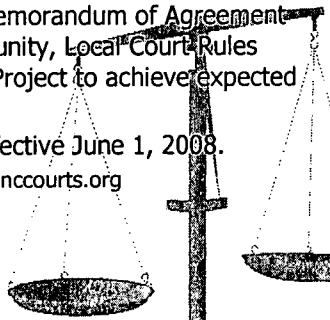
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## LOCAL COURT RULES

- Along with a Memorandum of Agreement with the community, Local Court Rules allow the CIP Project to achieve expected goals.
- Revised and effective June 1, 2008.
  - Found at [www.nccourts.org](http://www.nccourts.org)



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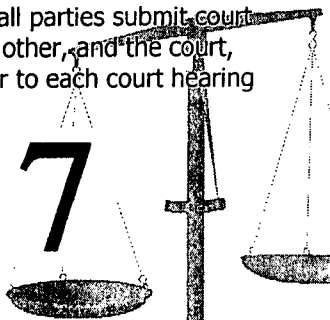
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## COURT REPORTS

- Per local rules, all parties submit court reports to each other, and the court, seven days prior to each court hearing



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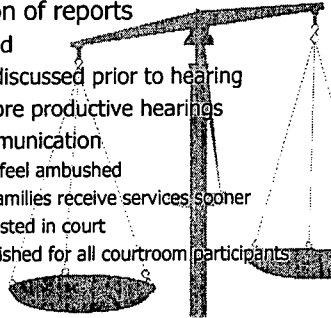
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## COURT REPORTS

- Early Submission of reports
  - Parties prepared
  - Discrepancies discussed prior to hearing
  - Shorter and more productive hearings
  - Enhanced communication
    - Parties do not feel ambushed
    - Children and families receive services sooner
    - Time is not wasted in court
    - Respect established for all courtroom participants




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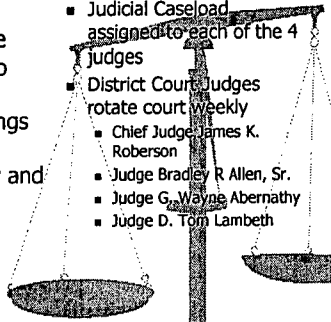
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## ONE JUDGE ONE CASE

- "A Judge who adjudicates a case should continue to preside over subsequent hearings in that case as to provide continuity and consistency"



- Judicial Caseload assigned to each of the 4 judges
- District Court Judges rotate court weekly
  - Chief Judge James K. Roberson
  - Judge Bradley R. Allen, Sr.
  - Judge G. Wayne Abernathy
  - Judge D. Tom Lambeth




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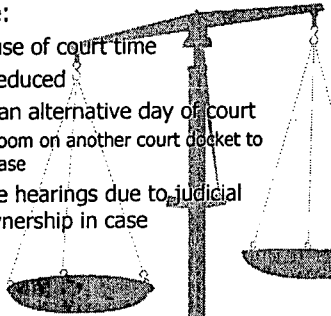
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## ONE JUDGE ONE CASE

- Benefits include:
  - More efficient use of court time
  - Continuances reduced
  - Case heard on an alternative day of court
    - Judge makes room on another court docket to hear juvenile case
  - More productive hearings due to judicial interest and ownership in case




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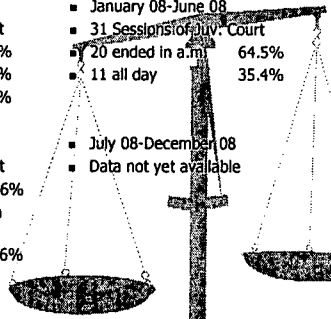
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## TIME SPENT IN COURT

- January 07-June 07
  - 27 sessions of Juv. Court
  - 12 ended in am 44%
  - 12 all day 44%
  - 3 data inconclusive 11%
- July 07-December 07
  - 30 Sessions of Juv. Court
  - 14 ended in am 46.6%
  - 2 brief period after lunch 6.6%
  - 14 all day 46.6%
- January 08-June 08
  - 31 Sessions of Juv. Court
  - 20 ended in a.m. 64.5%
  - 11 all day 35.4%
- July 08-December 08
  - Data not yet available




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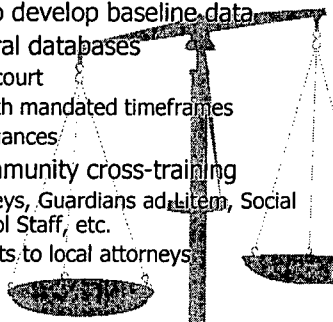
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## DATA COLLECTION AND TRAINING

- Time needed to develop baseline data
- Maintains several databases
  - Time spent in court
  - Compliance with mandated timeframes
  - Rate of continuances
- Coordinate community cross-training
  - Judges, attorneys, Guardians ad Litem, Social Workers, School Staff, etc.
  - Offer CLE credits to local attorneys




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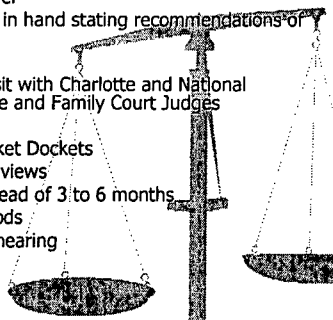
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## FUTURE GOALS

- Same Day Court Order
  - Leave with Order in hand stating recommendations of the court.
  - Began 11/1/08
  - 11/20/08- Site visit with Charlotte and National Council of Juvenile and Family Court Judges
- Mini Reviews or Rocket Dockets
  - Frequent Case Reviews
    - 4-6 weeks instead of 3 to 6 months
  - Shorter time periods
    - 10-15 minute hearing




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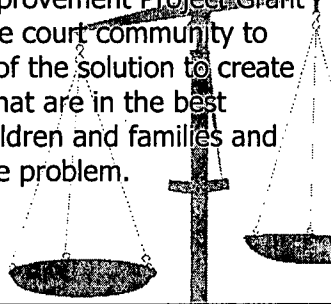
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The Court Improvement Project Grant has helped the court community to become part of the solution to create agreements that are in the best interest of children and families and not part of the problem.



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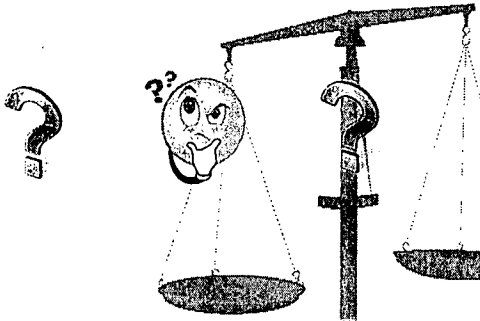
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## QUESTIONS



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**Nicky Melton**  
Juvenile Court Coordinator  
Alamance County 15-A  
336-438-1057  
Nichole.L.Melton@nccourts.org



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## WHAT TIME DO I SHOW UP?

1. Parents will arrive at 12:15 p.m. to watch a video that explains the court process



2. Parents will meet with their attorneys privately from 12:30-12:45 p.m.



3. Conference begins at 12:45 p.m.

## Child Planning Conference

### Location:

Criminal Courts Building  
2<sup>nd</sup> Floor,  
Grand Jury Room  
212 W. Elm Street  
Graham, NC 27253

If you have questions,  
please contact

Nicky Melton  
Juvenile Court Coordinator  
336-438-1057  
Nichole.L.Melton@nccourts.org

## CHILD PLANNING CONFERENCE (CPC)



Parent Brochure

## WHAT IS A CPC?

This conference is a meeting attended by the parties in a case but is not held before a judge. It will take place on Tuesday following the first court hearing.



## WHO IS PRESENT AT A CPC?

- Juvenile Court Coordinator as Facilitator
- Parents and their lawyers
- A friend, relative or other support person invited by each parent
- Social Workers and their lawyer
- Guardians ad Litem and their lawyer
- Other participants may include:
  - a mental health provider
  - a substance abuse professional
  - the local health department representative
  - a parenting agency representative
  - a School Social Worker

## WHAT IS THE PURPOSE OF THE CPC?

### 1. To Review Information in the Petition

- Name
- Address
- Telephone Number
- Date of Birth
- Social Security Number

### 2. To Identify Parents and Their Whereabouts

- Paternity
- Information regarding any missing parent

### 3. To Discuss Possible Placement Options

- Parents can provide names and contact information for possible placements of their children

### 4. To Discuss Service Needs of the Parent(s)

- What services or referrals do the parents need assistance in obtaining?
- What will you be asked to do in order to get your children back?

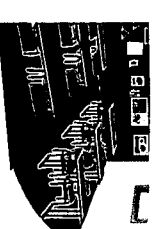
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### 5. To Discuss Service Needs of the Children

- What services or referrals do the children need?
- Where do the children receive medical and dental care?



- Where do they attend school or daycare?



### 6. To Discuss Visitation

- When will I visit my children?
  - What Day?
  - What Time?
  - How Often?
  - Location?



Council for  
Children's  
Rights

### State of the Children: Mecklenburg County

Brett Loftis, JD  
Executive Director, Council for Children's Rights  
Charlotte, NC

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### Demographics

- Total Mecklenburg County population: 827,445
- Total child population (0-19): 236,823
- Child population under five: 66,558
- Median household income: \$51,945
- Individuals below poverty level: 11.3%
- Children under 18 below poverty level: 14.6%

Source: U.S. Census Bureau, 2006 American Community Survey

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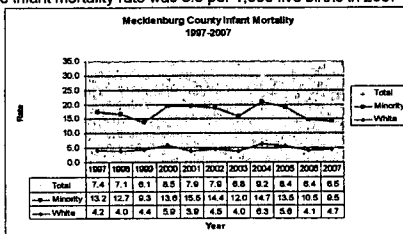
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### Child Fatality

- In 2007, there were 142 infant and child deaths in Mecklenburg County
- The infant mortality rate was 6.5 per 1,000 live births in 2007



Source: NC Division of Public Health - Women's and Children's Health Section; State Center for Health Statistics

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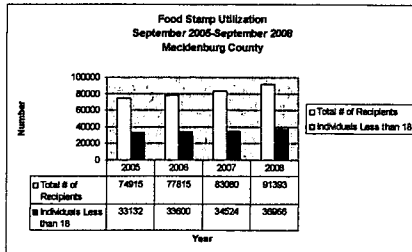
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## Social Services

### Food Stamps

- Food stamp utilization is on the rise in Mecklenburg County; since 2005, the total number of recipients has increased every year

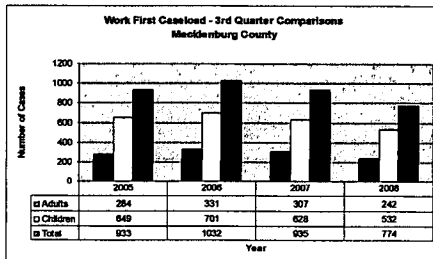


Source: NC Department of Health & Human Services, Division of Social Services, Food & Nutrition Services

## Social Services

### Work First

- At the end of the 3<sup>rd</sup> quarter 2008, there were 774 recipients of Work First, including 532 children



Source: NC Department of Health & Human Services, Division of Social Services

## Social Services

### Foster Care

- 1,627 children in DSS custody in FY 07
  - 37% were ages 0-5
  - 31% were ages 6-12
  - 26% were ages 13-17
  - 6% were 18 and over
- 69% were African-American; 15% were Caucasian

Source: Mecklenburg County Department of Social Services

## Social Services

### Child Maltreatment

- There were 9,741 reports of child abuse in FY08
- 5,389 cases were substantiated, services needed or services recommended
  - 452 substantiated cases
  - Services needed for 1,411 cases
  - Services recommended for 3,526 cases

Source: Mecklenburg County Department of Social Services

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## Early Care & Education

**As of June 30, 2008...**

- The average annual fee for child care in Mecklenburg County is \$8,674 for center-based care for children age 0-5
- 53% of surveyed parents cited cost as the reason they did not find child care
- There were 7,878 children receiving subsidized child care in Mecklenburg County; there were 6,825 children on the waiting list for subsidized care

Source: Child Care Resources, Inc.

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## Early Care & Education

- In Mecklenburg County, 62% of licensed child care facilities are 4 or 5 star rated; research demonstrates that programs with better educated staff and higher program standards have better child outcomes

Star Rating	Number	Percent of Star Rated Programs	Percent of Total Licensed Programs (818)
1	94	12%	11%
2	64	8%	8%
3	140	18%	17%
4	267	34%	33%
5	221	28%	27%
Total	786	100%	96%

Source: Child Care Resources, Inc.

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## Education

### Charlotte-Mecklenburg Schools Student Population

In 2007....

- There were 133,041 students in the CMS system
- 97 different languages spoken by the students
- 46% received free/reduced lunch; nearly 69,000 snack meals were served due to the debt owed on student accounts
- Nearly 11% of students had a disability

Source: Charlotte-Mecklenburg Schools

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## Education

### Achievement

- In 2007, 64% of students were at or above grade level at EOG testing
- Educational disparities exist for minority and free/reduced lunch students; African-American and Hispanic students are less likely to be at or above grade level at EOG testing as are free/reduced lunch students

End of Grade Testing Composite Results Snapshot								
Percent At or Above Grade Level by Subgroup								
Year	Total	African-American	Hispanic	White	LEP	Full Lunch	F/R Lunch	Students with Disabilities
2007	64.3%	47%	54.9%	86.3%	46.8%	80.5%	46.7%	31.7%
2006	63.3%	43.4%	53.4%	83.7%	37.7%	80.5%	45.1%	29%
2005	70.1%	67.7%	70%	93.5%	51.8%	91.2%	65.9%	43.6%

Source: Charlotte-Mecklenburg Schools

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## Education

### Graduation

- Entering 03-04 ninth graders graduating by 06-07; referred to as the "4-year Cohort Graduation Rate"
- Graduation rates are lower for minority and economically disadvantaged students when compared to white students

Subgroup	Percent
All Students	73.8
Male	70.1
Female	77.3
Native American	44.2
Asian	80.8
Black	62.8
Hispanic	61.8
Multi-Racial	71.6
White	87.1
Economically Disadvantaged	64.5
Limited English Proficient	62.3
Students With Disabilities	45.8

Source: Charlotte-Mecklenburg Schools

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## Juvenile Justice

- In 2007, there were 3,709 delinquent complaints in Mecklenburg County
- There were 913 admissions to detention and 47 YDC commitments
- Risk factors for juvenile crime include prenatal factors, poverty, history of child abuse, poor school outcomes, and family conflict and disruption

Source: NC Department of Juvenile Justice & Delinquency Prevention

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## Health

- Over 16% of births are to moms who did not have prenatal care in the 1<sup>st</sup> trimester
- According to the NC Nutrition & Physical Activity Surveillance System, 16% of children are overweight and over 16% are at risk for overweight
- There are 1,100 CMS students to every 1 school nurse
- 13% of CMS students, grades 6-12, are smokers
- Nearly 12% of NC children currently do not have or at some point in the past 12 months, did not have, health insurance

Source: Mecklenburg County Health Department; NC NPASS; NC State Center for Health Statistics  
CHAMP Survey Results 2007

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## Mental Health

- In 2007, 30% of clients served by Mecklenburg County Area Mental Health were under the age of 18
- 9% of services provided by Area Mental Health were Children's Developmental Services, for children 0-3
- An estimated 10-12% of NC children have a severe emotional disturbance
- According to a 2008 Mecklenburg County report, it is estimated that 15,833 children birth through five have a diagnosable mental health disorder. Many studies indicate that only one-third of these children receive treatment

Source: Mecklenburg County Area Mental Health 2007 Briefing Book; NC Division of Mental Health, Developmental Disabilities & Substance Abuse Services; "An Assessment of Adult Mental Health Needs in Mecklenburg County," Brief 10 of Mecklenburg County

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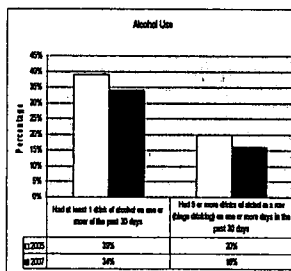
## Homelessness

- In June 2008, there were 2,493 homeless students enrolled in Charlotte-Mecklenburg schools
  - The number of homeless students is on the rise; up 13% from June 2007 and up 35% from 2006
- Homeless children get sick twice as often as other children; they have twice as many ear infections; four times as many asthma attacks; twice as many hospitalizations
- Homeless children go hungry twice as often as other children and 25% of homeless children report eating less after becoming homeless
- Mecklenburg County's shelter for women and children is regularly at or beyond capacity (200 beds plus 30 overflow)

Source: Mecklenburg County Point in Time Count; A Child's Place; National Center on Family Homelessness, 1999; Sandel, Shattstein, and Shaw, 1999; Institute for Children and Poverty.

## Youth Risk Behaviors

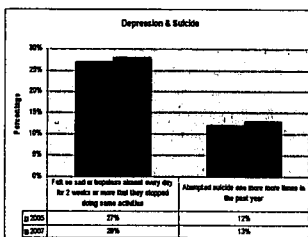
- 34% of CMS high school students have had at least 1 drink of alcohol on one or more days in the past 30 days
- 16% engaged in binge drinking in the last 30 days
- 22% of CMS high school students rode in a car with a driver who had been drinking alcohol in the past 30 days



Source: CDC Youth Risk Behavior Survey in collaboration with Mecklenburg County Health Department

## Youth Risk Behaviors

- 47% of high school students have had sexual intercourse; 16% have had sexual intercourse with four or more people during their lifetime
- 20% have been harassed or bullied on school property one or more times in the past 12 months
- 28% report feeling so sad or depressed they stopped doing some of their usual activities; 13% attempted suicide one or more times in the last year



Source: CDC Youth Risk Behavior Survey in collaboration with Mecklenburg County Health Department



**Council for  
Children's  
Rights**

**For more information please contact:**

**Brett Loftis**

**Council for Children's Rights**

**Charlotte, NC**

**704-372-7961**

**[Brett@cfcrights.org](mailto:Brett@cfcrights.org)**

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## **Reports Provided on Jump Drive**

### **Births & Fatalities**

BabyBook Mecklenburg Co 2007  
Barriers to Prenatal Care 2005  
Birth Highlights 2006  
Child Fatality by County 2007  
Infant Mortality 1997-2007  
Infant Mortality by Race & Ethnicity 1998-2004  
Infant Mortality Report (Final) 2007  
Meck Co. Child Fatality Report 2006  
NC Child Deaths in NC 2007  
NC Child Fatalities Homicide by Caregiver 2007  
Pregnancy Nutrition Surveillance 2006 Report

### **Child Welfare**

Abuse & Neglect Report Meck Co  
How the Child Welfare System Works  
Probability of Placement 1997-2008 Meck Co.

### **Demographics**

Census Data for Mecklenburg County  
Census Data for NC

### **Education**

Char-Meck School AYP Report 2006  
Char-Meck Schools Strategic Plan 2010 Exec Summary  
CMS School Performance 2007  
Meck. Co. Early Care & Education Report June 08  
NC Schools Report Card

### **Fact Sheets**

Action for Children Mecklenburg County Fact Sheet 2006  
CLIKS Profile for Mecklenburg County

### **Health/Mental Health**

Area Mental Health Briefing Book 2007  
Child Health Assessment & Monitoring Program (CHAMP)  
Infant Mental Health Needs Assessment – Meck Co  
Leading Causes of Death 2004  
Mecklenburg County Health Index 2007  
Medicaid Snapshot Meck Co 2008  
Medicaid Snapshot Meck Co 2007  
NC Child Health Report Card 2007



**Council for  
Children's  
Rights**

Percentage of Children At-Risk for Overweight

**Juvenile Delinquency**

Juvenile Crime County Databook 2007

**Social Services**

Food Stamp Data Meck Co by Month

Work First Caseload Characteristics Meck Co.

**Substance Abuse**

Substance Abuse Indicators 2007

**Youth Risk Behaviors**

YRBS Health Disparities High School

YRBS Highlights High School

YRBS Highlights Middle School

YRBS NC Comparisons

**Other Documents**

Presentation to Legislative Study Commission on Children & Youth

Online Data Sources



**Council for  
Children's  
Rights**

Online Data Sources		
Topic	Source	Weblink
Child Care	Child Care & Early Education Research Connection	<a href="http://childcaresearch.org">http://childcaresearch.org</a>
Child Care	Child Care Resources, Inc.	<a href="http://www.childcareresourcesinc.org">http://www.childcareresourcesinc.org</a>
Children	Child Trends Data Bank	<a href="http://www.childtrendsdatabank.org">www.childtrendsdatabank.org</a>
Children	Children's Defense Fund	<a href="http://childrensdefensefund.org">childrensdefensefund.org</a>
Children	North Carolina Child Advocacy Institute	<a href="http://www.ncchild.org">www.ncchild.org</a>
Crime	Charlotte-Mecklenburg Police Department	<a href="http://www.charmeck.nc.us">www.charmeck.nc.us</a>
Crime	NC State Bureau of Investigation, Division of Criminal Information	<a href="http://sbi.us.state.nc.us">sbi.us.state.nc.us</a>
Domestic Violence/Sexual Assault	NC Coalition Against Domestic Violence (NCCADV)	<a href="http://www.nccadv.org">http://www.nccadv.org</a>
Education	Charlotte-Mecklenburg School System	<a href="http://www.cms.k12.nc.us">www.cms.k12.nc.us</a>
Education	U.S. Department of Education	<a href="http://www.ed.gov">www.ed.gov</a>
Education	No Child Left Behind	<a href="http://www.schoolresults.org">www.schoolresults.org</a>
Education	NC Public Schools	<a href="http://www.dpi.state.nc.us">www.dpi.state.nc.us</a>
Employment	Employment Security Commission of NC	<a href="http://www.ncesc.com">www.ncesc.com</a>
General Data	LINC (Log Into North Carolina) - state data retrieval system	<a href="http://data.osbm.state.nc.us/pls/linc">data.osbm.state.nc.us/pls/linc</a>
General Data	NC Demographic & Statistical Data Sources on the Web	<a href="http://statelibrary.dcr.state.nc.us/iss/ncdataresources.html">statelibrary.dcr.state.nc.us/iss/ncdataresources.html</a>
Geographic Information Systems	NC Geographic Information	<a href="http://cgia.cgia.state.nc.us/">http://cgia.cgia.state.nc.us/</a>
Health	U.S. Department of Health & Human Services	<a href="http://www.healthfinder.gov">http://www.healthfinder.gov</a>
Health	Healthy Carolinians	<a href="http://www.healthycarolinians.org">www.healthycarolinians.org</a>
Health	Mecklenburg County Health Department	<a href="http://www.charmeck.org/Departments/Health+Departments">http://www.charmeck.org/Departments/Health+Departments</a>
Health	Centers for Disease Control	<a href="http://www.cdc.gov">www.cdc.gov</a>
Health	Kaiser Family Foundation - state health facts	<a href="http://statehealthfacts.kff.org">http://statehealthfacts.kff.org</a>
Health	NC Health Information	<a href="http://www.nchealthinfo.org">www.nchealthinfo.org</a>

Health	NC Department of Epidemiology	<a href="http://www.epi.state.nc.us">www.epi.state.nc.us</a>
Health	NC Healthy Schools	<a href="http://nchealthyschools.org">http://nchealthyschools.org</a>
Health	NC State Center for Health Statistics, including the BRFSS	<a href="http://www.schs.state.nc.us">www.schs.state.nc.us</a>
Health	NC Oral Health Section	<a href="http://www.communityhealth.dhhs.state.nc.us/dental/">http://www.communityhealth.dhhs.state.nc.us/dental/</a>
Health	Office of Minority Health & Health Disparities	<a href="http://www.ncminorityhealth.org/omhhd/index.html">http://www.ncminorityhealth.org/omhhd/index.html</a>
Housing/Homelessness	National Organizations Concerned with Mental Health, Housing, and Homelessness	<a href="http://www.nrchmi.samhsa.gov">http://www.nrchmi.samhsa.gov</a>
Immigration	Citizenship & Immigration Services	<a href="http://www.uscis.gov">www.uscis.gov</a>
Mental Health/Developmental Disabilities/Substance Abuse	NC Division of Mental Health, Developmental Disabilities, & Substance Abuse Services	<a href="http://www.dhhs.state.nc.us/mhddsas/">http://www.dhhs.state.nc.us/mhddsas/</a>
Mental Health/Developmental Disabilities/Substance Abuse	Substance Abuse & Mental Health Services Administration	<a href="http://www.samhsa.gov/">http://www.samhsa.gov/</a>
Population/Economic/ Housing Data	U.S. Census Bureau	<a href="http://www.census.gov">www.census.gov</a> <a href="http://www.factfinder.census.gov">www.factfinder.census.gov</a>
Social Services	NC Division of Social Services	<a href="http://www.dhhs.state.nc.us/dss">www.dhhs.state.nc.us/dss</a>



**MINUTES**  
**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

January 7, 2009

The Legislative Study Commission on Children and Youth met on Wednesday, November 19, 2008 at 10:00 a.m. in Room 1228 of the Legislative Building in Raleigh. The following Senate Members were present: Co-Chair Senator Ellie Kinnaird, Senator Doug Berger, and Senator Stevens. The following House Members were present: Co-Chair Representative Bordsen, Vice Chair Representative Earle, and Representative Johnson. The following Public Members were in attendance: Paula Carden, Dr. Helen Brantley, Mia Day Burroughs, Judge Mark Galloway, Dr. Jennifer Lail, Johnnie Ray Farmer, and Glenn Osborne. A visitor registration sheet is attached and made part of these minutes.

The presiding Chair, Representative Bordsen, called the meeting to order and briefed the Commission on the schedule for the meeting. An agenda is included and made part of these minutes.

Wendy Graf Ray was recognized. She gave some background on the Commission noted the Chairs wanted the Commission to become an ongoing oversight-type Commission. She noted there were not a lot of specific recommendations gathered over the Interim, but there may be ideas of issues to study further.

Representative Bordsen noted the thing to keep at the forefront of everyone's minds is that the Commission continues on.

Senator Kinnaird thanked Ms. Ray for the summary and thanked the Commission for traveling and for participating in the public hearings and in all of the meetings.

Sorien Schmidt, Senior Vice President of Action for Children North Carolina was recognized. Her remarks are included and made part of these minutes. Ms. Schmidt also noted the Legislative Agenda for Action for Children. The Legislative Agenda is included and made part of these minutes.

Representative Bordsen opened the meeting for discussion on recommendations.

Senator Kinnaird was recognized. She inquired about wrap around services and if the Commission could support more of those types of programs.

Ms. Schmidt responded that she believed Senator Kinnaird was referring to the implementation of evidence-based practices. One of those practices is System-of-Care.

Representative Bordsen noted the Commission should have another presentation on S.O.C.

Glenn Osborne was recognized. He noted that he is a big fan of child and family group conferencing. The model stemmed from Canada and is about empowering the family. It has been very successful in local Departments of Social Services. He thinks this can apply in other systems.

Mia Day Burroughs was recognized. She noted the issue is funding. What we have is all kinds of funding sources that end up being piloted. Money will dry up and localities end up having to try and find money. Funding sources can make collaboration difficult.

Senator Stevens was recognized. He suggested the Program Evaluation Division undertake a study of how many programs and how much money is used to serve children and youth across the state. That would be a helpful tool for the Commission to use in deciding which programs to support during tough economic times.

Judge Galloway was recognized. He observed that often when we are improving the lives of children, we are really improving the circumstances of the parents. He noted one good example of this is Drug Treatment Court. Those services are really helping children as well.

Representative Folwell was recognized. He noted the Commission should include economics as we consider the legislative agenda.

Dr. Lail was recognized. She noted her desire to hear about sustainability of funding. There is no up-front requirement to make programs sustainable and that needs to happen before funding is given. She also underscored the need for health insurance for all children.

Johnnie Ray Farmer was recognized. He noted it is a bad time to talk about money. But in all of the public hearings, the Commission heard about child care subsidy list. The Children need help and healthcare to get a good start.

Paula Carden was recognized. She noted that parents who qualify need to be forced to enroll in Health Care, Medicare and Medicaid so we can give those people services. We need to hook up people with a third party payer.

Dr. Helen Brantley was recognized. She noted the Commission needs to keep talking about wrap around services. Need to include mental health in the funding issue.

Senator Stevens stated that the Healthcare Access Commission will be recommending the same thing.

Dr. Brantley noted she would like to make a motion to include mental health care in the Commission recommendation regarding health care.

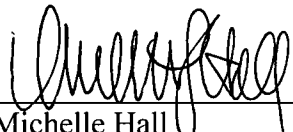
Glenn Osborne was recognized. He recommended looking at the child care subsidy with more vision and look at what is being done already.

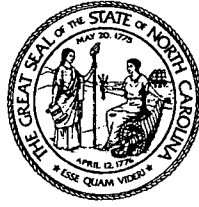
Senator Kinnaird asked to put Juvenile Crime Prevention Council funding and raising the age of juvenile jurisdiction on the list of recommendations.

There being no further business, the Chair adjourned the meeting at 12:10 p.m.

Respectfully submitted,

  
\_\_\_\_\_  
Representative Bordsen  
Presiding Chair

  
\_\_\_\_\_  
Michelle Hall  
Committee Assistant



## **LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

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### **AGENDA**

January 7, 2009  
Room 1027/1128, Legislative Building  
10:00 AM

### **WELCOME AND INTRODUCTION**

Rep. Alice Bordsen, Co-Chair  
Sen. Ellie Kinnaird, Co-Chair

- Sorien Schmidt, Senior Vice President, Action for Children North Carolina
- Discussion of Recommendations

**Future Meetings**  
January 14

## VISITOR REGISTRATION SHEET

Study Comm on Youth &amp; Children

Name of Committee

1-7-2009

Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Casey Wright	Hunt Institute
Ann Ward	NCPC
Vivian Muzyk	NCPC
Lori Ann Harris	CAHFA
David Lagos	NC Sentencing and Policy Advisory Commission
John Rust	NC Family Policy Council
Eleanor Wehman	Student, Yale University
Stephanie Fangel	Smart Start
Doc Saff	NC Child Care Coalition
Nancy Ableidinger	Action for Children NC
Sören Schmitt	u

## VISITOR REGISTRATION SHEET

Study Comm on Youth & Children  
Name of Committee

1-7-2009  
Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Stephanie Nantz

YAIO

Jeff Olson

NCDSS

Janice Fain

NC DHHS - DCD

David Lagos

NC SPAC

Kristen Guillory

DPI - Office of School Readiness

Brandi S. Clemmons

Office of the Juvenile Defender

Brendon Comer

(OCPYC)  
Orange Co. Partnership for Young Children, Chapel Hill

Margaret Samuels

OCPYC

Rob Thompson

Covenant

Julia Leggett

The Arc of NC

## VISITOR REGISTRATION SHEET

*Study Comm on Youth & Children*

Name of Committee

*1-7-2009*

Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

*Cynthia Bennett**DHHS**Carole Payne**McGraw-Hill Consulting*

# VISITOR REGISTRATION SHEET

*Study Comm on Youth & Children*

Name of Committee

*1-7-2009*

Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

*Jennifer Mahan*

*MHANE*





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Best Place to Be and Raise a Child*

## **PRESENTATION**

To: Legislative Study Commission on Children and Youth  
From: Sorien K. Schmidt, Sr. Vice President, Action for Children NC  
Date: January 7, 2009

**Re: Pathways from Research to Policy to Practice:  
Ensuring the Healthy Development of North Carolina's Children, Youth and Economy**

Action for Children North Carolina is a nonprofit organization in our 25th year working to improve child well-being in North Carolina through policy and system change informed by data and research.

We are here because we have a common understanding of the shared responsibility we all have to ensure the healthy development of North Carolina's children. Smart policy – in both the public and private sectors – that improves the outcomes of our children never has been more critical or more possible than now. This may sound like hyperbole, but we know North Carolina's current workforce is educated for a 1950's economy in a 21<sup>st</sup> century world and we are all paying the price.

Further, research, especially findings on brain development, has demonstrated which practices actually improve childhood outcomes. When the neuroscience research is combined with findings from early intervention studies, and program evaluations, this research provides clear guidance on the policies, resources and system changes needed to implement the most effective practices and supports for our children. We can see the highway of success, now we need to build the on ramps.

It may seem that I am out of touch advocating for broad policy and system changes just when our economy is diving to its lowest levels in decades and taking state revenue down with it. I have three thoughts about this. First, adversity forces change. Already we are seeing dramatic leadership change at the very highest levels of politics and business. Also on the ground, we have seen more people vote and more people at all income levels experience our shared declining fate if we do not improve. While deep recession is painful, billions of dollars in revenue short-fall can and must motivate everyone to do honest assessment and commit themselves to improve our collective and community policies and practices to they are more effective and thereby cost-effective in the modern world. The research tells us what works for children and we ignore it at our own peril.

Second, North Carolina, and America, has a history of implementing visionary yet difficult policies and practices with great success. From 1795 and the opening of the first public university in America at Chapel Hill, to the creation in 1993 of the Smart Start program based on cutting edge, neuroscience research of early child brain development – visionary leaders have brought North Carolina's minds, hearts and resources together to improve the state for all who live here. We can do it again.

Finally, we may feel poor, but we have resources. The reality is that every day therapists and teachers, employers and parents, judges and pediatricians are addressing the needs of the



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children and families sitting right before them. Many are working hard in difficult circumstances and deprived communities and providing the best services and practices known. In other words, in reality, our people are one of our greatest resources.

In addition, every county is served by a Department of Social Services, Department of Public Health, Smart Start partnership board, Juvenile Crime Prevention Council, courts, one or more school systems and more. In this committee you have heard testimony of examples where local initiatives are already leveraging private and public resources. Dotted throughout the state are successful initiatives where agencies are crossing the artificial silos of funding streams and departments to collaboratively implement research-based practices that improve children's lives. For example:

- Three school systems and the department of social services in Catawba County are working together to improve educational outcomes of children in foster care. They are using an evidence-based practice to help child welfare workers and educators to work collaboratively to identify obstacles, set common goals, define a plan of action and implement solutions.
- A collaboration of public and private agencies and private foundations that has come together to form the Alliance for Evidence-Based Family Strengthening Programs. Their goal is to prevent child abuse and neglect and they are already successfully implementing programs such as the Nurse-Family Partnership in several communities.
- Pediatricians, researchers and therapists from Duke and UNC-Chapel Hill have been training therapists in 45 eastern North Carolina counties in Trauma Focused Cognitive Behavioral Therapy, which has proven successful in helping children and youth overcome traumatic experiences.

These are significant and impressive efforts, and there are others, that can provide knowledge and experience to statewide policy efforts and that have already piloted programs that could be taken to scale. In addition, these pilot projects are supported by public and private state universities which assist with needs assessments, training, technical support, and ongoing evaluation. State and national private foundations have played an active and essential role in nurturing and funding these pilot projects. But private funding and local elbow-grease alone cannot bring these efforts to scale.

State leaders must intentionally create and fund systems that support and promote the replication of practices and pilot programs proven to be successful. National research and the experience of our pilot programs shows certain conditions are necessary to successfully implement evidence based programs, like a scaffolding that supports the local implementation. Some of these conditions include:

- A collaborative process involving all stakeholders from inception.
- Rigorous, honest needs assessment of the community and agencies involved.
- Clear, collaboratively agreed upon goals to be achieved and indicators and benchmarks by which to measure success.
- Expert training and ongoing technical assistance.
- Ongoing constructive evaluation to help practitioners implement the program as intended.
- Active support from decision-makers and leadership of the project including adequate funding.



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The challenge for state leaders, including this commission, is to identify how best to promote such a scaffolding given North Carolina's state and local government structure, organizational systems, funding streams, and laws and public policies.

Therefore, Action for Children respectfully recommends that the commission support the following policy proposals.

**1. Investment limited state dollars where they will have greatest impact on children's outcomes and local economies.**

- a. Increase Funding for NC Health Choice to Prevent Freeze on Enrollment and Expand Insurance Coverage to Children up to 300% of Federal Poverty**  
NC Health Choice is North Carolina SCHIP funded health insurance program for moderate income children. The number of uninsured children is increasing with the economic downturn, causing more children to be eligible for NC Health Choice than the program can currently enroll. More funding for Health Choice and children's health insurance expansion will:

- 1) Improve children's health outcomes;
- 2) Create economic activity throughout the state and stimulate health care job growth; and
- 3) Draw addition federal funding into North Carolina.

- b. Increase Funding for Child Care Subsidies and Make New Subsidies available to adults who are newly unemployed and searching for work or enrolled in community college courses.** Over 30,000 children are on the waiting list for child care subsidy. More funding for subsidy:

- i. Allows more parents to work, look for employment or attend job training or other classes.
- ii. Ensures children are safe and appropriately cared for; and
- iii. Stimulates local economic activity and job growth in the child care industry.

- c. Expand the evidence based systems, practices and scaffolding that is already in place, protecting them from cuts during the revenue downturn.** Cost-effective practices should be expanded in order to gain the long-term benefits to children and the economy, and to make best use of limited state dollars. Provide state funding and support to expand successful evidence programs such as Trauma Focused Cognitive Behavioral Therapy program by Duke and UNC; the Juvenile Justice Treatment Continuum and the Alliance for Evidence-Based Family Strengthening Programs.

**2. Expand the jurisdiction of the juvenile court to include 16 and 17 year olds.**

- a.** North Carolina is the only state in the country to automatically charge, try, sentence, probate and incarcerate 16 and 17 year olds in the adult criminal system without exception. Most of these youth are not convicted or are sent to the adult probation system where they receive few or no services. National research shows that youth prosecuted as adults are more likely to commit additional crimes and of increasing violence.

**b. Actions:**

- i. All minors should be presumed under the juvenile court's jurisdiction unless a juvenile court judge transfers them to the adult criminal court or they are charged with 1<sup>st</sup> degree murder.



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- ii. **Legislators should empower the appropriate commission and agencies to implement the feasibility study for raising the age of juvenile court,** to be released by the Governor's Crime Commission during the 2009 long session.
  - iii. **Adequately fund Juvenile Crime Prevention Councils and the Department of Juvenile Justice and Delinquency Prevention** so they can conduct rigorous local needs assessments, implement and support more evidence based community services, and expand services to 16 and 17 year olds.
- 3. Provide Financial Education to Students in Kindergarten through 12<sup>th</sup> grade.**
- a. Understanding basic economic concepts has become an essential part of living and working in modern American society. A stable and competitive North Carolina economy requires its workforce and consumers to be financially savvy. Currently, only five hours of financial education are required in high schools civics and economics class.
  - b. **Establish a Financial Literacy Council**
  - c. **Incorporate Financial Literacy Concepts in Curricula from Kindergarten to 12<sup>th</sup> Grade.** Repetition of basic concepts and skills is important to learning and comprehension.

**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH  
2008 PUBLIC HEARING SUMMARY**

<b>Name/Organization</b>	<b>Hearing *</b>	<b>Issues Addressed</b>	<b>Concerns/Recommendations</b>
Edith Locke (Child Care Services Association)	V-G	Education Funding	<ul style="list-style-type: none"> <li>• Early childhood – workforce education, retention, compensation</li> </ul>
Anna Mercer-McLean (child care director, Orange Co.)	V-G	Education Funding	<ul style="list-style-type: none"> <li>• Early childhood – quality of care/education</li> <li>• Smart Start – continue and expand</li> <li>• Wait list for child care</li> </ul>
Donna Stearns (Vance Co. Juvenile Crime Prevention Council)	V-G	Funding	<ul style="list-style-type: none"> <li>• JCPCs/funding</li> </ul>
Cindy Watkins (Alamance Partnership for Children)	V-G	Education Funding Other	<ul style="list-style-type: none"> <li>• Wait list for child care/Smart Start</li> </ul>
Rene Betancourt (Supervisor, Vance Co. DSS)	V-G	Child Protection	<ul style="list-style-type: none"> <li>• Wait list for child care</li> <li>• Social worker recruiting, retention</li> </ul>
Vernon Mason (day care director, Wilson Co.)	V-G	Education Funding Other	<ul style="list-style-type: none"> <li>• More at Four vs. Smart Start</li> <li>• DCD efficiency/customer service</li> </ul>
Linda Piper (Executive Director, NC Child Care License Association)	V-G	Education Other	<ul style="list-style-type: none"> <li>• DCD efficiency/customer service</li> <li>• Funding not keeping up with increased requirements for day care</li> </ul>
Deryl VonWilliams (Vance Co., learning center for students who are habitually suspended from school)	V-G	Education	<ul style="list-style-type: none"> <li>• Alternatives for students who are suspended from school</li> <li>• Accountability/LEA use of funds</li> </ul>
Peggy Grey (Vance Co., citizen)	V-G	Juvenile Justice Funding	<ul style="list-style-type: none"> <li>• At-risk youth in Vance Co.</li> </ul>
Lorrie Crawley (early educator, Warren Co.)	V-G	Funding	<ul style="list-style-type: none"> <li>• Child care subsidy</li> </ul>
Judy Johnson (Executive Director, Boys & Girls Clubs)	V-G	Education	<ul style="list-style-type: none"> <li>• Children 6-18 – after school mentoring, gang prevention, dealing with peer pressure, drop out prevention, parent involvement</li> </ul>
Ervin Stokes (First Step Mentoring Program)	V-G	Other	<ul style="list-style-type: none"> <li>• Help for people in the community to get programs started</li> </ul>
Kevin Leonard (YMCA of NC)	V-G	Other	<ul style="list-style-type: none"> <li>• Evaluation of child care regulations as they apply to after-school programs for older children</li> </ul>
Kevin Campbell (owner)	A-B	Funding	<ul style="list-style-type: none"> <li>• DCD efficiency/customer service</li> </ul>

of 3 child care centers, President, NC Child Care Association)		Other	<ul style="list-style-type: none"> <li>• Wait list for child care</li> <li>• More at Four funding</li> </ul>
Allison Jordan (Executive Director, Children First)	A-B	Juvenile Justice	<ul style="list-style-type: none"> <li>• JCPCs/funding</li> <li>• Raise juvenile jurisdiction to 18</li> </ul>
Pat Wallenborn (single parent of 2 children)	A-B	Other	<ul style="list-style-type: none"> <li>• Single parents forced to choose between parenting and holding a job with benefits/paid sick leave</li> </ul>
Jennie Eblen	A-B	Education	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Jacque Penick (Executive Director, Mountain Area Child and Family Center)	A-B	Education	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Ron Bradford (Executive Director, Smart Start, Buncombe Co.)	A-B	Other	<ul style="list-style-type: none"> <li>• Smart Start, More at Four, etc. must all work together – funding needed for all parts of the system</li> </ul>
Alan Kirkpatrick (father of child in day care)	A-B	Education	<ul style="list-style-type: none"> <li>• Wait list for child care</li> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Michael Lodico (Superintendent, Asheville City Schools)	A-B	Education	<ul style="list-style-type: none"> <li>• Programs in schools</li> </ul>
Jennifer Simpson (Executive Director, Mitchell-Yancey Partnership for Children)	A-B	Education	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Caroline Rodier (Executive Director, McDowell Co. Partnership for Children)	A-B	Education	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> </ul>
Sheila Hoyle (Southwestern Child Development)	A-B	Other	<ul style="list-style-type: none"> <li>• Early childhood – workforce issues</li> <li>• Smart Start, child care subsidy, etc.– funding needed for all parts of the system for it to work</li> </ul>
Lori Jones (NC Child Care Resource & Referral Council)	A-B	Other	<ul style="list-style-type: none"> <li>• Programs providing care for school age children</li> </ul>
Lanier DeGrella (Manager, NC Infant Toddler Enhancement Project, Child Care Services Association)	A-B	Other	<ul style="list-style-type: none"> <li>• Infants and toddlers up to age 3 – accessibility, affordability, and quality of care</li> </ul>
Jerry Rice (advocate for special needs children)	A-B	General Health Mental Health	<ul style="list-style-type: none"> <li>• Restructure the system, rather than</li> </ul>

		Education Child Protection	putting more money into it.
Tammy Greenwell (Blue Ridge Health Services)	A-B	General Health Mental Health	<ul style="list-style-type: none"> <li>• Need for school-based and school-linked health centers/funding</li> </ul>
Paul Tax (Executive Director, Addiction Recovery Programs)	A-B	Mental Health	<ul style="list-style-type: none"> <li>• Substance abuse prevention programs</li> </ul>
Holly Jones (Executive Director, YWCA, Asheville)	A-B	General Health Funding	<ul style="list-style-type: none"> <li>• Child care subsidy – market rate formula unfair</li> <li>• Child care is also an economic development issue</li> </ul>
Theresa Morgan (Executive Director, CARE, Haywood Co.)	A-B	Child Protection	<ul style="list-style-type: none"> <li>• Child abuse – prevention/parent education</li> </ul>
Linda Poss	A-B	General Health	<ul style="list-style-type: none"> <li>• Mental health care/psychiatry</li> <li>• Shortages in health care workers</li> <li>• Supportive of several pieces of legislation that would benefit children and youth that were introduced but not passed by the GA</li> </ul>
Patti Long (Meridian Behavioral Health Services, Inc.)	A-B	Juvenile Justice Mental Health	<ul style="list-style-type: none"> <li>• DPI use of funds for at-risk students?</li> <li>• JCPCs/funding</li> <li>• Mental health reform</li> </ul>
Ellen Clarke (Executive Director, West Carolinians for Criminal Justice)	A-B	Juvenile Justice Mental Health	<ul style="list-style-type: none"> <li>• Community based alternatives</li> <li>• Raise juvenile jurisdiction to 18</li> </ul>
Elisha Freeman (United Agenda for Children, Henderson Co.)	A-B	Other	<ul style="list-style-type: none"> <li>• School nurses</li> <li>• Safe, affordable housing</li> <li>• Child care subsidy</li> <li>• Mental health services for children</li> </ul>
Shea Henson (Executive Director, Smart Start, Henderson Co.)	A-B	Education Funding	<ul style="list-style-type: none"> <li>• Increase access to preschool education through increased subsidies and additional preschool spaces</li> <li>• Child care is also an economic development issue</li> </ul>
Kate Pett/Leah Ferguson	A-B	Education	<ul style="list-style-type: none"> <li>• Teens age 11-15</li> </ul>
Jennifer Svenstrup (YMCA)	A-B	Other	<ul style="list-style-type: none"> <li>• Child care subsidy</li> <li>• Evaluation of child care regulations as they apply to after-school programs for older children</li> </ul>

\* V-G = public hearing held at Vance-Granville Community College on 9-24-08

A-B = public hearing held at Asheville-Buncombe Technical Community College on 10-8-08

- ❖ A total of 38 people spoke at the public hearings:
  - 13 at Vance-Granville
  - 25 at Asheville-Buncombe
- ❖ Vance-Granville hearing:
  - 7/13 addressed early childhood care/education, including quality of care and availability of care
  - Most frequently mentioned issue (at least 3) – waiting list for child care
- ❖ Asheville-Buncombe hearing:
  - 13/25 addressed early childhood care/education
  - Most frequently mentioned issue (at least 6) – market rate formula for child care subsidy unfair
- ❖ Subject areas covered (as indicated by the speaker on sign-in sheet)
  - Education (16) – majority dealt with early childhood care/education, but also mentioned: alternatives for suspended students, care for school age children, after school mentoring
  - Other (13) – many dealt with early childhood care/education or overlapped with other categories, but also mentioned: DCD efficiency/customer service, evaluation of child care regulations as they apply to programs providing care for school age children (note: these two issues were raised at both hearings)
  - Funding (10) – most dealt with early childhood care/education, but also mentioned: funding for JCPCs and at-risk youth
  - Mental Health (5) – mental health services and substance abuse services/prevention for children
  - Juvenile Justice (4) – continuing and funding JCPCs, raise juvenile jurisdiction to 18
  - General Health (4) – school-based and school-linked health centers, legislation to increase cigarette tax and to provide comprehensive sex education to students
  - Child Protection (3) – social worker recruiting/retention, child abuse prevention/parent education



## 2009 Legislative Agenda

In good times and bad, schools, doctors, families, and a patchwork array of community and government services form a quilt to cover our children's needs. When stitched together, these pieces form a community that can nurture children's social, emotional, cognitive and physical development. Where patches of the community are lacking or unraveling, our children's needs go unmet. This legislative agenda offers public policy changes that sew in some of the missing and frayed patches in order to strengthen North Carolina's community quilt just when children and families most need the help – during an economic downturn.

### Health

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- 1) **Fully Fund N.C. Health Choice:** In record numbers, hard-working North Carolina families have been losing employer-provided health insurance coverage for their children. North Carolina's Health Choice program has done an good job taking in children who have lost their parent's employer-provided insurance; nonetheless, with the current recession many more children need this coverage. State elected officials should take all steps necessary to avoid a waiting list or freeze of Health Choice.
- 2) **Implement N.C. Kids' Care:** All parents should have the opportunity to buy health insurance for their children. When children are disabled, chronically ill or the parent's employer no longer provides dependent coverage, there is often no private insurance plan available. The Governor and state legislature have already approved the N.C. Kids' Care program to fill this missing piece of the private insurance market. Now it is time to fund its implementation.

### Juvenile Justice

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- 3) **Adequately Fund Juvenile Crime Prevention Councils (JCPCs):** North Carolina's JCPCs distribute grants to community service providers who are providing services to prevent juvenile delinquency. The juvenile crime rate is now at an eight year low. Community providers are doing this work with less money than the legislature allocated in 2002. Additional funding is needed to keep up with inflation, meet the service needs identified by JCPCs, and to allow the JCPCs to better monitor and support local programs.
- 4) **Raise the Presumptive Age of Adult Criminal Prosecution to 18:** Children under age 18 are not considered adults in nearly all legal circumstances; however, outdated N.C. criminal law from 1919 still assumes all 16- and 17-year-olds are adults when in contact with the criminal system. North Carolina is the only state in the nation to automatically charge, try, sentence, probate and incarcerate minors in the adult criminal system with no exceptions. These children do not have access to services appropriate for youth, do not have the right to education, and their parents do not have to be notified of or participate in their charges, trial, probation or sentencing.
  - a) All minors should be presumed to be under the juvenile court's jurisdiction unless a juvenile judge transfers them to the adult criminal court or they are charged with 1<sup>st</sup> degree murder.
  - b) Legislators should empower the appropriate commissions and agencies to implement the feasibility study that the Governor's Crime Commission is to release before the end of this long session.

**More Legislative Information:** Action for Children NC [www.ncchild.org](http://www.ncchild.org); NC Legislature [www.ncleg.net](http://www.ncleg.net)

**Or Contact These Staff at Action for Children NC:**

Sorien K. Schmidt: [Sorien@ncchild.org](mailto:Sorien@ncchild.org), 919-834-6623 x228

Mandy Ableidinger: [mandy@ncchild.org](mailto:mandy@ncchild.org), 919-834-6623 x233

January, 2009

## **Public Education**

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- 5) **Provide Financial Education to Students in K-12<sup>th</sup> grade:** Understanding basic economic concepts has become an essential part of living and working in modern American society. Indeed, a stable and competitive North Carolina economy requires its workforce and consumers to be financially savvy. Currently only five hours of financial education are required in high school to cover basic financial concepts like budgeting, savings, checking accounts and interest rates. Financial education should start early and be relevant to the complex financial marketplace so that children learn and establish the behaviors to manage their money.
- a) **Establish a Financial Literacy Council:** Involving public, private and non-profit organizations in the development of financial education curricula can improve the quantity and quality of financial education, leverage private-sector resources and introduce real-world applications to class work. A Council could establish student financial literacy goals and benchmarks, monitor implementation of financial education across the state and connect schools to private resources and financial curricula.
- b) **Incorporate Financial Literacy Concepts in Curricula from Kindergarten to 12<sup>th</sup> Grade:** Repetition of basic concepts and skills is important for children and youth to learn and eventually apply knowledge. Financial skills should be incorporated in current curricula—students can read children's books about going to the bank or learn to add using a check register. Curricula exist to aid this type of integrated teaching, but it must be supported, prioritized and rewarded.
- 6) **Ban Corporal Punishment in the Public Schools:** In recent decades, studies have shown that corporal punishment does not produce long-term positive results, but does run the risk of injuring students both physically and emotionally. The United States is the only country where corporal punishment is allowed, though 29 states have banned the practice.

In North Carolina, the State Board of Education endorses other forms of discipline, such as Positive Behavioral Support. State law, however, allows local school boards to permit corporal punishment. Sixty of the 115 local districts have banned the practice. These districts serve more than 80% of the student population in the state. For more information, see <http://www.ncchild.org/action/index.php/Education>.

Our students deserve to be protected from injury, especially the tragedy of an inadvertent injury inflicted by school teachers and administrators. It is time for North Carolina to adopt a statewide ban on corporal punishment in the public schools.

## **Economic Security**

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- 6) **Fund N.C. Earned Income Tax Credit Outreach and Expand EITC beyond 5%:** In 2009, low income families will be able to receive a North Carolina earned income tax credit (EITC) equal to 3.5% of the federal EITC for which they already qualify. In 2010, the state EITC will increase to 5% of the federal credit. EITC pumps up local economies by annually helping over half-a-million working North Carolinians make ends meet in every part of the state. An increase in the EITC will further support families who have been forced by rising unemployment to work fewer hours or in lower-wage jobs.
- 7) **Allocate Additional Funding to the Child Care Subsidy Program:** Currently, 38,000 children are waiting to receive child care subsidy so they can be in safe, developmentally-appropriate child care arrangements while their parents are working. More child care should be made available to parents who are looking for employment, getting an education or retraining for new employment.

**More Legislative Information:** Action for Children NC [www.ncchild.org](http://www.ncchild.org); NC Legislature [www.ncleg.net](http://www.ncleg.net)

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January, 2009

**MINUTES**  
**LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH**

January 14, 2009

The Legislative Study Commission on Children and Youth met on Wednesday, November 19, 2008 at 10:00 a.m. in Room 1228 of the Legislative Building in Raleigh. The following Senate Members were present: Co-Chair Senator Ellie Kinnaird, Senator Doug Berger and Senator Snow. The following House Members were present: Co-Chair Representative Bordsen, Vice Chair Representative Earle, and Representative Folwell. The following Public Members were in attendance: Barbara Bradley, Paula Carden, Dr. Helen Brantley, Dr. Austin Connors, Mia Day Burroughs, Judge Mark Galloway, Dr. Jennifer Lail, Johnnie Ray Farmer, and Glenn Osborne. A visitor registration sheet is attached and made part of these minutes.

The presiding Chair, Senator Kinnaird, called the meeting to order and briefed the Commission on the schedule for the meeting.

Representative Bordsen thanked the Commission for its work.

The Chair opened the meeting for discussion on the recommendations.

Representative Bordsen asked to amend the report on Recommendation #2 to include more specific language.

Dr. Brantley was recognized. She inquired if the Commission could be alerted when legislation is filed pertaining to the recommendations.

Representative Bordsen offered that an alert either from staff or from the Chairs' legislative offices was possible.

Senator Kinnaird noted the email addresses should be added to the final report.

Wendy Graf Ray went through the final report. Findings and recommendations can be found starting on page 16. A copy of the final report is included and made part of these minutes.


Discussion on the recommendations ensued.

Barbara Bradley was recognized for a motion. She moved the Commission to adopt the final report, as amended.

Judge Galloway seconded the motion and the Commission voted in favor of adopting the report.

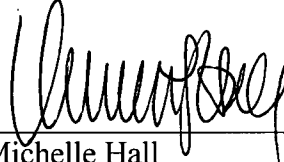
There being no further business, the Chair thanked the Commission and adjourned the meeting at 10:45.

Respectfully submitted,



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Senator Kinnaird  
Presiding Chair



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Michelle Hall  
Committee Assistant

# VISITOR REGISTRATION SHEET

Jt Study Comm. Children & Youth  
Name of Committee

1-14-09

Date

VISITORS: PLEASE SIGN IN BELOW AND RETURN TO COMMITTEE CLERK

NAME

FIRM OR AGENCY AND ADDRESS

Ann WARD	The North Carolina Partnership for Children, Inc.
LARI AUNTHERIS	CAHA
Linda Hayes	DJJD P
Martin Pham	DJJD P
SARA THOMAS	SENTENCING COMMISSION
Karen Calhoun	Sent. Comm
ERIC ZORRY	OFFICE OF THE JUVENILE DEFENDER / JPS
Stephanie Nantz	YAIO
Vivian Muzyk	The North Carolina Partnership for Children, Inc.
Emily Doyle	NCPAPA
KATHERINE JOYCE	NLASA

VISITOR REGISTRATION SHEET

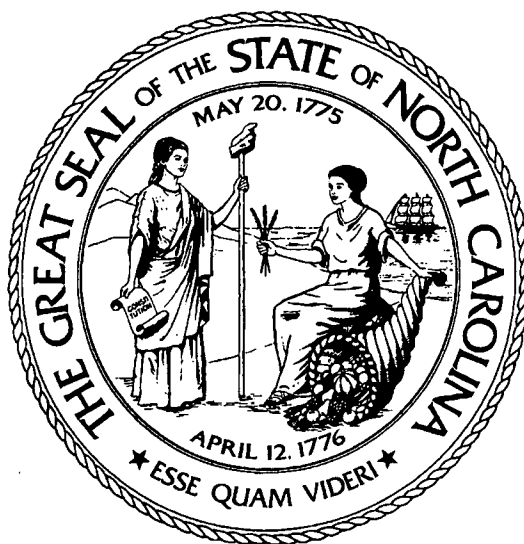
*Study*  
*J# Comm on Children & youth* *1/14/09*

Name of Committee Date

NAME

[illegible]

**LEGISLATIVE STUDY COMMISSION ON  
CHILDREN AND YOUTH**



REPORT TO THE  
2009 GENERAL ASSEMBLY  
OF NORTH CAROLINA

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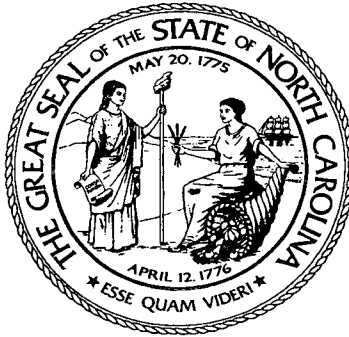


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APPENDIX E	Summary of Issues Presented at 2008 Public Hearings
APPENDIX F	Division of Child Development Fact Sheets on Subsidized Child Care Waiting List, County Allocations, and Market Rates
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APPENDIX H	More at Four
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STATE OF NORTH CAROLINA  
THE LEGISLATIVE STUDY COMMISSION ON  
CHILDREN AND YOUTH



January, 2009

TO THE MEMBERS OF THE 2009 NORTH CAROLINA GENERAL ASSEMBLY:

Attached for your consideration is the report of the Legislative Study Commission on Children and Youth established pursuant to Article 24 of Chapter 120 of the General Statutes.

Respectfully submitted,

---

Senator Ellie Kinnaird

---

Representative Alice Bordsen

Co-Chairs



## PREFACE

The Legislative Study Commission on Children and Youth, established by Article 24 of Chapter 120 of the General Statutes, is authorized to study and evaluate the system of delivery of services to children and youth on a continuing basis, and to make recommendations to improve service delivery to meet present and future needs of the children and youth of this State. The Commission is authorized to conduct any studies, evaluations, or assessments necessary for the Commission to carry out its purpose. The Commission consists of 26 members, and is co-chaired by appointees of the Speaker of the House of Representatives and the President Pro Tempore of the Senate.

The Commission was chaired by Senator Ellie Kinnaird and Representative Alice Bordsen. A committee notebook containing the committee minutes and all information presented to the committee is filed in the Legislative Library.



## MEMBERSHIP

### LEGISLATIVE STUDY COMMISSION ON CHILDREN AND YOUTH

#### *Pro Tem's Appointments*

Sen. Ellie Kinnaird                      Co-Chair  
North Carolina General Assembly

Sen. Robert Atwater  
North Carolina General Assembly

Sen. Doug Berger  
North Carolina General Assembly

Sen. John Snow Jr.  
North Carolina General Assembly

Sen. Richard Stevens  
North Carolina General Assembly

Mrs. Barbara Bradley  
NC Child Advocacy Institute  
1300 Saint Mary's Street, Suite 500  
Raleigh, NC 27605

Ms. Helen Brantley, PhD  
UNC Forensic Psychiatry Service  
109 Connor Drive  
Chapel Hill, NC 27514

Ms. Mia Day Burroughs  
110 Cedar Hills Drive  
Chapel Hill, NC 27514

Mrs. Selena Berrier Childs  
Child Fatality Task Force  
1928 Mail Service Center  
Raleigh, NC 27699-1928

Mr. John Cox  
112 West Harden Street  
Graham, NC 27253

#### *Speaker's Appointments*

Rep. Alice Bordsen                      Co-Chair  
North Carolina General Assembly

Rep. Beverly Earle  
North Carolina General Assembly

Rep. Dale Folwell  
North Carolina General Assembly

Rep. Verla Insko  
North Carolina General Assembly

Rep. Linda Johnson  
North Carolina General Assembly

Ms. Paula Carden  
Jackson Co. Dept. of Public Health  
538 Scotts Creek Road, Suite 100  
Sylva, NC 28779

Dr. M. Austin Connors Jr.  
8325 Nantahala Drive  
Raleigh, NC 27612

Hon. Mark Galloway  
PO Box 1077  
Roxboro, NC 27573

Ms. Dianna Wiggins Goforth  
816 Longview Drive  
Fayetteville, NC 28311

Dr. Jennifer Lail  
Chapel Hill Pediatrics & Adolescents  
205 Sage Road, Suite 100  
Chapel Hill, NC 27514



Mr. Johnnie Ray Farmer  
142 Ray Farmer Road  
Aulander, NC 27805

Mr. J. Glenn Osborne  
Wilson Co. Dept. of Social Services  
PO Box 459  
Wilson, NC 27894-0459

Hon. H. Paul McCoy Jr.  
Halifax County Court House  
PO Box 66  
Halifax, NC 27839

***Other Appointments***

Dr. June St. Claire Atkinson                      Ex Officio  
Superintendent of Public Instruction  
301 N. Wilmington Street  
Raleigh, NC 27601-2825

Mr. Dempsey Benton Jr.                              Ex Officio  
Secretary, DHHS  
2001 Mail Service Center  
Raleigh, NC 27699-2001

Hon. Britt Cobb Jr.                                      Ex Officio  
Secretary of Administration  
Mail Service Center  
Raleigh, NC 27699

Hon. Ralph Walker                                      Ex Officio  
AOC Director  
PO Box 2448  
Raleigh, NC 27602-2448

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Bill Drafting Division  
919-733-6660

Michele Alishahi  
John Poteat  
Fiscal Research Division  
919-733-4910

## **COMMITTEE PROCEEDINGS**

### **September 10, 2008 Meeting**

Co-Chairs, Senator Ellie Kinnaird and Representative Alice Bordsen, welcomed the Commission to the first meeting of the interim and thanked Commission members for serving. Cyndie Bennett, Director of the Division of Child Development then made a presentation on the current state of child care in North Carolina (see APPENDIX A).

John Dorman, Executive Director for the Public School Forum of North Carolina, was then recognized for a presentation about the North Carolina Center for Afterschool Programs. He emphasized the importance of extended day programs and the results children get from participating.

Henrietta Zalkind, Executive Director of the Down East Partnership for Children (DEPC), presented to the Commission next. Ms. Zalkind gave an overview of the DEPC, stressing that it is a model with the goal of maximizing subsidy resources for low-income and at-risk families (see APPENDIX B).

Ann Stalnaker, Director of Curriculum for Hickory City Schools, and Amy Herman, Program Manager for Catawba Social Services, presented information on improving educational continuity and school stability for children in out-of-home care in Catawba County (see APPENDIX C). Ms. Stalnaker shared information on the collaborative effort and the benefits it provides to children in foster care, and Ms. Herman shared a case study with the Commission.

Patti Long, System Development Program Coordinator of the Juvenile Justice Treatment Continuum (JJTC), presented to the Commission next (see APPENDIX D). Ms. Long explained that the JJTC is a comprehensive intervention strategy for court referred youth specifically designed to treat co-occurring mental health and substance abuse disorders.

### **September 24, 2008 Public Hearing**

The first public hearing of the Commission was held in Vance County at Vance-Granville Community College. A total of 13 people spoke at the hearing, and while a variety of issues were addressed (see APPENDIX E for a summary of comments and issues raised at both public hearings), the most frequently mentioned concern was the growing waiting list for subsidized child care.

### **October 8, 2008 Public Hearing**

The second public hearing of the Commission was held in Asheville at Asheville-Buncombe Technical Community College. A total of 25 people spoke at the hearing, and the most frequently mentioned issue was the fairness of the market rate formula for

subsidized child care. Early childhood care and education was, again, an overwhelming concern.

#### **October 22, 2008 Meeting**

Cyndie Bennett, Director of the Division of Child Development, was recognized to address concerns that were raised at the public hearings about customer service provided by the Division, particularly with regard to delays in transcript review. Ms. Bennett explained that due to recent statutory changes that were to be implemented by 2008, there was a backlog of transcripts to be reviewed. However, they are working through the transition and returning to normal processing times.

Janice Fain, Administrative Section Chief of the Division of Child Development, was recognized next to address concerns raised at the public hearings about the subsidized child care waiting list and the allocation formula for subsidy funds (see APPENDIX F).

Stephanie Fanjul, President of the North Carolina Partnership for Children, and John Pruette, Executive Director of the Office of School Readiness, presented to the Commission to clarify the missions of, and the relationship between, Smart Start and More at Four (see APPENDICES G and H).

#### **November 19, 2008 Meeting**

Eric Zogry, Juvenile Defender with the Office of the Juvenile Defender, presented to the Commission on the history of the juvenile code in North Carolina. Mr. Zogry informed the Commission that his office is currently considering some code revision issues, including expanding the jurisdiction of the juvenile court.

John Maddler, Associate Director for Policy at the North Carolina Sentencing and Policy Advisory Committee, then updated the Commission on issues currently being studied by the Sentencing Commission that relate to juveniles.

Nicole Melton, Juvenile Court Coordinator in Alamance County, then presented to the Commission on the Alamance County Court Improvement Project, including its successes and future goals (see APPENDIX I).

Brett Loftis, Executive Director of the North Carolina Council for Children's Rights, presented information to the Commission on a wide variety of issues currently affecting children in North Carolina (see APPENDIX J).

#### **January 7, 2008 Meeting**

Sorien Schmidt, Senior Vice President, Action for Children North Carolina, made a presentation to the Commission, focusing on the major issues that have been presented to the Commission during this interim. Ms. Schmidt offered several recommendations for the Commission's consideration. Following the presentation, the presiding Chair,

Representative Bordsen, led an open discussion among Commission members on the findings and recommendations to be presented to the 2009 General Assembly.

**January 14, 2008 Meeting**

The Commission met for the purpose of adopting its report containing findings and recommendations to the 2009 General Assembly.



## **FINDINGS AND RECOMMENDATIONS**

The Legislative Study Commission on Children and Youth met seven times in the interim before the 2009 Regular Session of the General Assembly, including two public hearings in different parts of the State. In these meetings, the Commission gathered information on a broad range of issues affecting children and youth across North Carolina. In its study the Commission found that there are numerous issues facing children and youth today, and that it is critical to ensure the healthy development of children in the State and improve outcomes for all children in order to ensure the future success of our State and our citizens. North Carolina is also currently experiencing difficult economic times, and in order to best meet the needs of children and youth in the State, it is imperative to develop State policy that encourages successful collaboration and cooperation among all stakeholders, promotes evidence-based systems and practices that have proven to be successful, and provides funding where it will have the greatest impact on children's outcomes and local economies. Specifically, the Commission makes the following findings and recommendations:

**FINDING 1:** The Commission finds that the State is currently facing an economic downturn, with limited State dollars available for programs that benefit children and youth in North Carolina. In order to provide the most benefit for the limited amount of dollars, funding should be provided for programs that have proven to be successful. Cost-effective practices should be expanded in order to gain long-term benefits to children and the economy. Funding should be provided to support and expand successful evidence-based programs. However, the Commission also finds that there is a lack of information currently available on existing programs for children and youth in North Carolina – i.e. what are the programs, how are they funded, what are the costs, and how successful are they? Without access to this information, programs tend to get cut across the board, whether they have proven successful or not.

**RECOMMENDATION 1:** The Commission recommends that the Joint Legislative Program Evaluation Oversight Committee direct the Program Evaluation Division to study existing programs that directly and indirectly benefit children and youth in the State. The Division should identify the programs and their sources of funding, and determine whether the programs have clear goals and indicators and benchmarks by which to measure success.

**FINDING 2:** The Commission finds that access to health care is a critical need for children and youth in North Carolina. Children are unable to learn and succeed if their health is suffering. Providing greater access to health care improves children's health outcomes and creates economic activity throughout the State and stimulates health care job growth. The Commission finds that the number of uninsured children in North Carolina is currently increasing with the economic downturn.

**RECOMMENDATION 2:** The Commission recommends that the State offer affordable health coverage to all children by fully funding NC Health Choice, implementing NC Kids' Care to children up to 300% of federal poverty level, and allowing families above that to buy into NC Kids' Care by paying the full premium.

**FINDING 3:** The Commission finds that many children suffer with mental health issues. When left untreated, mental health disorders can lead to school failure, family conflicts, substance abuse, and otherwise interfere with a child's ability to succeed. Untreated mental health disorders can be very costly to families, communities, and the health care system.

**RECOMMENDATION 3:** The Commission recommends that mental health services be provided to children in this State through NC Health Choice and NC Kids' Care.

**FINDING 4:** The Commission finds that there are currently over 30,000 children on the waiting list to receive subsidized child care. This was one of the most frequently heard complaints at the Commission's public hearings. Children across the State are in need of safe, developmentally-appropriate child care arrangements while their parents are working or advancing their educations. The Commission finds that making child care available to needy families allows more parents to work, look for employment, or advance their educations and careers; ensures that children are appropriately cared for; and stimulates local economic activity and job growth in the child care industry.

**RECOMMENDATION 4:** The Commission recommends that the General Assembly allocate additional funding for the Subsidized Child Care program.

**FINDING 5:** The Commission finds that Juvenile Crime Prevention Councils (JCPCs) have the responsibility of evaluating programs that are designed to meet the needs of juveniles in their local communities. The JCPCs distribute grants to community service providers who are providing services to prevent juvenile delinquency. While the juvenile crime rate is currently at an eight year low, providers are now working with less money that the General Assembly allocated in 2002.

**RECOMMENDATION 5:** The Commission recommends that the General Assembly adequately fund JCPCs to meet the service needs identified by JCPCs and to allow the JCPCs to conduct rigorous local needs assessments, and implement and support more evidence-based community services.

**FINDING 6:** The Commission finds that North Carolina is currently the only state in the country to automatically charge, try, sentence, probate, and incarcerate 16 and 17 year olds in the adult criminal system without exception. Those individuals do not

have access to services appropriate for youth, do not have the right to education, and their parents do not have to be notified of or participate in their charges, trial, probation, or sentencing. National research shows that youth prosecuted as adults are more likely to commit additional crimes and crimes of increasing violence. The Governor's Crime Commission is currently conducting a feasibility study on expanding the jurisdiction of the juvenile court to include 16 and 17 year olds. The report is expected to be released during the 2009 Session.

**RECOMMENDATION 6:** The Commission recommends that the General Assembly move forward with implementing the findings and recommendations of the Governor's Crime Commission's feasibility study with the goal of eventually expanding the jurisdiction of the juvenile court.

**FINDING 7:** The Commission finds that the North Carolina Earned Income Tax Credit (EITC) benefits local economies by annually helping over a half million working North Carolinians make ends meet. In 2009, low income families will be able to receive a North Carolina EITC equal to 3.5% of the federal EITC for which they already qualify. In 2010, the State EITC will increase to 5% of the federal credit.

**RECOMMENDATION 7:** The Commission recommends that the General Assembly fund the NC EITC and expand the EITC beyond 5% in order to further support families who have been forced by rising unemployment to work fewer hours or in lower wage jobs.

**FINDING 8:** The Commission finds that there are many additional issues affecting children and youth across the State that the Commission did not have adequate time to address. These include:

- At risk children of incarcerated parents (i.e. how do we identify and gather information on this population, what programs/services are available to them, what policies/procedures should be changed to address the needs of these children?)
- Collaborative "system of care" programs across the State/interrelation of programs
- Drug courts/drug treatment for parents to address the needs of the children
- Unique student identifiers
- Subsidized Child Care at the local level/methods for effective management

**RECOMMENDATION 8:** The Commission recommends that these issues be studied further in the interim following the 2009 Regular Session of the 2009 General Assembly.