



LOOKING TOWARD THE FUTURE

A Review of Western New York's Early Childhood System

A Report for Liftoff—Western New York Early Childhood Funders for Change
APPENDICES

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Prepared by
Public Sector Consultants
Lansing, Michigan
www.publicsectorconsultants.com

Prepared for
Western New York:
Allegany, Cattaraugus, Chautauqua, Genesee, Erie, Niagara, Orleans, and Wyoming Counties

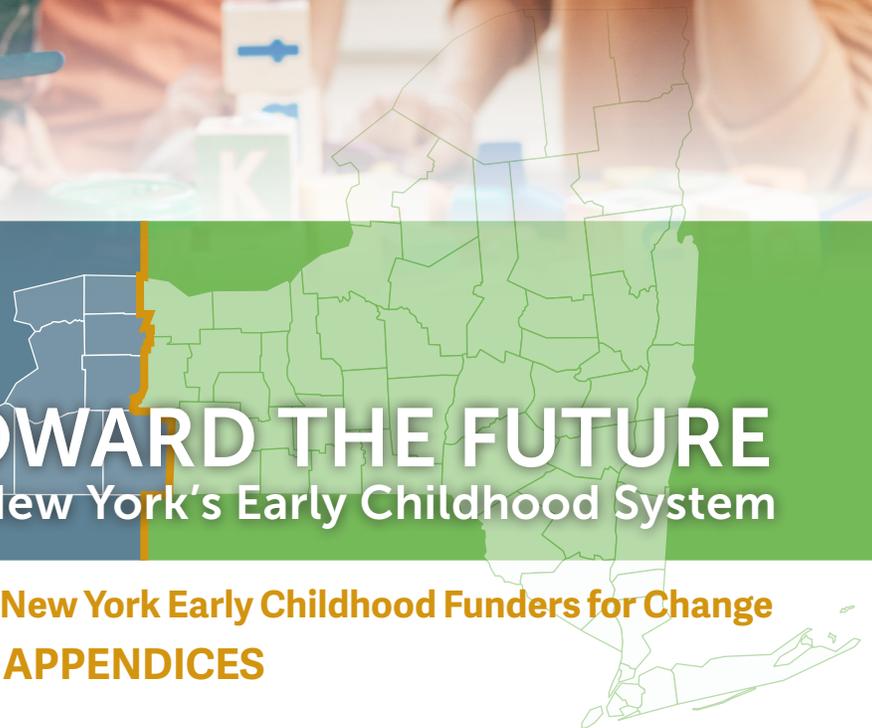


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APPENDIX 1:

GLOSSARY OF EARLY CHILDHOOD TERMS

Term	Abbreviation	Description
Accreditation		A process through which child care programs voluntarily meet specific standards to receive endorsement from a professional agency. The National Association for the Education of Young Children and the National Accreditation Commission for Early Care and Education Programs are two of the more widely recognized accreditation organizations.
Ages & Stages Questionnaire	ASQ-3	The parent-completed Ages & Stages Questionnaires® Third Edition is an accurate, family-friendly way to screen children for developmental delays between one month and five-and-a-half years of age.
Aspire		New York's registry for child care providers.
Boards of Cooperative Educational Services	BOCES	BOCES represents and supports 37 boards to meet their educational and financial goals. BOCES provides shared educational programs and services to school districts within New York State.
Center-based Care		Licensed child care programs in a nonresidential setting.
Child Care and Development Fund Plans	CCDF Plans	A plan submitted by each state to the federal government that serves as the guide for the administration of child care and quality services under the federal Child Care Development Fund.
Child Care and Development Block Grant	CCDBG	Federal block grant program supporting the state child care subsidy. To receive these funds, states must meet certain health, safety, and other requirements outlined by the federal government.
Child Care Resource and Referral Agencies	CCR&R	Agencies providing local and statewide services with guidance and referrals for parents seeking child care; these agencies also collect data on child care and provide training and support.
Child Care Subsidy		Public financial assistance provided to low-income families to help them meet the cost of child care.
Child Development Associate Credential	CDA	A credential earned by an early childhood educator who has demonstrated his or her skills in working with young children and their families by successfully completing an established credentialing process. The CDA credentialing process is administered by the Council of Early Childhood Professional Recognition and is the most recognized credential in early childhood education.
Child Protective Services	CPS	An official public agency responsible for receiving and investigating reports of suspected child abuse or neglect.
Community-based Organization	CBO	An organization, usually a nonprofit, that operates within a single community to provide community service and action, health, educational, personal growth and improvement, social welfare, or self-help for the disadvantaged.
Community Health Worker	CHW	CHWs provide outreach, education, referral and follow-up, case management, advocacy, and home visiting services to women who are at highest risk for poor birth outcomes, particularly low-birth weight and infant mortality.
Continuity of Care		Provision of care to children by consistent caregivers in consistent locations throughout the day and/or year to ensure a stable and nurturing environment.
Drop-in Child Care		A child care program that children attend on an unscheduled basis.
Early Head Start	EHS	A home visiting program established under the federal Head Start Program to serve low-income pregnant women as well as families with infants and toddlers.
Early Intervention	EI	A range of services designed to enhance the development of children with disabilities or at risk of developmental delay. Also refers to the formal Early Intervention program run by the New York Department of Health.

Term	Abbreviation	Description
Early Learning	EL	The formal teaching of young children before the age of normal schooling (usually age five) in settings outside the home. It is also called early childhood education, early childhood learning, or early education.
Evidence-based Practices	EBP	The process of making decisions for patient care based on a combination of the clinician's experience, education, and skills; the patient's own personal and unique concerns, expectations, and values; and the best research evidence.
Family Child Care		Child care provided for a group of children in a home setting.
Friends, Family, Neighbor Care	FFN	Most common type of child care for infants, toddlers, and some school-age children before and after school. Providers include grandparents, aunts and uncles, elders, older siblings, friends, neighbors, and others who help families take care of their kids on an informal basis. FFN providers are unlicensed and not regulated by the state, although some can receive subsidies for the care they provide.
Federal Poverty Line	FPL	Term used by the federal government to define who is eligible for certain services based on a family's annual cash income. Guidelines are issued each year by the Department of Health and Human Services. It is different from the poverty threshold estimated by the Census Bureau to report how many Americans live in poverty each year.
Free and Reduced Lunch	FRL	Federal lunch program providing cash subsidies and U.S. Department of Agriculture foods to schools. In return, schools must offer federally approved lunches at free or reduced prices to eligible children.
Head Start		A federal program for low-income families that promotes school readiness by enhancing their cognitive, social, and emotional development. Head Start is best known for the preschool program it offers to low-income four-year-olds.
Home Visiting Program	HV	Home visiting programs represent a range of models that provide services to pregnant women, new mothers, infants, and young children. Home visiting programs are voluntary programs that link parents with trained services providers (such as a nurse or social worker) who coach families on how to best address the challenges they face, and teach ways to improve the home environment for children. The research base supporting home visiting is remarkable for its breadth and quality, and for the positive results these programs have demonstrated.
In-home Child Care		Child care services provided in the child's home by relatives or nonrelatives while the parents are working.
Individualized Education Program	IEP	A written plan defining the individualized objectives for a child with a disability to help them reach educational goals more easily.
License-exempt Care		Legally operating child care that is exempt from regulation. In many cases this care is provided by friends, family, and neighbors.
Kindergarten Entry Assessment	KEA	An observational tool used by educators to assess the readiness of kindergarteners for school.
Kindergarten Transition		A process to help children transition from preschool to kindergarten.
Market Rate		The typical price charged by private child care providers. State's generally try to set their child care subsidies to a fixed percentage of the market rate.
Medical Home		A team-based delivery model providing comprehensive and continuous medical care to patients with the goal of maximizing health outcomes.
Prekindergarten	PK	A classroom-based learning environment for children ages three to five; also known as preschool.
Preschool		A classroom-based learning environment for children ages three to five; also known as prekindergarten.
Professional Development	PD	Training to build skill and knowledge for both personal development and career advancement.
Quality Improvement Plan	QIP	A plan to improve the quality of services an organization delivers. In the early childhood context, QIP is often associated with child care providers. Niagara QIP is an important quality improvement effort in Niagara county.

Term	Abbreviation	Description
QUALITYstarsNY	QSNY	The quality rating improvement system for child care providers in New York State; QUALITYstarsNY rates child care providers on a five-point scale.
School Readiness		Children who have mastered the skills that are widely expected of students as they enter kindergarten are considered school ready.
Quality Rating Improvement System	QRIS	The QRIS is a systematic approach to assess, improve, and communicate the level of quality in early and school-aged care and education; New York state's QRIS program is known as QUALITYstarsNY.
Supplemental Child Care		A secondary form of child care that supplements the primary arrangement. For example, a neighbor watching a child after preschool classes end for the day.
Temporary Assistance for Needy Families	TANF	TANF replaced the former Aid to Families with Dependent Children and is a federal welfare program. States receive a TANF block grant from the federal government and have considerable flexibility in designing programs to aid needy families.
Universal Prekindergarten	UPK	New York state's prekindergarten program for four-year-olds.

Sources: Seattle Department of Early Education and Learning (<http://www.seattle.gov/education/all-programs/about-us/glossary>); Child Care and Early Education Research Connections (<https://www.researchconnections.org/childcare/childcare-glossary>); New York State Early Childhood Advisory Council (<http://www.nysecac.org/resources/definitions/>); and PSC research.

APPENDIX 2: PROGRAMS SUPPORTING EARLY CHILDHOOD IN WESTERN NEW YORK

This appendix contains a brief description of each of the major programs serving young children in Western New York.

ACCORD Corporation

Allegany County Community Opportunities and Rural Development (ACCORD) is a community action agency that serves Allegany, Cattaraugus, and Wyoming Counties and provides services, information, and resources to low-income individuals and families. ACCORD also works to improve rural antipoverty measures in their region. Early childhood programs include child care referral services and Head Start/Early Head Start programs (Accord Corporation 2017).

All Babies Cherished Pregnancy Assistance Center

The All Babies Cherished Pregnancy Assistance Center, a faith-based agency serving Genesee County, offers support and assistance to new parents during pregnancy and until the child is three years old. At the center, parents have access to educational materials through Earn While You Learn, a program in which parents can earn “baby bucks” by watching parenting videos and answering questions about them. These baby bucks can then be used to purchase baby supplies (All Babies Cherished Pregnancy Assistance Center 2016).

The Arc of Genesee Orleans

The Arc of Genesee Orleans is a nonprofit agency serving Genesee and Orleans Counties with a focus on supporting children and adults with developmental disabilities by providing services, including vocational training, community living, and preschool. It also provides a variety of community services for other vulnerable populations, such as delivering meals to home-bound elderly.

For early childhood, the Arc offers Rainbow Preschool and Rainbow Pre-K, as well as an early intervention program.

- **Rainbow Preschool and Early Intervention**—Rainbow Preschool works with children from birth to age five with developmental disabilities. Through this program, the agency provides special education; occupation, speech, and physical therapies; counseling; and healthcare for children to meet their individual needs. The Arc works with these children and their families in their homes or through a preschool, child care, or Head Start program.
- **Rainbow Pre-K**—The Rainbow Pre-K program is a continuation of Rainbow Preschool and works with children ages two-and-a-half to five through two different Rainbow Center sites. Rainbow Pre-K classrooms include children of all abilities and focus on preparing them for K–12 classes (Arc of Genesee Orleans 2017).

The Arc of Livingston-Wyoming

The Arc of Livingston-Wyoming provides support services to developmentally disabled individuals and their families within Wyoming and Livingston Counties. It is a part of the regional Collaborative of the Finger Lakes Inc. as well as a chapter of The Arc’s national organization, both of which focus on developmental disabilities.

Through KidStart, the Arc offers a range of support services to young children dealing with developmental disabilities, including child care, early intervention, evaluation services, and a preschool program. It is also a certified Head Start provider.

- **Child care**—KidStart can provide licensed child care for children with special needs, as well as for children who do not have disabilities, and offers targeted activities that support the development of children with a range of abilities.

- Evaluation and early intervention—KidStart includes a full-service evaluation center with a range of providers who can work together to identify a child’s abilities and needs and then work to address those needs.
- Special Services Preschool Program—The preschool program can support children with a variety of learning needs through evaluations, special education, therapy, counseling, and referrals as needed (Arc of Livingston-Wyoming 2016).

The Aspire Registry

Aspire is New York’s registry for early childhood professionals. Teachers, directors, family child care providers, and trainers can use this online system to track their employment history, education, ongoing professional development, and contributions to the early childhood field (New York Works for Children n.d.).

Aspire of Western New York

Aspire is a nonprofit operating in Western New York that provides services to people with disabilities. Services provided to young children include:

- Early intervention—Home- and community-based services for children from birth to age three
- Preschool—Integrated classrooms or services in home- or community-based settings for children from ages three to five (Aspire of Western New York n.d.)

Asthma Coalition of Erie County

Part of the American Lung Association of the Northeast, the Asthma Coalition of Erie County is a collection of practitioners and community stakeholders who collaborate to improve the management of asthma in children. The coalition provides resources and information to families of children with asthma, and offers a test to help diagnose whether a child has asthma (Asthma Coalition of Erie County 2017).

Baby Café USA

Baby Café USA supports pregnant and breastfeeding mothers at sites around the country through weekly meetings. At these events, mothers can share experiences and get information from trained staff, including certified lactation consultants, midwives, and nurses. Many of the Baby Café USA sites also provide meals for participants. Pregnant or breastfeeding mothers are eligible to participate. Some sites allow male partners to attend and most allow female supporters to attend as well (Baby Café USA 2017).

Individual Baby Cafés located in WNY counties:

- Durham’s Central City Baby Café (Erie County)
- Mercy Hospital and Sisters Hospital Baby Café (Erie County)
- Jericho Road Baby Café: Wyoming Street and Barton Street (Erie County)
- The Gateway Center: Blackwell Chapel Baby Café (Chautauqua County)
- United Memorial Medical Center Baby Café (Genesee County)

Birth to 8 Initiative

The Birth to 8 Initiative is supported by a coalition of early childhood service providers in Erie and Niagara Counties who seek to improve access to early childhood development supports, including early literacy skill development and high-quality child care. Through this initiative, Erie County has tested and invested in multiple successful literacy supports, including the Parent-Child Home Program, Magic Penny, and Read to Succeed Buffalo (United Way of Buffalo & Erie County June 2016). Additionally, the United Way of Buffalo and Erie County have focused fundraising efforts on increasing the number of child care facilities, supplying providers with resources to improve quality and assisting eligible families with payments for child care (GiveGab 2017).

Buffalo City Mission

Buffalo City Mission works to counter poverty and homelessness by providing emergency shelter, a transitional program focused on helping individuals become self-sufficient through employment, education, and programs

for children of all ages. The primary early childhood program offered at the Buffalo City Mission is early child care for clients of the center. The child care center serves children from birth to five years old whose mothers are attending programming through the mission. Child care services include educational activities and regular evaluations for the children.

Buffalo Prenatal-Perinatal Network

The Buffalo Prenatal-Perinatal Network is a community-based organization serving Erie County that works with healthcare and service providers to improve birth outcomes, especially for at-risk populations.

The network is a certified WIC provider and administers two different statewide programs focused on early childhood and maternal health: The Buffalo Home Visiting Program, part of Healthy Families New York, and the Maternal Infant Community Health Collaborative.

- The Buffalo Home Visiting Program—The Buffalo Home Visiting Program is a part of the nationwide initiative, Healthy Families America, that provides home visits to families with children from birth to age five. This program offers families information on child development, connects families to resources they need in the community, and provides activities to facilitate healthy development.
- Maternal Infant Community Health Collaborative—This is part of a statewide program that uses trained community health workers to identify at-risk women; assess their needs before, during, and after pregnancy; and connect the women to the appropriate services to address these needs (Buffalo Prenatal-Perinatal Network Inc. 2017).

Buffalo Promise Neighborhood

Initiated in 2010, when the Westminster Foundation received a federal Promise Neighborhood planning grant, the Buffalo Promise Neighborhood (BPN) is a public-private partnership between local leaders and organizations to improve three neighborhood schools and revitalize the community around those schools through collaborative efforts. BPN works to address a spectrum of challenges facing residents in a 97-block area of Buffalo, New York, and projects include creating early childhood services for children and families, building successful community schools, starting college access opportunities early, and engaging the community to create safe and stable neighborhoods.

The BPN serves young children through three target initiatives: the Children’s Academy, the Community Health Center, and a series of literary partnerships.

- BPN Children’s Academy—Operated by the Community Action Agency of Erie County, the Children’s Academy is an early childhood education center that serves children from birth to age five and helps to prepare them for the transition to kindergarten.
- Community Health Center of Buffalo—The Community Health Center of Buffalo provides pediatric care for children from birth to age 18, including immunizations, nutrition, and hearing/vision screenings.
- Partnerships—BPN partners with Read to Succeed Buffalo and Every Person Influences Children (EPIC) to provide literacy and parenting education for children and families (Buffalo Promise Neighborhood 2017).

Campaign for Grade-Level Reading

The Campaign for Grade-level Reading is working in Buffalo to create alignment in programs serving children from six weeks to eight years old. The programs include child care, preschool, Head Start, and the early grades in Buffalo schools. The alignment efforts include consistent assessment, and consistent environmental classroom observations. The Buffalo Campaign for Grade-Level Reading reaches approximately 12,000 low-income children (The Campaign for Grade-Level Reading 2017).

The Campaign to ImmuNYze All New Yorkers

An initiative of the County Health Officials of New York, The Campaign to ImmuNYze All New Yorkers works to raise awareness and provide information about the importance of immunizations. Working with county health

departments and other organizations around the state, the campaign shares resources with parents, patients, and providers to increase vaccination rates (The Campaign to Immunize All New Yorkers 2017).

Chautauqua Blind Association Vision Rehabilitation Services

Chautauqua Blind Association (CBA) Vision Rehabilitation Services has been supporting individuals with vision impairments since 1921 through education and screenings. Currently, CBA serves residents of Chautauqua and Cattaraugus Counties and offers vision rehabilitation instruction and orientation, a mobility instruction program, and preschool vision screenings (Chautauqua Blind Association Inc. n.d.). The preschool vision screening program collaborates with local preschools, Head Start centers, and pre-K and kindergarten classrooms to provide early screenings for children (United Way of Southern Chautauqua County 2017).

Chautauqua Opportunities Inc.

Chautauqua Opportunities is a community action agency serving Chautauqua County that uses a strength-based model to help low-income county residents reach economic self-sufficiency. When they begin working with Chautauqua Opportunities, clients undergo a needs assessment, form a life plan, and are connected with appropriate services. Their early childhood programs include the Chautauqua Child Care Council (a Child Care Resource and Referral Agencies [CCRR] program) and Head Start/Early Head Start (Chautauqua Opportunities Inc. 2017a).

The Chautauqua Child Care Council, part of Chautauqua Opportunities Inc., serves families, providers, and employers in effort to improve access to high-quality child care services within the county. It also regularly evaluates whether existing providers are adequately meeting the needs of county residents and works to increase child care supply when necessary (Chautauqua Opportunities Inc. 2017b).

Child and Adult Care Food Program

The Child and Adult Care Food Program (CACFP) is a U.S. Department of Agriculture reimbursement program administered by the New York Department of Health that funds nutritious meals for eligible participants of child care sites, adult care institutions, afterschool centers, and emergency shelters (U.S. Department of Agriculture 2017). During FY 2015, CACFP was responsible for providing approximately 12.8 million meals per month, the majority of which took place in child care centers or home sites (NYSDH August 2016). In addition, the program provides an assessment process for child care centers that allows them to be certified as breastfeeding friendly (NYSDH March 2017).

Child Care Resource and Referral Agencies

CCRR agencies are part of a New York State Office of Children and Families program. Individual CCRR agencies exist in every county in New York State and provide referral information for parents in need of child care, as well as technical assistance for new child care providers (New York State Office of Children and Family Services n.d.).

Services for Families

- Referrals—Each CCRR agency offers families the chance to work with a referral counselor who can develop a list of child care providers based on the individual needs and location of each family. This list can then be used by families to contact providers and determine which is the best fit.
- Information—Each CCRR agency provides a series of resources to educate families about child care providers and how to determine whether a provider will meet their child's needs. They also can connect families to financial support for child care when needed, including through the County Department of Social Services.

Services for Employers and Businesses

- Information—The CCRR will offer businesses onsite information for employees about child care options available to them in the county, as well as general information about early childhood development needs.

Services for Child Care Providers

- Professional development—The council offers a series of workshops and training sessions to providers that meet state regulations on continuing education. They also connect providers with funding to support professional development activities.
- Technical assistance—For individual providers, the CCRR agency will provide onsite technical assistance tailored to the specific needs of that provider in effort to improve quality. Assistance can focus on a range of topics, including child development, center administration, layout, and state regulations.
- Legally exempt enrollment—In most counties, the CCRR is the enrollment agency for legally exempt child care providers (unlicensed providers caring for up to two children).

The CCRR agencies serving the eight counties of Western New York are:

- Allegany—Allegany County Community Opportunities and Rural Development Inc.
- Cattaraugus—ACCORD Corporation
- Chautauqua—Chautauqua Opportunities
- Erie—The Child Care Resource Network (also known as the Child Care Coalition of the Niagara Frontier Inc.)
- Genesee—Community Action of Orleans and Genesee Inc.
- Niagara—Niagara Community Action Program
- Orleans—Community Action of Orleans and Genesee Inc.
- Wyoming—ACCORD Corporation (New York State Office of Children and Family Services n.d.)

The Child Care Resource Network

The Erie County CCRR agency, the Child Care Resource Network (CCRN), works to support, provide access to, and advocate for high-quality child care services for all children. As a CCRR agency, the CCRN provides referrals, connects families to information and funding, and offers technical assistance and registration to child care providers (Child Care Resource Network 2017a).

In addition to its work as a CCRR agency, the CCRN provides the following early childhood services:

- Help Me Grow: WNY—The CCRN acts as the lead operations agency for this regional program.
- Child and Adult Care Food Program—Eligible providers can sign up through the CCRN to become a part of the program, which offers meal reimbursement and nutrition education (Child Care Resource Network 2017a).
- Western New York Infant Toddler Resource Network—A program focused on children from birth to age three, the Western New York Infant Toddler Resource Network improves early childhood care in all eight Western New York counties through outreach and professional development training (Child Care Resource Network 2017b).

Child Care Subsidy

New York State provides funding to counties to subsidize the cost of child care for low-income families. Approximately two-thirds of the allocation is from federal funds and one-third from state funds. The state mandates that certain categories of families be guaranteed a subsidy, including:

- Families on public assistance
- Those under 200 percent of the federal poverty line (counties have some discretion to lower this level if they do not have sufficient funds to cover everyone eligible)
- Those eligible for public assistance who choose to only receive a child care subsidy

Beyond these three categories, counties are free to set their own eligibility requirements. Counties can choose

different income levels for eligibility, place different restrictions on the types of activities that qualify for reimbursed child care, and put limits on how long families can receive benefits. There are significant variations between the various counties of Western New York with respect to how the counties have chosen to implement the subsidy. Information on the various county requirements is difficult to find, and as a result, a parent who qualifies for the subsidy in one county will have a hard time determining if they will still be eligible for the subsidy if they move to a new county, unless they meet one of the three conditions that guarantee eligibility.

Child Care Subsidy Training

This program provides training to local districts and staff on how to meet the programmatic mandates associated with New York State’s Child Care Subsidy program (Augenblick, Palaich, and Associates 2015).

Child Health Plus/Children’s Medicaid

New York offers two health insurance plans for children: Child Health Plus and Children’s Medicaid. Eligibility for the individual plans is based upon family income. To be eligible for either Child Health Plus or Children’s Medicaid, children must be residents of New York State and under the age of 19. Children who are not eligible for Medicaid and do not have access to other health insurance plans can enroll in Child Health Plus (NYSDH April 2016).

Childhood Lead Poisoning Prevention Program

The Childhood Lead Poisoning Prevention Program is a statewide health initiative administered by local county health departments to prevent lead poisoning in at-risk children. Local programs work to identify lead sources before they can harm children, provide and promote lead testing, educate the public about the harmful effects of lead, and offer treatment to children with lead poisoning. All uninsured children ages one and two are eligible for lead testing, and children ages three to six continue to be eligible if determined to be at risk as determined by state guidelines (NYSDH October 2013).

EXHIBIT A2-1. Western New York Lead Testing Results, 2012

County	Children Tested	Percentage with Elevated Lead Levels
Allegany	708	1.0%
Cattaraugus	1,593	0.6%
Chautauqua	2,590	1.4%
Erie	19,149	1.5%
Genesee	1,036	0.4%
Niagara	3,774	0.8%
Orleans	569	1.8%
Wyoming	685	0.7%

Source: Health Data NY 2012.

Children and Youth with Special Health Care Needs Program

The Children and Youth with Special Health Care Needs program works with children who have a long-term illness or condition that requires extra healthcare services. Managed by county health departments, the program helps to provide information, access to health insurance, service referrals, and other types of support. It also includes the Physically Handicapped Children’s Program, which offers financial support for services that are not covered by insurance. The program covers children with special healthcare needs from birth through age 21 (NYSDH April 2017a).

Community Action of Orleans and Genesee

Community Action of Orleans and Genesee provides support for disadvantaged and low-income families in both Orleans and Genesee Counties. As an organization, it focuses on services that will help families become more self-sufficient. Early childhood programs run by this community action organization include the Child Care Resource and Referral Program, Head Start, and the Early Head Start Child Care Partnership (Community Action of Orleans and Genesee 2017).

Community Action Organization of Erie County

The Community Action Organization (CAO) of Erie County is an antipoverty agency with an emphasis on citizen participation that provides a variety of services for at-risk residents of Erie County. The CAO operates 21 Head Start locations in Erie County and six in Niagara County. The CAO serves approximately 2,500 children. In addition, the CAO collaborates with other existing services to support early childhood development through education, disability support services, and other pre-K programs (Community Action Organization of Erie County Inc. 2004). To participate in the CAO's programs, children and families must be residents of Erie County, meet Department of Health and Human Services poverty guidelines, and demonstrate need for services. Ten percent of Head Start and Early Head Start slots are designated for children with disabilities (Community Action of Orleans and Genesee 2017).

Community Action for Wyoming County

Community Action for Wyoming County runs an early childhood program known as Mudpies and Milestones for children from birth through age five. Services offered include preschool, childcare, wraparound care for participants in the preschool program, and summer day camp (Mudpies and Milestones 2017).

Council on Children and Families

The Council on Children and Families is a part of the Office of Children and Family Services and coordinates statewide health, education, and human service programs that work with children and families. The council membership is composed of directors of other state agencies that work with children and families, which allows it to be a vehicle for interagency collaboration and systemwide improvements (Council on Children and Families 2017a).

The council accomplishes most of its work through a series of groups that focus on coordinating local systems and improving service delivery in different areas. Some of these groups provide tools to navigate systems around the state, while others focus on a specific vulnerable group that may need extra support, such as children with incarcerated parents or children with multiple disabilities.

Council initiatives that focus on supporting and improving services for young children and their families around the state include:

- Commissioners Committee on Cross-Systems Services for Children and Youth—This committee focuses on improving coordinated services and removing barriers between different systems for service delivery. Among other goals, the committee strives to engage families and youth in the process of quality improvement and to better support children who need intensive services from multiple systems at once (Council on Children and Families 2017b).
- Early Childhood Advisory Council—The Early Childhood Advisory Council is a coalition of experts and practitioners in the field of early childhood who provide strategy and guidance to the State of New York. Their goal is to create a comprehensive system of early childhood care and service delivery throughout the state based on the following principles: diversity, comprehensive health, family empowerment and support, and responsive services (Early Childhood Advisory Council 2017).
- Early Childhood Career Development Center—The Early Childhood Career Development Center provides professional development and credentialing opportunities for early childhood practitioners across the state, including targeted support for providers with low-literacy skills (Council on Children and Families 2017c).
- Early Childhood Comprehensive Systems Project—The Early Childhood Comprehensive Systems (ECCS) Project was originally funded through a 2003 grant from the U.S. Department of Health and Human Services to create a better integrated early childhood service delivery system. In 2013, the ECCS Project was awarded a new, three-year grant to specifically focus on programs that serve infants and toddlers (Council on Children and Families 2017d).
- Fetal Alcohol Spectrum Disorder Workgroup—The Fetal Alcohol Spectrum Disorder (FASD) Workgroup strives to raise awareness of FASD, increase use of screenings for mothers and children, and improve access to treatment (Council on Children and Families 2017e).

- Head Start Collaboration Project—The Head Start Collaboration Project uses federal funding to build partnerships between Head Start programs and other early childhood programs and acts as an advocate for Head Start in statewide policy discussions about children and families (Council on Children and Families 2017f).
- KIDS COUNT—NYS and Kids’ Well-being Indicators Clearinghouse—Both KIDS COUNT-NYS and Kids’ Well-being Indicators Clearinghouse are efforts to improve access to up-to-date and meaningful data about child well-being across the state. KIDS COUNT is part of a national network supported by the Annie E. Casey Foundation that shares county-level data on children’s health, education, and well-being indicators and promotes its use in policy development and accountability. Kids’ Well-being Indicators Clearinghouse is an interactive website that contains data on children’s well-being from across the state and offers users the chance to tailor data and its presentation to fit their own needs (Council on Children and Families 2017g; Council on Children and Families 2017h).

County Departments

Important programs serving young children are administered by county governments in Western New York. These programs include the child care subsidy, early intervention, lead poisoning prevention, immunizations, and Children with Special Health Care Needs. Important county agencies in Western New York include:

- Allegany County Health Department— The Allegany County Health Department provides outreach and services to promote county resident health (Allegany County New York 2017). The department administers several early childhood programs including WIC, Early Intervention, Childhood Lead Poisoning Prevention, Preschool Special Education, Children with Special Health Care Needs, and Immunizations.
- Allegany Department of Social Services—The Allegany Department of Social Services works to preserve families, protect individuals, and promote self-sufficiency. It works closely with ACCORD to provide child care assistance.
- Cattaraugus County Health Department—The Cattaraugus County Health Department provides services and education to residents to protect their health and prevent illness and disability (Cattaraugus County Health Department n.d.). The department administers several early childhood programs including: WIC, Early Intervention, Childhood Lead Poisoning Prevention, immunizations, and Children with Special Health Care Needs.
- Cattaraugus County Department of Social Services—The Cattaraugus County Department of Social Services works to keep county residents safe, healthy, and self-sufficient. It administers WIC and has programs that serve families, such as child protective services, and also benefit young children.
- Cattaraugus County Youth Bureau—The Cattaraugus County Youth Bureau provides services and education to residents to protect their health and prevent illness and disability (Cattaraugus County Health Department n.d.). The department administers the Preschool Special Education Program.
- Chautauqua County Health and Human Services Department— The Chautauqua County Health and Human Services Department provides a range of human services and health outreach to the residents of Chautauqua County (Chautauqua County n.d.). The department administers several early childhood programs, including Early Intervention, Childhood Lead Poisoning Prevention, Preschool Special Education, Immunizations, Nurse-Family Partnership, and Children with Special Health Care Needs.
- Erie County Department of Health—The Erie County Department of Health works to protect the health of county residents through prevention, outreach, advocacy, and partnerships with other health organizations (Erie County, NY Department of Health n.d.). The department administers Early Intervention, Childhood Lead Poisoning Prevention, and the Healthy Mom Healthy Baby program among other early childhood programs.

- Erie County Department of Social Services—The Erie County Department of Social Services has several programs benefitting young children, including assistance to nonparent caregivers.
- Niagara County Health Department—The Niagara County Health Department delivers necessary public health services, community health assessments, and policies to support improved public health outcomes (Niagara County Health Department 2017a). The department administers several statewide early childhood programs: Early Intervention, Childhood Lead Poisoning Prevention, Preschool Special Education, immunizations, and Children with Special Health Care Needs.
- Niagara County Department of Social Services—The Niagara County Department of Social Services helps families by offering cash assistance, child protective services, and assistance in finding child care and child care support.
- Genesee County Health Department—The Genesee County Health Department works to create a healthy environment and provide necessary services for all residents of Genesee County. The department collaborates on provision of certain services with the Orleans County Health Department (Genesee County Health Department 2015). The department administers several statewide early childhood programs: Early Intervention, Preschool Special Education, Lead Poisoning Prevention, and Children with Special Health Care Needs.
- Orleans County Health Department—The Orleans County Health Department strives to provide public services, educate the residents of Orleans County about their health, and create a healthy environment for all residents (Orleans County Government 2016). The department administers several statewide early childhood programs: Early Intervention, Childhood Lead Poisoning Prevention, Preschool Special Education, and Children with Special Health Care Needs.
- Wyoming County Health Department—The Wyoming County Health Department works to promote the health of all its residents through outreach and provision of services (Wyoming County Health Department 2013). The department administers early childhood programs, including Childhood Lead Poisoning Prevention and Immunizations.
- Wyoming County Youth Bureau—The Wyoming County Youth Bureau provides a variety of services focused on meeting the needs of young children and youth. Early childhood programs housed within the bureau work to identify and support young children with special needs (Wyoming County Youth Bureau 2013). Early childhood programs administered by the department include Early Intervention, Preschool Special Education, and Children with Special Health Care Needs.

Developmental Disabilities Planning Council

Created by the Developmental Disabilities Assistance and Bill of Rights Act of 2000, the Developmental Disabilities Planning Council works to ensure that individuals with developmental disabilities and their families have access to the services and public spaces they need. The Council also funds projects around the state that provide innovative support for individuals with developmental disabilities (Developmental Disabilities Planning Council n.d.a). Recent projects related to early childhood issues include Prevention of Fetal Alcohol Spectrum Disorders, Parent Partners in Health Education, and Pregnant Pause Mini Grants, all of which are focused on educating families with young children with disabilities (Developmental Disabilities Planning Council n.d.b).

Early Care & Learning Council

The Early Care & Learning Council (ECLC) works to promote access to and improve the quality of child care providers by partnering with and supporting CCRR agencies across the state. The ECLC provides technical assistance and collaborative professional development opportunities to professionals at these agencies, as well as leads the Quality Investments for Children (QIC) initiative. The QIC initiative works to raise awareness around the importance of high-quality child care and provides resources to improve quality in existing child care providers (Early Care & Learning Council 2015).

Early Childhood Direction Center

The Early Childhood Direction Center (ECDC) is a program out of the New York State Department of Education

that works with families of young children with special needs and early childhood professionals to improve outcomes in areas of early literacy, communication, social-emotional skills, and positive behaviors (NYSED 2016). The ECDC provides information, support, and technical assistance for families who have questions about their child's development or need access to specialized services. They also offer workshops for families and professionals on how to best support young children with developmental disabilities (Kaleida Health 2017).

ECDC serves families of children with special needs from birth to age five and professionals who work with those children.

Early Childhood Direction Centers serving WNY counties are:

- Regional Early Childhood Direction Center (RECDC)—Monroe #1 BOCES (Board of Cooperative Education Services) and University of Rochester Golisano Children's Hospital at Strong—Serves Genesee and Wyoming Counties (among other, non-WNY Counties) (RECDC 2017)
- West Early Childhood Direction Center—Women & Children's Hospital of Buffalo—Serves Erie, Niagara, Cattaraugus, Chautauqua, Allegany, Orleans

Early Head Start

Early Head Start (EHS) provides early and intensive child development and support services for low-income families with children from birth to age three. EHS services include weekly 90-minute home visits and two group socialization activities per month for children and families. EHS service providers in Western New York include:

- Allegany County—36 slots administered by ACCORD Corporation
- Cattaraugus County—50 slots across Cattaraugus and Wyoming Counties are administered by Cattaraugus and Wyoming Counties Project Head Start
- Chautauqua County—40 slots administered by Chautauqua Opportunities Inc.
- Erie County—34 slots administered by the Community Action Organization of Erie County Inc.
- Wyoming County—see Cattaraugus County (New York State n.d.)

Early Intervention Program

The Early Intervention Program (EIP) is part of the nationwide program for children from birth through age three with disabilities or developmental delays. Usually administered at the county level, it provides support to families and connects them with the services their child needs. The EIP provides a variety of support services to children with disabilities and their families, including therapy, healthcare, psychological support, education, and home visits. All eight counties examined by this report have a participating Early Intervention program (NYSDH April 2017b).

Eat Well Play Hard

Eat Well Play Hard (EWPH) was developed to address rising rates of childhood obesity. The program promotes increasing physical activity and improving nutrition for children. Funded through grants from the state, the program is implemented in a variety of settings, including child care sites throughout the state (NYSDH June 2010). EWPH strategies are incorporated into the state's other nutrition programs, including WIC, the Child and Adult Care Food Program, and the Hunger Prevention and Nutrition Assistance Program.

Education Incentive Program

The Education Incentive Program is a scholarship program to assist child care providers in obtaining the training and education needed to provide high-quality care to children. Providers must be participating in a program regulated by the New York State Office of Children and Family Services (Center for Children's Initiatives n.d.).

Empower

Empower (formerly Niagara Cerebral Palsy) provides services to individuals with disabilities in Niagara County. Empower Children's Academy provides services to children up to five years of age, including evaluations, preschool programming, special classes for children with disabilities, and integrated classrooms (Empower Inc. 2016).

Erie County Council for the Prevention of Alcohol and Substance Abuse

The Erie County Council for the Prevention of Alcohol and Substance Abuse (ECCPASA) works to provide educational outreach, prevention, and treatment for residents of Erie County focused on addressing alcohol and substance abuse. ECCPASA includes the Fetal Alcohol & Drug Effects (FADE) program. FADE offers pregnant women dealing with substance abuse multiple options, including awareness outreach and support groups (Erie County Council for the Prevention of Alcohol and Substance Abuse n.d.).

Even Start Family Literacy Programs

Even Start programs are developed as partnerships between a local school district and nonprofit, community-based providers to ensure low-income families with low literacy have access to a comprehensive statewide system of literacy services (New York State Alliance for Family Literacy n.d.).

Every Person Influences Children

EPIC is an Erie County program supporting families, communities, and other adults who live or work with children by providing parenting and family engagement services and education and development opportunities for professionals. EPIC offers a series of parenting classes and workshops focused on new parents, parents facing unique obstacles, and early childhood literacy. These workshops include topics such as parenting techniques, conflict resolution, infant development, and creating stability within the home. EPIC also offers workshops for professionals who work with children, including child care staff. These workshops are similar to the parenting workshops and are intended to help staff improve their interactions with and support of young children (EPIC 2017).

Family and Children's Services of Niagara

Family and Children's Service of Niagara is a nonprofit agency serving Niagara County that provides health and human services to individuals and families throughout the Greater Niagara Area. The agency offers family empowerment, parenting, youth, and home visiting services. It is also a certified site for the Healthy Families New York home visiting program (Family and Children's Service of Niagara 2015).

The Family Child Care Association of New York State

The Family Child Care Association of New York State is a professional association for family child care providers (providers who offer child care within their own home). In addition to offering members professional development and opportunities for networking, the association also works to promote the profession and improve the quality of care provided (Family Child Care Association of New York State Inc. n.d.).

The Family Help Center

The Family Help Center is an Erie County program that strives to support children and families through a variety of services, many of which are focused on preventing child abuse and neglect. With its focus on supporting healthy family interactions, the Family Help Center works with children of all ages. Programs that incorporate or target early childhood services include:

- **Child care**—The Family Help Center Daycare provides child care for children ages six weeks to 12 years through several programs, each of which uses a social-emotional curriculum targeted at the children's age and development level. The daycare also offers free transportation within a limited radius, nutritious meals, and all-day summer programming.
- **Family Helpline**—The Family Helpline is available 24 hours a day to families with children who need support. Caregivers who call the hotline have access to immediate help and advice, as well as referrals to other services as needed.
- **Home-based support services**—Through home visits, the Family Help Center social workers are able to provide education and extra assistance for families. This includes teaching families positive interactive and parenting skills as well as helping families identify necessary resources and keep child records up to date.

- Support groups—The Family Help Center facilitates parenting support groups for parents and caregivers who need a safe space to share challenges and parenting techniques. These groups also often incorporate programs such as Parenting Wisely, an evidence-based program that helps improve parenting skills (Family Help Center 2017).

Farmers' Market Nutrition Program

The Farmer's Market Nutrition Program provides funding to women through WIC to purchase locally grown fruits and vegetables (NYSDH May 2013).

firsthand Learning

A nonprofit serving Erie County, Firsthand Learning designs and implements curriculum materials and professional development programs that emphasize direct experiences with natural and cultural phenomena. Firsthand Learning's services include lesson plans for pre-K students (Firsthand Learning Inc. n.d.).

General Child Care Training

The New York State Office of Children and Family Services provides training to child care providers. The training is mandatory for licensed providers, and they must complete 15 hours of training during their first six months and 30 hours of training every two years after that (Augenblick, Palaich, and Associates 2015).

Go Buffalo Mom

Go Buffalo Mom is a traveling education planning and financial planning program for low-income, high-risk pregnant women with challenges accessing prenatal care due to transportation. The program ensures low-income pregnant moms regularly attend prenatal appointments and save for economical transportation options. By focusing on building skills and confidence, families learn to manage their finances and transportation needs. Go Buffalo Mom is a partnership of the United Way of Buffalo and Erie County, Niagara Frontier Transportation Authority, Greater Buffalo-Niagara Regional Transportation Council, Catholic Health System, Kaleida Health, and Belmont Housing Resources for Western New York.

Head Start and Early Head Start

Head Start is a federally funded early childhood education program that works with children ages three to five and their families to prepare children for school. Head Start services include early learning, health, and family well-being. Many Head Start locations offer weekly home-based programming for families as well. The programs are funded through federal Head Start Grants, Early Head Start Grants, and Child Care Partnership Grants from the Office of the Administration for Children and Families.

Early Head Start serves pregnant women, infants, and toddlers from birth to three years old until they are ready to enter a Head Start Program. Some Early Head Start programs partner with existing child care programs to provide services to children already enrolled in the child care program (Benefits.gov n.d.).

Children from birth to age five from families with income below the poverty line are eligible for Head Start and Early Head Start. Children who are homeless, part of the foster care system, or in families receiving public assistance are also eligible.

Western New York Head Start programs include:

ACCORD Corporation—Serving Allegany, Cattaraugus, and Wyoming Counties

- Head Start: 213 children
- Early Head Start: 156 children

Cattaraugus and Wyoming Counties Project Head Start Inc.—Serving Cattaraugus (seven centers) and Wyoming (one center) Counties

- Head Start: 351 children
- Early Head Start: 60 children, five pregnant women
- Chautauqua Opportunities—Serving Chautauqua County

- Head Start: 547 children
- Early Head Start: 105 children, two pregnant women
- Early Head Start Child Care Partnership: 45 children

Community Action Organization of Erie County—Serving Erie County

- Head Start: 2,442 children and families
- Early Head Start: 206 children, 36 pregnant women
- Early Head Start Partnership: 198 children

Community Action Orleans and Genesee—Serving Orleans and Genesee Counties

- Head Start: 218 children and families
- Early Head Start: 46 children
- Early Head Start Child Care Partnership: 81 children

The Seneca Nation of Indians Early Childhood Learning Center—Serving children in the Seneca Nation

- Head Start: 86 children and families (U.S. Department of Health and Human Services n.d.)

Healthy Community Alliance

The Health Community Alliance is a network serving Cattaraugus, Chautauqua, Erie, and Wyoming Counties that collaborates with local nonprofit organizations and healthcare providers to create access to healthcare for rural residents with a focus on quality of life, families, and health and wellness. Programs include parent empowerment, a family center, and Child Health Plus enrollment (Health Community Alliance 2013).

Healthy Families New York

The Healthy Families New York (HFNY) home visiting program is a national evidence-based home visiting model implemented by New York State. The program provides regular home visiting services to families in need of extra support, such as teen parents or parents with other young children already at home. Visits can begin prenatally and include an evaluation of needs, referrals to other services, and activities for families and children (Healthy Families New York 2017). The program targets expectant parents and parents with children birth to three months old who are identified to be at risk. Once a family is participating in the program, visits will last until a child is eligible for preschool (Healthy Families New York 2017).

Healthy Families New York has the following programs operating in Western New York:

- Buffalo Prenatal-Perinatal Network—Serves approximately 600 families a year in Erie County (Healthy Families New York March 2014)
- Niagara County Department of Social Services—Serves approximately 126 families a year in Niagara County
- Parent Education Program—Serves approximately 154 families annually in Allegany and Cattaraugus counties

Healthy Mom-Healthy Baby

The Healthy Mom Healthy Baby Program is implemented by the Western New York Public Health Alliance through the Erie County Department of Health. The program seeks to develop a county-wide system of prenatal and perinatal services to improve birth outcomes for Medicaid-eligible children and their mothers. There are five program areas: early identification of risk, coordination and referral for services, enhanced outreach, enhanced home visiting services, and infrastructure (Western New York Public Health Alliance, Inc. 2010).

Healthy Start, Healthy Future for All

The Healthy Start, Healthy Future for All Coalition is a network of healthcare organizations, medical providers, school-based and university organizations, government entities, transportation experts, human services

organizations, and faith-based partnerships committed to strengthening the systems and community supports that promote maternal, infant, and child health. Led by the United Way of Buffalo and Erie Counties and UBMD, coalition members work collaboratively to coordinate pre- and post-natal supports for pregnant women and infants, and promote active lifestyles and healthy nutrition for families of preschool and elementary school-aged children. Healthy Start, Healthy Future for All implements evidence-based interventions, provides professional development programs, influences public policy, and innovates new programming using human-centered designs.

Help Me Grow: Western New York

Help Me Grow Western New York (HMGWNY) is a regional organization based on the national Help Me Grow model that works to ensure children have access to the services they need to develop to their greatest potential. The HMGNY program provides families in Erie and Niagara Counties information, referrals to existing resources, and help connecting with those resources for parents of children birth to age five.

- Referrals and care coordination—HMGNY can provide parents and caregivers with referrals to and information about existing services in the community that meet their child's individual needs, as well as work with them after that to ensure that they successfully connect with these services.
- Developmental questionnaire—HMGNY offers families a questionnaire and guide intended to track a child's development and help families understand whether or not their child is progressing in a healthy manner.
- Partnerships with service providers—HMGNY will partner with healthcare and other service providers to provide specific family referrals, as well as in-service training sessions and other professional development opportunities (HMGNY 2014).

Hillside Family of Agencies

The Hillside Family of Agencies provides health, education, and human services to children and families via agencies located throughout Central and Western New York. Services supporting young children include the Parents as Teachers home visiting program, health homes for children, and numerous parenting and family support services (Hillside Family of Agencies 2015).

Hunger Prevention and Nutrition Assistance Program

The Hunger Prevention and Nutrition Assistance Program provides state and federal funds to improve the quality of food distributed to an estimated 2,500 Emergency Food Relief Organizations in New York State which include food banks, food pantries, soup kitchens, and emergency shelters (NYSDH February 2016).

The Jamestown Community Learning Council

The Jamestown Community Learning Council works to help parents gain the skills they need to properly prepare their children for school. As a partnership between United Way and Lincoln Elementary School in Jamestown (Chautauqua County), the council is part of the national Parents as Teachers network, which supports parents through home visits, group meetings, developmental screenings, and referrals (United Way of Southern Chautauqua County n.d.).

Jericho Road Community Health Center

Jericho Road Community Health Center works to meet the medical needs of refugee and low-income community members in Erie County by providing both primary care and a variety of outreach and social services. The center has two targeted early childhood programs: the Priscilla Project and the Parent-Child Home Program.

- Priscilla Project—This project works with low-income, pregnant refugee women and matches them with volunteer mentors, doula services, educational classes, and referrals appropriate to their cultural needs. The project helps women navigate an unfamiliar health system and continues to provide breastfeeding support after birth.

- Parent-child Home Program (PCHP)—A certified site for the national PCHP, Jericho Road works to prepare children ages 18 months through four years to be successful in school through regular home visits. The visits include language and literacy skills, as well as parent-child bonding activities. Jericho Road also works to train local members of refugee communities to act as home visitors and then strives to ensure families are culturally matched with a visitor (Jericho Road Community Health Center n.d.).

Jewish Family Service of Buffalo and Erie County

The Jewish Family Service of Buffalo and Erie County (JFS Buffalo) is a community-based health and social service provider that works with individuals of all ages. Services provided include mental and behavioral health, career development, support for torture survivors, and immigrant and refugee services. As a part of the immigrant and refugee services, JFS Buffalo offers the evidence-based Incredible Years® program focused on parenting skills for parents of children from birth to age six (Jewish Family Service of Buffalo & Erie County n.d.).

Keeping Babies Safe

Keeping Babies Safe is a statewide nonprofit organization that works to develop products and practices that contribute to safe sleep for infants through education and advocacy. The organization works to raise awareness about safe sleeping habits as well as educate parents about how to keep their children safe. Keeping Babies Safe also advocates for federal and state legislation to protect sleeping children, including the New York state law requiring hospitals and birthing centers to provide information on safe sleep in several languages for new parents (Keeping Babies Safe 2016).

King Urban Life Center

The King Urban Life Center is a community center in Buffalo that offers a space for residents to gather and partners with community institutions to provide a variety of educational programs for K–12 students. The center is a certified site for the national Parent-Child Home Program, which provides families with a home visitor twice a week. The visits include educational activities that target the child’s language and literacy skills, as well as social-emotional development. The activities support healthy development and help to ensure children are prepared for K–12 classrooms (King Urban Life Center 2016).

March of Dimes and Implicit Program

The March of Dimes works to improve babies’ health by preventing birth defects, infant mortality, and premature birth. The March of Dimes promotes preconception and interconception health, with programs including public education campaigns, participation on preconception and interconception task forces, support programs that promote more effective use of postpartum and well-baby visits, and advocacy work (March of Dimes 2017). The March of Dimes also works to address health inequities and supports education campaigns aimed at reducing early, nonmedically dictated labor inductions and cesarean deliveries. The March of Dime’s IMPLICIT Program (Interventions to Minimize Preterm and Low Birth Weight Infants through Continuous Improvement Techniques) is an evidence-based model that screens mothers of children from birth to age two for modifiable risk factors that cause preterm and low birth weight babies, including smoking, depression, contraception use, and multivitamin intake.

Mental Health Association of Erie County

The Mental Health Association of Erie County provides mental health services to seniors, adults, families, and children in Erie County. Among other services, the association provides services to families with children who have significant emotional and/or behavioral challenges. They help caretakers learn the skills to effectively advocate for the family. They also provide respite child care for families with children with behavioral difficulties, providing caretakers with a break from the demands of care (Mental Health Association of Erie County 2017).

New York State Association for the Education of Young Children

The New York State Association for the Education of Young Children (NYSAEYC) is an advocacy and professional development organization that promotes access to high-quality early childhood care and education. The association supports early childhood practitioners through a variety of resources and professional development and credentialing opportunities, as well as through small grants awarded for innovative ideas to improve the

program quality. NYSAEYC has also developed a series of position papers that advocate for specific policies or program changes (NYSAEYC 2017).

New York State Preventive Dentistry Program

The Preventive Dentistry for High Risk Underserved Children's Program provides preventive dental care to children living in communities with high rates of poverty who are at risk for dental diseases. Dental services provided include dental sealants, screenings, and referrals, and are provided through collaborations with local health organizations and schools. Children who live in communities with a high proportion of individuals living below 185 percent of the federal poverty level are eligible for this program (NYSDH August 2005).

New York Zero-to-Three Network

New York Zero-to-Three Network (NYZTT) is a statewide network of early childhood practitioners and researchers in a variety of fields working together to improve the quality of early childhood services offered in the state. The network enhances collaboration between practitioners and share best practices. In addition to providing networking events, resources, and information-sharing opportunities, the organization also works to improve service delivery systems and acts as a public advocate for the needs of young children and their families.

Furthermore, NYZTT has developed Infancy Leadership Circles in local communities throughout New York. Through these circles, groups of practitioners who work with infants and toddlers can share knowledge and collaborate on advocacy and local service initiatives (NYZTT 2017).

Newborn Screening Program

Required for all newborns in the state of New York, the Newborn Screening Program tests for more than 40 different disorders at an early age through local health providers. The program targets mostly genetic disorders, all of which require treatment, so children benefit from early diagnosis and intervention. If test results indicate the presence of a disorder, the program will then work with the family to ensure follow up treatment (NYSDH n.d.).

Niagara Community Action Program Inc.

The Niagara Community Action program provides a variety of services to low-income individuals in Niagara County to help them become self-sufficient. As a part of those services, the Community Action Program runs the Community Child Care Clearinghouse of Niagara, a CCRR program providing referrals to families (Niagara Community Action Program Inc. n.d.).

Niagara County Early Child Care Quality Improvement Project

The Niagara County Early Child Care Quality Improvement Project (QIP) project has been working to improve the learning environments in child care centers and increase school readiness of preschool children. Niagara QIP worked with 30 child care centers and 44 preschool classrooms as part of phase one which began in 2010. The program is now in phase two, focusing on infant and toddler development. The second phase has four interrelated components: developmental screening, professional development, leadership capacity of child care center directors, and enhanced learning environments through facility upgrades. The QIP is funded by the Peter and Elizabeth C. Tower Foundation, Grigg-Lewis Foundation, and United Way of Greater Niagara (Niagara University 2017).

Niagara Falls City School District Focus on Families Resource Centers

Focus on Families Resource Centers are based on the statewide Family Resource Center model and have four locations in the Niagara Falls City School District. These centers provide parenting skills education through the evidence-based program Incredible Years®, home visits, activities, and referrals for high-need families with young children. The goal of the centers is to support families and their ability to raise healthy children (Niagara Falls City School District 2017; New York State Family Resource Center Network 2008).

Nurse-Family Partnership

The Nurse-Family Partnership (NFP) is a national evidence-based home visiting model implemented by New York State in which a trained nurse visits first-time mothers on a weekly or semiweekly basis in their homes to provide healthcare and parenting support. Through their visits, the nurses educate women on healthy prenatal

and perinatal practices and parenting techniques; they also facilitate future planning focused on education and employment that will help the women to better support their family (Nurse-Family Partnership n.d.a). First-time, low-income mothers are eligible for home visits beginning while pregnant and then until the child is age two (Nurse-Family Partnership n.d.b). NFP service providers in Western New York include:

- Chautauqua County—63 slots administered by the Chautauqua County Health and Human Services Department

Office for People with Developmental Disabilities

The New York State Office for People with Developmental Disabilities (OPWDD) coordinates services for individuals with disabilities throughout the state; many of these services are provided through a network of nonprofit agencies. The OPWDD can provide individual services to children from birth to age 21 years old in addition to the supports they receive from other state and local programs (OPWDD n.d.a). Individuals seeking services with the OPWDD must go through a referral and review process that determines what services they are eligible for (OPWDD n.d.b).

Office of Children and Family Services

The New York State Office of Children and Family Services coordinates services throughout the state for children, adolescents, families, and vulnerable adults, often by collaborating with and funding local agencies. Programs overseen by this office include child care, child welfare, juvenile justice, domestic violence issues, the New York State Commission for the Blind, the New York State Bureau of Adult Services, and child abuse prevention (New York State Office of Children and Family Services n.d.).

Parent Education Program

The Parent Education Program (PEP) works to support healthy and stable families through a series of programs designed to address a variety of needs. These programs include counseling, visitation, and independent-living options for low-income families. PEP also implements the Healthy Families New York home visiting model for Allegany and Cattaraugus Counties (Parent Education Program n.d.).

Parent Network of Western New York

The Parent Network of Western New York is a nonprofit that provides education and services for individuals and children with special needs. The organization works to empower parents and family members to communicate effectively with professionals and to successfully advocate for their children. They also work with early childhood professionals by providing continuing education opportunities, resources, and referral services.

Parents as Teachers

Parents as Teachers (PAT) helps parents by providing information on child development, parenting support, and assistance with early detection of developmental delays. PAT includes one-on-one home visits, monthly group meetings, developmental screenings, and a resource network for families. PAT service providers in Western New York include:

- Chautauqua County—149 slots administered by the Jamestown Community Learning Council (Parents as Teachers 2017)

Perry Family Literacy Center

The Perry Family Literacy Center helps children in Perry, New York with their literacy skills. Services for young children include one-on-one tutoring, and prekindergarten classes. The center also holds parent workshops and outreach programs to encourage parents to read at home with their children (Muster 2014).

Physically Handicapped Children's Program

PHCP is designed for low-income families with two to three-year-old children and multiple risk factors. Home visitors model behaviors to aid in child development rather than instructing parents directly. PHCP service providers in Western New York include:

- Buffalo—100 slots administered by Jericho Road Ministries and 50 slots administered by King Urban Life Center (Niagara County Health Department 2017b)

Portable Dental Care

Portable Dental Care is part of CHOMPERS! a program supported by the Health Foundation for Western and Central New York that brings dental equipment and care to Head Start programs, preschools, WIC offices, and community centers (Health Foundation for Western & Central New York 2017).

Positive Emotional Development and Learning Skills

A partnership between the Peter and Elizabeth C. Tower Foundation and the Health Foundation of Western and Central New York, Positive Emotional Development and Learning Skills (PEDALS) is a program for early childhood teachers that focuses on students' social-emotional skill development. PEDALS is implemented into preschool classrooms and prekindergarten child care settings in Erie and Niagara Counties, and includes a variety of activities and short lessons, as well as coaching support, that help build specific social-emotional skills in the classroom. Since 2012, PEDALS has reached more than 3,500 children in more than 114 classrooms and child care settings (PEDALS 2017).

Preschool Special Education

Preschool Special Education is a program of the New York State Education Department Office of Special Education and collaborates with local institutions and agencies to provide services, special programming, and evaluations to eligible children ages three to five with a disability that affects their learning. Services offered include a variety of therapy, assistive technology, parent education, and counseling and can be implemented in both group and individual settings. The program is administered through local units, largely through county health departments. The program is funded through the Federal Title V Maternal and Child Health Services Block Grant (NYSED n.d.).

Preventative Dentistry Program for High Risk Underserved Children Program

This program is aimed at mitigating oral health problems among children who live in communities where a high proportion of the population lives below 185 percent of the federal poverty line. The program provides screening, dental sealants, and other treatments (NYSDH August 2005).

Project Read of Wyoming County

Project Read is a nonprofit that has been working in Erie County for close to 40 years. The program encourages parents to be their children's first teachers. Project Read provides books and parenting materials to new parents at Wyoming County Community Hospitals as well as preschools and child care centers (Ferrini 2016).

Quality Insurance Project

See the Niagara County Early Child Care Quality Improvement Project.

Quality Scholars

Early childhood workers who participate in QUALITYstarsNY can receive funding for professional development through the Quality Scholars program. Eligible activities include noncredit-bearing training, college tuition, and training and assessment fees associated with certain credential programs (QUALITYstarsNY n.d.).

QUALITYstarsNY

QUALITYstarsNY is a five-star quality rating and improvement center for child care providers, with five stars representing the highest quality rating. Participating programs earn a rating through a points-based assessment process. QUALITYstarsNY has a set of standards for each category of provider: centers, public schools, and family providers. The program is voluntary, and by 2015, 196 programs had received quality ratings (QUALITYstarsNY 2016).

Reach Out and Read

Reach Out and Read is a nonprofit organization based in Massachusetts that works to incorporate books into pediatric care to encourage families to read together. Reach Out and Read has programs in place at pediatric practices nationally, including three in Cattaraugus County, three in Chautauqua County, six in Erie County, and four in Niagara County (Reach Out and Read 2017).

Read to Succeed Buffalo

Read to Succeed Buffalo (RTSB) works to improve literacy for children from birth to third grade by increasing literacy instruction and improving quality. They have two main programs: Community Alignment for Reading Excellence (CARE) and Imagination Library.

- CARE—Through CARE, RTSB partners with child care providers, preschools, and elementary schools, including Head Start, and provides onsite early literacy specialists to support instruction in the classroom or child care setting. They also offer professional development, literacy instruction resources, and regular assessments to understand the needs of the children they are working with.
- Imagination Library—RTSB additionally coordinates the local branch of Imagination Library, which is part of a national program created by Dolly Parton to provide free books to low-income children. Participants in Imagination Library receive a new book through the mail each month until they turn five. Children are eligible for Imagination Library from birth to age five and are residents of zip codes 14207, 14210, 14213, 14214, and 14215 (Read to Succeed Buffalo 2009).

Say Yes to Education Buffalo

Say Yes to Education Buffalo is a partnership of educators, parents, government officials, community organizations, foundations, and businesses coming together to improve education and invest in Buffalo's future workforce. A chapter of a national organization, the partnership combines comprehensive supports for pre-K–12 students with scholarships for postsecondary education to remove obstacles to postsecondary degree attainment.

This effort begins in early childhood through a series of programs, including a literacy campaign, child care quality improvement, and the Children's Center for Success (CCS). The CCS offers children therapy and training that is focused on combating early traumas faced by children living in poverty, as well as increasing their early vocabulary. These programs work to ensure that all children are developmentally ready to enter kindergarten, which increases their chances of succeeding in school in the future (U.S. Department of Education n.d.).

Schuyler Center for Analysis and Advocacy

The Schuyler Center is a policy and advocacy organization that researches issues impacting vulnerable families: child welfare; family economic security; health; and maternal, infant, and early childhood issues. The center provides policy analysis and legislative advocacy on these topics throughout New York (Schuyler Center for Analysis and Advocacy 2014).

Self-applied Fluoride and Education Rinsing Program

The Self-applied Fluoride and Education Rinsing Program (SAFER) is a collaboration with schools throughout the state in which participating students are given access to fluoride within their classrooms. SAFER targets rural communities with high poverty rates that also lack access to community fluoridation and dental care, and partners with local schools, Head Start centers, and migrant child care centers (NYSDH April 2008).

Older children who participate rinse with fluoride for one minute daily, while children ages three to five years old are given either a daily fluoride tablet or fluoride drops (NYSDH April 2008; NYSDH August 2005). The program serves more than 115,000 children each year (NYSDH August 2005). Children are eligible for this program if they attend a participating school or Head Start program and are living within a qualifying community (rural communities with high poverty rates that also lack access to community fluoridation and dental care) (NYSDH April 2008).

The Seneca Nation of Indians Early Childhood Learning Center

The Seneca Nation of Indians Early Childhood Learning Center provides child care, health and disability services, nutritious meals, and education to children living in communities on the Cattaraugus Reservation. Early childhood programs include child care and Head Start, both of which provide access to other health and nutrition services. These programs focus on four specific areas of development: social-emotional, physical, cognitive, and language (Seneca Nation of Indians 2017).

Sisters of Charity Hospital: CenteringPregnancy Group Prenatal Care

CenteringPregnancy Prenatal Care is offered at the Sisters of Charity Hospital in Buffalo and provides OB/GYN services, as well as support group sessions with other pregnant women. The program is intended to provide enhanced support to pregnant women and make quality prenatal care easily accessible. Appointments are flexible depending on the participants' schedules, and group sessions offer an opportunity for education and discussion on a variety of challenges women face when pregnant and giving birth (Catholic Health System 2017).

S-Miles To Go Mobile Dental Program

A program of the University of Buffalo School of Dental Medicine, the S-Miles to Go Mobile Dental Program provides dental services to children through their school district by using a mobile dental unit that includes most of the amenities of a more traditional office. S-Miles to Go serves children who reside in Allegany, Cattaraugus, Chautauqua, and Livingston counties, with plans to expand into nearby Counties (University at Buffalo n.d.).

Southern Tier Health Care System

The Southern Tier Health Care System (STHCS) is one of several rural health networks established by the New York State Department of Health to improve access to healthcare in rural communities. It provides a range of healthcare programs to residents of Allegany, Cattaraugus, and Chautauqua counties, including emergency medical services, overdose prevention, and insurance enrollment support, as well as a variety of services that target children's health specifically.

- **Child Health and Safety Team**—The Child Health and Safety Team works to prevent accidental child deaths in Allegany and Cattaraugus Counties by collaborating with local agencies to review incidences of child deaths and provide recommendations on how to avoid such deaths in the future. They also provide information on situations that can lead to accidental deaths, including unsafe sleep practices and drownings.
- **Cribs for Kids Partnership**—The STHCS partners with Cribs for Kids, a national organization, to raise awareness about crib safety and purchase safe cribs for low-income families (Southern Tier Health Care System Inc. n.d.). It also works with other local organizations that act as ambassador agencies for the program, including the Healthy Community Alliance in Jamestown (Healthy Community Alliance 2013).
- **Dental Committee**—The Dental Committee includes providers and agencies and is focused on recruiting additional professionals to the area, providing community outreach, and supporting dental education for preschool and elementary school students (Southern Tier Health Care System Inc. n.d.).

Success by 6

Success by 6, a national early childhood initiative implemented in Allegany, Cattaraugus, and Erie Counties, strives to support the development of young children and their families through a coalition of United Way member agencies. These agencies work together to coordinate services and apply evidence-based strategies that will improve program quality and outcomes. Success by 6 provides technical assistance to child care providers to help them improve care (United Way 2012).

Union-Administered Quality Child Care Grants

This program provides grants to registered family and licensed group family child care providers. The program helps child care providers with their small business needs. Funding is supported by the United Federation of Teachers and Civil Service Employees Association (CSEA) (VOICE CSEA 2015).

Universal Preschool

New York State's Universal Prekindergarten program, also known as UPK, was launched in 1998 with a goal of offering free preschool to all of the state's four-year-olds, regardless of their family's income. While that goal has not yet been met, the program does provide access to preschool for many of Western New York's four-year-olds, and currently, 49 percent of these children are enrolled. This figure understates total enrollment in preschool, since many of the state's low-income families have children enrolled in Head Start programs (National Institute for Early Education Research 2015).

Western New York has 97 school districts, and UPK is currently provided in 92 of these areas. Stakeholders indicated that programs having waiting lists limits access in some communities.

WIC

The federally funded Women, Infants, and Children (WIC) program provides nutrition education, breastfeeding support, nutritious food, and referrals to other social services as needed. Through the Farmers' Market Nutrition Program, WIC-eligible women and children can also receive funding to purchase locally grown fruits and vegetables at participating farmers markets throughout the state (NYSDH May 2013).

To be eligible for WIC in New York, an individual must have a dietary need and meet income requirements. Other criteria are that she must be pregnant or have a child from birth to six months, must be breastfeeding with a child up to 12 months, or must have a child from birth to age five. In 2016, New York State received \$492 million in federal funding to support the WIC program.

Agencies providing WIC services to Western New York counties include:

- Allegany County Health Department (serves Allegany County)
- Catholic Charities of Buffalo (serves Chautauqua, Erie, and Niagara Counties)
- Cattaraugus County Health and Social Services Departments (serves Cattaraugus County)
- Livingston County Health Department (serves Wyoming County)
- Oak Orchard Health (serves Genesee and Orleans Counties)

Winning Beginning

Winning Beginning is a statewide coalition composed of parents, practitioners, and researchers focused on advocating for and raising awareness of early childhood issues, including child care, early intervention, home visiting, and pre-K education.

Winning Beginning previously worked to support the implementation of QUALITYstarsNY, an Early Childhood Advisory Council project that helps to develop and implement legislation on quality and accreditation of early childhood providers. Current priorities include the implementation of universal prekindergarten and the creation of a statewide early childhood system that links providers and support services from birth to age five (Winning Beginning NY 2017).

YMCA

Many YMCAs throughout the eight-county region provide early childhood programming. A typical example is the Early Learning Readiness (ELR) program provided by the YMCA in Olean, New York. This program is designed to help children ages two to five develop the physical, verbal, and social skills needed to be ready for kindergarten. Many YMCAs also provide childcare and preschool, and have child watch programs that allow family members to utilize other services' classes provided by the YMCA (YMCA of the Twin Tiers Olean-Bradford-Wellsville 2017).

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APPENDIX 3: KEY INFORMANT INTERVIEW SUMMARY

INTRODUCTION

As a part of this research, Public Sector Consultants conducted interviews with experts on the early childhood system in Western New York. Fifteen key informants were interviewed between January and February 2017. Informants were asked about their perspective on what children need in order to be successful when they start kindergarten, about the region's assets and gaps in services, about ways in which early childhood funding could be better leveraged, and about how the early childhood system could be improved. In general, the interviewees had knowledge specific to one or two of the counties within the eight-county region, but not about the region in its entirety. Additionally, some interviewees were focused on state-level policies and programs, and did not share information specific to the Western New York region. The interview guide and a list of the individuals interviewed are included as attachments.

KINDERGARTEN READINESS QUALITIES

Interviewees shared their thoughts on what children and families in Western New York need to be healthy and ready for when they arrive at kindergarten. Many of the interviewees had similar comments about the importance of quality learning environments; quality, affordable child care; safe and secure families; access to regular medical care; and schools that are ready to teach children.

Quality Learning Environments

The majority of interviewees reported that children need quality learning environments. If they didn't use this exact term, they described aspects of a quality learning environment considered essential for a child to be healthy and ready for kindergarten. This aspect is necessary no matter where the child spends their time, including home, caregiver, preschool, and child care settings.

Features of a quality learning environment offered by interviewees ranged from the activities and materials available to the relationships needed for a child to thrive. They commented on the importance of accessible literacy materials, exposure to an expansive vocabulary, and as much background knowledge as possible, which could be strengthened by visiting available cultural institutions throughout the community. Interviewees said children should have age-appropriate toys, physical activities, and regular opportunities for social and emotional development. Other interviewees added that parents and caregivers need to be engaged in a child's learning, and that a child needs a secure attachment with caregivers. A couple of interviewees described situations where children with social and emotional challenges move from one child care setting to another because of their behavior, thus hampering the growth of a secure attachment with their caregiver, which increases the likelihood that they will not have a secure attachment at the next child care setting and will exhibit additional behavioral challenges. In order to have a quality learning environment, those who are providing care (i.e., parents, child care providers, relatives, or friends) may require training and ongoing supports.

Quality, Affordable Child Care

In addition to a quality learning environment, many interviewees shared that working parents need access to affordable, quality care for their child (with all aspects of the learning environment above), including quality preschool programs. Interviewees said that there are not enough high-quality care settings available or that those that are available are not affordable to the children who need them. They added that this issue is compounded by challenges with the child care subsidy reimbursement rates.

Safe and Secure Families

Another important aspect of being healthy and ready for kindergarten raised by several participants is that children must have safe and secure families. Interviewees stated that families must have all of their basic

needs (i.e., housing, healthy food, and clothing) addressed, social and emotional supports available, and safe neighborhoods. They also said that to support the whole family, families need to have access to important services, such as home visiting, parenting, and mental healthcare. One person added that services and supports need to be available to the family at or before a child's birth to ensure each child is living in a safe and secure home.

Medical Care

Several interviewees said that to ensure a healthy, properly developing child, families need healthcare coverage and access to regular medical care. Interviewees stated that families should have a medical home, a primary care physician, and well-child visits or regular check-ups. Others added that children need regular screenings for health and developmental milestones.

Ready Schools

The last area that interviewees identified as necessary for children to be healthy and ready for kindergarten was to have schools that are ready to teach the children coming to them. Interviewees added that schools need to be understanding of the wide array of children's abilities when entering kindergarten, and they must be able to work with every child. Participants said schools should do more to encourage parent involvement and to empower parents to be engaged in their child's learning. They explained that if the early childhood system was more aligned and coordinated with the schools, schools would be more prepared for the enrolling students. Schools could know or be engaged with families before children are enrolled in kindergarten, which could increase families' comfort and knowledge surrounding the schools and early childhood resources prior to kindergarten enrollment.

REGIONAL ASSETS

Interviewees shared what assets they believe are working well in Western New York to help support young children and their families. The features raised include availability of services, community commitment to early childhood, general features about the region, and the area's new universal preschool program.

Multiple participants commented that assets in one city or county are not necessarily working well in others. As noted above, most interviewees were familiar only with the city or county in which they work, and not about the region in its entirety and, as such, described what is working well only for certain areas. Additionally, over half of the interviewees spoke explicitly about Erie or Erie and Niagara Counties. A few had a statewide perspective that was not specific to Western New York, and a couple of interviewees were in Cattaraugus County.

Available Services

Most interviewees expressed positive comments about the quality of services available to families in their community, and many of those in Erie County commented that the diverse array of services available to families is a major asset. Several added that many services are offered in multiple languages with multilingual materials available to better serve its large refugee and immigrant population. Interviewees were quick to note, however, that although there are many different services available in general, they are not often well aligned or coordinated with each other and many families and service providers are unaware of what services are available or their eligibility requirements.

Several interviewees outside of Erie County described the positive programming offered through social service agencies or public schools, as there are fewer nongovernmental program options in rural areas.

The types of services shared as great assets include prevention-oriented social service agencies like WIC; refugee services, such as Jericho Road and the Priscilla Project; parenting programs, including those for dads and incarcerated parents; and services focused on improving the quality of child care providers. Several participants specifically mentioned Help Me Grow as helping the community and raising awareness about early childhood screenings.

Community Member Commitment

Another regional feature raised by several interviewees were the task forces, coalitions, and collaboratives focused specifically on early childhood or creating healthy communities. These groups, they said, as well as many early childhood-serving organizations, are made up of a committed workforce. Dedicated employees and groups have increased the awareness of the importance of early childhood throughout the community, which has led, interviewees say, to more early childhood investment, more early childhood screenings, and increased access to early intervention programs. Additionally, although more work is yet to be done, there is greater conversation taking place about the need for better alignment, and there is stronger collaboration happening between some programs (e.g., the coordination between area Head Start programs and the local public school district).

General Region

General qualities of the region were also shared as strong assets, especially by those outside of Erie County. Some participants mentioned that those who live in the region are great people; they are good neighbors who help each other out and create strong communities. Several others added that the region has good educational options, especially for those who can afford them, as well as a low cost of living and beautiful scenery. Those in Erie County added that there is great diversity among the population, and another interviewee shared that there has been strong infrastructure investment in the area that has made it a better place for all, including young children and their families.

Universal Preschool

Some interviewees reported that New York's policy to offer universal preschool has helped young children and their families access quality preschool programs. Interviewees, however, added that slots for quality programs are limited, and because the preschool program lasts only a few hours a day, it may not be logistically accessible to working parents. Nevertheless, universal preschool has increased access for many families. One interviewee added that in her area, there is no waitlist for preschool slots, which is interpreted as enrollment availability for everyone.

Other Assets

A handful of other regional assets were mentioned by three or fewer people. Some interviewees shared that the quality of available child care is getting better, although it is still unaffordable to many families. Others said that the colleges and universities in the area, especially Niagara University, help support early childhood education by providing research, thought leadership, and programs to support and train child care providers.

A couple of interviewees reported that investment by foundations in early childhood programs is helping make programs more available while also improving program quality. One interviewee said that the high rate of health insurance coverage for all people in New York, including its children, is helpful. Another reported that starting in January 2018, New York will offer paid family leave, which will provide additional support to many working parents.

REGIONAL GAPS AND CHALLENGES

Interviewees shared several concerns about the region regarding things that are not working well and gaps in services and supports to families. The challenges raised by interviewees ranged significantly and included a disconnected early childhood system, underfunded child care subsidies and incongruous child care policies, inadequate access to child care and other services, high poverty rates, and missing early childhood system leadership.

System Alignment

Most interviewees raised concerns related to a poorly coordinated early childhood system. Interviewees reported that services and organizations are often siloed from each other and are very difficult to navigate. Families and service providers, including pediatricians, are unaware of the services available to provide support to young children and their families. Programs for children from birth to age three may not be coordinated with programs for children in pre-K, and pre-K programs may not be coordinated with the public schools and their

services. Another interviewee shared that some programs are duplicative—with varying quality—because of the siloes and because programs provide services based on what the program can get funding for instead of having funding for what is specifically needed in that community. Programs, they said, are not being held accountable for their services or outcomes.

Interviewees said that Western New York's early childhood system is uncoordinated, in part, because there is no aligned system at the state level and because the state allows each county to set their own policies, including for child care subsidy eligibility. Interviewees added that there is inadequate leadership in this area to convene early childhood stakeholders, which could help break down the silos and create more service coordination, or could help create a comprehensive early childhood strategic plan. There is no data to support which programs are most effective, which have the best outcomes, or which have a strong return on investment.

Child Care Subsidies

Concerns with the child care subsidies were raised by several interviewees. Interviewees consistently described the subsidy child care reimbursements providers receive as too low, which leads to too few providers participating, especially quality providers. It also contributes to low provider pay and high provider turnover, which further decreases child care quality.

Child care subsidy policies are set by each county, including income eligibility, work or school requirements, and copayment requirements. If a family moves from one New York county into another, they may not have the same benefits they had previously, or the benefit may be much more expensive for them to utilize. Families are generally unaware of these differences and may be surprised to find they do not have the same benefit access when they move.

The subsidies, interviewees noted, are inadequately funded. Although the income eligibility threshold may be set at a specific level that varies by county, there may not be enough funding to cover all those who qualify, so they are not enrolled. Interviewees added that lack of funding is such an issue in some counties that they no longer maintain a wait list for subsidy enrollment, meaning that a family may not even be able to apply for this support. If a family is currently receiving the reimbursement, but then becomes ineligible, even if for a very short time due to a job change, they would not be able to re-enroll.

Additionally, one interviewee added that, given what is known about the importance of quality child care, public money should not be spent on low-quality care. Subsidies should go toward quality care or be used to incentivize using higher-quality care.

Access to Quality Child Care

The limited access to quality child care is a major concern across the region, according to several interviewees. Some reported that quality care exists if a family can afford it, and others reported that there are not enough quality slots available regardless of income. Unfortunately, because of high program costs, low subsidy reimbursement rates, and strict licensing regulations with unfunded mandates, some programs and providers close, further reducing access to care.

It was mentioned that access to quality care is especially tough for some populations such as those in rural areas and those with trauma histories or social and emotional challenges. It may be cost prohibitive to build or develop quality, center-based child care in a rural area because of the low population density as there may not be enough children to enroll in it. Families with children who have behavioral challenges or special needs often struggle to find quality care staffed by those with proper training.

Access to quality care is inhibited in part because an insufficient number of providers are fully trained in child development and quality practices. There is not enough investment in workforce training, provider coaching, or ongoing support to assist providers in becoming and maintaining a quality program or to help them when working with a child with special needs and challenges. Additionally, interviewees noted that quality improvement programs and quality-improvement rating systems are not available across the region, particularly in rural communities. The low provider pay discourages people from entering the child development profession, investing in improving their service, or remaining in business, leading to high rates of provider turnover and lower-quality providers.

Access to Services

Several interviewees shared that families often have limited access to other services beyond child care. They reported that despite high health insurance coverage rates, there is need for greater access to general healthcare services as well as for the specific areas of oral and mental healthcare, maternal and child health, and pediatric-focused physical and mental healthcare providers. They also reported there is not enough funding invested in prevention, early intervention, or home visiting to have these important services be widely available to those who need them.

Interviewees noted that there are no universal screenings for children. One person added that only a portion of pediatricians do regular screenings with the children they see. Without more regular screenings and a more coordinated way to identify children who need services, those who would benefit the most may not be aware of, referred to, or able to access these services.

Poverty

A challenge across the region, according to interviewees, is its high rate of poverty, especially childhood poverty. Many families struggle to afford basic needs like housing and food, let alone transportation that helps them access services and supports. Those with few or no financial resources have less access to education, child care, healthcare, or other services. Additionally, families in poverty can have needs in many different areas, and with poorly coordinated services, they may not receive all of the care they need.

Other

A variety of other challenges were raised by three or fewer interviewees. These issues include lead contamination, especially within old housing stock; low rates of adult literacy, limiting parents' ability to encourage child literacy; teen pregnancies; and cumbersome and expensive regulations.

UNDERSERVED POPULATIONS

Interviewees shared which populations they see as inadequately served by the current system and described barriers that limit their access to services and care.

Missed Populations

Many different groups of people were identified as being missed by the larger early childhood system. Several interviewees identified that those who are unaware of services are definitely not accessing them. People may be unaware of available services because they are not connected to any other services, including the school system, or may not use many healthcare services outside of occasional emergency room visit so that someone could refer or connect them with other services. Other families may be unaware because they are English-language learners or do not speak English at all, or because services may not even be available in a language they understand. Another group that may be absent from services are those in poverty, this group may not be connected to services because of the economic barriers to accessing them.

Additionally, interviewees said that those who are just outside of the service eligibility requirements often fall through the cracks. These are families whose incomes are a little too high to qualify or whose children have behaviors that are a challenge, but do not fit the requirements of a specific program. Other groups reportedly being missed include those who are disenfranchised by the system or who do not trust service providers, those without transportation to reach services, and people of color because they are not being screened for services, are unaware of services, or for some other reason.

Service Barriers

Participants identified a handful of barriers that keep children and families from accessing needed care. One of the issues raised most often, also mentioned above, is limited transportation to reach services. This is especially true in rural areas, but interviewees reported that most cities across Western New York also have limited public transit systems in place. System coordination and a lack of screenings are another major barrier. Families are not being identified through screenings or other system involvement to be connected to necessary care. Funding for services and programs, and especially for the child care subsidies, keeps many families from having

access to child care, early intervention programs, and others. Additionally, a few interviewees said that the scant availability of quality child care is a challenge. Quality care is unavailable, in part, because of high staff turnover from low pay and stringent requirements, as well as lack of training in managing complex behavioral issues and children with social and emotional challenges.

RECOMMENDATIONS FOR IMPROVEMENT

Interviewees were asked how state, local, nonprofit, and philanthropic organizations could better work together to meet the needs of young children and their families. They were also asked for the one change they would make to the system to improve outcomes for young children in Western New York. Many of the recommendations were directly related to the gaps and barriers reported above.

Create an Aligned and Coordinated Early Childhood System

Almost every interviewee recommended that state, local, nonprofit, and philanthropic organizations could better work together by breaking down system siloes and developing an aligned, coordinated early childhood system. This was also regularly recommended as one thing needed to improve the system. Interviewees described several aspects of an improved early childhood system, including forming a dedicated early childhood group with strong leadership and shared data, creating a comprehensive strategic plan that uses this data, establishing funding priorities and practices, and increasing early childhood investment.

Form a Coalition or Task Force

In order to create a more coordinated system, interviewees reported that there needs to be a dedicated group charged with designing a new system. The coalition needs to have cross-system partnership with a broad array of partners, including schools, human and social service providers, local government, healthcare providers, business representatives, and parents. Additionally, there should be regular opportunities for early childhood stakeholders to meet and talk with each other, build relationships, and increase the collective understanding of who can provide what services.

Interviewees shared that this effort needs strong leadership, which could be provided by an umbrella organization, philanthropy, or local government. The entity leading the effort should, however, have people paid to do this work, so that they can focus on organizing and moving it forward.

Develop a Comprehensive Plan

According to participants, there needs to be a comprehensive early childhood strategic plan that drives the design of the new system. The plan should include a review of state and local policies that affect early childhood programs and providers (e.g., child care subsidies and age requirements for pre-k), describe the gaps in services and community needs, create community priorities, and establish goals and intended outcomes on which to base new funding priorities. Interviewees added that the plan should, where possible, align with any related state goals. Although, as reported by some participants, one reason for the difficulty in coordinating early childhood services at the local level is due to a poorly aligned state system where families are served by over a dozen different state departments.

Interviewees reported needing to capture and share data, which could be done through an early childhood coalition. Data help improve transparency and accountability, and are needed to gauge how the community is doing, identify its biggest challenges, and demonstrate progress on its established goals.

A clear plan could also facilitate the creation of impactful messaging around the importance of early childhood and its current needs, as requested by several interviewees. Clear messages could help facilitate more awareness of early childhood, help the community speak with a more unified voice, and help engage more service partners and funders in early childhood.

Establish Funding Priorities and Practices

Several interviewees commented on how funding is allocated and used in the community for early childhood. Through established early childhood goals and funding priorities, there should be opportunities to share or braid funding, to repurpose existing funding, and to leverage funding across partners. One interviewee recommended

creating an early childhood or preschool community bond to generate more funding for needed services.

Interviewees said that providers need to be held accountable for their outcomes and for providing quality services. As a result, funding could be directed toward effective services and programs as well as to reducing duplicative services.

With a more coordinated early childhood system, interviewees said, the system will become more family focused, allow families and providers to easily navigate and access services, and ensure universal screenings so families are identified prior to needing more expensive and intensive services. This sort of system will help families and their children be healthy and will ensure that children are ready for kindergarten.

Invest in Early Childhood Care and Workforce

In addition to creating a more coordinated system, many interviewees stated that Western New York should invest more in and improve the quality of early childhood care and its workforce. They want quality child care to be more affordable and more accessible to all families, to have the subsidy fully funded so all those eligible receive it, and to reassess the subsidy so that it encourages the use of quality child care. According to interviewees, additional quality preschool slots are also necessary.

Participants recommended several different ways to support a quality workforce. They suggested offering scholarships or free access to trainings and educational opportunities. They also suggested free or reduced cost to complete steps required for child care licensing or a quality-improvement rating system. Interviewees suggested investing in early childhood educational programs to encourage and incentivize current and future providers to obtain an early childhood certificate or degree in early childhood education, which could increase the number of available quality providers. Interviewees added that trainings must consider adult learning and include mentoring, coaching, and ongoing support.

Other Recommendations

A few interviewees made other recommendations to improve the early childhood system. Others recommended more general investment in early childhood programs, including in home visiting options. One interviewee recommended requiring children to attend kindergarten at five years of age.

LEVERAGED FUNDING

Interviewees were asked where they thought private philanthropy and public resources could make the biggest difference in the early childhood system. Most interviewees recommended funding to create a more coordinated and aligned system and to improve child care quality, access, and workforce. These recommendations were for both private philanthropy and for public resources. However, there were more recommendations for private philanthropy to be the neutral leader for a more coordinated system and to fund the research and policy analysis needed to develop a comprehensive strategic plan. Some interviewees stated that vast public resources need to be invested in the early childhood system to make it a truly sustainable effort and to show the community's commitment to early childhood.

In addition to the two main recommendations above, interviewees recommended investment in infrastructure and in pilot projects and specific programs.

Infrastructure

Some participants suggested investing public resources in infrastructure development, especially for public transportation. Access to transportation, which was one of the frequently referenced barriers, would help support families' access to healthcare services, family and social supports, and necessary services such as early intervention or preschool programs. One interviewee added that public resources should also be invested in increasing access to broadband or in improving connections with families in order to provide them with books and other resources.

Programs and Projects

Several interviewees recommended investments in specific programs, which are mentioned below.

- Programs that address the underlying causes of poverty and generational poverty. The interviewee recommended using the teachings of Dr. Donna Beegle. She recommends connecting those in poverty with those with greater financial resources through mentorship to be role models and helps them create connections to find jobs and education resources.
- Programs that employ evidence-based strategies on adult learning behavior for child care workforce development.
- Pilot projects that provide healthcare and social services within a child care setting to work with families with the greatest need. Support should be provided to help parents navigate the system, secure employment, and help elevate them out of poverty, while their child is enrolled in a quality child care setting.
- Public schools to ensure teachers and administrators are educated in early childhood development and practices so the staff are ready to receive the incoming kindergarteners.
- Public schools to be able to provide and or house preschool programs. Including preschool within the school building can help connect families to the school system prior to kindergarten enrollment and encourage increased parent engagement in the child's education.
- Summer programs for children before they enter preschool or kindergarten to encourage a positive transition into an educational setting. This could also help connect families with other services earlier than if they waited to enroll their children in kindergarten.
- Home visiting programs that can provide parenting support, ensure a healthy home, and link families to other services they may need.
- Child development specialists available in pediatrician and healthcare practices. Physicians, including pediatricians, are usually not child development specialists and may not conduct screenings or see developmental delays during visits.
- Universal screening policies, education, and awareness for both child development and maternal health and depression. Screenings can be done during doctor visits, as well as through other key services.

ATTACHMENT A: KEY INFORMANT INTERVIEWEES

- Susan Antos, Senior Staff Attorney, Empire Justice Center
- Anne Botticelli, Chief Academic Officer, Buffalo Public Schools
- Kate Breslin, Schuyler Center for Analysis and Advocacy
- Marie Cannon, First Deputy Commissioner, Erie County Department of Social Services
- Sherry Cleary, Quality Stars NY, NY Early Childhood Professional Development Institute
- Dr. Debra Colley, Niagara University
- Ken Franasiak, CEO, Calamar Enterprises
- Ira Katzenstein, Cattaraugus County Project Head Start
- Phyllis McBride, Erie County CAO Head Start
- Lynn Pullano, Help Me Grow Western NY
- Dr. Kathy Ralabate Doody, Buffalo State College
- David Rust, CEO, Say Yes to Education Buffalo

- Anne Ryan, Executive Director, Read to Succeed
- Dr. Stephen Turkovich, Women and Children’s Hospital of Buffalo
- Tina Zerbian, CEO, Cattaraugus Community Action

ATTACHMENT B: INTERVIEW GUIDE

Interviewer Introduction

Liftoff—Western New York Early Childhood Funders for Change” is working to document policies, programs, funding streams, and overall systems that impact young children in the area, including their health, development, and early childhood education. For this project, we are defining young children as children from birth to age five. This work is also seeking to identify the region’s assets and gaps in service delivery and to identify high-impact strategies that can result in systemwide change improving numerous outcomes at once.

Our work includes research, focus groups, and key informant interviews with experts. You have been identified as an expert whose opinions would be extremely valuable for this work because of your broad understanding of the issues facing young children and their families in Western New York and your ability to think across systems. We very much appreciate your taking the time to share your expertise with us today.

Interview Questions

1. What do families and young children in Western New York need to be healthy and ready for school when they arrive at kindergarten?
2. What two or three things are working well for young children and their families in Western New York?
3. What are the region’s biggest assets for young children?
4. What things are not working as well for young children and their families in Western New York?
5. Are there gaps in Western New York’s early childhood system?
6. Are there children who are currently not being served by the system (or by key programs) who should be? Who is not being served and why are they not being served?
7. What are the biggest barriers preventing young children and their families from being served?
8. How can state, local, nonprofit, and philanthropic partners better work together to support and complement each other to meet the needs of young children and their families? Please give specifics
9. If you could make one change to the system to improve outcomes for young children in Western New York, what would it be?
10. What are the areas in the system of early care where private philanthropy can make the largest difference?
11. Where can public resources make the greatest difference?
12. Do you have any closing thoughts you’d like to share on this topic?

Thank you very much for your assistance. If you think of any additional items that you’d like to share after we are done talking, please email me at kvandorn@publicsectorconsultants.com. Thank you again. We very much appreciate your assistance with this project.

APPENDIX 4: EARLY CHILDHOOD FOCUS GROUPS SUMMARY

INTRODUCTION

As part of the research to document the assets and gaps in Western New York's early childhood system, PSC conducted five focus groups with key stakeholders. Focus groups were hosted by Allegany County United Way, United Way of Southern Chautauqua County, United Way of Buffalo and Erie County, Niagara University, and United Way of Orleans County. Participants included service providers, partners, government agencies, child care providers, public school representatives, and parents from Allegany, Wyoming, Cattaraugus, Chautauqua, Erie, Niagara, Orleans, and Genesee Counties. A list of focus groups and participants is included as an attachment.

FOCUS GROUP DEMOGRAPHICS

Focus group attendees were asked to fill out a demographics form. They were told the form was voluntary and that they should skip any questions they would prefer not to answer. Forty-nine attendees answered the question asking for participant gender, and of the respondents, 44 (90 percent) indicated that they were female and five (10 percent) that they were male.

Of the 53 respondents who answered the question on race, 50 indicated they were white and three selected African American. Participants did not select other races. Fifty-two respondents answered the question on family income. Two respondents indicated annual family income of less than \$20,000 per year; one indicated income of between \$20,000 and \$35,000; five indicated income between \$35,000 and \$49,000; 15 indicated income between \$50,000 and \$75,000; and 29 respondents indicated annual family income in excess of \$75,000 per year.

SUMMARY OF FOCUS GROUP DISCUSSION

To drive discussion, PSC asked focus group participants about programs that are working well or not working well, in what ways young children or families are not being served, the challenges that families and young children are facing, and opportunities for improvement in Western New York's child care system. The following provides a summary of participant discussion across several categories of interest.

Affordability and Access

All focus groups discussed the problem of affordability—that not everyone can afford child care due to high costs and insufficiency of subsidies. Participants noted that it is particularly hard for parents to qualify for the Head Start subsidy because New York State has a higher minimum wage than 48 other states. One participant said:

"Families that earn more than the income eligibility requirements for subsidized child care but can't afford it on their own are left out. Children with disabilities can be approved for child care, but there are not enough services available to help families who are over income thresholds."

Most focus groups identified increasing funding for child care services and raising the income threshold for qualifying for the survey as opportunities. One participant noted that employers should be encouraged to provide well-paying jobs so that workers can afford daycare. One stakeholder also wished workers could have consistent working hours that would enable them to spend more time with their children.

Participants also discussed the lack of child care options that meet working families' needs. For example, preschool and certain special education programs are often either a half day or full day, with full day being 9 AM

to 2 PM, and these options often do not align with parents' schedules. However, in some cases, providers are extending their hours; for example, in Orleans County, Head Start is moving from half-day sessions to full day, providing expanded learning opportunities as well as full-day child care.

Focus group participants discussed the lack of available providers, lack of regulated programs, and the general disinterest in starting new programs. Several stakeholders noted that the expansion of state-funded preschool offerings was drawing three- and four-year-olds out of child care settings, which was forcing many of these locations to close. In Chautauqua County, one stakeholder noted that 13 child care centers had closed in the last year.

Most focus groups talked about the lack of transportation options to support child care. The Orleans County focus group noted that funding is needed for transportation options that meet broader and greater needs than school-specific transportation. The stakeholders also noted there are good programs available, but the transportation and other associated costs are too high for many families, and small agencies cannot afford to provide families with this service.

Quality of Care

Some participants noted that QUALITYstarsNY, New York's child care rating program, is improving system quality; however, constantly changing regulatory standards are a challenge. Some focus group participants noted necessary improvements for evaluating child care programs, including a better template for evaluating programs and their results, better agency coordination, and the implementation of Parents Activating Children's Early Readiness skills for every family in child care services.

In general, focus group participants felt that Early Head Start and Head Start programs are good-quality programs in their communities. Some respondents in Chautauqua and Cattaraugus Counties commented that home child care, as well as community-based child care with school oversight, are also of good quality.

Services for Families and Children

Focus group participants noted that home visiting programs are being expanded somewhat in Western New York and are generally effective, though expensive to execute. For example, Healthy Families-Niagara is a home visiting and education program that works well—98 percent of families receiving assistance are no longer on assistance after the program. There are other parent-focused support programs that are seeing success, including:

- The Parent-Child Home Program, based on a national model, serves 150 families in the Buffalo area.
- Life coaches serve families in Chautauqua and Cattaraugus Counties.
- Parents and Children Together is an ongoing collaboration in the local school district through which parents attend class with their children, which helps build relationships and increases involvement. Parents can also get involved in English as a second language classes and GED programs.
- The Healthy Steps program works with a child development specialist to provide an intergenerational approach for medical and child development.
- In Niagara, the Positive Emotional Development and Learning Skills (PEDALS) Initiative implements a social coaching curriculum.
- In Buffalo, the Priscilla Project provides support for people who are pregnant and have never experienced American healthcare systems, including doula and prenatal aid for six months.
- In Buffalo, there is a unique network of breastfeeding supports, including 29 sites designated as breastfeeding friendly and 200 certified lactation counselors.

In nearly all focus groups, participants noted that there is a lack of early intervention and prevention services. Participants discussed the lack of support for health services for parents and children—some noted that healthcare professionals do not take early intervention seriously enough, and that pediatricians need help to give parents tools to address their concerns with their children. Many indicated that services are not reaching

children early enough—doctors are not making connections with children’s health and certain speech, nonmotor, and other physical issues.

Some participants noted that in many cases, children will not qualify for services if they are not delayed enough; providers often wait for children to have more serious issues before they can receive the help they need. For example, some children do not qualify for services during committee evaluation even though they have behavioral issues because they are not eligible because their on academic performance does not meet the threshold for services. Many participants noted that families are just not aware of the services that are available to them, and that families avoid pursuing mental health services because of stigma. Participants also noted that professional certificates for early childhood mental health are not available in New York State, leading to a lack of talent and expertise in this skill area. One participant noted:

“In Orleans County, schools test five areas: cognitive, speech, fine motor and gross motor, social, and emotional. Children have to test below 33 percent in one area or below 25 percent in two areas to qualify for programs. From the three through five level, we have a very specific set of criteria we are looking for. Twenty-two children with speech needs are currently going unserved because there are no providers. Some children who haven’t had services or are at risk for substantial regression qualify for a six-month summer program. The school system is trying to close the gap for the kids between ages three through five.”

Many focus group participants provided some suggestions for improvement, including focusing more services toward families of middle income or higher, noting that stigma exists for all socioeconomic levels when children and families need help. Participants suggested that programs and services should put families first, rather than the current systems-focused approach. Many participants noted the need to connect with parents as early as possible in the child development timeline, including talking about prenatal health and preparing the home for a child’s arrival. Some indicated that home visiting works well, but is not available for all families, and suggested that it be made more easily available to reduce stigma. One participant stated:

“The first and strongest system in a child’s life should be the family—we need to do a better job of understanding what parents may or may not know.”

Talent

Most focus groups discussed the lack of skilled staff in Western New York, especially in rural areas. Focus group participants noted that wages are not high enough to attract workers from New York City, and that upstate graduates are heading back to the city for higher wages and urban lifestyle. Many indicated that wages for specialized therapists are too low, and as a result, the area lacks speech, occupational, and physical therapists. Some participants also discussed the importance of having greater diversity in the schools and child care facilities, as well as Spanish-speaking staff.

While the consensus in the rural focus groups was that qualified professionals are not attracted to work in their communities, many felt that there are a lot of young people in communities that would stay if they had the opportunity. The focus groups largely felt that increased economic prosperity would lead to more quality jobs and increase talent attraction and retention.

Collaboration, Community, and Culture

Overall, the focus groups reported that collaboration in child care is continually improving, with Child Care Resource Networks growing and providing education, training, and technical assistance programs for providers in the area. Communication between agencies and school districts is good, and Western New York has seen increased support from business leaders as they begin to view child care as an investment in the future workforce. Other supportive child care partners listed by focus group participants included the YMCA, PEDALS, Healthy Steps, Niagara County Quality Improvement Program (QIP), perinatal and prenatal groups, and county departments of social services.

Some focus group participants noted challenges with collaboration, particularly in coordination between agencies, noting that different agencies, including Office of Child and Family Services, the Department of Education, and Department of Health and Human Services, handle different aspects of the system. Participants were divided on the role school districts should play in early childhood. Some service providers felt as if school

districts are taking over the defined services, and that it is not cost effective for school districts to do this because of their school-specific regulations. Others felt early childhood programs should be in places where people already go, and that public schools are ideal places for partnerships with early child care providers.

Many of the participants discussed opportunities for increased collaboration, particularly with the business community, as well as the Child Care Council, a business group for child care providers. In counties where business is expanding, participants noted an opportunity for companies to understand the return on investment for supporting early childhood, as well as realize their role in supporting young children, which may include corporate sponsorships of early childhood programs and provision of family-friendly workplace practices. One participant noted:

“Employers and businesses need to understand the importance of quality care and what it means to them as an employer. Staff are less productive if their child care is inconsistent or poor quality.”

Participants also noted opportunities to unify advocacy messages regarding early childhood funding, ensuring that school boards, policymakers, parents, and the public are aware of the issues in their communities and the contribution that child care and early childhood services can make to the workforce. Some discussed ensuring that the early childhood community is advocating on the local, state, and national levels so that decision makers realize that spending early in a child’s life can impact the child significantly and reduce the burden on other systems.

Some participants talked about the broader public’s need for education regarding the significance of prenatal to age five development, as well as parents’ likelihood of benefiting from a model for giving their children a good start. Some suggested better-coordinated applications that could serve multiple programs, as well as a centralized data system that would make the application less onerous for parents and improve coordination with providers.

ATTACHMENT A: FOCUS GROUP PARTICIPANTS

Host: United Way of Orleans County

There were five participants in the Orleans County focus group, including:

- Orleans and Genesee County Head Start Program
- Community Action of Orleans and Genesee
- United Way of Orleans County
- Rainbow Preschool
- Albion Central School

Host: United Way of Buffalo and Erie County

There were 13 participants in the Buffalo and Erie County focus group, including:

- Child and Adolescent Services
- United Way
- Healthy Start Healthy Future for All
- Every Person Influences Children Inc.
- Community Action Organization
- Child Care Resource Network
- Western New York Early Childhood Funders Collaborative
- 211 Western New York

Host: United Way of Southern Chautauqua County

There were 14 participants in the Cattaraugus and Chautauqua County focus group, including:

- United Way of Southern Chautauqua County
- United Way of Northern Chautauqua County
- Jamestown Community College and Chautauqua Lake Child Care Center
- Elementary School Principal
- Chautauqua County
- Jamestown Community Learning Council
- Chautauqua Child Care Council
- QUALITYstarsNY
- Teacher educator
- Preschool teacher
- Chautauqua Opportunities
- Early intervention and preschool programs for Chautauqua County and children with special healthcare needs
- Maternal and Infant Health Program at Chautauqua County
- In-home child care provider with a master's degree in education

Host: Allegany County United Way

There were ten participants in the Allegany county focus group, including:

- Albert University
- United Way of Allegany County
- ACCORD Corporation Child Care Services
- Assistant Library Program Director and former K-12 Librarian
- Trinity Christian Daycare
- Wellsville School Board
- Western Allegany County Community Action
- Houghton College Teacher Education Program
- Allegany County United Way
- Department of Social Services

Host: Niagara University

There were 24 participants in the Niagara County focus group, including:

- Niagara University
- Niagara University—Quality Improvement Program (QIP)
- Parent of 2 young children, and graduate from Niagara University in Early Child care
- Closing the Gap
- Parent and provider of preschool for behaviorally challenged children through Liberty Post
- YMCA
- Community Child Care Clearinghouse of Niagara
- Erie County Department of Social Services

- Niagara county childhood quality improvement project and PHD candidate
- Every Person Influences Children
- Empower (formerly Niagara Cerebral Palsy)
- Help Me Grow
- Pediatrician in the city of Buffalo
- Niagara Falls City School District
- Niagara University Continuous Improvement Program, former daycare provider, and parent, who runs a parenting education for prenatal and neonatal families
- Liftoff

ATTACHMENT B: FOCUS GROUP SCRIPT

Location: _____

Host Name: _____

Host Organization: _____

Setup and Arrival (20 Minutes: Occurs Before Scheduled Start time)

Facilitator Instructions: Introduce yourself and welcome participants individually as they arrive; thank each for coming. Start the discussion once all expected participants have arrived. Even if it appears that everyone has not arrived, start the discussion within a few minutes of the scheduled start time and tell the participants that you want to be respectful of their time. [If the weather is inclement, delay start time for a few minutes.]

Opening (Five to Ten Minutes)

Facilitator Instructions: Thank the participants as a group for agreeing to participate in the discussion. Thank the host and the host organization for their hospitality. Introduce yourself to the group. Tell them you are from Public Sector Consultants, a private research and consulting firm based in Lansing, Michigan, and that you are doing research on behalf of Liftoff.

Follow script below:

Facilitator Script: *An extensive research base has demonstrated that the first years of a child's life are the most critical for development. Positive experiences and environmental factors can put children on a path to success, while negative experiences and environmental factors can set children back.*

The right investments and programs can make a tremendous difference in young lives and help make sure that children arrive at kindergarten on pace and ready to succeed.

Liftoff is interested in understanding what is working now for young children in Western New York, what is not working, and how the system can be improved.

Your firsthand experience with Western New York's early childhood system, whether as a parent, service provider, or in another role, is invaluable. You know best how things are working on the ground. We want to learn from your experiences and expertise, and we appreciate your taking time out of your busy schedule to share your knowledge.

Everything you say in this meeting will be anonymous; you will not be identified by name in the report. We may include some of your specific comments, but we will not attribute them to you. Also, we have handed out a form so that we can track the demographics of the room. Please fill out this form, but do not include your name; you can skip any questions you would prefer not to answer.

Before we go any further, let's take a few minutes for introductions. We would like everyone to have a sense of who is in the room. Please take a minute or two to share your name and your organization if you are representing one. If you are a parent, please let us know the number of children in your family and how old they are.

What Works (Ten Minutes)

Facilitator Script: *We would like to start with a conversation about what is working for young children and their families in your community. When I say “young children” I am referring to children from birth through age five.*

1. *What programs or services for young children and their families are working well in your neighborhood or community? What is happening that makes these programs work? [Probe: ask participants to provide more detail or specific examples if necessary.]*

Community Challenges (20 Minutes)

Facilitator Script: *Now, we’d like to discuss some of the challenges young children in your community face.*

1. *In your opinion, what are the greatest challenges that families with young children deal with in your neighborhood or community? [Do not probe. Allow participants to respond with either broad life challenges, or challenges specific to helping children be ready to succeed in school or both. The directions participants go on this question will be informative.]*
2. *Are there programs or services for young children and their families in your community that could work better? [Probe: make sure to get the names of specific programs; also, ask how could these programs work better?]*
3. *Are there young children and families in your community that are not being served that should be? [Probe: who is not being served? why do you think they are not being served?]*
4. *What barriers are preventing some young children and their families from being served?*

Opportunities for Improvement (25 Minutes)

Facilitator Script: *Now, we’d like to discuss opportunities to make the system work better for children in your community.*

1. *If you could make one change to the system to improve outcomes for young children in your community, what would it be? [Probe for specifics.]*
2. *What changes to the system or to specific programs do you think would have the biggest impact? [Probe: why is that?]*
3. *How could programs that serve young children better connect with and reach children and families in your community?*
4. *Who would you like to see take a bigger role in serving young children in your community? [Probe: how would this help?]*
5. *Do you have any other thoughts on how to improve outcomes for young children in your community?*

Close

Facilitator Instructions: Thank everyone for coming. Thank the host again. Collect the demographic information sheet.

APPENDIX 5: PARENT FOCUS GROUP

Seven focus groups were conducted as part of this research: six conducted by Daemen College and one by the Liftoff. The focus groups were held in Allegany, Cattaraugus, Chautauqua, Erie, Niagara, Orleans, and Wyoming Counties. A total of 61 parents participated in the focus groups and were responsible for 161 children, 101 of which were ages zero to five.¹ This appendix contains the notes from these focus groups.

FOCUS GROUP NOTES

Disclaimer: The following notes come directly from the meetings and the parents' input. Correct or not, the notes reflect parents' opinions and perspectives as they have experienced them. We did not attempt to fact check these statements.

Social Services

Many families in Western New York struggle with economic challenges, such as unemployment, underemployment, and poverty, as well as related social conditions, including addiction, domestic violence, and mental health disorders.

Families view the social services they qualify for—WIC, Head Start, and UPK—as critical. The WIC program is particularly valued, especially the special farmers market WIC coupons. Some participants advocated for fresh fruits and vegetables and would prefer that the program offer these in lieu of juice.

Participants noted that their experiences using WIC at some stores were better than others. Some stores seemed to have staff who were better educated about the program; however, several participants cited disputes with cashiers about what items qualify for WIC. In many cases, the WIC recipient must request a store manager to settle such disputes, resulting in socially uncomfortable situations.

With WIC, the recipient is required to get everything on the check in order to redeem it. One woman detailed a situation in which the store was out of fresh milk, so she did not get everything on her list. This resulted in the store invalidating her full check and forcing her to forfeit the groceries she just shopped for.

In addition to government-provided services, many families receive vital assistance from churches and community-based groups. These groups provide food, clothing, diapers, and holiday gifts. Some participants revealed they were unable to participate in identified programs and services because they did not meet income eligibility requirements, could not pay the required fees, or there were not enough slots available. This was a source of great frustration, especially for parents who felt their child “needed” or could clearly benefit from a service.

Participants in one focus group noted that there were no organized programs for children of domestic violence, alcohol and drug abuse addicts, incarcerated parents, etc. Children who pass indirectly through the court system, because of their parent's injudiciousness, are affected. Many of the children feel isolated and do not realize that other children are going through the same or similar situations. In these cases, parents split up and get back together multiple times—quite often leaving the grandparents to raise these children when they need support themselves.

Child Care

Parents also articulated challenges with child care availability. A grandmother in one group was 86th on the waiting list for child care when she began seeking services. Many participants indicated that while they would prefer their child be cared for at a high-quality center, they simply could not afford it. As a result, many relied on family members (especially grandparents), friends, or neighbors. Parents felt this care was not of the highest quality, but that they were “doing the best they could.” They acknowledged this would likely result in their children receiving education through “television programs” and being less prepared for school.

¹ We use the term parent in this section to refer to parents, grandparents, and other child care givers.

After-hours care was extremely limited as well. At one focus group, parents mentioned that many of Wyoming County's largest employers require open availability, which often includes late shifts, and finding child care for such times is extremely difficult.

One parent noted that parents in her area were "frantic" about the lack of child care in the community, especially parents who were over the income cut off for the subsidy. Another parent noted that she had been a child care provider and that the state subsidy was too low to make this work worthwhile.

Parents at one focus group spoke very favorably about the services provided by the local YMCA. They noted that lessons and care were very affordable. The care times were flexible, and the YMCA was only closed two days a year.

Universal Preschool (UPK)

In one focus group, parents noted that one of the local school districts did not offer UPK. However, the districts that did had substantial waiting lists and used a lottery system to select children with the greatest need after an evaluation was completed. Parents expressed concern that without Head Start or UPK, the children are far behind when they enter kindergarten.

Early Intervention

Many parents believed that many children were not receiving early childhood screenings. One participant mentioned that many families were not aware that the counties will cover early childhood screenings for children under the age of three. One participant said the program provided flexibility for mothers to have the screening in their homes or at a community-based organization. It was her observation that children make incredible progress in the early intervention program.

In general, parents recognized the value of early intervention; however, some were frustrated about not knowing where to turn when they sensed something was physically, cognitively, or emotionally wrong with their child. They were often told by healthcare professionals to "wait it out" and were subsequently frustrated when their suspicions were confirmed, and an early intervention opportunity was missed.

Parents felt that healthcare professionals needed additional training on child development and the importance of early intervention to provide more timely screenings and referrals. Parents also noted a critical gap in early intervention services: there are very few child psychologists or developmental specialists in more rural counties, and the level of care available to those local communities feels pieced together and not comprehensive. Therefore, families have to travel to Buffalo or Rochester to receive care.

Healthcare Access

Participants, especially in rural communities, observed significant turnover in healthcare providers. Additionally, many voiced concerns over a perceived lack of experience of their care providers; long times to secure initial appointments with physicians and dentists; and significant travel and wait times. Some participants said they waited 45 minutes to 1.5 hours for a 15-minute checkup.

Transportation

Transportation challenges, such as reliability of a vehicle, also burden families' access to services. Though some families have a vehicle, it is usually needed by the wage earner to commute to work. For many, employment can be located 30–60 miles from home.

Public transit is also limited, especially in more rural areas. Some participants noted two-hour work commutes using public transit—and Western New York's inclement weather only exacerbates these challenges. Additionally, others disclosed that programs "in town" actually required a walk of several miles to participate.

Program Eligibility

Program eligibility requirements were a source of significant frustration as well. One participant said her income was \$3 over the eligibility requirements for Head Start, and another considered moving to a community where she could meet the eligibility requirements. Parents were frustrated by their inability to access or qualify for services their children needed, particularly special assistance. Parents said they were told their child did not have "enough need" or the "right kind of need" to qualify for assistance.

Parents felt penalized for trying “to do the right thing” by working and not relying on government programs. Some participants decided to drop one income from their household to qualify for government programs like Head Start.

Service Awareness

Focus group participants expressed concern over their limited knowledge of available services. They stressed the need for better communication about these programs, as several programs were no longer available because of low participation.

Focus group participants stressed the importance of making “navigators” available to help identify and access programs. Examples included WIC staff members who assisted in securing needed items such as diapers, and health insurance navigators. However, not all staff were seen as helpful, and participants discussed the “lack of customer service” and/or interference of Departments of Social Services and Child Protective Services in their lives.

Participants at one focus group discussed the importance of parent advocacy training and the development of parent advocates. They also highlighted the benefits of developing a parent peer network which would include facilitated meetings where participants can share ideas and information about programs and services.

Recreation Opportunities

Participants emphasized the need for safe and constructive play activities for families and young children, such as access to playgrounds, splash pads, indoor recreation, and educational activities. However, participants stressed that affordability was key with these opportunities and desired low- or no-cost options that accounted for transportation challenges.

Finally, participants described how much they valued the opportunity to come together, discuss their challenges, and learn from other caretakers. Most focus group participants were interested in regular opportunities to engage with other caregivers to support, share information, and learn from one another.

APPENDIX 6: SURVEY

INTRODUCTION

As part of the research to document the assets and gaps in Western New York's early childhood system, Public Sector Consultants conducted an online survey to gather input from a wide variety of stakeholders. PSC developed a set of survey questions and shared them with the Liftoff—Western New York Early Childhood Funders for Change for input, and the final set of questions was programmed into Survey Monkey. Liftoff members and partners shared the survey with their networks, and participants completed the survey between January and March 2017.

Participants included parents, caregivers, early childhood educators and administrators, advocates, funders, and other service providers. Respondents represented seven of the eight counties in the region.

This summary highlights the survey demographics and key takeaways, then analyzes the responses to each survey question. Attachment A includes a full summary of participants' demographics, and Attachment B includes the full survey protocol.

SURVEY DEMOGRAPHICS

Survey participants responded to two demographics questions, one about their role and one about their county affiliation. Over half of participants identified as parents; with over 40 percent identifying as parents with children ages five or under, and almost 13 percent identifying as parents with children age six or older.

Other service providers or administrators for young children comprised 20 percent of respondents, and early childhood educators or administrators made up 16 percent of respondents. Very few paid caregivers (2 percent), early childhood advocates (3 percent), and funders (2 percent) responded.

Nearly all survey respondents (84 percent) reported an affiliation with three counties: Chautauqua, Erie, and Wyoming. In four counties (Allegany, Cattaraugus, Genesee, and Orleans), five or fewer individuals participated in the survey.

In total, 245 individuals completed at least one question on the survey.

KEY TAKEAWAYS

- **Program success requires availability, access, and awareness**—Participants explained that for programs to successfully serve communities, they need to be available (or offered), be accessible (in terms of cost and location), and community members need to be aware of the services offered.
- **Experiences vary widely**—As can be expected in a survey of diverse participants and distinct communities, experiences varied widely between participants. One respondent's success story was another's challenge. This story is an important reminder that any strategy will need to be differentiated by audience and location.
- **Regional success requires connections**—While respondents rarely talked about the broader early childhood system and how to build coordinated systems, many of the challenges participants discussed would benefit from existing within a broader early childhood framework. Early childhood educators and service providers were the exception and did note the benefits of having a more coordinated effort.

WHAT IS WORKING WELL?

Early Learning Opportunities Prepare Children Academically and Socially for School

Nearly 125 respondents explained that early learning opportunities are helping to equip young children with the academic and social skills they need to succeed in school. Participants explained that having exposure to early learning opportunities is important for children.

One respondent explained:

"If [programs are] well planned and developed, [then] children have a good place to grow, learn, and play."

Another said:

"We are getting many [children] ready for the rigors of education by exposing them to the foundational skills so critically needed to be successful from the start."

Other participants explained that access to quality early literacy opportunities are particularly critical. One parent said:

"The literacy skills my children developed during their early childhood years are strong. They came away knowing all their letters, capital and lowercase, and knew the corresponding sounds."

These opportunities could be offered through formal early learning programs or more informal, community-based programs. As one respondent explained:

"Public library programming, when available, is working well in WNY as a vehicle for promoting early literacy."

Participants also noted that many early learning programs continue to focus on play and hands-on learning, even though systems are placing growing emphases on academics for young children. For example, a provider explained that her program prioritizes outdoor time for children. Another participant said:

"[There's] a greater emphasis on play in the school setting. Children learn so much from free play, including enhancing creativity, communication and conversation skills, negotiating, and problem solving with others. Also, children enjoy play time and they are more likely to learn when they are enjoying the activity."

Participants also celebrated social-emotional learning. They indicated that early learning programs provide opportunities for socialization. One parent said:

"Social/emotional gains are made too. My sons have benefitted by interacting with other children in a learning environment."

Another parent agreed:

"Socialization in atmospheres such as daycares or school teaches the child to be adaptive and to [accept] the society that they will be a part of."

Access to Early Intervention Services

Nearly 70 respondents highlighted access to early intervention services as an area that is working in local early childhood systems. Respondents defined early intervention quite broadly. Some indicated that children have access to services to help fulfill their basic needs. Most said that there are mechanisms to identify and address delays early. One respondent said:

"Helping children to get services early in their development is eliminating or lessening behavior and medical delays, which is a lifelong benefit not only for them, but society!"

An early childhood educator explained:

"Many of the children with learning or speech difficulties are identified early."

Parents agreed. One said:

“Early intervention for special needs [is working well]. We are fortunate to provide services to young children with delays and special needs. This makes worlds of difference in their future education and adulthood. I am witnessing this with my son.”

Another parent said early intervention services are coordinated.

“In WNY, we have access to quality early intervention programs, and doctors, districts, and providers work together.”

Respondents named several specific programs that are improving early intervention, such as Kid Start, Buffalo Prenatal-Perinatal Network, and Early Head Start. They also explained that a wide variety of local stakeholders refer parents and children to early intervention, including pediatricians, local health departments, school districts, family court attorneys, and early childhood educators.

Access to Prekindergarten

Nearly 60 participants praised the community for its access to prekindergarten through programs like universal pre-K (UPK) and Head Start. An early childhood educator said:

“School-based, universal prekindergarten programs for four-year-olds are an essential part of early childhood educational programs and working very well to better prepare students for kindergarten. Recent trend data in our district/region shows gaps with language development, so students participating in UPK receive increased levels of language support through early literacy exposure in a classroom setting.”

Parents agreed, saying that paid preschool programs are helpful for families (especially low-income families) and for children.

Cross-system Collaboration

Over 40 early childhood educators, administrators, and service providers indicated that there are efforts to connect existing early childhood resources. Respondents said that more agencies are working together and communicating. One early childhood educator said:

“Professionals are coming to the table to discuss what is working and what could be better about early childhood.”

Respondents mentioned specific efforts, such as Erie Niagara Birth to 8 Coalition, WNY Behavior Collaboration, NY Zero-to-Three Network Infancy Leadership Circle, Healthy Moms Healthy Babies, partnerships facilitated by local chapters of the United Way, collaborations with Niagara University, and efforts to create Head Start/UPK partnerships.

Increased Focus on Child Care Quality

Forty participants, nearly all early childhood educators, service providers, or advocates, said there is an increasing focus on child care quality. The region is doing a better job understanding the importance of quality child care, defining quality, and helping programs achieve higher-quality measures. One early childhood educator explained:

“[Recently,] local school districts have placed an increased emphasis on the importance of best first instruction by opening the discussion in educational settings about early childhood educational programs that encompass, language support, gross/fine motor development, cognition, health/wellness, and exposure to a wide array of learning opportunities in/out of the classroom. Further, emphasis on mobilizing family involvement is another focus point that is gaining traction.”

Other respondents said that there are better resources and training available for early childhood providers and teachers. One participant said:

“Teachers seem to have a good amount of resources available to create learning-rich environments.”

Another agreed:

“The access to training and collaboration has greatly improved in the past five years. I particularly like access to webinar training that can be accessed anytime, day or night.”

Additional Bright Spots

This report includes a discussion of all topics that received 30 or more mentions. Here is an overview of the topics that narrowly missed this cut-off. The number of mentions is noted in parenthesis.

- **Referrals (29)**—Respondents said that referrals are working well. Participants varied in their definition of referrals. Some indicated that there were resources to help them navigate early childhood services. Others said that it was easy to access follow-up services after an evaluation.
- **Support for parents (28)**—Respondents said that parent engagement and education is on the rise. This may include having parents in classrooms or more formal efforts like home visiting. One respondent said, “From birth, a child’s brain is wired for learning and the first five years are very crucial in determining how successful they will be later in life. Working with parents and providing them with valuable information about their child’s development, and how they can stimulate and encourage that development, goes a long way in helping children reach and even surpass developmental milestones.”
- **Quality providers (26)**—Participants said that child care providers and teachers in the area are skilled and caring. One respondent said, “Many people working in the system are passionate, committed, and genuinely want to do their best for kids.”
- **Access to medical services (26)**—Respondents said that families in the region have access to quality medical services. Some said that healthcare broadly is working well. Others highlighted that programs, such as lead testing, are effective.
- **Access to WIC (23)**—Respondents, mostly parents, indicated that access to the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) is important to families.

WHAT CAN BE DONE TO INCREASE ACCESS TO PROGRAMS AND SERVICES?

Increase Awareness

Fifty respondents said there needs to be greater awareness of existing early childhood programs and services. An early childhood educator explained:

“I believe there is a knowledge gap between what services are in the community and what families know about. There needs to be better education for families into what the community can provide.”

A parent agreed:

“First and foremost, is awareness. Making them aware of what is available to them. And making such services accessible.”

Respondents offered some opportunities to improve, including advertising, notifying parents of services when their child is born, having a stronger 211 database, educating staff to increase parent referrals, educating doctors about service, and a comprehensive (noncommercial) listing of resources from child care to activities.

One respondent said there needs to be greater awareness in all neighborhoods.

"[There needs to be more] education about the programs that are out there, not assuming that certain neighborhoods or communities don't need access to programs offered."

An early childhood educator agreed that information can vary by neighborhood.

"Although identification of children in our communities has improved, I believe further outreach is necessary. I believe we are reaching our Hispanic and white populations, but we still need to increase our presence in our African-American communities."

Increase Availability

Respondents said that families need better access to services, including making services more affordable and making programs available in the communities where families live.

Nearly 50 respondents said that cost can be a barrier to families, and that making services more affordable would improve access. Respondents also called for more programs without income-eligibility requirements. For example, one respondent said:

"Preschool is entirely too costly and yet children need it to succeed in grade school. Are there free/low-cost programs out there?"

Parents said child care is also too expensive. One parent explained:

"[My] only difficulty is the cost of child care. I spend twice the amount of my mortgage monthly on child care for one child!"

Over 60 respondents said it can be difficult to access existing services. In some cases, services are not available in all communities. In others, transportation is a barrier to accessing the services that are offered.

Several respondents called for better access to UPK. One said:

"I would like to see universal pre-K offered in all schools. The earlier the children are put in a productive atmosphere, the better."

Others said that programs have a limited scope that is not comprehensive enough to address bigger family needs. One respondent said:

"There are short-term programs, and if they don't get it in the first three to six months, oh well, times up. Swim or sink."

Quality child care can also be difficult to find. A parent said:

"The quality of daycare in the city of Buffalo needs a huge improvement. I'm fortunate that I can afford private daycare, but when we were looking, we didn't find high-quality care."

Another parent agreed.

"There are no accredited child care programs in our area. Quality child care services are difficult to find, expensive, and not accessible to many parents."

It is also more difficult to find services in rural communities, respondents reported. One parent said,

"Availability of services is always a barrier in rural counties."

Another respondent agreed.

"Geographic distribution of services and programs is inequitable. Increase the number and quality of early childhood early learning programs so that more children are served throughout the county."

In other cases, services are offered, but families cannot access them due to transportation barriers. Many respondents simply reported that transportation is a barrier, but others said this need is amplified in rural areas. An advocate said:

“Transportation is a huge issue in the rural areas of WNY. The local Head Start’s enrollment numbers were down because they lost transportation funding in 2015–2016.”

Other respondents said that UPK programs do not always offer transportation. A service provider said:

“We need transportation to UPK classrooms in order for many parents to be willing to send their [children].”

WHAT IS NOT WORKING AS WELL AS IT COULD AND HOW CAN IT BE IMPROVED?

Respondents mentioned many of the same themes discussed in the first two questions, including raising concerns about access and program awareness. Ideas for improvement are included below.

Access

Almost 80 respondents explained that access to programs is a challenge. For example, several participants said there are waiting lists for child care subsidies and programs. This is can be true for infant care, full-day programs, afterschool programs, child care during second and third shift, and emergency child care, participants explained. Participants also said there need to be more services for children with special needs. Respondents indicated that more funding would help address these access issues.

Participants also reiterated that some communities are underserved. This is particularly true in rural communities. Participants recommended increasing access to transportation and increasing the number of services available in underserved communities. An early childhood educator explained:

“I believe we need to especially reach out to our rural communities who do not have the access to YMCA and Boys and Girls Club facilities. These communities have become more isolated with a lack of support in their local towns. Possibly connecting with doctors’ offices in rural areas to provide additional family support.”

Improving transportation could be one way to increase access. Participants said there should be more bus routes, car pool options, and the ability to request service. One participant said specific busing for events could help. Another said that enforcing snow removal requirements in the winter would make it easier to walk.

Awareness

Nearly 40 respondents indicated that more needs to be done to improve awareness of existing programs. Participants suggested offering “what to expect” classes for parents with children at different developmental stages. One participant said:

“Just as there are birthing classes, we should offer classes after birth ... there are books called “what to expect ... while you’re pregnant, the first year, the second year” ... The YMCA offers different swimming classes from six months of age and up ... but I really believe we need other programs—making a healthy meal, building something, crafts—encourage family time in a fun way.”

Others suggested maintaining lists of available services and sharing these lists with families, as they could use assistance in how to participate in programs like WIC.

“Maybe offer concierges at grocery stores who are familiar with requirements available to shop with people and or prescreen items before check out to avoid 1) embarrassing check user 2) frustrating cashiers who need to explain over and over again 3) keeping lines moving and avoiding cranky customers.”

Participants said that medical providers could be valuable partners in identifying needs and referring families to programs.

Inappropriate Early Environments

Nearly 40 respondents said that early learning environments are not developmentally appropriate. Parents cited Common Core and an increasing focus on academics. One parent said:

“Educators and parents need to have access to information about child developmental stages and appropriate activities at each stage, and need to be willing to push back against educators and systems who misguidedly think more desk time and worksheets at age four are appropriate, for example.”

Early childhood educators said that early learning programs look more and more like early elementary classrooms. Classrooms should look more like home said one educator. Another called for more flexibility in the daily schedule and being less rigid about time. Physical education was a common theme too. One educator said:

“Young children are on buses too long. [There is] not enough play, exercise, or space for movement activities that is necessary for daily movement. Physical education is mandatory for the upper grades but not early childhood.”

Additional Challenges

This report includes a discussion of all topics that received 30 or more mentions. Here is an overview of the topics that narrowly missed this cut-off. The number of mentions is noted in parenthesis.

- **Referrals (22)**—Respondents said that referrals are not working well. Like in the Additional Bright Spots section above, participants varied in their definition of referrals. Some indicated that there were resources to help them navigate early childhood services. Other said that it was easy to access follow-up services after an evaluation.
- **Lack of collaboration (18)**—Early childhood educators and service providers said more needs to be done to encourage collaboration and connections across the system. Participants noted that there have been efforts in the past, but more work is needed.

ATTACHMENT A: SURVEY PARTICIPANTS

Role

Over 40 percent of respondents indicated that they are parents or grandparents of children five or under. The second highest demographic category was “other,” with almost 26 percent of respondents selecting this option.

Note: Thirty-one additional individuals participated in the survey, but did not respond to this question.

Survey Question: I am a ... (Select the option that best applies to you.)

County	Number of Participants	% of Total
Parent or grandparent of one or more children aged five or under	88	41.12%
Paid caregiver for one or more children aged five or under	5	2.34%
Early childhood educator or administrator	32	14.95%
Other service provider or administrator for young children	28	13.08%
Early childhood advocate	6	2.80%
Other	55	25.70%
Total	214	100%

Due to a large number of individuals reporting their role as “other,” PSC analyzed these responses and, where possible, categorized each response to give a more complete view of survey participants. This analysis showed

that most of the participants who identified their role as “other” clarified that they are parents with children over age five. With the respondents that identified as parents of young children, nearly 54 percent of survey participants identified as parents.

In addition, several individuals who could be considered “other service providers” also identified as “other” and clarified their specific role. A total of 20 percent of respondents identified as “other service providers,” and 16 percent identified as “early childhood educators” or “administrators.”

Survey Question: I am a ... (Select the option that best applies to you.)

County	New Based on “Other” Responses	Number of Participants	% of Total
Parent or grandparent of one or more children aged five or under		88	41.12%
Parent of one or more children aged six or older	X	27	12.62%
Paid caregiver for one or more children aged five or under		5	2.34%
Early childhood educator or administrator		34	15.89%
Other service provider or administrator for young children		42	19.62%
Early childhood advocate		7	3.27%
Funder	X	4	1.87%
Other		7	3.27%
Total		214	100%

County Affiliation

Nearly all survey respondents (84 percent) reported an affiliation with three counties: Chautauqua, Erie, and Wyoming. In four counties (Allegany, Cattaraugus, Genesee, and Orleans), five or fewer individuals participated in the survey.

Note: Sixty-seven additional individuals participated in the survey but did not respond to this question.

Survey Question: If you are a parent, please indicate the county where you live. If you selected another role, please select the county where you work.

County	Number of Participants	% of Total
Allegany	0	0%
Erie	70	39.33%
Cattaraugus	3	1.69%
Chautauqua	43	24.16%
Genesee	5	2.81%
Niagara	17	9.55%
Orleans	1	0.56%
Wyoming	36	20.22%
Other	3	1.69%
Total	178	100%

ATTACHMENT B: SURVEY PROTOCOL

Introduction

Liftoff—Western New York Early Childhood Funders for Change is a coalition of philanthropic organizations, United Ways, and government agencies dedicated to improving the lives of young children. Liftoff is investigating the best ways to improve outcomes and well-being of the region’s children, from birth through age five. To do this, Liftoff has partnered with Public Sector Consultants to study Western New York’s current early childhood system and develop recommendations on how to best support the interests of young children and their families.

Your voice is an important part of this work! Please complete the following questions no later than Friday, February 10, 2017. As they develop recommendations, PSC and Liftoff will summarize and carefully consider all your feedback. The survey will take approximately ten minutes to complete.

Important Notes

- Throughout this survey, we refer to “early childhood.” We ask that you consider “early childhood” broadly to include programs and services like developmental screening and support, early intervention, child care, education, healthcare, and family support for **children and their families from birth through age five.**
- We are interested in your thoughts and opinions on the early childhood system in Western New York, which we are defining as these eight counties: Allegany, Erie, Cattaraugus, Chautauqua, Genesee, Niagara, Orleans, and Wyoming.

Survey Questions

1. In your experience, what is working well in the early childhood system? Please describe up to three items that are working well, and suggest how each item could be improved. *[Provide spaces for three responses. For each, have a box for what is working well. Limit the “what is working well” to 250 characters.]*
2. What can be done to improve access to programs and services for children from birth through age five and their families? *[Provide a text box for open-ended response. Limit to 500 characters.]*
3. In your experience, what else is not working as well as it should? Please describe up to three items that are not working well, and suggest how each item could be improved. *[Provide spaces for three responses. For each, have a box for what is not working well and a corresponding box for how it can be improved. Limit the “what is not working well” to 100 characters and the description of how it can be improved to 500 characters.]*

Demographic Questions

4. I am a... (Select the options that best apply to you.)
 - Parent or grandparent of one or more children aged five or under
 - Paid caregiver for one or more children aged five or under
 - Early childhood educator or administrator
 - Other service provider or administrator for young children
 - Early childhood advocate

Other [Allow 100 characters for response.]

5. If you selected parent for question 4, please select the county in which you live, otherwise, select the county in which you work?
 - Allegany
 - Erie
 - Cattaraugus

- Chautauqua
- Genesee
- Niagara
- Orleans
- Wyoming
- Other *[Allow 100 characters for response.]*

Thank you for taking the time to provide your ideas for improving the early childhood system in Western New York. If you would like us to send you a copy of the research findings when the research is complete, please enter your email address below. *[Provide a text box for email address.]*

If you have any questions on the survey, please contact Jeff Guilfoyle at PSC, at jguilfoyle@publicsectorconsultantsinc.com

APPENDIX 7: EARLY CHILDHOOD SUPPORT FROM WESTERN NEW YORK'S PHILANTHROPIC COMMUNITY

This appendix contains the results of a survey of the philanthropic community in Western New York. The community was asked to provide information on grants supporting young children (from birth to age five) for the most recent three years of grant reporting.

EXHIBIT A7-1. Philanthropic Grants Supporting Young Children in Western New York

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
Health Foundation for Western and Central New York	1. Niagara University 2. Child Care Resource and Referral Network 3. Consultants	Help Me Grow WNY	Help Me Grow WNY is based on a nationally proven model for connecting young children at risk for developmental and behavioral problems to the services they need.	Prenatal through age five	\$811,052	2013–2017	Eight counties in WNY
Health Foundation for Western and Central New York	1. Chautauqua County Health Department 2. Independent Health Foundation 3. Lake Shore Behavioral Health 4. Sisters of Charity Hospital Foundation	Maternal and Child Health Best Practices	The focus of the funding is to expand the use of evidence-based programming in maternal and child health and human services.	Prenatal through age five	\$750,000	2014–2017	Eight counties in WNY
Health Foundation for Western and Central New York	1. Auburn Memorial Medical Services 2. Mohawk Valley and Midwifery Associates of Ithaca 3. Women's Health of WNY 4. Wyoming County Community Health System 5. Cathy J. Berry and Associates	Maternal and Child Health Midwifery	The purpose of this funding is to increase the ability of low-income women in WNY to access midwives by working directly with midwifery practices to improve their business practices and development, as well as identify and explore policy barriers.	Prenatal through age five	\$610,000	2015–2017	Erie, Niagara, Genesee, Allegany

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
Health Foundation for Western and Central New York (This is a joint project with the Peter and Elizabeth C. Tower Foundation.)	1. Community Action Organization 2. Buffalo Public Schools UPK 3. Chautauqua Lake Child Center 4. Chautauqua Lake Central School 5. Consultants	Positive Emotional Development and Learning Skills	The project is designed to support effective training, implementation, and sustainability of evidence-based and best practice curricula in preschool classrooms that result in measurable improvement in the social and emotional well-being of children served.	Prenatal through age five	\$575,000	2014–2018	Erie, Niagara, Chautauqua
The John R. Oishei Foundation	Aspire of WNY	2014 Center for Learning	This funding supports early intervention and preschool.	Birth to age five	\$500,000	2014–2015	Eight counties in WNY
Health Foundation for Western and Central New York	1. Holy Cross Head Start 2. Cattaraugus Wyoming Project Head Start	CHOMPERS! Cavity Free Kids	CHOMPERS! brings dental education, prevention, and treatment to places young children already go, through two proven and complementary strategies that build on the resources and assets in the regions—Cavity Free Kids, a dental curriculum for early childhood programs, and portable dental equipment in settings frequented by children.	Prenatal through age five	\$417,875	2015–2018	Eight counties in WNY
Health Foundation for Western and Central New York (This is a joint project with the John R. Oishei Foundation.)	Bison Children's Scholarship Fund	Children's First Scholarship Fund (but only as it is utilized.) 2. GCR	The funding is to support scholarships for at-risk children who are in low-performing schools to increase their access to higher-performing schools.	Pre-K through first grade	\$400,000	2014–2022	Erie
Grigg Lewis Foundation	Niagara University	Niagara Quality Improvement Project	The funding supports increasing school readiness and infant toddler development.	Infants and toddlers	\$390,000	2010–2016	Niagara
The John R. Oishei Foundation	Explore and More Children's Museum	2014 Children's Museum	This funding supports operational expansion and museum planning.	Birth to age five	\$300,000	2014–2015	Eight counties in WNY
Health Foundation for Western and Central New York	1. March of Dimes 2. United Way	Maternal and Child Health IMPLICIT/WHEN	This funding supports interventions to improve disparities in preterm birth and low birth weight through continuous improvement techniques that focus on smoking, depression, contraception, and multivitamin intake.	Prenatal through age five	\$300,000	2015–2018	Niagara

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
Health Foundation for Western and Central New York	1. Community Health Center of Buffalo 2. TBD	CHOMPERS! Portable Dental Care	CHOMPERS! brings dental education, prevention, and treatment to places young children already go, through two proven and complementary strategies that build on the resources and assets in the regions—Cavity Free Kids, a dental curriculum for early childhood programs, and portable dental equipment in settings frequented by children.	Prenatal through age five	\$255,665	2014–2017	Erie, Niagara
The Peter and Elizabeth C. Tower Foundation	Niagara University	Niagara Early Child Care Quality Improvement Project—Phase III, Focus on Kindergarten Transition	This funding supports the work of the Niagara County Early Child Care Quality Improvement Project to focus on supports for young children transitioning from pre-K to kindergarten.	Ages four and five	\$253,590	2017–2019	Niagara
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	New York State Office of the Attorney General: Health and Safety Bridge Funds (14-16 expended)	This total project expended \$2.1 million from November 2010 to December 2016 to provide Green and Healthy Homes Initiatives (GHHI) services to low-income homeowners, with a preference emphasis on families with children six or younger.	Birth to age six	\$200,461	January 2014–December 2016 (total award period November 2010–December 2016)	Erie
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	NYS Office of the Attorney General: New Americans Project	The funding was subawarded to the Jericho Road Community Health Center, primarily to conduct outreach targeting refugee and immigrant families with children and link to GHHI services.	Birth to age six	\$193,600	January 2014–February 2016	Erie
Ralph C. Wilson, Jr. Foundation	Public Sector Consultants	WNY Early Childhood Scan	Analyze Western New York's early childhood system documenting assets and gaps and helping to develop an overall strategy.	Birth to age five	\$183,165	2016–2017	Eight counties in WNY

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
The Peter and Elizabeth C. Tower Foundation	Niagara University	Niagara County Early Child Care Quality Improvement Project—Phase II, Focus on Infant and Toddler Development	This funding supports work to assess the healthy mental development of infants and toddlers and provide professional development to child care center staff.	Birth to age five	\$179,945	2014–2016	Niagara
James H. Cummings Foundation	United Way	Campaign Support for Early Childhood Programs	This funding supports investment for programs serving early childhood and education programming.	Birth to 18 years old	\$150,000	2014–2016	Erie
The Peter and Elizabeth C. Tower Foundation (In partnership with the Health Foundation for Western and Central New York)	Various early childhood centers	PEDALS 2.0	This funding supports curriculum training, teacher coaching, and child assessment for early childhood classrooms.	Birth to age five	\$150,000	2014–2016	Erie
Health Foundation for Western and Central New York	1. Cattaraugus Wyoming Project Head Start 2. Chautauqua County AME Zion Church 3. Summit Center 4. Cathy J. Berry and Associates	Maternal and Child Health Hot Spot	The fund is designed to support small projects that emerge from the “hot spot” assessment data and improve health and human services systems and services. This work will lead to better infant health, maternal health, and birth outcomes.	Prenatal through age five	\$150,000	2014–2017	Eight counties in WNY
The John R. Oishei Foundation	Read to Succeed Buffalo	2016 Scaling Reading Success	This funding supports educational programming.	Birth to age five	\$140,000	2016	Erie (City of Buffalo)
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	Green and Healthy Homes Initiative and CNCS SIF	This funding supports Pay for Success Asthma Technical Assistance and Feasibility with Your Care, GHHI and Urban Institute focused on childhood asthma interventions (In-Kind Services, not cash)	Birth to age six is the focus, but up to age 18	\$128,000	June 2015–September 2016	Erie
Health Foundation for Western and Central New York	1. Allegany Rehabilitation Associates 2. Consultants	Children, Poverty and Trauma	This funding supports the delivery of a child-specific trauma intervention and project evaluation, as well as a scan of the current research and data on the services provided in WNY that address women and children’s trauma.	Prenatal through age five	\$116,400	2016–2018	Eight counties in WNY

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
James H. Cummings Foundation	Sisters of Charity Hospital	Renovations to NICU	This funding supports renovations and upgrades to NICU.	Newborns	\$100,000	2016	Erie
James H. Cummings Foundation	Roswell Park Cancer Institute	Renovations to Pediatric Oncology Center	This funding supports renovations and upgrades to create new outpatient pediatric oncology center in conjunction with new JRO-CHOB.	Birth to 21 years old	\$100,000	2015	Erie
The John R. Oishei Foundation	First Hand Learning	2015 SKILL: Science Knowledge Improves Language Learning	This funding supports educational programming.	Birth to age five	\$98,560	2016	Erie (City of Buffalo)
The Peter and Elizabeth C. Tower Foundation	Family Help Center Inc.	Children's Center for Success	This funding supports the implementation of the Teacher Child Interaction Training model.	Birth to age five	\$75,478	2015–2016	Erie
James H. Cummings Foundation	Summit	Building Hope Campaign	This funding supports renovations to recently acquired buildings for classroom and training spaces.	Three to 21 years old	\$75,000	2016	Erie
The John R. Oishei Foundation	Family Help Center	2015 Children's Center for Success	This funding supports early intervention and preschool.	Birth to age five	\$66,000	2015	Erie and Niagara
Community Foundation for Greater Buffalo	Read to Succeed Buffalo	Community Alignment for Reading Excellence (CARE)	This grant will fund a portion of the salary and benefits of the executive director as she leads the organization's efforts to sustain the expansion of the classroom-based literacy infusion model CARE and other programs of Read to Succeed Buffalo.	Six weeks old to age eight	\$65,000	March 2014–March 2015	Erie
Community Foundation for Greater Buffalo	Read to Succeed Buffalo	Community Alignment for Reading Excellence (CARE)	This grant will fund a portion of the salary and benefits of the executive director as she leads the organization's efforts to sustain the expansion of the classroom-based literacy infusion model CARE and other programs of Read to Succeed Buffalo.	Six weeks old to age eight	\$60,000	February 2015–February 2016	Erie

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
Community Foundation for Greater Buffalo	Read to Succeed Buffalo	Experience Corps Small Group Tutoring	A \$60,000 grant for the director of program's salary will leverage a dollar-for-dollar match of federal Social Innovation funds of \$60,000 (\$120,000 total) to implement the AARP Foundation's Experience Corps Volunteer Tutoring Program in three high-need Buffalo public schools.	Age five to age eight	\$60,000	May 2016–May 2017	Erie
The Peter and Elizabeth C. Tower Foundation	Buffalo Hearing and Speech Center	Early Childhood Screening Project	Funds will be used to implement a mobile screening program for children at risk for learning disabilities.	Birth to age four	\$60,000	2014–2017	Erie
Grigg Lewis Foundation	Reach Out and Read	Reach Out and Read	This funding supports incorporating a reading program into pediatric care in Eastern Niagara County.	Birth to age six	\$58,000	2016–2017	Niagara (specifically Lockport)
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	Environmental Protection Agency Indoor Contaminants	This funding supports a project with Erie County and Belmont Housing to combat early childhood and childhood asthma via in-home outreach, education, and interventions via GHHI providers	Birth to age six	\$50,000 for 2014 (Total grant is \$100,000 for October 2012 to September 2014)	January 2014–September 2014	Erie
James H. Cummings Foundation	Buffalo Hearing and Speech Center		This funding supports renovations for early childhood classrooms.	Three to five years old	\$50,000	2015	Erie
James H. Cummings Foundation	Heritage Centers	Funding for Renovations to Building	This funding fully supports the addition of an elevator.	Three to 18 years old	\$50,000	2016	Erie
Community Foundation for Greater Buffalo	Niagara Area Foundation/Community Foundation for Greater Buffalo	Niagara Early Childhood Quality Improvement Program	This funding is the last year of support for Niagara QIP through Niagara University's College of Education with Grigg Lewis and Tower (total project was \$617,900 between 2011-2014, costs paid in 2014 only reflected here)	Birth to age five	\$49,871		Niagara
The John R. Oishei Foundation	Center for Governmental Research	2016 Consultant for Lead Poisoning Study	This funding supports the measuring of lead exposure.	Birth to age five	\$46,000	2016	Erie

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
The John R. Oishei Foundation	First Hand Learning	2016 SKILL: Science Knowledge Improves Language Learning	This funding supports educational programming.	Birth to age five	\$42,000	2016	Erie (City of Buffalo)
Health Foundation for Western and Central New York	Community Foundation for Greater Buffalo	Asthma—Pay for Success	This funding supports project management for the research for the Green and Healthy Homes Initiative Pay for Success project.	Prenatal through age five	\$40,000	2015–2017	Erie
Community Foundation for Greater Buffalo	Gerard Place Housing Development Fund Company	Family Learning	Family Learning will provide targeted instruction for parents of infants and toddlers so they can help prepare their child for kindergarten, as well as homework assistance and family support to help older refugee children to succeed in school.	Birth to age eight	\$30,000	June 2014–June 2015	Erie
Community Foundation for Greater Buffalo	Jericho Road Community Health Center	Parent Child Home Program	The Parent-Child Home Program bridges the “preparation gap” by helping families who are challenged by poverty, limited education, language and literacy barriers, and other obstacles to school success to prepare their children to enter school ready to learn.	Birth to age five	\$30,000	July 2014–July 2015	Erie
Community Foundation for Greater Buffalo	Jericho Road Community Health Center	Parent Child Home Program	The Parent-Child Home Program bridges the “preparation gap” by helping families who are challenged by poverty, limited education, language and literacy barriers, and other obstacles to school success to prepare their children to enter school ready to learn.	Birth to age five	\$30,000	August 2015–August 2016	Erie
Grigg Lewis Foundation	St John’s Outreach	Diaper and Infant Care	This funding provides diapers and infant care products for children of low-income families.	Infants and toddlers	\$29,000	2011–2016	Niagara (specifically Lockport)

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
Community Foundation for Greater Buffalo	University at Buffalo Foundation	The Magic of Music for Head Start	This funding provides music instruction for low-income children ages three to five in CAO Head Start programs serving Buffalo; the program also explores how music education can enhance school readiness.	Age three to five	\$27,241	July 2014–July 2015	Erie
The John R. Oishei Foundation	Family Help Center	2014 Children's Center for Success	This funding supports basic human needs.	Birth to age five	\$25,000	2014	Erie and Niagara
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	Erie County Department of Health	This funding is a 2014 subaward from a HUD grant to support the revived Wipe Out Lead campaign.	Birth to age six	\$25,000	April 2014–January 2018	Erie
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	Erie County Department of Health	This funding is a 2016 subaward from a HUD grant to support the revived Wipe Out Lead campaign.	Birth to age six	\$25,000	April 2014–January 2018	Erie
Community Foundation for Greater Buffalo	King Urban Life Center	Parent Child Home Program	The Parent-Child Home Program bridges the "preparation gap" by helping families who are challenged by poverty, limited education, language and literacy barriers and other obstacles to school success, to prepare their children to enter school ready to learn.	Birth to age five	\$25,000	September 2016–September 2017	Erie
James H. Cummings Foundation	Boys and Girls Club		This funding supports facility renovations for summer use.	Five to 18 years old	\$25,000	2014	Erie
James H. Cummings Foundation	Valley Community Center	Replacement Van	This is partial funding for a new van used to transport early care and after school care children.	One to 12 years old	\$25,000	2015	Erie
The John R. Oishei Foundation	Family Help Center	2015 Children's Center for Success	This funding supports basic human needs.	Birth to age five	\$22,500	2015	Erie and Niagara
Grigg Lewis Foundation	EPIC	Parent Coaching	This funding supports mentoring for change and parent coaching in Lockport, New York.	Mothers and children	\$22,468	2016	Niagara (specifically Lockport)
The John R. Oishei Foundation	Family Help Center	2016 Children's Center for Success	This funding supports basic human needs.	Birth to age five	\$22,000	2016	Erie and Niagara

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
Community Foundation for Greater Buffalo	King Urban Life Center	Parent Child Home Program	The Parent-Child Home Program bridges the "preparation gap" by helping families who are challenged by poverty, limited education, language and literacy barriers, and other obstacles to school success to prepare their children to enter school ready to learn.	Birth to age five	\$22,000	July 2014– July 2015	Erie
Community Foundation for Greater Buffalo	United Way of Buffalo and Erie County	Birth to Eight Coalition Asset Mapping Project	This funding supports the improvement of the health, well-being, and development of children eight or younger by identifying assets and service gaps that impact academic success to strategically mobilize community resources.	Birth to age eight	\$20,170	October 2014–2015	Erie
The John R. Oishei Foundation	Kaleida Health Foundation	2016 Pediatric OCD Clinic in WNY at the Children's Psychiatry Clinic	This funding supports mental health services.	Birth to age five	\$20,000	2016	Eight counties in WNY
Community Foundation for Greater Buffalo	United Way of Buffalo and Erie County	Teacher-Child Interaction Training (TCIT) and Parent-Child Interaction Training (PCIT) at BPS 93 Southside	This funding supports expansion to two additional classrooms of TCIT/PCIT evidence-based strategies that improve outcomes for children ages two to seven who exhibit extremely challenging behaviors at home or in a child care or school setting.	Age two to seven	\$20,000	September 2016– September 2017	Erie
Community Foundation for Greater Buffalo	Western New York Women's Foundation	MOMs: From Education to Employment	This funding provides high-quality child care to children focusing on improving their education while their mothers attend college classes.	Birth to age eight	\$20,000	January 2014– January 2015	Niagara
The Peter and Elizabeth C. Tower Foundation	EmPower New York	Children's Academy Sensory Room	This funding supports a sensory room for children with sensory processing issues.	Birth to age five	\$16,843	2016–2017	Niagara
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	Health Foundation for Western and Central NY	This funding supports the Community Action Plan Lead Hazards.	Birth to age six	\$10,000	December 2016–July 2017	Erie
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	United Way of Buffalo and Erie County	This funding supports the Community Action Plan Lead Hazards.	Birth to age six	\$10,000	November 2016– October 2017	Erie

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
Community Foundation for Greater Buffalo	Western New York Women's Foundation	MOMs: From Education to Employment	This funding provides high-quality child care to children focusing on improving their education while their mothers attend college classes.	Birth to age eight	\$10,000	December 2016–December 2017	Niagara
Community Foundation for Greater Buffalo	WNY Women's Foundation	MOMs: From Education to Employment	This funding provides high-quality child care to children focusing on improving their education while their mothers attend college classes.	Birth to age eight	\$10,000	December 2015–December 2016	Niagara
James H. Cummings Foundation	Adoption Star	Upgrades to Software	This funding supports upgrades to software used to support programming to adoptive parents and children.	Birth to 18 years old	\$10,000	2016	Erie
The Peter and Elizabeth C. Tower Foundation	League for the Handicapped, Inc.	Classroom Renovation	This funding will renovate a classroom for preschool-aged special education students. Renovations will provide improved storage of and access to educational materials and will support children's needs for large-group, small-group, and individualized instruction.	Birth to age five	\$10,000	2016–2017	Erie
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	Health Foundation for Western and Central NY	This funding supports the Pay for Success Asthma Technical Assistance and Feasibility with YourCare, GHHI, and Urban Institute focused on childhood asthma interventions.	Birth to age six focus, but up to age 18	\$9,500	October 2015–August 2016	Erie
Community Foundation for Greater Buffalo	City Mission Society	Shape-A-Space Reading Library Center	The Shape-A-Space Reading Library Center and corresponding educational materials will provide a resource that will allow the Mission to build pre-reading and reading skills in at-risk pre-K children at the Cornerstone Manor in order to prepare them for kindergarten.	Birth to age five	\$8,500	August 2015–August 2016	Erie
The Peter and Elizabeth C. Tower Foundation	LaSalle Early Childhood Center	Preschool Outdoor Learning Center	This funding will purchase an outdoor learning center for hands-on science education.	Birth to age four	\$8,500	2015	Niagara

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
Community Foundation for Greater Buffalo	Lions SEE	Lions SEE	This funding will purchase eye screening devices for Lions Club volunteers to expand screenings to help to identify children at risk for vision-related problems, and refer them to eye care professionals to avoid educational problems.	Six months to age six	\$7,090	September 2016–September 2017	Erie, Niagara
Community Foundation for Greater Buffalo	Buffalo Hearing and Speech Center	Lockport Community Universal Pre-K Program	This funding will support screening of preschool children for hearing and speech issues.	Birth to age five	\$6,806	December 2014–December 2015	Niagara
The Peter and Elizabeth C. Tower Foundation	Buffalo Hearing and Speech Center	Floortime Training	This funding will support training in Greenspan Floortime approach for ten Lockport UPK teachers.	Birth to age five	\$6,000	2015–2016	Niagara
Community Foundation for Greater Buffalo	Perry Rotary Foundation	Read Around Perry	The funds of this grant award will be used towards the expansion of our one-on-one tutoring program, from serving preschool and kindergarten students to serving students from three years old to second grade.	Age three to second grade	\$5,000	June 2014–June 2015	Wyoming
Grigg Lewis Foundation	Niagara County Sheriff	Car Seats	This funding will replace unsafe car seats, and to provide a free car seat to low-income families.	Infants and toddlers	\$5,000	2016	Niagara
Grigg Lewis Foundation	Operation Warm	Coats for Kids	This funding will provide new winter coats for Lockport children in need.	Preschool	\$5,000	2016–2017	Niagara (specifically Lockport)

Foundation	Grantee	Grant Title	Purpose of Grant	Target Ages of Those Served	Total Grant	Grant Period	Counties Covered by Grant
The Peter and Elizabeth C. Tower Foundation	Holy Cross Head Start	Second Step Early Learning Curriculum Sustainability	These funds will supplement current resources and materials for the Second Step lesson, activities and teacher trainings. Additional resources include Second Step Early Learning Kits, dual language posters and feeling cards, as well as books that complement Second Step lessons for every classroom. Classroom staff have also been provided Second Step trainings and will be provided the "Challenging Behavior in Young Children" book for each teacher's resource library for continued social and emotional learning.	Birth to age four	\$4,082	2015	Erie
Community Foundation for Greater Buffalo	Community Foundation for Greater Buffalo	The Peter and Elizabeth C. Tower Foundation	This funding will support the Community Action Plan Lead Hazards.	Birth to age six	\$3,000	November 2016–October 2017	Erie
James H. Cummings Foundation	Autism Services		This funding will support technology upgrades for classrooms.	Three to 21 years old	\$3,000	2014	Erie
Community Foundation for Greater Buffalo	Project Read of Wyoming County	Project Read Book Drive	This funding will provide more books to pre-K and WIC children.	Birth to age five	\$1,000	July 2016–July 2017	Wyoming
Community Foundation for Greater Buffalo	Perry Rotary Foundation	Read Around Perry	The funds of this grant award will be used towards the expansion of our one-on-one tutoring program, from serving preschool and kindergarten students to serving students from three years old to second grade.	Age three to second grade	\$500	July 2016–July 2017	Wyoming

**A Report for Liff—Western New York
Early Childhood Funders for Change**

