

PRESCHOOL EXPANSION ANNUAL MEETING

NOTES FROM PEER EXCHANGES

APRIL 7, 2016

Peer Exchange: Effective Services for Children with Special Needs

Changes/Challenges

- Increased behaviors due to high risk criteria for PDG – all children in room, adult-child ratio too high
- Nap time – not really a nap time; no funds for teacher to have a break
- Teachers don't understand the needs of the most at risk students
- Teachers that are unfamiliar with teaching children with special needs and the IEP process
- Hard to get parents to attend meetings; paperwork not returned
- Parent coordinator ratio too high to help support programs
- Because this is already an at-risk population, it is hard to identify children with actual special needs
- High number of referrals
- Increased need to bring support services to child care centers
- Providers don't understand push-in model
- Special Education director not always as knowledgeable as to early childhood services

Solutions

- Mental Health Consultant (more money for more support)
- Lunch monitors
- CSFEL model/ Conscious Discipline
- Social/Emotional Skills are worked on for the first 3 months
- Special education staff comes in the room for additional support
- Full day programming has already increased outcomes
- Collaboration Days with staff – observation/coaching
- Parent Coordinator help support families
- Educate parents on special needs
- Contact special education co-op for speech/ot/pt resources and training
- Utilize Starnet training on integrated services

Resources needed from ISBE:

- More direction on providing adequate support for children with special need
- More behavior management professional development provided at more than one time, not just at the beginning of the year

Peer Exchange: Strategies for Recruitment

Approaches for recruitment

- Looked at stakeholders in community
- Looked at demographics
- Management offices, churches – talked to pastors, get on agenda for clergy advisory groups, spoke during announcement time at church services
- Letters and flyers to social service agencies - prompted calls for screening
- Go to local schools during kindergarten open house and registration events to recruit siblings
- Use Prevention Initiative staff and PFA Parent Educators as recruiters; visit in pairs
- Park days; free lunch days, housing authority, kid centered places like Chuck E Cheese
- Flyers on cars at stores like Walmart
- Door to door; look for toys in yard, leave flyer if not home and go back for follow up
- Find ways to help identify staff for home visits, parents won't open door if they don't recognize the person – use badges, bags, shirts, magnets for cars
- Index card with appointment date and map; save the date card for refrigerator
- Attendance calls to follow up on commitment
- Reach out to those who don't attend open house
- Don't ask for anything on first visit – start outreach by meeting basic needs and provide them with things such as diapers or museum passes
- Use parent ambassadors – door to door; help to prepare forms, input on what parents need

How recruitment differs: PFA vs PDG

- Eligibility form for PDG is more intimidating
- Cross trained staff to address both PDG and PFA questions
- Recruitment the same but follow up greater due to additional paperwork and more at risk families
- Door to door hadn't been done with PFA
- Able to reach out to areas that couldn't with PFA due to limited transportation resources in PFA
- Used data from conversations with parents that declined PFA due to lack of transportation as leverage with district
- Cross recruitment/referrals for 0-3 year olds in home during recruitment visits
- All day programming opened families to a variety of options

Reasons programs are revising recruitment flyers:

- Integrated PFA and PDG – no need for two different flyers
- “Tone down”; less wordy, simplify text
- Use screening flyer – doesn't include all info
- Looked at the reading level (parents provided feedback on need to simplify)
- Re-worded question about younger children in family (birth to 5 years)
- Use “how to “ language/action steps helps families know how to proceed

- Paperwork accepted electronically or as walk in
- Parents asking for ability to scan documents – portable wand scanners or take picture of documents with iPad when out on visits

Challenges to recruitment and enrollment

- Families in crisis tend not to complete enrollment process
- Families dealing with mental health, addiction issues
- Grandparents raising children; can't overcome obstacles
- Need for follow up; more than you think

Wishlist/Resources needed from ISBE:

- More common forms
- Lower ratio of parent educator to families – can't meet needs and give support that is needed with current ratio; can't work on family goals, make referrals or fully support comprehensive services
- Funding for communities without innovation zones
- Consistent three people in classroom to accommodate breaks, naps, team lesson planning, staff lunch, etc.
- More guidance on mental health
- Eligibility guidance doesn't match with SNAP, WIC, or FL – how to align better

Peer Exchange: Community Partnerships and Referrals

Changes/Challenges

- Dental services – Meeting the needs of the children
- What is good for community versus what is good for specific programs
- Sustainability
- Social service agencies closed due to lack of state budget
- Parent Educator/child ratio too high
- High turnover in staff
- Developing a clear message, identifying core values and purposes
- Community buy-in/building relationships
- Having regular meetings

Unmet needs

- Transportation
- Child Psychology
- Mental Health
- Bilingual
- Dental services

- Job placement and employment
- ESL courses
- Domestic Violence services
- Finances
- Services for trauma cases
- Affordable housing/closing of shelters

Resources needed from ISBE:

- Online network for family support/Parent Educator
- “Yammer” site to share information
- Additional staff support
- Statewide conference for family support for those working with preschool children
- More support for community collaborations
- More details of what is expected in Compliance Checklist, such as what is meant by dental homes and goals of family support