

Draft Recommendations for the Strategic Vision

PLEASE NOTE: These are draft recommendations currently being developed by MS SECAC committees for the MS SECAC Strategic Vision. The full SECAC has not yet reviewed or endorsed these recommendations or potential actions. They are open for public input and feedback. Please visit ThoughtExchange at mssecac.org or by scanning the QR code to rate these ideas and to share your own ideas. As a reminder SECAC is an advisory body; implementation of the recommendations depends on support of the governor, the legislature or other state agency leaders who have decision-making power.



Workforce Committee

Recommendation #1- Increase compensation to attract and retain professionals in the childcare field.

Actions that are Underway or Completed:

- 1. Design a portfolio of business model options for childcare centers that could incentivize larger organizations (businesses, universities, community colleges, United Ways, churches) to partner with the centers for mutual benefit (such as becoming a site for those organizations' staff to send their children), thus creating 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. These models could include tax credits to businesses the provide specific childcare center supports. These would be opt-in models, as some centers may not want to relinquish independent ownership.
- 2. Establish a professional standard for a graduated compensation grid tied to education and years of experience.
- 3. Establish a licensure board and process for early childcare providers to elevate and standardize the profession:
 - Option 1: Consider moving licensure of childcare professionals to the MS
 Department of Education (MDE) to enable alignment of compensation and
 training with other educators for a more seamless pipeline, while leaving licensure
 of centers with the MS Department of Health. Add early childhood professionals to
 the state retirement system (PERS).
 - Option 2: Create and locate licensure board for professional standards within a newly created Division of Early Childhood within the MS Department of Health, which would also be responsible for existing DHS licensing of childcare centers. (See Recommendation #2, Action #3 below)
 - Option 3: Establish licensure of professionals at MDE; retain licensure of centers at DHS.
- 4. Publish a legislative briefing on compensation strategies from comparable wage states (Arkansas, Tennessee, Louisiana, North Carolina, West Virginia), including comparisons to other low-wage jobs that have fewer human consequences yet exceed childcare workers'





compensation: Fast food restaurant crew (\$7.25-13.00);Catfish gutters (\$11-14.03); Airport luggage handlers (\$12.96-15.32); Trash collectors (\$14.00-18.78).

Recommendation #2- Ensure professional development and training for childcare providers and licensed professionals is more standardized, well-coordinated, publicized, and easily accessed.

Potential Recommended Actions:

- 1. Appoint a qualified task force to establish professional licensure standards (not the same as center/facility/curriculum standards) for childcare providers.
 - Create a statewide clearinghouse of sources of professional development opportunities.
 - Consider housing PD resources at the licensure board (see Recommendation #1, Action Item #3).
- 2. Incentivize childcare professionals to seek minimal level of training until more rigorous licensure requirements can be executed.
 - Create a childcare workforce data base and tracking system to enhance recruitment efforts and standardize training expectations. Specifically, a system that would house a calendar and registration features for upcoming trainings as well as track and categorize the contract hours that the ECEPs have earned over time. This would benefit not only the professionals, but the providers seeking staff and the state's data system.
 - Identify most appropriate fiscal agent for coordinating and monitoring payments related to continuing education of providers.
- 3. Improve state support of childcare services and professionals to improve quality of care that leads to better outcomes for children and favorably impacts the state's economy.
 - Establish a division of Early Childhood Services within the Department of Health to support coordination of efforts that will maximize Mississippi's competitiveness for federal childcare dollars. This division could also serve as the fiscal agent for coordinating and monitoring funding streams specific to early childhood professionals and providers.
 - Consider existing funding sources such as MS Lottery.

Recommendation #3- Strengthen the recruitment and retention of high-quality personnel to ensure uninterrupted services in early childcare centers.

- Create credentialing requirements for early childcare professionals to align with the licensure of other educators. [Currently 15 hours per year are required with no specification of training required.]
- 2. Create a registry credentialing tracking system for all early childhood professionals as a (a) mechanism for disseminating information about professional development offerings for applicants; and a (b) mechanism for center directors who are hiring to track professional development and credentialing history of potential applicants.
- 3. Design a graduated-compensation rating system to ensure equity of the profession as it relates to other professions with similar education requirements and duties. A system which accommodates and compensates for experience.



- 4. Bring early childhood professionals into the state retirement system and investigate the feasibility of creating a state insurance pool for early childcare professionals.
- 5. Upon completion of Action Steps 1 4, enlist marketing and communications student interns from the universities' programs to design a statewide recruitment/ad campaign with an established goal of reducing vacancies by 25%. (

Recommendation #4- Improve quality, consistency, variety, practicality, and efficiency of accessibility of professional development offerings for early childcare professionals to improve delivery of services in these settings.

Potential Recommended Actions:

- Appoint a Working Group (comprised of early childhood teachers, childcare directors, and higher education faculty) to accomplish two goals: (a) inventory and evaluate (quality, consistency, variability, practicality, and affordability) of current statewide professional development offerings for early childhood professionals; and (b) complete review of early childhood programs and design a standard curriculum for early childhood pre-service programs.
- 2. Develop professional standards/qualifications and organize professional development offerings to support achievement of competencies. Subsequently, organize a system of delivery to reflect standards. Currently 15 hours per year are required with no specification of training required.
- 3. Establish a statewide calendar with a robust clearinghouse of PD providers and offerings, managed and vetted by the Agency Division of Early Childhood Services.*

Recommendation #5- Ensure State Early Learning Guidelines are up to date, evidencebased, and operative.

Potential Recommended Actions:

- 1. Distinguish between standards for childcare centers, standards for early childcare professionals, and the standards which comprise the Early Learning Guidelines for children.
- Ensure that Early Learning Guidelines are current and reviewed every five years.



3. 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.

Family Support and Access Committee

Recommendation #1- Reduce/remove barriers for applying to the Child Care Payment Program (CCPP) including meeting work requirement prior to enrollment, difficulty completing paperwork, and the Child Support Enforcement Requirement.

Actions that are Underway or Completed:

The Mississippi Department of Human Services, Division of Early Childhood Care and Development has completed recent upgrades to the CCPP application process that allow





parents to more easily upload documents. The system is available for parents to use via smart phone, tablet, or desktop computer. This process launched on July 13, 2022, and any further updates will be emailed to parents, and providers, as well as posted to the MDHS-DECCD website, and social media platforms.

- 2. MDHS-DECCD has also optimized the CCPP application process to allow MDHS-DECCD to obtain email addresses of applicants first. This change was made so that going forward, MDHS-DECCD will be able to track the number of actual abandoned applications as opposed to applications that are only temporarily abandoned but ultimately completed.
- 3. In addition, MDHS-DECCD is currently working with ITS to optimize the entire online application for smartphone usage. This update will allow applicants to complete an online CCPP application with their smartphone. MDHS-DECCD anticipates this update to the online application process will be completed by January 2023 and any additional updates will be provided as the process develops.
- 4. The Mississippi Department of Human Services, Division of Early Childhood Care and Development is working to move a recommendation forward that would add a job search period of 90 days for parents during the initial application process.
- 5. Mississippi Department of Human Services, Division of Early Childhood Care and Development secured technical assistance from ECE-RISE to determine support identification of child care deserts and to determine methods for addressing those areas where child care deserts exist.
- 6. SECAC voted to recommend to Governor Reeves to remove the Child Support Enforcement Requirement.

Potential Recommended Actions:

- 1. SECAC can utilize family and provider feedback from surveys, interview, focus groups, SECAC Town Hall, as well as other methods to make recommendations to the Mississippi Department of Human Services, Division of Early Childhood Care and Development for ways to streamline the paperwork process.
- 2. SECAC can work with external entities to develop a "percent eligibility" formula to ensure a consistent measure of this important data point.

Recommendation #2- Ensure a well-organized, community-based system of support is available for parents of young children to access resources and services to support their children's development.

- 1. SECAC can research existing community models across the United States (Help Me Grow, county-level children's councils, etc.) that have proven results and create a system for reporting the components of those models in a clear and efficient manner.
- 2. SECAC can engage in peer learning visits with other states (Alabama, Georgia, Arizona, Utah etc.) with existing well-organized community-based models that produce positive outcomes for families and children.





- 3. SECAC can use these learning exchanges, as well as other research and data, to create a menu of options for creating a cohesive and aligned system of support in each county and/or community that ensures families receive the resources and services they need.
- 4. SECAC can explore a state agency model focused on Early Childhood (Alabama's Department of Early Childhood Education, New Mexico, Colorado, etc.).
- 5. SECAC can ensure accountability and outcomes by tracking progress and using data to inform an improvement process.
- 6. SECAC can explore innovative funding mechanisms to address gaps in service and/or comprehensive support for families and children, as well as to provide expand support for families that may benefit most.

Recommendation #3- Provide opportunities for parents of young children to develop parent leadership skills to become effective advocates for quality care and education that address their children's needs.

Potential Recommended Actions:

- 1. SECAC can promote the use of consistent and cohesive statewide family engagement supports that help parents better advocate for their children's needs.
- 2. SECAC can utilize the quality care and education system as a mechanism to develop a list of parental "look fors" to help parents better understand the characteristics of quality care and education, as well as "look fors" in K-3 grades.
- 3. SECAC can engage with parents and seek family input to statewide plans.
- 4. SECAC can 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.

Recommendation #4- Provide parents of young children the most recent research-based knowledge and skills about child development, learning, and health so that they are the most effective caregivers to their children.

- 1. SECAC can promote active, statewide use of research-based programming that strengthens parents' knowledge of child health, development, and learning.
- 2. SECAC can support the use of funding streams to expand home visiting programs.
- 3. SECAC can support the use of the MS Department of Education's family and parent resources, as well as other tools to promote family/child interactions.
- 4. SECAC can support family-friendly mechanism for accessing state programs and services to ensure that families have more time to actually care for their children.
- 5. SECAC can promote communities' engagement with community partners to help connect families to programming that supports knowledge and skill building across the five developmental domains.
- 6. SECAC can promote use of funds to provide training and materials to community-based programs and/or staff of these programs (libraries, museums, outdoor learning





environments, parks/recreation, cultural resources, etc.) to increase enrichment opportunities to all families.

Early Intervention Committee

Recommendation #1- To address the need of timely service delivery, hire more well-trained professionals to increase access for families needing early intervention services.

Potential Recommended Actions:

1. SECAC can recommend changing the current hiring criteria for Special Instructors to include professionals with a child development degree (153 license) thus allowing for more professionals to be eligible for this role. Emerging professionals with a bachelor's degree have been well-trained in child development with a specific emphasis on birth to 5, using a family centered approach. The addition of these professionals could potentially increase special instructors significantly because multiple institutions of higher education offer this degree in different regions of the state.

Recommendation #2- Provide more training for community-based early care and education providers, early intervention providers, and other health-related professionals to increase support for referrals and evidence-based instructional practices.

Potential Recommended Actions:

 SECAC can make a recommendation to hire a fulltime Comprehensive System of Personnel Development (CSPD) Coordinator. This position would increase capacity for cross disciplinary in-service training opportunities, offer guidance for preservice curriculum, and work collaboratively with state agencies as well as professional licensing boards to increase needed competency standards for professionals serving young children and families.

Recommendation #3- Increase the use of the model of an early intervention professional serving as a primary service provider (PSP), or a family's primary contact for early intervention services who sees the family most often, who collaborates with all service providers on the IFSP team, and who helps the family address the child's development from a holistic perspective. Research suggests that an early intervention professional serving as a primary service provider (PSP) offers more continuity for families and can enhance the efficacy of the routines based intervention model.

Potential Recommended Actions:

1. SECAC can make a recommendation to establish a hiring pin for a primary service provider (PSP) role in the First Steps system. This PSP role would provide both service coordination and service provision for children and families, thus increasing continuity of service delivery and enhancing child outcomes. This PSP role has demonstrated in other states efficacy as related to State Systemic Improvement Plan (SSIP) outcomes.

Recommendation #4- IDEA Part C is an educational service, but it is funded with a medical model for reimbursement and what is legally required by IDEA—services in natural environments—are often not reimbursable from some insurance companies, thus compromising the best practice models in El. Additionally, obtaining a Medicaid provider number can be cumbersome, at best, for most independent providers, so assistance with these billing aspects would create a system that not only helps with recruitment but also with retention of providers.





1. Reimburse services that would support providers within First Steps with the billing and reimbursement system.

Heath, Mental Health, and Nutrition Committee

Recommendation #1- Increase awareness of, access to, and enrollment in the WIC nutritional program.

Potential Recommended Actions:

1. Establish WIC Certification Days: This would allow us to be on-site on a specific day of each month or quarter to certify WIC participants at daycare centers. We currently have partnerships with Head Start Centers where we provide certification, nutrition education, and benefit issuance on-site. This is a model that can be replicated at other childcare facilities. Parent Resources: Once the online application is up and running, we will work with MSDH Office of Communications to develop a poster or flyer and provide it to childcare facilities statewide. The poster or flyer would provide information on what services WIC provides and how to apply.

Recommendation #2-

Potential Recommended Actions:

- Expand the pilot initiated in the School Safety Act of 2019 to include selected Headstarts, and possibly selected private preschools/daycares.
 - Language from legislation The Mississippi Department of Education shall
 establish three pilot sites in six school districts utilizing an evidence-based
 curriculum to provide students in K-5 with skills to manage stress and anxiety.
 DMH shall be responsible for the development and/or selection of the content of
 the training. The results of the program shall be measured and reported, and such
 results shall be consideration of statewide implementation.
 - DMH funded 10 School Districts 23 schools
 - EduMotion and Second Step; DMH funded
 - Expectation of SEL curriculum pilot program
 - Provide students with skills to manage stress and anxiety
 - Be better equipped to handle challenges in a healthy way
 - Hope to see a decrease in disciplinary actions
 - Improvement in emotion management, situational awareness, and academic achievement
 - Helps students build self-confidence
 - Get motivated and set goals
 - Practice showing respect for others
 - o Feel more comfortable with their peers
 - Make safe and healthy choices that are good for themselves and others

Recommendation #3-





- Establish a pilot program to implement Parent Child Interaction Therapy (PCIT) at all 13
 Community Mental Health Centers.
 - Regions 9 and 6 are currently working with University of Mississippi Medical Center through a grant to implement PCIT into their programming. Implementing this therapy statewide would bring awareness to and encourage providers to serve children below the age of six. Arkansas has implemented this practice in all but a few counites across their state.

Recommendation #4-

Potential Recommended Actions:

 Ensure that primary care practices can conduct at least two social emotional screens for children between the ages of 0 and 3 - without these screens supplanting developmental screenings.

Recommendation #5-

Potential Recommended Actions:

- 1. Encourage screening for pregnancy related depression and anxiety in mothers occurs as part of a well child visit or new mother's health care follow up.
 - DMH will work with a marketing firm to develop and customize video public service announcements, audio public service announcements, posters, and other social media graphics highlighting service offerings for pregnant, parenting, and postpartum women.

Data and Policy Committee

Note: The Data & Policy Committee did not draft their own set of recommendations. They reviewed the recommendations from all the committees and offer the following considerations:

Workforce Committee:

- Recommendation #1:
 - Actions 1 and 4 are currently more feasible; more information needed on 2 and 3.
 - O Action 4: some of this information was recently presented at the MS Senate Study Committee, but a more thorough analyses would be helpful.
- Recommendation #2.
 - Potential Recommended Action 1: suggest working in concert with current child care advisory board within MS Department of Health's child care licensure
 - Potential Recommended Action 2: review what and how current training is available and determine ways to coordinate/collaborate across agencies/providers for training and cross-post on websites
 - O Potential Recommended Action 3: Need more information on determining where such a division should go; specify what childcare federal dollars are not being obtained and via which federal agencies. Collaboration is encouraged, but would need more research on this and is this something under the purview of SECAC?
- Recommendation #3:





- General comment from committee: Should child care be required to the same credentialing when the compensation is much lower? Is bringing child care providers into the state retirement system a reality, as providers are not state employees?
- Exploration of using shared services as a possible pathway to have more child care providers participate in a pooled insurance group
- Recommendation #4
 - Consider incorporating professional development recommendation into Recommendation #2
- Recommendation #5:
 - Clearly distinguish terminology between guidelines and standards; standards equate with what child outcomes should be and guidelines pertain to Pre-K classrooms

Family Support & Access Committee:

- Recommendation #1
 - Actions that are Underway #6: SECAC made this recommendation; awaiting a response from the Governor
 - Potential Recommended Actions: should be revised to suggest an entity/agency to execute as SECAC does not make direct actions
 - Potential Recommended Action #2: clarify what "percent eligibility" and "data point mean"
- Recommendation #2
 - Potential Recommended Actions: All of these items are leaning toward finding available early childhood data about outcomes. SECAC should use one of the five available requests to find out what data is available from Lifetracks for children ages birth – 8 years of age to report at the next SECAC meeting.
- Recommendation #3
 - Potential Recommended Actions: refine recommendations as to who would do these and when
 - Potential Recommended Action #2: revise and request that Mississippi Department of Education (MDE) create "look fors" for first - third grade
 - Potential Recommended Action #3: make recommendations to agencies that would collect this information for statewide plans
- Recommendation #4
 - Potential Recommended Action #6 great idea—what funds would be used?

Health, Mental Health & Nutrition Committee

- Recommendation #2: great idea—can we see the results of the pilot and then make recommendations to expand?
- Recommendation #3: great idea—can we see the results of the pilot and then make recommendations to expand?
- Recommendation #4
 - Potential Recommended Action #1: this action needs further clarification.
- Recommendation #5: do they need funding? Is DMH doing this currently?
 - Potential Recommended Action #1: It seems like this activity could fit in the postpartum expansion legislation to accomplish this work.

