

NH's Early Childhood Strategic Plan

Measures of Success and

Crosswalk and Analysis of State-Level Plans



Early	Vision: All NH families are afforded comprehensive and responsive supports, so they are healthy, learning, and thriving now and in the future.				
Childhood Strategic	Themes	Objectives	Initiatives		
COUNCIL FOR Plan THRIVING Framework CHILDREN 2023-2025	Strategic Theme 1 Quality, consistent,	 Increase early intervention and primary prevention Increase accessible childcare and 	 Normalize utilization of early intervention and primary prevention services among all families Increase provider awareness of and collaboration with all available primary prevention and early intervention services Expand eligibility for childcare assistance costs, increase the amount of assistance for each family, and increase awareness and utilization of NH Child Care scholarship assistance 		
Priority Outcomes • Increase families' partnership in, knowledge of,	equitable access to opportunities and services for all NH families	 early learning options 3. Increase family awareness, voice, influence, engagement and knowledge 4. Enhance quality of early childhood programs and services 	 2b. Expand options for and access to childcare and early learning statewide, particularly in areas where options are limited 3a. Establish a Statewide Family Engagement Framework including feedback loops 3b. Expand universal home visiting to every baby in New Hampshire 3c. Expand NH parent/caregiver access to family support/Family Resource Centers (FRCs) 4a. Increase participation in NH QRIS 4b. Increase family awareness of quality care and early learning options 		
and choices for their child's development Increase families' access	Strategic Theme 2 Early childhood workforce capacity and quality	 Increase workforce Increase workforce knowledge regarding early childhood development 	 1a. Promote early childhood careers and career path 1b. Promote the availability of workforce incentives and tax credits and expand them beyond early childhood education to include family support and health 2a. Equip the early childhood workforce with knowledge of child development and evidence-based practices to meet the needs of children and families 		
to integrated quality early childhood opportunities and services • Increase comprehensive wellness of young children • Ensure children achieve early childhood developmental and educational goals • Increase providers' and educators' knowledge and access to resources for quality programs and services	Strategic Theme 3 Investment in early childhood programs and services	 Leverage and sustain new and existing funding Increase business and community support for early childhood programs and services 	 1a. Create and implement a comprehensive early childhood system funding plan including federal, state, local, and private sources 1b. Develop and implement a comprehensive study of compensation, benefits, and incentives across the various roles within the early childhood field 2a. Create and implement a plan to increase businesses' financial investment in the early childhood system 2b. Create and implement a plan to increase community awareness of and engagement in building the capacity of the early childhood system 		
	Strategic Theme 4 Systems integration	 Increase state, regional, and local level collaboration and program integration Enhance family navigation of integrated programs and services Increase community voice and influence in design of programs and services 	 Affirm and institutionalize the early childhood regions and networks, ensure ongoing support, and foster collaboration with families and local communities Formalize, strengthen and broaden local early childhood coalitions that integrate with regional and state structures Establish a shared, compatible early childhood data system to inform decision-making Establish and promote a comprehensive and inclusive system leveraging existing tools for families to navigate and access resources Increase individualized support for families in navigating the system Build cultural and linguistic competence of the early childhood system and professionals to better support families Create approaches to specifically engage under-represented groups to influence decisions about programs and services that affect them 		
	Strategic Theme 5 Office of Early Childhood	 Ensure a cohesive and collaborative approach to a mixed-delivery, early childhood system Expand public understanding of the importance of quality early childhood experiences for all children 	 Establish a collaborative process to define the role of the Office of Early Childhood, including authority, functions, structure, and resources Coordinate messaging across key early childhood champions to ensure a diverse set of voices that will expand public understanding of the importance of early childhood experiences for all children and families Clarify and communicate roles and responsibilities of the early childhood system to include early childhood agencies, families, policy makers, and service providers 		

Full Report

- Introduction
- Purpose
- Methodology
- Measures of Success
- Table of Crosswalked Plans and Documents
- Crosswalk Description and Analysis
- Recommendation
- Acknowledgement
- Appendices
 - Strategic Plan Framework
 - Crosswalk
 - Proposed Measures of Success
 - NH Council for Thriving Children Membership
 - Strategic Planning Subcommittee Membership



Working Definition of a Plan

- Document published by a State agency, such as a department, division, office, or similar entity of the State of NH, or by a legislatively enacted council or similar entity, such as the Wellness and Primary Prevention Council or the NH Child Care Advisory Council
- Includes a detailed proposal and/or action steps for achieving specific outcomes (e.g., strategic plan, work plan, contract, etc.)
- Do not need to be focused on, but may have elements or specific strategies affecting, young children and families
- Do not include needs assessments, survey results, or recommendations



Analysis Findings: Inconsistencies and/or Lack of Clarity

- Inconsistencies in terms, e.g., "Family Communication Network," "Family Information Network," "Family Portal"
- "Equitable access" and "equity approach" not consistently defined or explained, if at all.
- All DHHS contracts require CLAS as part of Scopes of Work; only some plans require use of DHHS' Equity Review Toolkit.
- CHWs are included in multiple plans (FO, CFSS, CCSPF, CDC Disparities grant, RPHN, NH SHIP), but it is unclear if their deployment throughout NH is coordinated or disparate.



Analysis Findings: Missing or Weak Linkages

- Supporting families w/young children experiencing homelessness is not explicitly included in the Strategic Plan. No explicit/strong linkages across NH Council on Housing Stability, NHED McKinney-Vento Act services, Medicaid, and myriad family support workplans re: family-level coordination and data sharing and interoperability.
- Large focus on FRC-Q designation, but quality of FRCs nor the quality designation process are included as part of an objective or initiative in the PLan.



Analysis Findings: Missing or Weak Linkages, continued

- Plan's focus on credentialling is tied to GSQ and excludes ECFMH credential, FRC-Q designation, and teacher certification. Several workplans include requirements to increase these, but a related priority doesn't exist in the Plan. Could include it under Strategic Theme 2 EC Workforce Capacity and Quality.
- Biggest gap in the Plan is in Strategic Theme 5 Office of Early Childhood. Two of its initiatives were identified as a high priority for 2023, but no plans exist or were provided to Pear Associates indicating activities to carry out Initiatives 1a and 2a.



Analysis Findings: Missing or Weak Linkages, continued

- FO contract requires maintaining or Kinship Navigators and CHW positions each year; this connects to Strategic Theme 2 (Early childhood workforce capacity and quality) Objective 1 Increase workforce but does not fit under Initiative 1a or 1b.
- The 10-year Mental Health Plan recommends developing an IMH Plan. A plan for use of MH ARPA-D funding for MH describes an IMH Plan and some of its priorities. However, no IMH Plan exists beyond what is required through legislation in RSA 135F. No plan exists or was provided that describes how the pathways, linkages, and services for children birth to age 6 will be created.



Analysis Findings: Missing or Weak Linkages, continued

- Expanding resources to strengthen families is a common thread/goal across many plans (Office of the Child Advocate, NH SHIP, FO contract, CFSS, WPPC, HFA, etc.) however few are coordinating or implementing Initiatives that are part of Strategic Theme 3 Investment in Early Childhood Programs and Services.
- Limited plans, beyond reports and high-level plans submitted to federal entities, are available publicly. Plans that exist in the form of a contract are extremely difficult to locate on the SOS website for G&EC meetings. Contracts are in G&EC meeting agendas but cannot be located using a search function.



Analysis Findings: Duplication of Effort

- As described above, Community Health Workers (CHWs) are included in multiple plans, but it is unclear if the implementation of CHW efforts is coordinated or disparate.
- Contracts resulting from the Child Care Strengthening Plan and/or funded by Child Care ARPA-D funds duplicate efforts in several areas:
 - Training and technical assistance (TA) in child care business practices
 - Training and TA for child care and out-of-school-time providers
 - Creation and dissemination of marketing materials to promote the "Family Portal," Granite Steps for Quality, and FRCs
 - Tuition assistance for child care and out-of-school-time providers



Recommendations: Operations

- Create a clearinghouse of plans connected to young children and families
 - Responsible entity could be the Office of Early Childhood of Strategic Theme 5 and its objectives are realized or Council Director
 - Alternative: identify a more user-friendly way to search for contracts approved by Governor & Executive Council and departmental plans
 - Webpage with lists and links by Departments and Divisions
 - Establish protocol that each Department, Division, Bureau, etc. lists and links to active plans and contracts
- Maintain the Crosswalk
 - Identify a responsible party (e.g., Office of Early Childhood, Council Director)
 - Identify a process for state entities to update or notify update is needed



Recommendations: Operations, continued

- Develop a Glossary for consistency in terms, definitions, and names across plans and contracts
- Develop a process for tracking Measures of Success and regularly reporting to the Council
 - Could be led by ECIT leads, coordinating at the joint ECIT meeting as needed
- Establish baselines and targets for each Measure of Success
 - Will require coordination across bureaus, divisions, departments

 $\,\circ\,$ Utilize ECIT as a resource



Recommendations: Quality

- Update the Strategic Plan to include new initiatives about quality designations and credentials.
 - FRCs: add to Strategic Theme 1 Objective 4 as Initiative "4c. Increase participation in the FRC-Q designation process."
 - Increasing engagement in the EC and ECFMH credentials and teacher certification pathways can be a new Initiative (2b) under Strategic Theme 2 Early Childhood Workforce Capacity and Quality.
- Consistently require use of the NH DHHS Division of Public Health Services (DPHS) Equity Review Toolkit for guidance on ensuring equity, including Race, Ethnicity, and Linguistic (REaL) and Sexual Orientation and Gender Identity (SOGI) data collection by contracted vendors (and their subcontractors).
 - Could be a requirement in contracts originating from other State departments.



Recommendations: Coordination and Collaboration

- Develop and implement an internal departmental coordination process for new workplan/contract development.
 - Department subsections can coordinate and collaborate on activities, outputs, and alignment to the Plan in advance of procurement.
 - Could include final review by the associated ECIT or the joint ECITs.
- Develop and implement an Infant Mental Health Plan that reflects the goals and activities described in federal reports.
 - $\,\circ\,$ Ensure efforts are documented and tracked
 - Other Initiatives can align.
 - Initiatives could include 1:1a, 1:1b, 2:1a, 2:2a, 2:2b (if the above recommended update to the Plan is made), 4:2b and 4:2c.

Recommendations: Coordination & Collaboration, continued

- Develop a comprehensive implementation plan for CHW training and deployment for a cohesive approach and no duplication of efforts.
 - Family Support Specialists are included in many contracts. Differentiation between the positions should be clarified.
 - Shared training, credentials, and career pathways development opportunities for each role should be considered.
- Regularly monitor the Bureau of Child Development and Head Start Collaboration contracts' performance to identify nuance in pilots and inform future budget priorities.
- Leverage public/private partnerships to assist implementation of Strategic Plan initiatives.
 - Formally and informally partner with non-state entities with a vested interest in the Strategic Plan to further Initiatives.



Priority Outcome 1: Increase families' partnership in, knowledge of, and choices for their child's development			
Measure of Success	Target	Responsible Entity	
Increase in number of children enrolled in Family-Centered Early Supports and Services*		DHHS	
Increase in number of children enrolled in Preschool Special Education*		NHED	
Increase in number of families enrolled in home visiting (MIECHV, Medicaid, CFSS)*		DHHS	
Increase in number of parents/caregivers enrolled in parenting skills groups/classes		DHHS	
Increase in number of children enrolled in center-based and family-based child care		DHHS	
Increase in number of children enrolled in public preschool programs		NHED	

*Denotes a Measure of Success from 2020 NH Strategic Plan for Early Childhood (or similar)

Priority Outcome 2: Increase families' access to integrated quality early childhood opportunities and services		
Measure of Success	Target	Responsible
		Entity
Increase in family resource centers with quality designation (FRC-Q)		DHHS
Maintain or increase the number of early childhood and out-of-school-time (OST) licensed and license-		DHHS
exempt child care providers (or slots) statewide*		
Increase the number of licensed and license-exempt child care providers (or slots) in communities with		DHHS
low (below median) or no access to licensed care*		
Increase in number of children receiving child care scholarship*^		DHHS
Increase in number of families receiving system navigation support		DHHS, NHED
Increase in utilization of child care slots (enrollment: available slots)		DHHS

*Denotes a Measure of Success from 2020 NH Strategic Plan for Early Childhood (or similar)

Priority Outcome 3: Increase comprehensive wellness of young children			
Measure of Success	Target	Responsible Entity	
Increase in number of women receiving early (1 st trimester) prenatal care		DHHS	
Increase in number of women enrolling in WIC (prenatal and overall)		DHHS	
Decrease in percentage of children under age 6 with elevated blood lead levels		DHHS	
Decrease in percentage of young children with no health insurance		DHHS	
Increase in number of Ages & Stages Questionnaires (ASQ-3) administered and Ages & Stages		DHHS	
Questionnaires: Social Emotional (ASQ:SE-2) administered not resulting in monitoring or referral		A.	

*Denotes a Measure of Success from 2020 NH Strategic Plan for Early Childhood (or similar) ^ Denotes 100% consensus of Strategic Planning Subcommittee that the measure of success should be tracked

Priority Outcome 4: Ensure children achieve early childhood developmental and educational goals		
Measure of Success	Target	Responsible
		Entity
Increase in 3 rd grade reading proficiency by district		NHED
Increase in number of children enrolled in Family-Centered Early Supports and Services*A		DHHS
Increase in number of children enrolled in Preschool Special Education*		NHED
Increase in number of Ages & Stages Questionnaires (ASQ-3) administered and Ages & Stages		DHHS
Questionnaires: Social Emotional (ASQ:SE-2) administered not requiring monitoring or referral		P
Increase in the percentage of preschool children aged 3 through 5 with IEPs who demonstrate		NHED
improved (a) positive social-emotional skills (including social relationships); (b) acquisition and use of		
knowledge and skills (including early language/communication and early literacy); and (c) use of		1
appropriate behaviors to meet their needs		

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Priority Outcome 5: Increase providers' and educators' knowledge and access to resources for quality programs and services		
Measures of Success		Responsible
		Entity
Increase in center- and family-based child care programs participating in the Granite Steps for Quality		DHHS
(GSQ) and awarded a step		1
Increase in providers and educators receiving coaching through the GSQ Pyramid Model pathway		DHHS
Increase in number of professionals receiving a new, renewed, or advanced EC, OST, or ECFMH		DHHS
credential.		
Increase in teachers receiving or renewing Beginning Educator licenses, Experienced Educator licenses,		NHED
and Master Teacher Certificate in early childhood education		
Increase in enrollment in the TEACH program		DHHS
Increase in early childhood post-secondary education tuition assistance program		DHHS

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Add your Questions to the Chat!

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