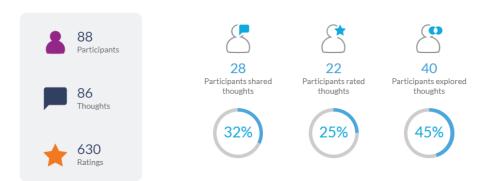
SECAC ThoughtExchange Summary

Overview of ThoughtExchange Participation



Of the 88 people who participated in ThoughtExchange:

- 34% are direct providers of early childhood programs/services
- 26% are parents or caregivers of young children (ages 0-8)
- 22% are advocates
- 19% are SECAC members
- 16% are interested community members
- 7% are professional development providers/higher education
- 4% are state or local government agency staff

ThoughtExchange Results

You can view the full results here. They have been organized below by committee subject matter (and duplicate/similar ideas were combined). Ideas are listed from highest rated to lowest rated. The ideas in blue were those shared by SECAC committees, while the ideas in black came from members of the general public.

Workforce Committee

- SECAC should encourage the state to pursue a way to support increases to child care teacher pay tied to retention. Child Care providers have struggled to retain their best teachers long before the pandemic because pay is low and there are rarely benefits.
 - Raise the professionalism and funding for early educators so we can retain staff. The
 pay is too low to make early childhood education a career. Employees move on to better
 paying positions after centers invest in their PD and training.
- Publish a legislative briefing on compensation strategies to highlight disparities in child care provider wages. Professionals charged with taking care of our youngest citizens earn wages that are less than catfish gutters, luggage handlers and fast food servers.
- Create a recruitment and retention plan for teachers and caregivers. Enhance or expand local early care and education programs and services. When teachers leave it hurts the children and

costs more money to train new teachers that end up leaving before they can apply what they've learned.

- Raise salaries for child care teachers and add supports. This is important because even if you pay teachers more they still need additional supports otherwise they will leave the field.
- Consider establishing a professional standard for graduated compensation grid tied to education and years of experience. Elevate the profession to be in line with other educators.
- Create workforce registry that tracks credentials for all early childhood professionals (as well as professional development information). To strengthen the recruitment/retention of high-quality personnel in early childhood centers.
- Create a statewide clearinghouse & repository of PD opportunities; establish a Division of Early Childhood Services for better coordination & oversight. Professional development and training for childcare providers and licensed professionals are not standardized, wellcoordinated, publicized, or accessible. Ensure PD/training for child care providers and other licensed professionals is more standardized, coordinated, publicized and easily accessed.
- Appoint Working Group to evaluate statewide PD offerings and complete review of EC programs and design standard curriculum for pre-service programs. To strengthen recruitment/retention of high-quality personnel in early childcare centers.
- Design a graduated compensation rating system that accommodates and compensates for experience to ensure pay equity for this profession. To strengthen the recruitment/retention of high-quality personnel in early childcare centers.
- Bring early childhood professionals into the state retirement system and investigate the feasibility of state insurance pool for EC professionals. To strengthen the recruitment/retention of high-quality personnel in early childcare centers.
- Create credentialing requirements for early childcare professionals to align with the licensure
 of other educators. To strengthen the recruitment/retention of high-quality personnel to ensure
 uninterrupted services in early childcare centers.
- **Establish licensure board for child care.** A licensure board for early child care provides could help elevate and standardize the profession.
- Ensure that Early Learning Guidelines are current and reviewed every five years.
- Develop a committee to research possible alternatives to a "quality rating system." To ensure implementation of minimal standards that are meaningful without being burdensome to childcare centers.
- Design a portfolio of business model *options* for childcare centers that could incentivize larger organizations to partner with centers for mutual benefit. Would create greater stability for compensation and employee benefits for the centers and also become a reliable provider of childcare to the "host" organization's employees and stakeholders.
- Enlist marketing/comms interns from university programs to design statewide recruitment/ad campaign with goal of reducing vacancies by 25% in early childhood. To strengthen the recruitment/retention of high-quality personnel in early childcare centers.

Family Support & Access

• Remove the Child Support Enforcement Requirement from CCPP. The child support requirement in CCPP is a barrier to CCPP access for single moms who need CCPP most.

- Allow upfront job search in CCPP. Parents need CCPP child care in order to search for a job.
- Easy and accessible system to apply for services. Not all families have access to IT or understand how to use.
- Optimize the Child Care Payment Program (CCPP) online application through smartphone usage. To reduce/remove barriers for applying to CCPP.
- DECCD should commit more staff to help support parents to make it through the CCPP application process. Too many parents end up without CCPP despite being eligible for and needing CCPP because they can't navigate the online application process without help.
- The Mississippi Department of Human Services needs to use TANF funds to increase the number of children served by CCPP. Low-income working single moms need affordable child care.
- Identify child care deserts and determine methods for addressing those areas where child care deserts exist. To reduce/remove barriers for applying to CCPP.
- Consider existing funding such as MS lottery to improve state support of child care services and professionals. This will lead to better outcomes for children and favorably impact the state's economy.
- Make CCPP paperwork easier. SECAC can use feedback from families/providers from surveys, Town Hall, etc. to make recommendations to DECCD for how to improve & simplify paperwork.
- Creating a refundable Child and Dependent Care Tax Credit. This will encourage parents to remain in the workforce.
- Active, statewide use of research-based programming that strengthens parents' knowledge of child health, development, and learning.
- Explore a state agency model focused on Early Childhood (Alabama's Department of Early Childhood Education, New Mexico, Colorado, etc.)
- Explore innovative funding mechanisms to address gaps in service and/or comprehensive support for families and children.
- Research existing community models across the United States (Help Me Grow, county-level children's councils, etc.) that have proven results. To ensure a well-organized, community-based system of support for families of young children to access resources/services.
- Create county or regional parental councils where parents are given a "voice" in decision making at the state level, as well as the local level.
- Utilize the quality care and education rating system as a mechanism to develop a list of parental "look fors" to understand the characteristics of quality child care.
- Create "menu" of resources/supports available to families in each community. Parents of young children need a well-organized, community-based system of support to access resources & services to support their child's development.
- There should be more alignment between CCPP and WIOA and AccelerateMS workforce programs to help parents move into higher paying jobs.
- Provide opportunities for parents of young children to develop parent leadership skills to become effective advocates for quality care/education.
- Engage in peer-learning research with other states that have well-organized, community-based models that connect families to resources/services.
- Use the MS Department of Education's family and parent resources, as well as other tools to promote family/child interactions
- Use different funding streams to expand home visiting programs.

• Work with external entities to develop a "percent eligibility" formula to ensure a consistent measure of this important data point.

Early Intervention/Special Education

- **Provisions for all children to have developmental screenings.** The earlier delays are detected and treated, the better the outcome for the child.
- **Special needs assessments and early intervention support.** More and more children have social emotional and behavioral needs. There are not enough staff to help us in the facilities dealing with these children.
- A recommendation that Part C and 619 staff provide training opportunities to child care providers. To increase their capacity to include children with disabilities and address the importance of service provision in natural environments.
- Child care providers and families need help supporting children with special needs. We have training, but we need financial support to hire bodies. Children with special needs often need additional support to thrive, including 1:1 aides to help navigate language and behavioral challenges.
- Find a way for more early intervention services that are provided in natural environment (e.g. at home) to be reimbursable.
- Ensure all required early intervention services are covered and reimbursable through the Medicaid State Plan. Services not covered by Medicaid must be provided at the full state expense, instead of the match rate/ This change would increase service reach.
 - Medicaid should adopt a state-defined modifier for all services provided under Part C
 as part of an Individualized Family Service Plan (IFSP). This would enable better
 accounting of all Medicaid expenditures for early intervention services.
 - Recognize the Individualized Family Service Plan (IFSP) under early intervention is recognized as the Medicaid Plan of Care. This would significantly reduce duplication of services and efforts, while reducing paperwork.
- Hire a full-time Comprehensive System of Personnel Development Coordinator to support training of those who work with children with disabilities. To provide more training for community-based EC providers, early intervention providers, and health-related professionals.
- Include professionals with a child development degree (153 license) to be eligible for the special instructor role. Emerging professionals with a bachelor's degree have been well-trained in child development with a specific emphasis on birth to 5, and families.
- Ensure primary care practices conduct at least two social-emotional screens for children between ages 0-3 without supplanting developmental screening.
- Increase the use of the model of an early intervention pro serving as a primary service provider, or family's main contact for all El services. Helps provide a consistent experience with the family and coordination of their services, which enhances child outcomes.

Health, Mental Health & Nutrition

- Establish WIC Certification Days at daycare centers. To increase awareness of, access to, and enrollment in the WIC nutritional program.
- Encourage screening for pregnancy-related depression and anxiety in mothers occurs as part of well-child visit or new mom's healthcare follow-up.

- Establish a pilot program to implement Parent Child Interaction Therapy (PCIT) at all 13
 Community Mental Health Centers. To expand the availability of this type of therapy statewide which is currently only in the Community Mental Health Center in Regions 9 and 6.
- Expand pilot initiated in School Safety Act of 2019 to include selected Head Starts and private preschools/daycares. To implement an evidence-based curriculum that provides students with skills to manage stress and anxiety.

Additional Comments:

- SECAC should engage with parents and seek family input to statewide plans.
- Connect all groups across Mississippi to work together for early childhood. Too many processes and ideas are top down instead of bottom-up solutions from providers and families; so much recreates existing plans.