

Draft CCMHB PY2024 Program Summary

Portions of this summary are drawn from the original application, which contains more detail. Staff and reviewer analysis and comments relate to sections of the application and, if the proposed program has been funded, to submitted reports.

Program: [CU Early](#)

Agency: CU Early

Request: \$77,184 - a NEW request

Why it matters: "... a home visiting program that serves at risk expectant families and children up to age 3... developmental screenings on all enrolled children alongside the parent to ensure that children are developing on track."

Selected priority: Thriving Children, Youth, and Families

Staff/reviewer comment: This proposal is a new request to the CCMHB, to support a portion (one of five staff) within a current early childhood program which partners through the Champaign County Home Visiting Consortium.

Services and People Served

Who will benefit: "At risk" children and families prenatal to age 3, focus on pregnant and parenting teens, homeless families, linguistically isolated/Spanish speaking.

Scope of services: Home visits, monthly play groups, weekly teen parent education/support, library groups, toy and book lending library, parent resource library. Goals: support families of infants/toddlers as their child's first teacher; build strong foundation for learning within families; assist parents in preparing children for success in kindergarten and beyond. Baby TALK model and curriculum. Ensuring families receive adequate prenatal and well-baby health care, complete their education, and have the resources/skills to foster the child's optimal development.

Location and frequency of services: Family home or other location based on family needs (agency office or other) - biweekly or more frequent; playgroups at Urbana Early Childhood School (agency office) - weekly; CU Early Spanish speaking groups at Champaign, Urbana, and Douglass Libraries- weekly; prenatal teen groups at C and U high schools - weekly; home visits through a virtual option in case of illness or bad weather.

Staff/reviewer comment: Section includes data on poverty and language use; focus of the application is to serve 20-25 Spanish speaking families; additional details on the Baby TALK program requirements, professional development plans, and training topics.

Measures of Client/Participant Access

Eligibility criteria and determination: Highest priority: homelessness, involvement with DCFS, domestic violence, SUD, parent an English language learner, family income 50% of federal poverty level (FPL). Second tier: child with developmental delay/IFSP, chronic medical condition, family income 50-100% of FPL. Third tier: family in home without basic utilities, family lives in isolation, family receiving Public Aid, SNAP, or medical card; non-high school graduate, family income 100-130% of FPL. Fourth tier: family member in military service, single parent, low birth weight, prematurity. Eligibility screening of family before enrollment; proof of income; family score of 75 or higher on Baby TALK screening tool.

Outreach to eligible people: Through families currently/previously enrolled in CU Early, or who have children attending or having developmental screenings at Urbana Early Childhood School (due to collocation of the program); through referrals from partners in the Home Visiting Consortium; and through community fairs.

Within 3 days from referral, 100% of those referred will be assessed.

Within 3 days of assessment, 95% of those assessed will engage in services.

People will engage in services, on average, for: 3 years.

Additional demographic data: # home visits, # parent groups, # attendees at groups, family income, # developmental screenings, languages spoken by parents, highest level of education of parents, date of referral received, dates of enrollment and exit, # prenatal visits, # parent goals set/partially met/achieved, and parent's employment status.

Staff/reviewer comment: Some of the data noted relate to program performance rather than demographic characteristics.

Measures of Client/Participant Outcomes

Outcomes and targets:

1. Improvement of parenting skill & knowledge... 95% of parents will make progress in parenting skills and knowledge.
2. Child Development... 95% of children will make developmental progress from one screening date to the next.
3. Health Care... 95% of children will be current on immunizations and well child exams.

Specific assessment tools and data collection:

1. Piccolo Parent Child Interaction tool (home visitor with parent).
ISBE Parent Questionnaire (by the parent)
Results are compiled for annual self-assessment meeting/review.
2. Ages and Stages Developmental Screening tool (parent and home visitor together)
Screening data and Individual Family Goal plan data (program coordinator compiles for annual review)
3. Well Child exam and immunization record (initially and annually reviewed, compiled by program coordinator).

Outcome data gathered from all participants: Yes.

Will collect outcome data twice a year.

Staff/reviewer comment: Well-thought out and relevant to the people served.

Measures of Utilization

Community Service Events (CSEs): no numeric target - events include Read Across America, Prenatal Fair at Parkland, Kindergarten connection through Urbana School District, presentations to service providers through the Home Visiting Consortium, school board presentation, small group presentations promoting the program.

Staff comment: Given the nature of the service, it would be appropriate to include a target and description of TPCs, either as a count of children or a count of children plus families. In addition, Service/Screening Contacts are being counted, as we saw in the list of additional (demographic) data to be collected, so adding an estimated annual total for these and describing the service/screening types in that category would be helpful.

Financial Analysis

PY2024 CCMHB funding request: \$77,184 - a NEW request

PY2024 Total Program budget: \$491,793

CCMHB request is for 15.7% of total program revenue. Other revenue is from ISBE grant \$394,659 (80.2%) and in-kind contributions \$19,950 (4%).

Personnel-related costs of \$77,184 are the only expense charged to CCMHB, at 100% of requested amount.

Total Agency and Total Program budgets have a surplus of \$10; CCMHB budget is BALANCED.

Program staff to be funded by CCMHB: 1 Direct FTE

Total program staff: 1 Indirect and 4 Direct = 5 FTEs

Staff comment: Total program = total agency. The proposal is to fund costs of the full-time bilingual home visitor. 'Flat' ISBE funding plus anticipated 5% increases in staff costs present a threat to continuing the current services, hence the request to CCMHB to support one FTE.

Agency Cultural and Linguistic Competence Plan

Does the CLC Plan include required benchmarks and CLAS Standards? Yes

Highlights from the submitted CLC Plan: Professional Development will be provided through the school district. All employees of the C-U Early will have to attend Racial Equity Training that is required through the school district. The Bilingual Home Visitor will provide materials in the native language for the family that is being served. "CU Early staff will partner with Center for Latin American and Caribbean Studies (CLACS) for Latin American Story Time. The program will consist of bilingual storytelling (English-Spanish-Q'anjob'al), and traditional music and crafts. Families will be invited to attend and encouraged to bring family artifacts to share with others."

Staff comment: CU Early is connected to the Urbana School District Early Childhood program. I reviewed the program plan and a clear description about the work of the Home Visitor and the families that are being served. This program within a school district is a clear example of barriers for families that do not speak English as a first language. Listed below is a highlight from the program description of the population that underinvested and underserved: "The bilingual home visitor will work with at risk Hispanic and Mayan families, who face a number of challenges including low levels of literacy, lack of transportation, lack of access to resources provided to citizens, lack of trust in agencies and unfamiliarity with our educational system."

Overarching Decision Support Criteria

Eliminating disparities in access and care: Outreach and recruitment in rural areas through the HV Consortium, connecting rural residents to providers serving their area; this program will serve an enrolled family which has moved from CU to a rural area, continuing home visiting (virtual is available but not preferred due to nature of the intervention). Hispanic and Mayan families are a focus of this proposal, additional support for linkage to other resources and services, to reduce stress and increase families' energy and time for connection with their child; referrals to EI when appropriate; playgroups help connect families and build new communities of support. Services in locations near these families.

Promoting inclusion and reducing stigma: Improve access to community; increase families' connection to each other; improving English through learning the songs and hearing the stories read during groups; free play after groups; sharing stories, joys and challenges.

Outcomes: The three outcomes are specific, measurable, and relevant to the people served. Each is associated with appropriate assessment tools. Outcomes based on a logic model.

Coordinated system: Yes. Good detail on other available home visiting programs and the work of the HV Consortium, along with other collaborations and referral process. Note on the low # of Spanish speaking home visitors versus high # of Spanish speaking families seeking these services, often waiting.

Written collaborative agreements: Crisis Nursery, Champaign School District Unit #4, The Well Experience, CUPHD, Young Lives, United Way, RPC (case management and Head Start), Feeding our Kids, Child and Family Connections, Champaign County Home Visiting Consortium, Champaign County Resource and Referral (is this UIUC Child Care Resource and Referral?), Urbana Adult Education.

Budget and program connectedness: The Budget Narrative provides good detail on all other sources of revenue for the program, states that the school district does not have the ability to provide any financial support for the program, describes each expense category (for program and this contract) and how costs within each were calculated, and clarifies the roles of each staff person associated with the program (and how the position is funded).

Person Centered Planning: Not specific. It appears that planning is driven by family/child needs and that treatment plans may be individualized.

Evidence-based, evidence-informed, recommended, promising, or innovative practice: Describes and links to information about home visiting as a prevention strategy and the specific Baby TALK curriculum/model. Also notes that the program is 'quality confirmed' meaning services align with the Baby Talk Critical Core Principles and concepts.

Staff credentials: Program Coordinator - MA in Education, BS and AA in Child Development, 30 years admin experience in Birth to Five programming, with the IL Director Credential level II for professional administrators of Early Children Education. Bilingual Home Visitor - MA in Early Childhood Ed-Early Intervention, fluent in English and Spanish. Home Visitor - MA in Family Services, 15 years working with Birth to 5. Home Visitor - MA in Early Childhood Special Ed, 10 years working with families and children. Bilingual Home Visitor (to be funded through this contract) - BA in Psychology, 10 years' working in early childhood education settings. All staff certified in Baby TALK curriculum.

Will the funding be used as match for another source of revenue: No.

Other pay sources: ISBE, RPC's Early Childhood program (Head Start/Early Head Start) for materials through United Way, directly to families. **Client fees:** No. **Sliding scale:** N/A

Willing to participate in Medicaid programs: No. Program refers eligible clients to Early Intervention.

Staff/reviewer comment: The program is under the umbrella of Urbana Schools but also serves children in the Champaign Schools and district. Works (until age out) with families who move from CU to another area of the County and refers new clients from other areas of the County to providers covering their area; due to likelihood of Spanish speaking families to be located in CU, this may be sufficient.

Expectations for Minimal Responsiveness

Organizational eligibility questionnaire: Yes.

All forms submitted by deadline: Yes.

Audit findings: N/A - not a currently funded agency. It may be helpful to review the agency's PY22 prior to offering a contract.

Services/supports relate directly to behavioral health conditions or I/DD and how they will improve the quality of life for persons served: Yes.

Evidence that other sources of funding have been maximized: The Budget Narrative explains that ISBE Prevention Initiative funding will not increase for PY24 and 25.

Referral between providers: Yes. (See notes above, Coordinated System.)

Continuation of services during public health emergency: Virtual option in the event of child illness or inclement weather.

Builds on successes with technology and virtual platforms, increasing training and access for staff and people served: Not a focus of the application.

Staff/reviewer comment: The agency completed all application forms and submitted on February 8, 2023, prior to the deadline.

Process Considerations and Caveats

Contracting considerations: If this application is approved for funding, the applicant may be required to respond to the following for review and approval prior to execution of the final PY2024 contract:

- *Develop Utilization Targets for TPCs and SCs, which are appropriate to the program description. Estimate the # of CSEs.*
- *Consider requiring most recent agency audit and minutes of the board meeting approving application for this program funding.*

- *It would be helpful to know more about why the school districts (as taxing districts) do not provide financial support to this program.*

Review and input: The applicant is encouraged to review this document upon receipt and notify CCMHB staff in writing of any factual errors made by CCMHB staff or reviewers which should be corrected prior to completion of the award process.

Recommendation: Pending