

LEARNING TO PLAY IN THE SANDBOX



A Scholarly Report on

Aligning Early Childhood Services

Submitted to
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Running head: A Scholarly Report to Support Aligning Edmonton's Early Childhood Services

LEARNING TO PLAY IN THE SANDBOX: A Preschool Leadership Initiative

By

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Executive Summary

The purpose of this paper is to provide an overview of the main themes that the Align Initiative will encounter in its endeavour to develop a seamless continuum of Early Childhood services. To assist in this process recommendations are offered in keeping with invitational leadership practices. Key leadership concepts include: strategic leadership, developing a shared vision and partnership agreement, while ensuring input from a broad base of stakeholders. Research focused on early childhood development, the components of quality programs and delivery of services through collaborative models. This descriptive, qualitative study includes the findings from an extensive 32 item questionnaire. Leadership practices, evidenced based research and shared knowledge provide a frame for suggested improvement strategies and decision-making.

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As author of this report I accept responsibility for any unintentional errors or omissions. If errors are found, notification would be appreciated. Please report discoveries to the author at lavon.hildebrandt@epsb.ca. Thank you.

Chapter One: Introduction and Background

Children sometimes have complex social, emotional, health, or developmental problems that often create barriers to learning. A collaborative approach is essential for the development and success of services; not only should collaboration involve institutions and agencies, but parents, families, and community members as well (Skage, 1996). When a community begins to contemplate a collaboration of services for children, a number of insights are beneficial. Such as: an awareness of child development, an understanding of the needs of children and families, an understanding of service models that have been successful elsewhere and finally in this instance an understanding of the vision and possibilities that exist for Aligning Early Childhood Services Initiative in Edmonton. Marian Anderson once said "Leadership should be born out of the understanding of the needs of those who would be affected by it" (Page, 2006).

Therefore, this paper will attempt to provide an overview of these important considerations. It will not investigate any one category in-depth as other research papers have done; rather it is hoped that a composite picture will be formed by combining these subjects within one document and thus serve the public interests of the Align Steering Committee and Task Forces, enabling them to move forward with increased knowledge and insights. Solid leadership principles demand that the foundation of any organization's decision-making be based on facts and present realities.

Nature and Scope of Project

The goal of Aligning Early Childhood Services Initiative is to ensure service providers remain effective by improving the continuum of services available for children. Specific strategies for programs and implementation suggestions for supporting the continued improvements in Alberta will be identified within the scope of early childhood services. To do so, several questions were given consideration over the course of this paper's development: (a) How will the application of good leadership principles affect the formation of a new coalition? (b) What will a current literature review offer in terms of direction for formulating an improved model of delivering early childhood services that can be effective in the Edmonton climate? (c) How can leadership perspectives and educational outcomes be integrated into a practical model that will improve the delivery of services to preschoolers and their families?

Early child development is a time when the building blocks for physical well-being, school readiness and social belonging are established. It is a time for growth, wonder and discovery (Government of Saskatchewan, 2007). Within the province of Alberta and the City of Edmonton service providers strive to maintain programs of excellence for children. These efforts demand constant evaluation and a continual search for improvement strategies. "Standing still is the fastest way of moving backwards in a rapidly changing world" (Anonymous, 2008). Hence, the focus of this paper is to chart the progress, from both a leadership perspective and from an improvement project standpoint, of the Initiative to Align Early Childhood Services in North/Central Edmonton (see Chapters Two and Seven). This group is interested in improving the delivery of early learning services within the city of Edmonton. As a community initiative it is important that their decisions are supported by evidence based research.

Therefore, an extensive literature review regarding the pertinent issues forms the bulk of this paper as key subjects were given diligent attention (see Chapters Three, Four, and Five).

Organization of the Paper

The review begins by providing a brief background of the main contributors of educational psychology and the theories behind child development along with accepted practices in early education today. After the background to Early Education, a review of current trends and the main factors impacting education today follows. A key concern of the Initiative to Align Early Childhood Services is the need to navigate their particular context well, in order to successfully meet their aims.

Hence, a broad literature review of other endeavours that use partnerships and collaboration to strengthen program delivery was conducted to discover the key elements of their success. Attention focused specially on programs that have identified methods and strategies that provide effective support for early childhood education. After reviewing programs in other locations, this paper will identify current strategies and programs within Alberta.

The final portion of this paper incorporates possible outcomes presented as improvement strategies to enhance present early childhood services. Highlights from questionnaire findings which nine community partners responded to are discussed in Chapter Six. In addition, key recommendations from leadership, educational, and partnership perspectives will be integrated and presented in the form of proposed improvement strategies in Chapter Seven. While Alberta Education is known for innovation and educational improvements, this project will seek to identify supplementary strategies that could be considered for effective networking and collaboration.

Therefore, this paper is organized into three major divisions. Part one emphasizes the leadership perspective focusing on the invitational leadership theory and key leadership principles. This is expanded and applied to the progress of the Initiative to Align Early Childhood Services. Part two forms the largest portion of the paper, as it contains the literature review. It begins by providing the foundation for early learning and the major components necessary in programming. This is followed with the presentation of several relevant models of early childhood services. Finally, the Canadian perspective, including Alberta and Edmonton are presented. Part three forms the final section, which discusses the questionnaire findings in the Edmonton context, followed by proposed strategies for improvements.

Suggestions for improvements took into consideration the necessary components that make up the invitational leadership paradigm; foundational principles, leadership practices, common values, and the shared vision. The intention is to then produce sound recommendations for improvement. To do this one must first start with the background of this organization and its supporting affiliations.

Background - Development of Aligning Early Childhood Services Initiative

In December 2006 a broad group of community service representatives gathered for a facilitated session exploring how to better align early childhood services in North/Central Edmonton. This session was hosted by Edmonton Inter-Agency Head Start and the City Centre Education Project (a collaboration of seven schools within the Edmonton Public School Board). A report was compiled reflecting the feedback from the broader group. It was agreed that a sub-group (a steering committee) with representatives from each stakeholder group should continue to meet to further develop the objectives and priorities of the broader constituency.

The rationale for this Initiative is based on the common themes that emerge from the literature when examining early childhood services. These themes are: empowering families, building capacity amongst communities, increasing effectiveness of services providers, delivering services in a seamless manner, increasing efforts to involve “hard to reach” families, improving early identification and screening of children and families needing services, improving referral, follow-up and transitional plans, and finally to improve overall outcomes for children. Schroeder (2005) in documenting the Children's First Initiative in B.C. reports that understanding and supporting the healthy development of children before they reach school age will significantly impact on their success in school and perhaps throughout their lives. It is vital that young children and their families have access to quality environments to promote all aspects of early child development. “A localized collaborative approach to meeting young children's needs is critical. A one-size fits all approach will not work to meet the diverse social, cultural, and developmental needs of children” (Schroeder, 2005, p.4). Aligning Early Childhood Services in North/Central Edmonton is following a similar pattern by honouring the efforts of community partnerships and through collaboration; seeking out ways to broaden existing programs to meet current and future needs. “The key is to know what needs to be done and who is going to do it” (Schroeder, p.12).

Methodology is an important aspect of any research and procedures need to be sufficiently described in order to be duplicated. Rather than describe techniques under one section, the methodology used in the project will be explained in context as it occurs in the body of the text. This will include the stakeholder survey, the formation of task forces and the gathering of data through the use of an extensive questionnaire. The findings of the qualitative questionnaire will be discussed in detail in Chapter Six. In this document terms are not always defined in context as it can distract from the content, therefore a table of terms (Appendix A) and a list of acronyms (Appendix B) is included at the end of this document to facilitate better understanding for the reader.

The development of a shared vision for Aligning Early Childhood Services was originally initiated in December 2006 with the first stakeholders meeting and was continued with discussions throughout many steering committee meetings that followed in 2007. The questionnaire furnished some impetus by asking members what they felt should be the top five goals of the initiative. Altogether, 48 specific statements were submitted by members as possible goals. Staff from Success by Six categorized them and eventually summarized these statements into seven specific goals which were presented to stakeholders at a meeting in April of 2008. Those present participated in group discussions to assist the steering committee in outlining needs, setting priority directions,

and in choosing a vision statement. Participants filled out a survey where they rated committee developed statements to select the one most appropriate for expressing the shared vision. At that time they were also able to indicate if they wished to become more involved in the development of Aligning the Early Childhood Services Initiative. This process is more fully developed in Chapter Two.

A name for Aligning Early Childhood Services Initiative has not yet been finalized by the steering committee or the stakeholders. During the formative period references have varied from Aligning Early Childhood Services in North/Central Edmonton, Aligning Early Learning Services, Aligning Early Learning and Care Services, Aligning Early Childhood Development Services, and others. Therefore, to eliminate confusion but to allow some variety in referring to this endeavour the terms Align Initiative, Align, or Initiative will be used for brevity and interchangeably throughout this document.

Because of the broad scope of the committee's interest this paper has become extensive. Therefore, some depth in analysis has been sacrificed to accommodate the breadth of the Initiative and it is illustrative of the enormous task the Align Initiative is undertaking. Early childhood learning is such a vast domain, that almost any topic within a chapter could have turned into a major study on its own. Consequently, the purpose of this paper is to provide an overview of the main themes that the Align Initiative will encounter in their endeavour to develop of a seamless continuum of services and to offer solid recommendations to assist in this process. Uniting the multiple themes and directions into one document has been no easy feat, yet in comparison to the actual mission facing this Initiative it was a simple task. Although, this paper examines scores of issues, it is not exhaustive. Accordingly, the Initiative could advance their preparation by deliberating about what other issues they are likely to encounter. It is hoped that this manuscript will allow the steering committee and those working on task forces to proceed with their challenging tasks with more ease and confidence to the betterment of the community.

PART 1 - LEADERSHIP ASPECTS OF THE APPLIED PROJECT

Chapter 2 - Overview of the Initiative to Align Early Childhood Services

In this portion of the paper attention is given to developing a leadership framework that will help guide the Initiative to achieve the outcomes they desire. The progress and work that has already taken place will be considered from a leadership perspective. While a forward focus is embedded into the chapter, so that this collaborative venture may benefit from insights while they are still en route.

Invitational Leadership Theory

Kirp (2007) captures this paper's essence when he declares: the claim for preschool programs has been mostly evidenced based. Even though, the fundamental political decisions which reveal who we are as a nation is rooted in values rather than analytics. An adept leader knows how to integrate values and theories about "how the world ought to be working into commonsense concepts of what the government ought to be doing. This is the smart politics of the heart, and it can change people's minds" (p. 242). This Initiative desires to work collaboratively with community partners to ensure that quality early childhood services are available to support parents in the optimal nurture of their children. Subsequently, the goal of this paper is to provide information and to increase understanding to enable the Initiative to move forward with this important endeavour. As this paper's primary focus is on various models currently in practice; only the most appropriate leadership principles and facets that pertain to this Initiative will be examined.

There are other communities that have implemented similar goals, however the waters in Edmonton are uncharted, so new routes must be explored. It is not a simple matter of implementing a tried and true model from another locality, but rather a matter of developing relationships, of encouraging innovative ideas, and of employing practice that is both evidenced based and which utilizes new methods of providing quality services.

For this reason, the theory of Invitational Leadership fits well with the new alliance-partnership that is being birthed. Invitational Leadership presents as a leadership paradigm appropriate to the goals of the Align Initiative as it incorporates some foundational characteristics that are necessary for the success of this endeavour. The Invitational Education Theory (IET) is a theory of practice that was introduced by Purkey and Novack in 1996 (as cited in Pudlas, 2008) that addresses the total environment in which leaders function. Invitational Leadership is an extension of this theory which when put into practice offers a systemic approach to education and provides strategies for making the process more inviting. The model of Invitational Leadership is one that encourages leaders and their associates to pursue more meaningful professional and personal lives through four guiding principles: respect, trust, optimism, and intentionality (p.6). Adapted for the Align application, these principles could be stated as:

1. *Respect*: Everyone is valuable and wants to be accepted and affirmed.
2. *Trust*: Success in this venture requires cooperative, collaborative activity where the process is as important as the product.

3. *Optimism*: All people and children possess personal potential and are worthy of efforts and support so they can reach their fullest capacity.
4. *Intentionality*: Safe communities are best realized by creating and maintaining inviting places, policies, processes, and programs by people who are intentionally inviting with themselves and others, both personally and professionally. (Pudlas, p.6)

IET is based on three keystone suppositions: adjustable perceptions, self-concept, and social communication (Pudlas, 2008). This theory also suggests four levels of invitational to non-invitational behaviour along with five factors that affect human social development. These five factors can contribute or cause damage and are identified as people, places, policies, programs, and processes (Schmidt, 2004, p. 30). These critical factors that affect functioning are especially relevant to the Align Initiative and could be used to frame on-going evaluation.

Invitational Leadership differs from the traditional theories of leadership that “emphasized the process of influencing others through the use of power. Instead it promotes collaboration and shows compassion and respect for individuals” (Egley & Jones, 2005, p. 2). These principles are particularly relevant to the broader application of educational practices with diverse populations. “Cultural diversity is evidenced for example in British Columbia’s largest school district where nearly 42 % of the 65,000 students come from homes where English is not the primary language spoken” (Pudlas, 2008, p.3). Thus, invitational leadership provides a welcomed context for establishing helpful relationships with people from diverse cultural backgrounds while promoting equity and mutual understanding (Schmidt, 2004).

“The current focus in education is on differentiated instruction; the systematic approach to helping teachers ensure that every student is learning, regardless of interests, learning styles, or readiness for school” (Pudlas, 2008, p.6). This mandate makes the educational environment likely the most influential factor on preschool programming expectations and at times the source of pressure for ensuring all children are ready for school learning. Pudlas in a symposium discussed how educators might progress from a “mere head-knowledge of what is right, to a heart conviction of what should be done and then to a hands-on approach of how the right thing might be done better” (p. 4). This approach could be described as leading from passion to practice. In fact, LeFrancois declares, ‘even our most impulsive and habitual actions reveal our underlying convictions, and implicit theories – in other words our beliefs’ (as cited in Pudlas, 2008, p.3). Research shows when intellectual understanding is integrated with emotions which are the source of human motivation that better outcomes occur in practice. This is not only true for educators but for community leaders as well. “The third foundation of invitational education is a guiding ideal that focuses on developing continuous dialogue and mutual respect among people regarding shared aspects of their lives. Living in community requires communication, and within today’s pluralistic communities that communication involves a wide variety of perceptual worlds, self-concepts, and cultural perspectives” (Pudlas, 2008, p.8).

Furthermore, invitational leadership “furnishes educators with principles of practicing behaviours that seek to integrate, in creative and ethical ways, research, theory, and practice” (Egley & Jones, 2005, p. 1). Consequently, the application of this theory is a powerful process of communicating care along with providing a platform for the

development of individual potential and is helpful in identifying and changing those forces that defeat and destroy potential. As an integrated approach, invitational leadership embraces the broad perspectives of education, health care, counselling, and other services that help people meet the diverse challenges of today's world (Schmidt, 2004, p. 27). Acceptance of these foundational values: respect, trust, optimism, and intentionality "provides a common language of transformation and a consistent theory of practice" (Pudlas, 2008, p.6).

Similarly, transformational leadership is the process when the leader and follower both act to enrich each other's lives. Leaders like Gandhi and Martin Luther King Jr. are considered transformational leaders rather than just inspirational leaders because of their ability to transform their followers through inspiration and servant modeling. Although, "transformational leadership aligns with the same philosophical foundation of servant leadership, the focus of the serving is to the organization rather than the individual" (Boyum, 2008, p.2).

If this premise is accepted, transformational leadership may also be an appropriate model to consider for this application. Align has a dozen or more organizations coming together to seek ways in which they might cooperate, coordinate and collaborate to better meet the needs of children and families in the Edmonton area. Thus, the initiative will have many different approaches to blend into a composite whole that will require accommodation from all individual organizations in order to provide a coordinated continuum of services.

To conclude the introduction to Invitational Leadership as a useful theory, consideration is given to two metaphors: "Beacons are inviting behaviours that serve as the most overt expressions, reaching out even to the most reluctant persons, always showing others that invitations are there for the taking, offering encouragement and optimism, an opportunity to join, a chance to establish belonging. Ports are inviting by providing a haven of safety, a place to pause and take stock, a place to rest and recuperate, a place to take refuge without a need to provide an explanation. A Port listens with care, concern, and interest. A Port freely gives away time and attention, provides empathy, acknowledges fear, accepts reluctance, and communicates support by presence alone" (Riner, 2007, p. 2).

Perhaps *beacons* and *ports* provide a fitting analogy for the Align Initiative and the invitation they intend to offer children or families wherever they might find themselves on the spectrum. Beacons and ports also provide a frame of reference as the initiative navigates the uncharted waters to align services in Edmonton on behalf of the vulnerable children they wish to serve. To use another metaphor in keeping with this year's Summer Olympics, the Eight Man's Rowing with a Coxswain provides an image of the team effort required for the Align Initiative to be successful in their pursuit to deliver *gold-medal* quality services. Fortunately, many experts are already at the table with representatives from child care, education, health, children and family services, multicultural, aboriginal, along with bipartisan leaders; together they have the capability to garner the resources to ensure premium services are provided for young children.

Formation of an Alliance - Key Leadership Principles and Practices

Strategic Planning

By using the *Strategic Planning Guide* for B.C.’s Children’s First Initiative (see Figure 1), the progress of the Align Initiative can be charted. Step one is *getting started*. Hardly a fascinating title, but as the Initiative has discovered it is one of the hardest stages which is elongated both by the importance of the mission and also by the number of members to be incorporated into a cohesive alliance.

Figure 2.1. Strategic Planning Guide. (Figure imported from Munro, 2007).



Kaner’s description of the group decision-making process is applicable when he talks about the divergent ⇒ groan ⇒ convergent zones (1996). Initially, there is the dance of one step forward two steps back type of process as members test the waters, get acquainted and seek common ground. If there is a fluctuation in membership at this time it prolongs this stage as a lot of necessary time is spent informing and orientating new members. This issue was partially addressed with a summary document that was compiled in September 2007 by the Align steering committee.

Focus Meeting

Fortunately, invitational leadership was utilized right at the outset by the Align Initiative, when an invitation was extended to community partners and stakeholders by two associations that had already experienced success by collaborating with colleagues. Inter-Agency Head Start Network (IHSN) and City Center Education Project (CCEP – is a collaboration of seven Edmonton Public Schools) together they welcomed about 35 community partners at an initial meeting in December 2006. This broad group of community service representatives gathered for a facilitated session exploring how to better Align Early Childhood Services in North Central Edmonton.

As part of the programme, both hosting organizations presented their work within the city center catchment area along with a mapping presentation. This was followed by a time of whole group discussion and then in-depth small group discussions. Discussions centered on three main topics: (a) identifying other services, needs, and/or gaps for the north central quadrant, (b) identifying better ways to align early childhood development services for communities, and (c) assessing broadening the focus beyond the north central quadrant. The consensus that surfaced was to begin with this quadrant and then consider expanding later.

Through the discussions participants identified six themes that emerged as central:

1. There is a need for a new paradigm.
2. Seek to identify with whom the group needs to connect / partner with most.
3. Seek to engage the Community.
4. Look at how to fund the initiative – seek funders, individually and together.
5. One government ministry would be preferable to address all of the needs of children and the service providers that work with them.
6. It is critical to view children holistically in the context of their families and communities (Lashbrook, 2006).

A summary report was completed reflecting the feedback and sent to the delegates that attended the meeting. Representation included nine organizations: Head Start agencies, Capital Health, City Centre Education Project, Principals, Edmonton Public School Board, Edmonton Catholic School District, Children and Family Services - Region 6, United Way – Success by Six, City of Edmonton, and Child Adolescent and Family Mental Health (CASA), referred to as stakeholders elsewhere. It was further agreed at that time that a sub-group with representatives from this stakeholder group would continue to meet to work on moving the priorities of the broader group forward with Success by Six to coordinate the next steps. Other steps that participants thought could be done concurrently were: to consider long-term plans that were not reactive but proactive, set short-term objectives that would benefit children directly, secure the necessary resources to support the work, and to develop a coordinated political effort (Lashbrook, 2006).

Even at this early stage of the organization's formation result-based leadership measures (connecting goals and objectives to results) were put into place by determining the next steps, identifying a lead organization, ratifying a steering committee, along with assigning responsibility for necessary immediate actions.

The Continued Process of an Organization's Formation

After several meetings the steering committee was able to formulate the following goals in September 2007.

Short Term Goals:

- Gain a broad knowledge of what exists in the community
- Informed decision making /deliberate planning – Information is available to guide decision making to ensure there is no overlap in services.
- Broader collaborative services, partnerships and effective working relationships between programs
- Maximized use of current resources available

Intermediate Goals:

- Government is informed and is influenced to implement/support a comprehensive ECD system
- Research / Longitudinal study of child and community outcomes based on early childhood services is conducted with local information
- Common Understanding of the Spectrum of Services available for children.
- Better understanding of what the community identifies as important for young children.

Long Term Goals:

- Children and families have access to services in the community for optimal development
- Explore the possibility of an intake portal (streamlined access) – (potential to look at common intake forms/questions to gather demographics across programs) (Lashbrook, 2006).

The steering committee subsequently spent some time exploring partnerships: between Head Start and schools (both at the same location and at a separate location) and between a child care provider and a school (same location). However, nothing materialized from these conversations due to a critical member moving at that time. Even so a preliminary inventory of programs including the number of spaces within the CCEP boundaries was compiled.

An awareness that surfaced through the collaboration process was recognition of a need to build trust. Stakeholders expressed this even at the initial focus meeting as “we need to build trust so that we care as much about each others’ work as we do for our own. Perhaps trust begins with increasing our knowledge of each others’ services, and how these pieces fit together” (Lashbrook, 2006, p. 3). If people are to be valued and seen as important regardless of ability, then it is vitally important that trust is established and maintained. This is a foundational principle which gives phenomenological evidence to the validity of the invitational leadership paradigm and its four core values. Align will have to work diligently to build confidence and trust in the services that they provide and

to establish a reputation of doing what is best on behalf of all involved but primarily children.

The committee acknowledged that by early 2008 that they had not progressed much further in the process largely due to the fluctuation of members on the steering committee. Currently, three members have remained constant since the first exploratory stakeholders meeting in December 2006 representing Inter-Agency Head Start Network, Success by Six, and the representative for the Child Care Sector; such is the nature of volunteerism. By the outset of the year the Align Initiative realized the need to bring the previous conversations and relationship acquaintances into a form that would create a purposeful community. A purposeful community is: "one with the collective efficacy and capability to develop and use assets to accomplish goals that matter to all community members through agreed-upon processes. The development of assets includes tangible, financial, and physical resources, but also the talents of personnel, access to information and technology. Important features involve the development of "shared vision, shared assumptions, and shared ideals and beliefs about the core mission of the organization" (Marzano, Walters & McNulty, 2005). The three responsibilities to tackle next are shared vision, empowering teams, and building morale (Atha, 2006). Fittingly, developing a shared vision became the next objective.

The Invitational Process in Developing a Shared Vision

Highlights from the Questionnaire.

Early in 2008 as a researcher, the writer of this report became involved with the steering committee. At that time, the steering committee filled out an in-depth questionnaire specifically designed for their needs that consisted of 32 questions in an effort to gain more clarity and understanding about each other's work and to move the initiative forward. The administration of the questionnaire represents the desire of the Initiative to be as fully informed about the availability of present resources and programs as possible. An in-depth discussion on the findings of the questionnaire is addressed in Chapter Six of this document. Besides providing information, the import of the questionnaire was it provided an opportunity for organizations to share their beliefs, values, and goals. The integration of their input into one document allowed common values to emerge which stimulated and contributed greatly to the Initiative's development of a shared vision. Suffice to say that the highlights of this questionnaire were presented in a meeting which had a broad representation of stakeholders in attendance, though a dozen less were present compared to the initial meeting partly due to in-climate weather.

Ensuring Input from Stakeholders

This was the first follow-up session with stakeholders since the December 2006 strategy planning day. So, it was important to include a time for the steering committee to communicate their progress and the results of the questionnaire, but it was even more important to provide an opportunity to gather additional input from the stakeholders and to give them time to connect with one another. These two very important steps, involvement of stakeholders and facilitating communication cannot be overlooked. Such

steps help to build ownership and commitment, empower those in committees since they have the support of a broader base of colleagues, and engage the community by providing an opportunity for their input and contributions.

Participatory leadership or shared leadership is really the reverse of the top-down management style. In this paradigm leadership is at the base not the top, more like an inverted pyramid, where resources and efforts are focused on helping others succeed (Finzel, 1994). This may find application between Align service providers as well as working together to more effectively meet the growing needs of children and their families. Therefore, it was very important in this developmental state of the organization to gather once more to hear from the broader group and implement their input.

A second meeting was held on April 22, 2008 as way to re-engage stakeholders in setting the direction of the Initiative. The purpose of the meeting was to invite their input, gather additional information in setting priorities, identify strands to further the work of the Initiative, and to invite interested participants to consider joining a task force in the near future to work on specific goals and priorities.

The development of a shared vision for the Align Initiative began with the original stakeholders meeting in December 2006 and continued through many discussions during 2007 steering committee meetings. The 2008 questionnaire furnished additional impetus by asking members what they felt should be the top five goals of the initiative. Altogether, 48 specific statements were submitted by members as possible goals. Staff from Success by Six categorized them and eventually summarized these statements into seven specific goals which were presented to stakeholders at a meeting in April of 2008. During the meeting stakeholders were asked to rate the seven goals in order of the priority that they thought the Initiative should address first. Later the survey feedback from stakeholders was summarized and submitted to the steering committee.

Overall, the response of stakeholders was very favourable with all but one of the twenty participants signing the survey signifying their support of the initiative. In addition, six participants indicated an interest in joining a task force when they were at the formation stage. Through the survey procedure, vision statement # 2 was selected as reflective of the Initiative's vision which states "Aligning Early Childhood Services is dedicated to working collectively to create an environment that supports the best opportunities for all children." While statement # 6 was selected to represent the mission statement which says, "This initiative commits to working cooperatively with community partners to ensure that quality early childhood services are coordinated to support parents and by working together to enrich children's lives, and help them attain their full potential". Furthermore, at the conclusion of meeting the steering committee made a commitment to the stakeholders that an Annual meeting would be held to keep them abreast of the initiative's progress and to continue to invite their input. This is respectful of those interested stakeholders who want to keep their *finger on the pulse*, but were not able to commit time to the endeavour just now; as this provision allows them to contribute to the overall process.

Letting leadership come from the ground up allows those in the trenches, who know the tasks or needs best, an opportunity to lead in practical ways towards improvement. This empowerment and openness to ideas becomes a source of energy where creative solutions can be sought and implemented together.

In this instance, the journey to a common vision was both arduous and lengthy at times, but ever so necessary. Vision is a critical element as “it inspires actions and leads to achieving results” (Guide to State Agency Planning, 1999, p 3). The participatory process whereby stakeholders have a say about what values they wish to promote and then to come to a decision about which values will underlie the work of the project is very important. For this reason, the Align Initiative will have to work harder when they begin to involve parents, as they have not been part of the process as yet. Acknowledging that it will be more difficult for parents to eventually feel like equal partners can inform decisions around this phase. This will be a critical area of focus that Task Force II will undertake.

In summary, shared values are the foundation of developing a shared vision. Shared values are also the back bone of developing effective value-based partnerships. Nelson, Amio, Prilleltensky, and Nickels (2000) describe shared values as embracing the caring and compassion that have motivated people to invest time, energy, and resources in the work; a health-oriented perspective and belief in children's resilience and capacity to heal; a commitment to community-based approaches that nurture empowerment and participation; and a conviction that individuals and groups must work together and advocate at multiple levels for a more equitable distribution of resources and opportunities for all members of the community (p.8). Since, members had previously agreed to the process of seeking additional input from stakeholders prior to finalizing the vision, it was logical for the focus of the May 2008 meeting to be ratifying the vision and then to develop a partnership agreement.

Value-Based Partnership Development

What is the purpose for the partnership? How will the partnership enhance the mutual goals of the members? What are the needs and strengths of those involved in the partnership? These are a just a few questions that arise when a partnership is contemplated. Skage has identified some reasons agencies are motivated to work with each other that include:

- sharing expertise;
- improving services and access;
- limited or inadequate funding;
- meeting funders' criteria; and
- working toward the common goal of supporting and strengthening the family (1996, p. 24).

For additional reasons why community partnerships are explored see Appendix C. Each one of these aspects has come up in Align committee or stakeholder meetings. D. Morrison (2007) suggests that a good knowledge of the target population is also necessary for successful partnerships and even more effective if relationships have been established.

Nelson et al. (2000) persuasively state “once an agreement on the values and vision of the partnership has been reached, the next task is to develop working principles, or the collective norms, that will govern the group” (p. 9). They go on to affirm “it is through relationships that we live our values. For this reason partnership is an essential concept for the implementation of prevention programs” (Nelson et al. p 3). Developing

value-based partnerships is an approach that initially requires more time and energy but it has several positive outcomes as it: ensures a solid foundation and encourages staying power for the organization. It is also important to recognize that each partner has strengths and brings something valuable to the planning and implementation process. “This strengths-based focus has long been a key concept of community psychology” (Nelson et al. p.8).

Acknowledging present realities may help one to understand why more collaboration and partnerships have not occurred. For example, when a school is designated to have a preschool program added to its present services, why is Head Start not contacted to provide the service as might naturally occur in the business arena? Well there are several reasons why this does not transpire: different funding sources, teachers under union and contracts versus private teacher salaries, utilization of space formulas and differences in qualifying criteria. Negotiations would require the involvement of several parties which adds to the complexity facing those who wish to simplify services and to create spaces for preschoolers at a faster pace. For instance, negotiations between the school administrators, school board authorities, Alberta Education, Custodial Union and perhaps even the Alberta Teacher Association would be necessary. To add to the complexities, each entity has a separate mandate with differing priorities which makes coming to equitable resolutions very difficult but not impossible, nevertheless these are not changes that occur quickly. Unfortunately, hard fought battles are sometimes reversed when new administrators come onto the scene who lack a full appreciation of the consultation that transpired previously.

Three Levels of Partnership.

Therefore, the Align Initiative felt three levels of partnership were worth considering: cooperation, coordination, and collaboration. The adopted definitions were taken from Skage's (1996) work in *Building Strong and Effective Community Partnerships* and the examples are from D. Morrison's (2007) work *Creating and Maintaining Effective Partnerships*.

Cooperation - two or more agencies share general information about their mandates, objectives, and services. They may work together informally to achieve their organizations' day-to-day goals by sharing expertise and resources, for example, through support or referrals. It is a relatively superficial level of agency interaction, as in inter-agency meetings and informal networking. Agencies function primarily in a parallel peaceful co-existence. (Skage, p. 19). For example in Alberta, “a Family Resource Centre may partner with an Aboriginal agency to deliver a culturally appropriate program. (D. Morrison, p. 11)

Coordination - a multi-disciplinary approach where professionals from different agencies confer, share decision making, and coordinate their service delivery for the purpose of achieving shared goals and improving interventions (Skage, p. 19). For example in Alberta: “One agency is viewed as having specific expertise such as “mentoring” others who wish to have a mentoring component to their program would partner to some degree sharing staff, training and meet regularly resulting in a coordinated service. (D. Morrison, p. 11)

Collaboration - unlike any of the other models of partnership, collaboration requires two or more agencies working together in all stages of program or service development; in other words, "joint planning, joint implementation and joint evaluation". There is a cooperative investment of resources, (time, funding, material) and therefore joint risk-taking, sharing of authority, and benefits for all partners. The term collaboration has been used to describe integrations that result from blending provider disciplines and usually involves several organizations working together in a unified structure (Skage, p. 19). For example in Alberta: "Partners for Kids and Youth a coalition of organizations are working together to plan and implement a program. They hired a coordinator and one staff from each of the partners has been seconded. (D. Morrison, p. 11)

Skage (1996) cautions, coordination or even collaboration cannot overcome poverty, nor resolve all the problems of fragile families. The risk factors affecting many program participants are but symptoms of deeper societal ills that are beyond the reach of inter-agency collaboration efforts. Therefore, community leaders need to be careful that their collaborative efforts do not "mask or divert attention from the pervasiveness of such inequities" (p.25).

When evaluating the three levels of partnership in the May 2008 steering committee meeting, it was noted that these levels may be somewhat fluid. Depending on what is required based on the specific objectives or goals therefore the Initiative anticipates movement through these levels as determined by the work at the time. In terms of authority the Initiative is not a consensus decision-making entity, so members acknowledged that the organizations that they represent would continue to plan and make decisions independent of the Initiative and that expectations needed to be realistic in this regard. However, beginning straight away they would attempt to influence decisions by sharing information broadly amongst themselves, among their organizations and among their network circles. That cooperation could also begin around existing services represented by members to see how the Initiative can work more effectively and collectively to meet objectives. Lastly, that at this point, a pilot project provides the best prospect to develop true collaboration in delivering coordinated services.

Logic Model.

The logic model is a popular tool that is being used by many government and community agencies in the Edmonton area. Primarily it is a service plan that progresses in a logical manner as to connect all the critical elements into an integrated picture of the entire endeavour. It is a means of connecting the goals to measurable outcomes and assigning what will be the indicators of success prior to implementation. Some embedded language was not well known to stakeholders and consequently caution needs to be used when using unfamiliar terms such as *inputs* and *outputs* in the context of community work. Better recognition and connection can be gained by using common terms such as *activities*, *expected outcomes*, and *measurement tools* instead as these resonate and are therefore more meaningful to more people. Sensitivity to these issues needs to be heightened once involvement of front-line workers or parents are incorporated into the planning process. An effective leadership model emphasizes the importance of clear

communication based on a common understanding of terms and concepts which was an objective stated earlier by stakeholders. In order to continually improve, communication lines need to stay open and facilitate constant feedback. When input is sought leaders must listen actively to hear the common threads and to bring them together in a cohesive whole, where recognition for feedback is visible and the process honouring.

Despite the disconnect with language the Logic model provides a way of connecting goals and objectives to results while insisting that indicators of success be chosen beforehand. It provides a mechanism to demonstrate results-based leadership which is imperative to good use of resources, staying the course and for effective evaluation. The ability to track and measure progress provides on-going feedback. Hence, it is a tangible method for measuring success according to the original intent and vision of the organization. Nevertheless, measuring outcomes can be very complicated because of so many impacting factors that to state with certainty any cause and effect relationships must be done with careful prudence.

The development of the Partnership Agreement that is provided as Appendix D is a blend of the six major components of the logic model which includes: shared vision, shared mission, program name, statement of need, strategy, and rationale, along with a blend of D. Morrison's work on creating effective partnerships (2007). With the exception of the last six items in the table, the work of determining each category was previously completed by the Align steering committee, so it was a simple matter of plugging in the data into this framework prior to the May meeting. Even so there was a sense of completion that the committee had reached a pivotal stage in the development of the Initiative and had finally emerged from Kaner's *groan zone* and were now in the *convergent zone* (1996, p. 113).

Partnership Agreement.

D. Morrison's (2007) delineated key ingredients for a healthy partnership. The Align Initiative may wish to develop a survey using these factors to evaluate their progress and experience during the next year. Ingredients for a Healthy Partnership (p. 46).

- Know yourself
- Desire to work together
- Shared vision
- Common expected outcomes
- Cooperation
- Accountability
- Commitment
- Leadership
- Flexibility
- Shared decision making
- Practice
- Constructive means of resolving conflict practice
- Low stakeholder turnover
- Trust

The next stage for the Initiative involved the formation task force groups along with determining their focus in order to move the endeavour towards decision-making and action plans with eventually a targeted implementation date for a pilot project to commence the fall of 2009.

Strategic and Result-based Leadership

Figure 2.2. Aligning Early Childhood Service Partnership Structure

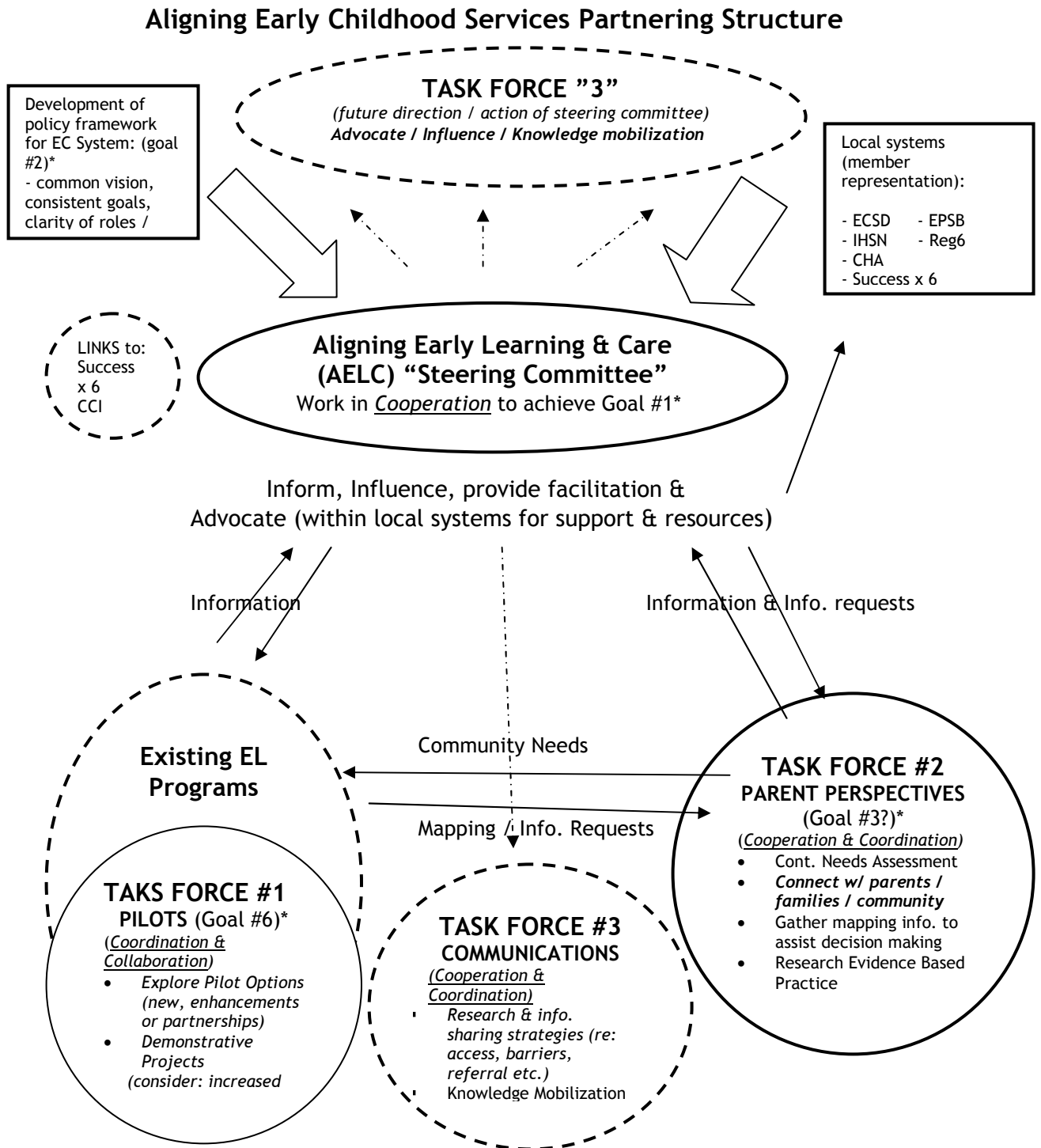


Figure 2.2 cont. Other Suggested Goals / Activities

ACTIONS: Drop or incorporate into existing task forces or create new task force.

- Common Intake form / Referral Process / Follow-up Processes
- Cooperative / Collaborative Parent Programs
- Seamless Home Visitation / Consistent Curriculum
- Extended PD & Training
- *Increased Quality Child Care Programs (included in TASK FORCE #1)*
- *Ascertain Funding Sources for Sustainability (future direction "3")*
- *Influence Governing Bodies and Policy Makers (future direction "3")*
- *Terms of Reference & Partnership Agreements (Steering Committee Task Prioritizing & task force development.*

(Italics themes emerging from stakeholder survey).

(Figure 2.2 was formatted by Kelly Hennig, Align Steering Committee Member, 2008).

Even after the initial meeting in December 2006 where a lot of interest and enthusiasm was generated it took many meetings and time together until the interest was transferred to commitment. It takes incredibly motivated and passionate individuals to take a spark of an idea and to move it a long into an entity. This initiative was fortunate to have at least three such individuals who bore the pangs of birthing this idea and provided consistency while others came and went as is the nature of start up endeavours. Once more structure was put into place then others were invited and motivated to join which has been described and reached a culmination in June 2008 with the formation of task forces.

Task Force Development.

According to the literature review that is given in-depth deliberation in Chapter Five, the various Children First Initiatives supply helpful examples of how similar projects have moved into implementation mode. A study of these 55 initiatives reveal that the most common methods used were either to divide members into several working committees with specific tasks to complete or to hire consultants, directors, or part-time staff to carry out the decisions made by the steering committee into actual implementation (Schroeder, 2005). Following a similar pattern, the Align Initiative has evolved to the focused, task force phase with three new committees beginning the fall of 2008: (Task Force #1) exploring pilot project options, (Task Force #2) community and parent involvement, and (Task Force #3) communication – research and evidence sharing. Stakeholders who indicated a desire to join a task force at the April meeting were invited to the June steering committee where a brainstorming session prioritizing needs and goals advanced to a consensus of what should be the focus of the task force groups. Once these were determined participants had an opportunity to sign up for the one they were most interested in. The steering committee is relieved that the Initiative is now posed to develop strategies and action plans within these three main task forces in order to forge ahead with the original vision.

The steering committee developed a short checklist for the task forces and have supplied the chairperson of the first meeting with some sample templates to serve as a

guide as they begin form their own group/team. It is expected that in the fall of 2008 task forces will begin to meet and can consider this checklist at that time.

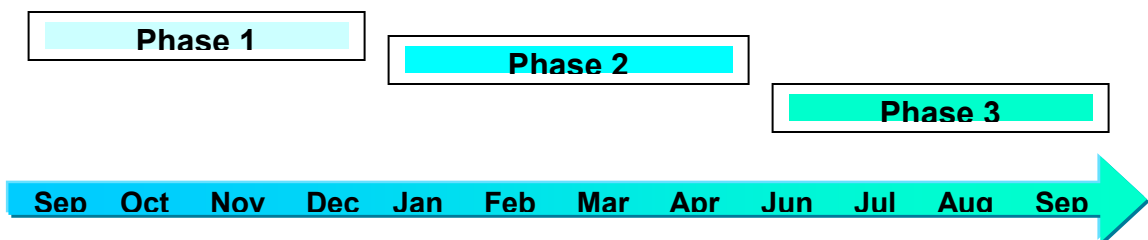
Task Force Checklist:

- Who are the members of your task force / are there any key stakeholders missing?
- Do you need to develop a separate partnership agreement or terms of reference for your task force?
- What format will you use to move to define the goals / objectives and outcomes expected (i.e. logic model, action plan etc.)?
- How will you ensure that the partnership agreement developed by the Align steering committee is reflected in the work of your task force?
- Is there specific support you require from the Align steering committee or other task force (i.e. facilitation, demographic information, research etc.)?
- How will you communicate your work and successes back to the Align steering group (how will you ensure accountability?)

Though task forces have been divided into groups, this does not make them a team (Page, 2007). As they begin to meet, team development will need to be part of their intentions in order to achieve effectiveness. In contemporary leadership paradigms like Invitational Leadership, leaders no longer control and determine, rather they offer guidance. Consequently, decisions are more often made in groups or teams that embrace a variety of views and interests in a flexible environment that remains responsive to change. Sometimes partnerships are referred to as team charters as well. To emerge as a team Lesley Bendaly contends ‘a team is a highly effective, cohesive group of individuals who work together with commitment to reach a common goal’ (as cited in Page, p. 2). A team charter enables members to understand and operate within a team structure within defined parameters such as the process for working together to enhance the overall productivity of the team and how differences between members will be handled as well (Page, p. 2). The task forces of the initiative will likely adopt the partnership agreement developed by the steering committee, but they may find that they need to make modifications as well to be effective in their specific objectives.

Proposed Task Force Time-Line for 2008-2009

Figure 2.3. Proposed Task Force Time-Line.



Phase 1 – Task Forces Begin to Meet

- Get to know team members – their work, their strengths and their interests and hopes for the task force
- Discuss needs and gaps for their particular focus /task force

Brainstorming possibilities

Phase 2 – Develop Action Plans

Develop a Plan for the Year and long-term objectives

Discuss resources

Available Resources

Required resources that members do not have access to currently
(E.g. funding needed and appropriate sources)

Divide duties and Responsibilities

Assign Roles

Phase 3 – Implementation

Gather resources together

Connect with others that need to be involved

Choose a kick off date

Implement plan

Evaluate

It is important that realistic time commitments are attached to the actions of each Task Force committee.

Decision-Making - Determination of Priorities.

The shared leadership model that the Align Initiative has employed worked well and will likely continue through the decision-making phase. For the past year, Success by Six has very capably taken the role of chairing the meetings and sending out the minutes and agenda each month. In the fall at least three task forces will begin meeting and will begin planning and making decisions regarding their particular areas of focus.

At some point soon the Align Initiative should consider employing a director to coordinate the many directions this initiative will begin to expand into. The most successful partnerships have committed resources; B.C. Children's First initiatives found that eventually hiring a coordinator was needed to move the work forward. "Success rises and falls on leadership" is an old adage that still has significance. A designated coordinator will ensure that there is time available to provide the necessary leadership. The skills and abilities of the person taking on the coordinator's position are very important, Skage (1996) says. "A proven capacity for building strong interpersonal relationships and a high level of initiative are among the qualities required in a coordinator; as many people point out, partnerships take place between people, not agencies" (p.67). This should be a priority concern of the steering committee that while momentum is building that someone who is committed to the vision is also able to devote the time required to ensure that those volunteering have the resources necessary to continue moving it ahead. If Align relies totally on volunteer hours and monthly meetings it will take considerably longer to achieve their objectives and they run the risk that the interest of organizations will wane. It is critical that they are posed to take advantage of opportunities when they arise to keep impetus and energy flowing through the initiative.

This observation leads to another area that will need attention very soon and that is securing funds to make the goals of the Align Initiative a reality. In fact, before a director can be secured, funds need to be in place. With the vision now clearly articulated and a mission statement along with a partnership agreement in place, Align is now

positioned to begin financial discussions and explore how they wish to raise the funds that will help the work move ahead.

In addition, this initiative has the potential to develop - tangible tools members can take away such as:

- a common intake form
- a consistent referral process
- consistent follow-up processes
- a seamless delivery in home visitation with a specific curriculum based on years of receiving home visits across service providers.
- Collaboration and cooperation in delivering parent programs in neighbourhood locations
- Extend PD & training by inviting other agencies & organizations especially child care providers (day-homes & daycares).

However, determination of such activities will now be the responsibility of the task force groups.

In charting the progress of the Align Initiative this paper began with using the Strategic Planning Guide (see Appendix E), it is evident that a organization's actual progress is not always as systematic as a plan on paper. Each step taken is not linear. In this case steps two and three creating a mission and vision statement came into fruition at the same time following the April stakeholders meeting. Step four became the formation of the partnership agreement, which includes identification of values and strategies. However, there is evidence of fluidity between steps five, six, and seven which included assessing the situation, identifying goals, and creating objectives and strategies, in a sense these will be revisited by the task forces as they form specific goals to their area. Steps seven dot zero and eight: establishing action plans and monitoring progress will be the focus of attention during this current school year primarily through the formation of the task forces which is the first action taken thus far. Nonetheless, this report should go a long ways in helping to fulfill step nine which involves documenting and communicating the plan. It also provides considerable information to better assess the situation (step five) and to form a solid basis for future decisions.

Leadership Summary

Projects that are successful establish a clear vision and regard leadership as a function to which many stake holders contribute, rather than a set of responsibilities vested in a single individual. Thus, collaborative leadership also called shared leadership encourages and provides excellent support for a wide range of improvement initiatives (Harris & Hopkins, 2000, p. 3 & 5). Research has found the best policy perspectives that service providers should practice to support communities in transition are based on:

- involving stake holders in key decision making and setting future directions
- acknowledging transition as a joint responsibility, rather than something "owned" by a particular group
- employing evidenced based research practices
- effective co-ordination and implementation of strategic plans
- recognizing the importance of relationships and providing time and resources to support relationship-building; and

- identifying the existing strengths, rather than deficits, of families and communities and developing strategies to build upon and extend these strengths. (Dockett & Perry, 2007, p.5)

The Align Initiative embraces these key features and seeks to continue to develop structures and create conditions that foster collaboration and will lead to the empowerment of families (Harris & Hopkins, 2000, p. 2).

PART 2 - RELEVANT LITERATURE REVIEW

Chapter 3 - Background to Early Learning

When a community contemplates true collaboration around the services provided for children a thorough understanding is required. The Align Initiative requested a literature review regarding pertinent issues, related to improving early childhood services, so that decisions would be founded on evidenced based research. The review begins by providing a brief background of the main contributors to the field of educational psychology, the theories behind child development, and accepted practices in early education today. After the background to early education comes an overview of current trends and notations of the main factors impacting early childhood learning.

Early Contributors and the Main Theories of Educational Psychology

John Santrock (2006) a school psychologist for many years and a professor at the undergraduate and graduate levels provides an overview of educational psychology by rehearsing the roles of those who have shaped the field and what follows is based on his work. He begins with William James who felt that it was important to observe teaching and learning within the actual environment in order to make recommendations to improved education. John Dewey emphasized the practical application of psychology, which promoted the view that a child is an active learner. Thorndike's contribution brought a strong emphasis on assessment and measurement into education. Skinner added another perspective by emphasising the behavioural aspects of learning and the ideal environment in which learning takes place. Then as early as 1958, Bloom highlighted the cognitive learning constructs which include the concepts of memory, thinking, and reasoning in order to help children learn. Finally, in the last few decades the emphasis has swung to the social, cultural, aspects of children's lives and how these factors impact learning (pp.5-7). Interested readers can find a time-line of the history of Early Childhood Education in G. Morrison (2007, p. 545).

Current trends are also supported by brain and behaviour research. "Biological theories such as nativism, ethology, socio-biology and behaviour genetics have gained popularity as developmentalists have sought to better understand the role of physiological process in development"...In addition, Bronfenbrenner's ecological theory has helped developmental psychologists categorize environmental aspects, while considering how they influence individuals too (Bee, Boyd, & Johnston, 2005, p. 53).

Social-cognitive theorists are interested in (a) person perception; (b) understanding of others' intentions; and (c) understanding different kinds of rules (moral versus conventions) all of which children are beginning to develop. These theorists are also able to offer better explanations and predictions regarding gender-related understanding and behaviour (Bee, et al. 2005, p.224).

Thus, the two main theorists of cognitive and social cognitive theories which impact current early learning programs and practices were developed by Piaget and Vygotsky. Piaget is known for his constructivist theory with developmental stages and characteristics of children's cognitive processes as his primary contribution (Hendrick & Weissman, 2006, p.11). Highlights of this theory are summarized below:

- Children play an active role in their own cognitive development (organization of thought)
- New mental and physical activity are important for cognitive development (assimilation)
- Experiences constitute the raw materials children use to develop mental structures (schemas)
- Children develop through interaction with and adaptation to the environment (accommodation)
- Development is a continual process achieved through resolving conflict of the mind (equilibration)
- Development results from maturation and the transactions or interactions between children their physical social environments (Morrison, 2007, p. 97; Santrock, 2006, p. 40).

However, Van Der Veer (2007) suggests the fundamental questions that bothered Vygotsky were “what makes us human and different from animals? What is human development all about? His goal was the creation of the *psychology of man*” (p. 139). Thus, a primary interest of his was how a child acquires the culture of his parents? Vygotsky also believed that much of children’s learning was structured by adults or older siblings by providing assistance or guidance which he termed *scaffolding* (Bee, et al. 2005, p. 47). He is also well known for his term *zone of proximal development* which describes the range of tasks that are too difficult for children to master alone (Santrock, 2006, p.51). Vygotsky maintained that language and cognitive abilities develop in part because of interaction with other people – the mind develops as the result of society’s action on it. He theorizes that by using the tool of language, “children are able to master themselves and gain independence and self-control of behaviour and thought... For language to have meaning it must be tied to the concrete world, and for the world to acquire meaning, they must have language” (Hendrick & Weissman, 2006, p.343). Thus, a child’s mental development cannot be separated from the social context in which it takes place; this forms the basis of Vygotsky’s sociocultural theory (Hendrick & Weissman, 2006, p.343).

A comparison of these two giants in psychology who were born the same year 1896, demonstrates how both have contributed immensely to North American’s understanding of child development since the translation of their work in the 1960’s. Vygotsky’s and Piaget’s views on education are summarized in Santrock (2006) with Vygotsky’s as “education plays a central role, helping children learn the tools of the culture” and Piaget’s as “education merely refines the child’s cognitive skills that have already emerged” (p. 55). Though these theories may co-exist, there are many educators who would more closely align themselves with one of these theories and whose teaching style reflects their preferred view.

Fit of style, modes of instruction, and the personality of the instructor, become dynamic tools that affect learner outcomes, cultural enrichment and even assessment of some standards. “Different sub-disciplines (e.g. dynamic assessment, cultural psychology) have been sprouting up and hundreds of articles have come out” based on Vygotsky’s theories that correspond with changes emerging in the field of early learning. Changes such as center based assessments for earlier identification, and the rise of cultural awareness and its significance (Van Der Veer, 2007, p.134). For extensive

elaboration on Vygotsky's work and current applications readers are referred to a new release *Lev Vygotsky* by René Van Der Veer (2007). Nevertheless in practice, cognitive and behavioural approaches continue to be the main focus behind learning acquisition in educational psychology (Santrock, 2006, p.7).

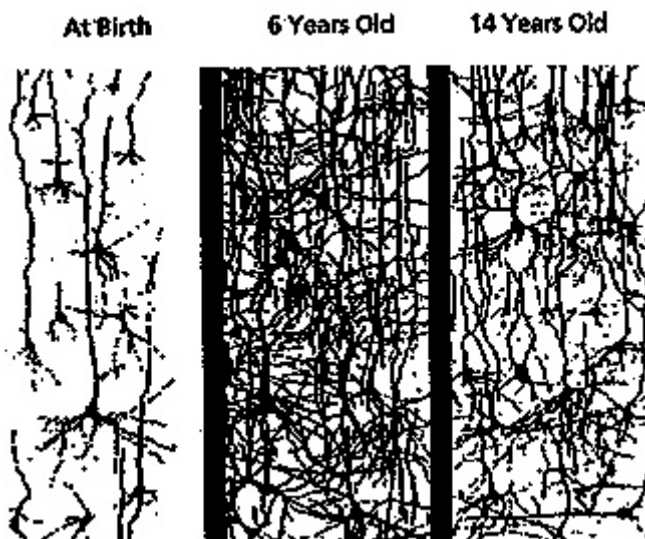
In addition, there has been considerable research examining the typical development of children. "This knowledge base has led to a movement within the field of early childhood education known as *developmentally appropriate practice* (DAP), which means the learning activities planned for children are placed at the correct level for their age" and are then suited to individual interests, abilities and cultures (Hendrick & Weissman, 2006, p. 9). Below is a collection of elements most often found in positive environments necessary for young children (G. Morrison, 2007, p. 101; Woolfolk, Winne, & Perry, 2000, p.447).

Positive Environment Factors:

- Implement routine and structure
- Encourage engagement and active learning
- Manage movement
- Support co-operative learning
- Be aware of the overall happenings and tone in the room
- Supervise several activities simultaneously
- Provide hands-on activities
- Plan centers and project-based activities

Brain Development

Figure 3.1. Progress of Brain Development in Youngsters (Figure imported from Holden, 2004).



Today's science isn't fixated on nurture versus nature, but on the interaction between the two and how they affect each other. As noted above environment is an important factor in child development. "Researchers know that the day-to-day qualities of a child's environment have profound effects on both the child's immediate development,

as well as adulthood” (Holden, 2004, p. 7). The diagram above illustrates how the brain of a child grows with increasing, multiple connections until the age of six. From six to fourteen years there is evidence of what scientist’s call *synaptic pruning*. This means the number of connections begin to decrease as the brain responds to environment, exposure, experience, and the child’s personal bent and interests. “By the end of adolescence, around the age of 18, the brain has declined in plasticity but increased in power” (Nash, 1997, p. 10). McCain, Mustard, & Shanker (2007) refers to this stage as “consolidating the pathways” (p. 15). A child’s brain development can be likened to the development of a city’s roadways, which begins with a basic two-way road system. But, as the population increases and patterns of travel emerge which are eventually recognized, the city makes some roads into arteries, and some into main thoroughfares. In this manner the volume of traffic can be managed more efficiently. In a similar fashion the brain develops discrete and organized pathways for easier retrieval and application of knowledge. The first three years of life are absolutely vital for providing experiences that are structured and predictable advocates Dr. Bruce Perry. He says "Experience is the chief architect of the brain" (Nash, p. 8). This diagram effectively demonstrates what research and logic have been proclaiming, that healthy child development requires a nurturing environment, repetitive exposure, and opportunities for experiential learning. These factors are critical to strengthen and retain the maximum number of connections to support life long learning.

Dr. Peter Huttenlocher, of the University of Chicago declared, “microscopic connections between nerve fibres continue to form throughout life, until they reach their highest average densities (15,000 synapses per neuron) at around the age of two and remain at that level until the age of 10 or 11” (Nash, 1997, p. 6). This is good news as it reveals that the window for intervention and support is wider than first believed. When this piece of the puzzle is joined with other research, early childhood educators can see how the pieces begin to fit together in a way that makes sense at the level of programs. The essential factors that are repeatedly mentioned in the literature are: identify children and intervene early, intervene often, and ensure interventions last for sufficient duration to make a lasting impact for the child. UCLA, Dr. Donald Shields exclaimed, “if there’s a way to compensate, the developing brain will find it. What wires a child’s brain, say neuroscientists--or rewires it after physical trauma--is repeated experience” (Nash, p. 7). Even though new connections continue to form throughout life, and adults can continually refurbish their minds through reading and learning, “never again will the brain be able to master new skills so readily or rebound from setbacks so easily” (Nash, p. 10).

Key Program Components - Play and Literacy

Accordingly, play and literacy are the two most common elements to be found within preschool programs. Roskos and Chirstie (2007) describe a 9 month study conducted by Rowe in a preschool setting with 2-3 year olds that confirmed a connection between play and literacy with even children this young. In the study, play around books served various purposes from engaging, constructing, to imaging. Connections with a figure included in the book outlined dramatic play patterns such as: personal response, re-enacting for pleasure, sorting out author’s meanings, assuming characters, connecting the

book with toys in extension, are ways that propel questions and sense-making (p. 41-57). These may support later developing skills like comprehension, predicting, visual imagery, and self-monitoring (Roskos & Christie, 2007, p. 217).

Another study in Australia that asked children to categorize learning and play activities revealed some interesting findings. Children associated teacher absence with play; more specifically, children made links between play and the presence of peers both in parallel and cooperative activities; whereas, children most often identified learning activities as those that were teacher directed. These results demonstrate that children differentiated between teacher involvement and teacher direction. "This suggests that children understand the different roles played by the teacher during classroom tasks and use this information to make judgments about learning" (Howard, Jenvey, & Hill, 2006, p. 381).

Play is highly motivating and enjoyable for children, which may be one reason pretend-play is found across cultures and can support narrative competence. Parallels between make-believe play and narration is even more apparent with group pretend play. It fosters social skill development while expanding gains in contribution, coordination (turn-taking), negotiation, collaboration, and improvisation necessary for success (desired outcomes). The contributing authors in this work also discuss how pretend play supports the theory of the mind when children judge what other players know and understand, which they add to their knowledge (Roskos & Christie, 2007, p. 216).

There is a great deal of sentiment around play, but so far researchers are unable to verify that play has an essential role in learning (Roskos & Christie, 2007, p.15). Practitioners who differentiate between the terms early learning and early education usually do so because of views regarding child development and the importance of play in the life of a child.

In Australia, for example, children are not required to enter formal education until the age of six years (although many do attend at five years old). And though the United Kingdom supports play as good medium for learning it is not always evident in classroom practice. The same pressures faced in other countries by educators are likely faced by educators in Edmonton as well; pressures that make the facilitation of learning through play difficult. For instance, testing, increased administration, mixed-age classes or parental pressure to start academic drills early are all challenges that must be overcome. These implications affecting professional practice have been documented previously outlining the difficult challenge that uniting developmental and educational objectives presents for practitioners (Howard, et.al, 2006, p. 391).

The reason for including a discussion on play and literacy in this paper is that these concepts are under pressure because of new trends on models of delivery for preschoolers. "Three megatrends in early education are: (a) the new science-based approach, (b) the movement toward early childhood learning standards and standards-based education, and (c) the view that early literacy is the cornerstone of school readiness" (Roskos & Christie, 2007, p. 219). These competing trends do not place the same value on play which results in decreased playful learning opportunities or even elimination. Rather than seeing play as a stand alone activity, educators should seek to expand play's role to compliment and enhance the new pre-K basics.

Readers interested in studying more about play, should read the book *Play and Literacy in Early Childhood*. As so many authors have contributed to this work and "each

chapter presents a scaffolding strategy: guided participation (Neuman), play challenges and hurdles (Hall), and play planning (Bodrova & Leong), where the adult raises the bar and help children progress to the next level of development” (Roskos & Christie, 2007, p. 223).

Child Care

The necessity for child care is a present societal reality. In the U.S. 13 million children are in child care arrangements, with child care more common for children under five than being cared for at home. In today's economy many families find it impossible to get by without two incomes, so 64% of mothers with children under six are in the workforce (Hendrick & Weissman, 2006, p.14-15). It is unlikely that the demand for child care will lessen in the future with the high costs of living, especially in Edmonton with its high housing costs. According to Statistics Canada, the average cost for housing in Edmonton in 2006 was \$1129 per month (<http://www40.statcan.ca/101/cst01/famil10g.htm>).

Additional data helps to paint the local statistical picture. CTV News reported on March 24, 2008 that there were only 111 new preschool spots created in Edmonton since July 2007. In November 2005, the average cost of a licensed day care or day home space in the Edmonton region was \$538 per child per month. Almost half of the children in care received a subsidy to help offset this cost to families (Twilley, 2006, p. 32). About one in four child care staff in licensed facilities has a Level 3 certification (Twilley, p. 32). In 2005, there were 52,853 children 0 to 6 in Edmonton (Twilley, p. 7). The following breakdown compiled by Children & Family Services Authority-Region 6 (CFSA) summarized that there were: 234 day cares with 11,147 licensed spaces, 197 nursery schools with 4,227 spaces, 13 contracted day home agencies with 3,002 spaces, a total of 12,407 preschool children attending licensed facilities, 4,927 subsidized preschool children in the Edmonton region (Michelle Craig, MSLP CCC, Regional Manager Preschool Health Services, personal communication, August 20, 2008). Therefore, approximately 12,400 preschoolers were cared for in a licensed facility, representing only about one quarter of the 0-6 child population. Evidently, three quarters of the children were being cared for in another manner. Sadly, children may suffer if parents who must work cannot find appropriate child care arrangements (Twilley, 2006). “West Virginia et al. (2002) proposed good child care supports the intellectual, social, and emotional development of children. Children who receive warm and sensitive care... are more likely to trust others, to enter school ready to learn and to get along with others. Conversely, children who receive inadequate or barely adequate care are more likely to feel insecure with teachers, to distrust other children, and to face possible later rejection by other children” (p. 7).

Moreover, G. Morrison (2007) lists the characteristics of a quality child care as: “licensed, safe, low caregiver/child ratios, developmentally appropriate programming (DAP), individual needs are accommodated respectfully, culturally appropriate, communicates and provides resources to families, provides staff with training and development, and uses an accredited program” (p. 189). This list of features may appear easy to implement, but agencies beg to differ. According to a recent survey of B.C.'s Early Childhood Educators (ECE) (First Call B.C. et al. 2007) retaining quality staff is

just the beginning of problems facing child care providers. This sector has complained for a long time about the low wages and lack of benefits for staff. Consequently, delays in dealing effectively with the human resource issues have contributed to the child care crisis facing many provinces. “We are not creating new spaces; we are closing centres (especially infant/toddler centres) because of the lack of qualified staff” (First Call B.C. et al. 2007, p. 4). Key themes that emerged from this recent survey were:

- Need for a universal child care system
- Stable and sufficient funding
- Child care is in crisis
- Recognition of ECE as a profession that needs to be well- paid and respected
- ECE desire on-going training.

The results of this survey brings to the forefront the need for an integrated, well planned and funded system for early learning and child care that includes a strategy for fair wages concluded the participating early childhood educators (First Call B.C. et al. 2007).

Many of these observations are echoed by child care providers in economically booming Alberta. “Society benefits when child care is readily available, affordable, and of high quality. However, these three requirements of good child care are quite difficult to meet” (Twilley, 2006, p. 32). In many ways this demonstrates that we are past a philosophical debate about if or should governments help support parents in caring for their own children; rather the question becomes” how can governments best support parents as they care for their children”? The answers most worthy of pursuit are well founded innovative ideas that provide long-term solutions.

Recent changes to the provincial subsidy rate provide evidence that the Alberta government is taking important steps in securing enduring solutions. “Effective September 2008, eligible low- and middle-income families using licensed or approved out-of-school child care for the hours before and after school will be able to receive a subsidy. Eligible families with children in Grades 1-6 will also be able to access the Kin Child Care Funding Program effective September 2008. Kin Child Care helps families pay a non-custodial relative to look after their child(ren) when they are at work or at school”. See Table 3.1 (<http://child.alberta.ca/home/710.cfm>).

Table 3.2. 2008 Alberta Child Care Subsidy Rates.

Subsidy Rates - As of September 1, 2008 (REGION 1-8, 10)			
Subsidy Rates (up to a maximum of):			
	Infant (1-18 mos)	Toddler (19+ mos) to kindergarten	Grade 1-6
Day Care/Out of School Care	\$628	\$546	\$310
Family Day Home	\$520	\$437	\$310
Extended Hours	\$100		
Stay At Home Parent	\$1,200 (max per year)		N/A
Kin Child Care Funding		\$400	\$200

*Parents are responsible for any additional fees.
 *Note: Subsidy rates will be increasing by 3.5 per cent for parents using licensed day care centers and approved family day homes effective September 1, 2008.

(Table imported from the Alberta Government Website - <http://child.alberta.ca/home/710.cfm>).

The Alberta government needs to be applauded for implementing some needed changes to the child care landscape. Approving an allowance for Kin Child Care is a positive move for several reasons: (a) it gives parents more affordable choices, (b) it may result in more spots becoming available for parents who have no available kin, (c) it will save taxpayer dollars by \$146 for every child in Kin Care, compared to day care and (d) in the long run some future study may prove that it was in the child's best interest. To be sure in the short term some families will be very grateful as a new school term begins.

However, this step does not go far enough as it lacks sufficient recognition of the multicultural perspective that many families embrace where extended family live within one household. Therefore, the criteria that the relative be non-custodial, falls short of providing adequate, legitimate options for many families and it may not achieve all the possible benefits listed above as it is too restrictive.

Furthermore, the Alberta government has opened the door a crack for stay at home parents by subsidizing stay at home parents \$1200 per year. However, if any subsidy is to make a difference and make this option more realistic for families, it will have to be at least on par with the Kin Child Care level of funding.

Basis for a Home Visitation Programs

Research findings suggest that when parents are actively involved in their children's development and education that children have more positive attitudes towards learning, and exhibit healthier behaviours (Meyer & Mann, 2006; Reglin, 2002).

One study from a teacher's perspective by Myer and Mann (2006) involved 26 teachers who conducted initial home visits prior to the commencement of school in two rural areas in a Midwest state. They were able to complete 364 visits with 76% of the families represented for an average of 14 visits per teacher. Upon completion only one teacher viewed the experience as an opportunity; the rest felt it should be a requirement. They felt that it was a valuable experience where important insights were gained along with many benefits to the parent/school partnership, thus it was well worth the effort. But past preschool, few schools provide teachers the time and resources to make it a part of teacher job expectations (Johnston & Mermin, 1994).

Nevertheless, it is confirming for preschools with home visitation programs, as the teachers in this study reported the following benefits occurred over the school year after completing just *one* home visit prior to the start of school:

- Parents perceived them to be more approachable
- Children were not so anxious during the first day
- Parents were more receptive
- Improved positive relations with parents
- More connected to students
- Improved communication with parents
- Increased teachers understanding, empathy, and appreciation
- Realized which children would not receive help with homework (eg. parent unable to read)
- Over all teachers gained a better perspective of the strengths and challenges that a child might face in the classroom (Meyer & Mann, 2006).

In addition, to illustrate the enduring effects of home visitation, Reglin exhibits several earlier studies as evidence for the critical aspects of parental involvement. "The earlier parents get involved in their children's educational process, the better students tend to do in their overall performance (Shepard, 1995). When this partnership is formed, continual communication is established, an understanding of role expectations and preferences is achieved and parental involvement is maintained (Gettinger and Guetschow, 1998). Strengthening parents' role in the learning of their children has been identified by teachers as an issue that should receive the highest public education policy priority (Peressihi, 1998). Thus, when parents are involved in their children's education, children are more likely to succeed in school" (as cited by Reglin, 2002).

There was also one other study considered for review, because it was conducted in the same demographic area in which the Align Initiative exists. Certainly some characteristics of the study's participants would be very similar to the families that Align designs to support. The Parent Support Program study conducted by nursing and education professors used a resilience model and a dual approach of "crisis intervention to stabilize" and "involvement to develop" (Drummond, Weir, & Kysela, 2002, p. 22). In the first intervention steps, home visitors focused on the immediate needs of families such as adequate housing, income, safety. In the second step approach, a developmental screening test along with an adult parenting inventory were used as assessment tools to determine appropriate goals in early intervention, life-skills development, and health issues. This study reports that a system of varied service levels was developed, where participant's need and motivation determined the intensity and duration of program delivery. This multidisciplinary program provides a broad spectrum of services and uses multiple routes (health, social services, education) to have greater effects. It also found successful interventions "take into consideration the individual differences of parents and children, and programs that target the groups at highest risk (e.g., young, single, and low-income mothers) demonstrate the greatest benefit" (Drummond, et al. 2002, p. 27). "Drummond, et al. (2002) also cited earlier research, the best programs recognize the family as a key resource for change and set goals determined by family members, who then agree on a plan of action (Pearson, 1990). Other findings suggest that appropriate evaluation of programs provides accountability, increases efficiency, determines the direction of treatment, and contributes to empirically based models of practice (Bloom, Fischer, & Orme, 1995). Furthermore, unless practice can be described and quantified, program managers and evaluators have difficulty determining if and how interventions are being implemented" (as cited in Drummond, et al. 2002, p. 28).

Considering the research that has been conducted regarding home visitation it appears that a full range of advantages exist for home visitation programs. See Appendices F and G for further highlights and summaries. According to several additional studies visiting children's homes has the potential of achieving the following:

- Improving communication between home and program/school (open communication)
- Healing the breach between home and program/school (trust)
- Building positive home program/school relationships (relationships)
- Ease child's entry into program/school (security)
- Creating 3-way partnerships: parents, program/school, and community (team building)

- Improve support for high-risk children and families (support)
- Provide intervention to increase child development (implement prevention strategies)
- Child centered approach (emphasis on meeting the child's needs)
- Enhance parent involvement in program/school (respect & opportunity) (Acosta & Platin, 1997; The American School Board Journal; Davies, 1991; Johnston & Mermin, 1994; Jonson, 1999; Reglan, 2002; and Meyer, 1990).

Factors Impacting Early Education & Learning

Social Issues.

Demographic and economic factors that impact families include: parents spending more hours at work, increasing levels of economic hardship for families and growing numbers of young children spending time in child care settings of variable quality, beginning in infancy. These circumstances compound the problem of implementing programs that work. One startling statistic included for West Virginia, states that “only 59 % of the children eligible for Head Start receive it” (West Virginia et.al, 2002, p. 9)

According to Bee et al. (2005) families of the working poor make up about 10% of Canadian families, who often find themselves cycling in and out of the poverty range. Persistent poverty leads to conditions in which the disadvantages experienced by young children are sustained over time, and developmental problems they may have are not likely to readily improve. About one out every four children under the age of 6 is affected by the effects of poverty. However, they go on to report that this poverty rate for Aboriginal children is more than double and for single-parent female families the rate is 50% compared to 16% of all Canadian families living in poverty. The effect of poverty on children is strongly associated with “poorer health, social problems, and lower educational achievement...In addition, they are more likely to experience malnourishment, hyperactivity, delayed literacy and math development, have friends who are in trouble, and have lower rates of participation in sports” (Bee et al. p.227).

In addition to the above statistics; discussions with social workers and front-line workers who perform home visits confirm that families, who are struggling to meet basic needs, don't have the resources to create rich learning environments for their children. Nearly all parental energy is expended providing food, clothing and adequate housing; which unfortunately is “often in decaying neighbourhoods with high rates of violence and many such families move frequently, which means their children change schools often” (Bee, et al. 2005, p.228). Sadly the consequences are children lack stable friendships, live in more chaotic environments, become more stressed as overall the neediest families have fewer supports and resources. When the entire neighbourhood is poor, parents usually have fewer resources to rely on and children have more violent adult models and fewer supportive ones. When the entire neighbourhood lacks connectedness and stability and adults do not collaborate to support one another, then the effects are worse still (Bee, et al. p.228). “As Jeffers and Olebe (1994) point out, it isn't difficult to see that supporting learning means supporting families” (as cited in Skage, 1996).

Changing Family Structures.

In 1996, two parent families were still the most common living arrangement for children in Canada, with the national average at 74 % and Alberta's rate at 81%, according to Statistics Canada (Bee, et al. 2005, p.203). Of Canadians who were raised in two-parent families, 92% report that they had a happy childhood whereas only 72% of Canadians who experienced divorce before 15 years of age report happy childhoods (Bee, et al. p.206). Overall, the divorce rate in Canada has remained fairly constant for the past three decades, affecting about 28% of Canadian children who live in stressful situations (Bee, et al. p. 204-205). In Alberta approximately 8000 divorces occur each year (Statistics Canada). Evidence leaves little doubt that divorce and instability in families is traumatic for children as their behaviour may be disrupted for several years (Bee, et al. p. 224).

Furthermore, divorce seems to have enduring effects. Clearly, "children living in more stressful family structures (single-parent and stepparent) have greater vulnerability to health problems... and this is true when such other difference between the families as race, income, and mother's level of education are factored out" (Bee, et al. 2005, p. 204). When comparing U.S. statistics from the 1960's to 2004, the number of children being raised in a single parent home increased from 6000 to 21,000 and married couples with children decreased from 55,000 to 49,000 (numbers in thousands)(G. Morrison, 2007, p. 496).

Woolfolk et al. (2000) also cite some statistics that are not surprising: 21% of children in Canada live in low-income families with many children being raised by a single parent usually the mother or are part of a blended family. "In 2004, 27.5% of lone-parent families in the Edmonton area lived below the low-income cutoffs, compared with 8.7% of couple families with children" (Twilley, 2006, p. 28). [Readers are referred to Twilley for the retrieval of many helpful statistics for the Edmonton region]. Meanwhile children in middle-class homes may have only one sibling, more "things", but less time with parents (Woolfolk et al.). "Joan Isenberg in *Growing Up too Fast* says, the increased pressures and responsibilities of our time place stress on children while simultaneously redefine the essence of childhood itself" (as cited in Woolfolk, et al. p. 87).

Considering the impacts of these statistics collectively, it is no wonder, "psychologists agree that family relationships constitute one of the most if not the most, influential factors in early childhood development", thus the parent-child relationship is of primary importance (Bee, et al. 2005, p.195). Skage (1996) concurs, "Children acquire their basic cognitive and linguistic skills within the context of the family" (p. 10). Preschoolers who are securely attached to their parents experience fewer behaviour problems and are more likely to develop positive relationships. Conversely, children with insecure parental attachments display more anger and aggression toward both peers and adults in social settings such as daycare or preschool (Bee, et al. p.196).

Bee, et al. (2005) explains how Child Developmentalist, Diana Bumrind, focuses on four aspects of family functioning "(a) warmth or nurturing; (b) clarity and consistent rules; (c) level of expectations; and (d) communication between the parent and the child" (p. 197). According to her the most optimal outcomes for the child occur when the parents are not overly restrictive, explain things to the child and avoid the use of physical

punishments, yet maintain high expectations, described as authoritative parenting (Bee, et al. p.197).

“Landy and Tam (1998) found that the rates of aggressive behaviour and hyperactivity in children of families with consistent parenting styles were less than half the rates found among other families” (as cited in Bee, et al. 2005, p.197). Parents who demonstrate consistency between what they say and what they do (parental modelling), effectively influence prosocial behaviour in their children (Bee, et al. p.213). “Good parenting practices are common in all socioeconomic status (SES) levels, but when children of lower SES are exposed to inadequate parenting practices they become more vulnerable to a wide range of problems” (Bee, et al. p.224).

Canada is a developed, industrialized nation that values safety, health, civility, and economic and cultural prosperity. Since most Canadians value a fair and just society, they embrace the ideal that all children should have an equal chance at becoming successful adults (Bee, et al. 2005, p.229). However, Bee et al. also presents the argument that there is “no income level below which a child is destined to fail or above which a child is guaranteed to succeed” (Bee, et al. p. 229). Increasing incomes alone are not sufficient; what is also required is the creation of pathways for opportune access.

Multicultural Considerations.

Sensitivity to the diverse multicultural population of most urban centers deserves thoughtful and careful consideration as well. Service providers are capable of making adjustments that will make a big difference. For example, Nelson et al. (2000), provide several proactive measures that can be implemented. Leaders should make a conscious effort to ensure discussions are not dominated and to allow time for the voices of those whose language and cultural background is different. Meetings should be held at times and in places that are most conducive to participation from community members. In addition, providing interpretation, transportation, and refreshments are other ways in which groups can encourage more participation (p.8). Valerie Pang, an noted expert on cultural issues cited by Santrock (2006), believes that many educators do not take into account sufficiently the cultural background of the children they teach. Most of the time educators don't share similar background experiences, nor live in the neighbourhood in which they work. She suggests that staff can improve their connection with parents and children by shopping in the neighbourhood, reading community newspapers, by using local examples in their content and in this manner make a concerted effort to learn the rhythm and culture of those they wish to teach (p. 10).

Other researchers offer additional suggestions as a way of building bridges:

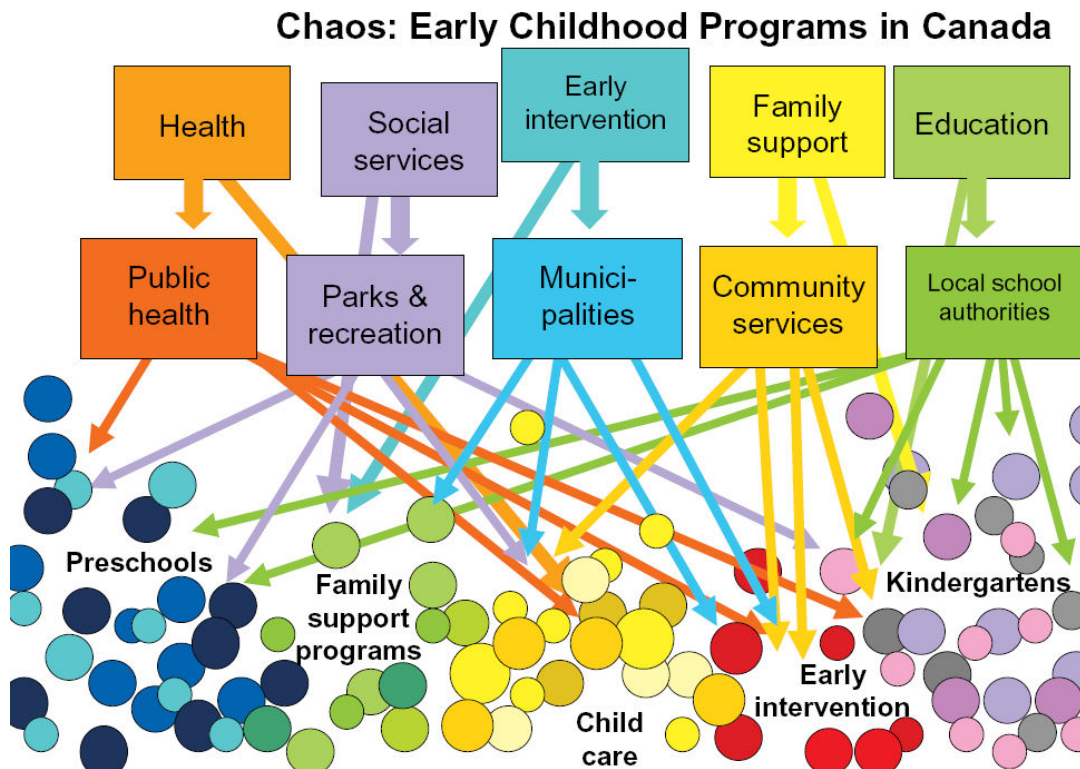
- Hire teachers from ethnic groups represented in the preschool community
- Learn the songs and rhymes from the other cultures represented or have a parent come in occasionally to lead a circle-time
- Encourage children to bring stories and props from home and utilize them in the classroom
- Weave materials and snacks from various cultures deliberately yet casually into the regular routine of preschool programs
- Demonstrate sensitivity to customs and holidays (Hendrick & Weissman, 2006, p. 232).

Encouraging relationships that “foster deeper understanding... is the purpose of multicultural experiences with the hope that each child feels included and valued and also feels friendly and respectful toward people from other ethnic and cultural groups” (Hendrick & Weissman, 2006, p. 232). These two basic threads are woven through programs that are proactive “(a) teaching that everyone has many unique and precious differences to be shared and appreciated (honouring diversity) and (b) teaching that all people have many basic needs in common”. Therefore, the basic goal of cultural pluralism should be the realization that “everyone is worthwhile and that each child brings with her special things she has learned at home that can benefit the entire group” (Hendrick & Weissman, 2006, p. 229). Multicultural awareness is learning about other cultures while children also learn about their own to enable them to integrate commonalities and appreciate each other’s uniqueness (G. Morrison, 2007, p. 426). Thus, according to the latest research, culture and education exert stronger influences on children’s development than Piaget originally believed, so it is important that proper respect be given to this issue by the Align Initiative (Santrock, 2006, p.49).

Additional consideration should also be given to this issue as, “ethnic minority children have been excluded from research for so long, there is likely more variation in children’s real lives than research studies have indicated in the past” (Santrock, 2006, p. 26). For example, cognitive assessments and speech and language assessments are not sufficiently standardized for non-English speaking children and problems exist with instruments either over identifying or misidentifying the needs of children.

When empowerment provides people with the intellectual and coping skills to succeed and create a more *just* world, then an important aspect of multicultural education is achieved. “It involves giving children the opportunity to learn about the experiences, struggles, and visions of many different ethnic and cultural groups with the hopes that minority children’s self-esteem will be raised, prejudice decreased, and tolerance increased” (Santrock, 2006, p. 168).

Figure 3.3. (Figure imported from McCain, Mustard, & Shanker, 2007).



Presently, in Canada we still have a patchwork of social programs with various criterion for eligibility. In 2000, The National Children's Agenda (NCA) began work to address this area and developed a shared vision that includes four goals for children

1. physical and emotional health;
 2. safety and security
 3. success at learning; and
 4. able to engage in social responsible behaviour
- (Bee, et al. 2005, p.229).

These goals offer direction and parameters for the Align Initiative to consider.

Chapter 4 - Models for Early Learning Programs

Given the overall purpose of the project which is to develop a seamless continuum of services it is appropriate to review various models of early learning programmes. What follows is a synopsis of several exemplary programmes.

Broad Perspective

The Sandbox Investment written by David Kirp endorses a vision of society that does well by doing good. It is a good read for any staff member of the organizations involved with Align. Although it is essentially an American perspective; it covers many matters that are relevant to the promotion of early childhood education (2007). "By showing that preschool is a wise investment, economists have drawn the support of business leaders and politicians...Pre-K isn't simply about enrolment – the particulars make all the difference. Good preschools can rewrite the scripts of children's lives, but a four-year-old doesn't gain anything from attending a prekindergarten where untrained instructors, large classes, driven by narrow objectives, substitute skill-and-drill for thinking. Since advocates of high-quality preschool can't monitor every prekindergarten, the challenge is to design a system that will sustain a culture of quality – one that gives parents useable information, lays out the best practices, and offers inducements to preschools that improve themselves" (Kirp, 2007, p. 266).

Southeast Kansas Community Action Program.

This model is based on Southeast Kansas Community Action Program (SEK-CAP) after they implemented Positive Behaviour Support (PBS). The model was implemented for 0-5 programming under the direction of the Head Start administration and grew over time to include Early Head Start, the home-visiting program and the inclusion of community partners. The region recognizes the success of the program is due to the leadership of SEK-CAP (Fox, Jack, Broyles, 2005, p.6). SEK-CAP in addition offers support through Emergency Shelters, Family & Community Services, General Public Transportation, and Housing. (For more information visit their website at <http://www.sek-cap.com>).

Southeast Kansas Community Action Program (SEK-CAP) Model Summary along with Leadership Strategies that were implemented for sustainability include:

1. Collaboratively building a vision and setting expectations:
 - a) Seeking and valuing the input of stakeholders
 - b) Identifying performance goals
 - c) Dedicating time to on-going process
 - d) Using data to make decisions and monitor progress
 - e) Foster a climate of risk-taking
 - f) Identifying and implementing evidence-based practices
 - g) Refocusing resources to support promotion and prevention rather than just intervention
2. Comprehensive Training Program extended to include:
 - a) All Center-based staff
 - b) Home visitors

- c) Child-care partners
 - d) Family Members
 - e) Community-based professional staff and
 - f) PBS facilitators
3. On-going Support for Key Relationships:
- a) Development of leadership teams to work with PBS Consultant to problem solve, plan training and to review of individual implementation plans.
 - b) Outreach to families
 - c) Working with community collaborators using:
 - Open, regular communication
 - Team-based approach
 - Data based decision-making
 - Solution orientated
4. Celebrated Successes such as described below:
- a) Outcomes for the Program - staff satisfaction, improved quality of program, team planning, increased comprehensive strategies, 50% reduction in staff turnover...
 - b) Outcomes for Children – decreased referrals for mental health, supporting each other, understood and followed behaviour expectations, improved transitions...
 - c) Outcomes for Staff – better skilled to support children, tools to address challenging behaviour, collaboration with community resources, and increased confidence. (Fox, Jack, & Broyles, 2005, p. 6-7)

This outline is comprehensive and includes many best practices from a leadership perspective. It appears that collaboration was intentionally used to create a shared vision based on common values. Admirably, the program is proficient at tying objectives, resources and results together to achieve the desired outcomes.

Not surprisingly, SEK-CAP was selected by the Center on the Social and Emotional Foundations for Early Learning (funded by Head Start and Child Care Bureaus in the U.S. Dept of Health and Human Services Administration) to be a Partner in Excellence (PIE) This information was summarized from the Program-Wide Positive Behaviour Support document (Fox, et al. 2005). PIE teams worked with the Center to demonstrate effective practices and to serve as models to other programs and communities, which further served to refine and strengthen the success of SEK-CAP itself (p. 13).

The development of relationships is at the core of leadership principles and is emphasised in this model. Moreover, the fostering of positive reciprocal relationships with children and their families is absolutely essential for an endeavour such as SEK-CAP and the Align Initiative. These relationships serve as the foundation for all interactions, support and teaching opportunities. Other critical investments in relationship building are also between staff members, with key outside consultants or resource providers along with community partners with similar visions (Fox, et al. 2005, p.8).

This model also found that it was “important to build consistent supports within the family’s daily community contacts”. For that reason they have invited child care workers, school staff, and mental health partners to their training sessions for PBS in an effort to help develop a shared understanding of what works when working with families. “It seems senseless for a family to have several family goal plans to meet the

requirements of each agency when all can work together to develop one family-centered plan that addresses each of the family's strengths and needs" (Fox, et al. 2005, p.9). By cooperating and coordinating continuity of care and services, resources can be allocated more efficiently without becoming burdensome to the family. As the Director of SEK-CAP Linda Broyles says, it is important that organizations share their successes with other community partners and become good neighbours by adding to the knowledge and best practices for early learning (Fox, et al. p.9).

Lastly, this model demonstrates respect for the family. Families are included in family-focused training programs, and are asked to participate as members of the child's developmental support team. Parents are acknowledged as the child's first and most important teacher. "Family Educators assist families in developing tools and activities to promote their child's social competence and to address their challenging behaviour" (Fox, et al. 2005, p.10).

The keys to the SEK-CAP Model are:

1. Started small by sharing training opportunities with other partners
2. Good model of leadership practices
3. Emphasised the importance of building relationships with community partners
4. Implemented strategies in the home and gave support to parents
5. Devoted resources to become a training site for other early childhood programs (Fox, et al. 2005).

West Virginia Kids Count Program.

West Virginia Kids Count (2002) is an advocacy model that best relates to some of the long term goals of Aligning Early Childhood Services in Edmonton as articulated following their December 06 meeting or initially articulated. Ideas can be found in this document that involve increasing public awareness through education and mobilizing the private sector by using print and broadcast media. They have experienced success by partnering business leaders with social services professionals. By disseminating information relevant to making positive policy, program, and system changes including legislations in health, child care, and welfare reform on behalf of at-risk children and their families, they have greatly increased their effectiveness (West Virginia et al. p.4-6).

In addition, they have broadened the base in making Kids Count by making it a shared enterprise and calling for citizens to become involved as part of the solution by providing access to a toll free number. To close the gap between what is known and what is being done; they suggest that building public understanding and political will is necessary in order to gain broad-based constituency for change. The key for active implementation is being frank about the costs and funding requirements for good care (West Virginia et al. 2002, p.25). In order to further these endeavours Kids Count is engaged in a three year campaign to address: (a) the shortage of good child care for low-income, working families, (b) harness the tremendous power of quality child care to transform the lives of children and break the cycle of poverty, and (c) tap into the enormous resource business can be for child care (West Virginia et al. p. 28). "If all children are to enter school ready to succeed, every community must have an ample supply of well-functioning programs. One effective system, combining regulatory,

administrative and program functions is superior to many separate ones" (West Virginia et al. 2002, p.28).

Educare.

Another early childhood initiative is called *Educare*, which seeks to increase accessibility of early care and education services while creating linkages to help families access the services they need. Educare pilot projects have exemplified high levels of collaboration across community programs and professions while utilizing innovative strategies to improve the quality of programs. For example, monthly training sessions have brought together the home, facility, and center providers as well as other early childhood professionals which is raising the sense of professionalism and purpose (West Virginia et al. 2002, p.14-15).

The Educare collaborative also identified some of the key challenges facing child care centers as need for additional staff, staff training, increase in staff salaries, non-traditional work hours, programming for children at risk for developmental delays and behaviourally challenged children plus the cost of child care. In addition, there is a need for proper materials and equipment to properly implement curriculum and developmentally appropriate practices (West Virginia et al. 2002, p. 20). Educare funds have been used to help fill some of these gaps by providing staff to sub and fill in spots when staff are ill, to increase wages upon completion of additional training, lower adult-child ratios with additional hiring and lower staff turnover rates (West Virginia et al. p. 21).

Longitudinal Preschool Studies

Perry Preschool Project.

Kirp provides a succinct summary of the *Perry Preschool Project*; his work is used as the primary source for this section (Kirp, 2007, p. 50-57). In the decade prior to the intervention not a single class had scored above the tenth percentile at Perry Elementary, whereas a premier primary school in the same town of Ypsilanti never had a class score below the ninetieth percentile. In 1961, David Weikart began the Perry Preschool Project with 123, three and four year old children who were randomly assigned to an intervention or a control group. The intervention group received a half-day preschool experience five days a week for two years where the teacher to child ratio was 1-5. Teachers were well trained (most had master degree's) and well compensated at public school rates. Teachers also visited each home for 90 minutes once a week during the school year, communicating a key message "read to your child".

Data has been repeatedly collected on this group from the time they were seven to eleven, then at the ages of 14, 15, 19, 27, and remarkably again at 40 in 2004. This extraordinary track record of 97% retention rate for those who were involved in the study is not by chance, but due to the high commitment level of teachers who have been both persistent and diligent over the years (Kirp, 2007, p. 53).

Initially findings were mixed, but by the fourth grade the intervention group had higher achievement scores. This finding alone is note worthy. For the children in the

study, this positive outcome is four years post intervention, not simply one year with pre and post tests. It causes one to wonder how often good ideas or programs are abandoned because of political impatience or the lack of sufficient data.

Fortunately, this was just the beginning of positive effects found for this longitudinal study. During school years improvements were found for achievement tests, grades, high school completion rates and earnings as well as lowering crime and welfare use which have endured (West Virginia et al. 2002, p.11). In adulthood, nearly twice as many have earned college degrees, they are more likely to own their own home, car, and have a savings account. On average they earn 25% more than the control group which put them well above the poverty line and only half as many have gone to jail with fewer less likely to use drugs. They are more likely to be married, raise their own children, and have fewer health problems (Kirp, 2007, p. 54). All in all, more are responsible, stable and contributing citizens.

The preschool program has continued under the founder's direction and the High/Scope name (G. Morrison, 2007, p. 152). As to the causal factor for its success – it does not appear to be singular. Was it the problem-solving curriculum, the well-trained teachers, the home visits, or the low ratio of children to teachers? Another consideration was the creativity factor that spawned energy and momentum which when partnered with deep relationships that developed over the months must too contribute to the successful venture. Kirp (2007) says, “it remains to be seen whether it's possible to build onto the Perry study or kids-first results to turn these elegant experiments into projects of national-scope” (p. 257).

Carolina Abecedarian Project.

The Carolina Abecedarian Project provided intensive early intervention with children from low-income families. One hundred and eleven children received nutritional supplements during the first years of life and their families received social service referrals for as long as needed or until the child was eight years old. Half of the children (57) received elaborate year-round, all-day, educational child care preschool programming that promoted the development of cognitive, language, and adaptive behaviour skills until they were five years old. (This is similar to a year around program in Edmonton operating under the name of *Oliver Center*). The parents also participated in parent group meetings and children had follow-up school services until they were eight. When the children were 15, those children who had received a preschool intervention had higher IQs, scored higher on achievement tests and had lower incidence of special education and grade retention. Again, at 21 years the children who received the preschool intervention were twice as likely to still be in school, were three times more likely to have attended a college, more likely to have a good job, and half as likely to have been teen parents (West Virginia et al. 2002, p.12; Kirp, 2007, p. 58).

Child-Parent Centres – Chicago.

Arthur Reynolds has spent the majority of his professional career analysing the effects of the Child-Parent Centers in Chicago (Kirp, 2007, p.43). He is considered an expert on this preschool program; hence this section relies primarily on his analyses.

“Although significant progress continues in understanding the effects of preschool programs, questions remain about the reliability of long-term impacts for large-scale programs, cost-effectiveness, and the causal mechanisms of change” (Reynolds & Temple, 2007, p. 2). Reynolds and Temple describe recent findings on the impact of the Chicago Longitudinal Study of the Child-Parent Center Preschool (CPC) program that now because of the age of the subjects extend into adulthood. As the program has been run by the Chicago Public Schools for 40 years, its consistent evidence with positive effects and high economic returns have significant implications for policy development. The study commenced in 1977 and continues to investigate the lifecourse development of 1,539 children, 93% of whom are African American, 7% Hispanic who attended government-funded early childhood programs in preschool or kindergarten in high poverty neighbourhoods in Chicago (2007, p. 2 & 5).

Reynolds and Temple (2007) describe the context, in addition to the small classes of 17 children and 2 staff, including a certified teacher, each center has a Head Teacher who functions as a principal. A Parent-Resource Teacher who runs the parent program in the Parent Resource Room, a School-Community Representative, and school nurses and other auxiliary staff who provide health-related services. A kindergarten and school-age (Grade 1-3) component also have been implemented as part of the larger CPC extended intervention model with at least one teacher assistant in each classroom. The program includes three components: a child-centered focus on the development of reading/language skills, parental involvement, and comprehensive services. CPC model included a half-day preschool program for three-four-year-olds, a half-day or an all day kindergarten program, and 2 or 3 years of school-age intervention in co-located elementary schools (p. 3-4).

This longitudinal study and the associated hypotheses provide a foundation for understanding how early childhood programs lead to longer-term effects, and the environmental conditions that promote or limit success. As shown, the effects of preschool are “transmitted through (a) developed cognitive and scholastic abilities (cognitive advantage hypothesis), (b) social development and adjustment (social adjustment hypothesis) (c) parents’ behaviour with or on behalf of children (family support hypothesis), (d) children's motivation or self-efficacy (motivational advantage hypothesis), and (e) the quality of the school environments children experience post-program (school support hypotheses)” (Reynolds & Temple, 2007, p. 7).

The CPC program has been successful in demonstrating high economic returns through promoting school achievement, higher educational attainment, and economic wellbeing for participants and reducing rates of remedial education, child maltreatment, and juvenile and adult crime. (See Appendix H). “At a cost of roughly \$8,000 per child for 1.5 years of half-day preschool, the program generated a societal return per participant of over \$84,000. This is a return of \$10.15 per dollar invested. Exclusive of intangible crime victim savings, the return per dollar invested was \$7.14.... Total benefits to the general public (taxpayers and crime victims) were about \$57,000 per child. The largest benefit was in crime savings as 49% of the total benefits were in reduced criminal justice system costs and averted crime victim savings. The second and third largest benefit categories were program participants’ increased earnings capacity (30.2% of total) and resulting tax revenues projected from higher educational attainment (10.7% of total)” (Reynolds & Temple, 2007, pp. 12 & 13).

Given the program’s history of thriving within existing services systems, these findings have special relevance for policy makers (Reynolds & Temple, 2007, p. 3). At the age 24 follow-up study with 1,400 of the study participants (which is a phenomenal 91% retention rate), Reynolds and colleagues found that after adjusting for many family background factors, CPC preschool participants had greater well-being in health and social behaviour as well as educational attainment and occupational status (Reynolds & Temple, 2007, p. 8).

According to Reynolds analyses of the Child Parent Centre in Chicago six active ingredients emerge that promote enduring effects in early childhood learning: (Reynolds & Temple, 2007, p. 15-17).

1. A coordinated system under single administration of continual service from age 3 through the primary grades.
2. The length of program – duration is positively correlated with improvement in learning gains with enduring effects into adulthood.
3. The teaching staff should be well trained (either certified or degree holders) and fairly compensated.
4. Program content needs to be responsive to all children with an intensive emphasis dedicated to the enhancement of educational and social skills.
5. Comprehensive family services to support the child’s needs also need to be provided.
6. Programs need to have on-going evaluations to measure effectiveness and cost benefit relationships.

Comparisons.

Reynolds and Temple have put together a table of 22 of the most common U.S. preschool programs mentioned in research literature see Appendix I for more information. Moreover, “the value of the Perry Preschool, the Abecedarian Project and the Child-Parent Centers in Chicago is now widely accepted” (Kirp, 2007, p. 266). They have become the gold standard because of their large sample size, the longitudinal of the studies, and key outcomes have been demonstrated with cost-benefit analysis as well.

Table 4.1 - *Key Outcomes According to Cost-Benefit Analysis.*

Outcome	Perry Preschool	Abecedarian	Child-Parent Centers
Original sample sizes (program, control)	58, 65	57, 54	989, 550
Sample recovery for high school completion (%)	94	95	87
Special education services by age 15/18 (%)	15 vs. 34	25 vs. 48	14 vs. 25
Grade retention by age 15 (%)	ns	31 vs. 55	23 vs. 38
Child maltreatment by age 17	n/a	n/a	7 vs. 14
Arrested by age 19	31 vs. 51	ns	17 vs. 25
Highest grade completed by age 21/27 (mean)	11.9 vs. 11.0	12.2 vs. 11.6	11.3 vs. 10.9
High school completion by age 21/27 (%)	71 vs. 54	70 vs. 67 (graduation)	66 vs. 54
Attend college by age 21/27 (%)	33 vs. 28	36 vs. 14 (four-year)	24 vs. 18
Employed at age 21/27 (%)	71 vs. 59	70 vs. 58 (teen mothers)	n/a
Monthly earnings at age 27 (\$)	1219 vs. 766	n/a	n/a

Note: For Perry, special education is for educable mental impairment (i.e., mental retardation) placement by age 15. Ages for educational attainment and employment are 27 for Perry, 21 for Abecedarian, and 22 for Child-Parent Centers.

Abbreviations: ns, not significant; n/a, not available.

(Table imported from Reynolds & Temple, 2008, p. 116).

When comparing these three studies, the age of entry varied from infancy to three years of age and the mean duration of the intervention also varied from one and half years to five years. CPC is a much larger study with a sample size 11-18 times the other two, with 20 sites compared to 1 site. The children were all from a low SES background and predominately African American for all three studies. Furthermore, “the curriculum appeared to be less important since the programs spanned from Perry’s child-initiated approach to Chicago’s blended / teacher-directed approach”; enduring effects are more tenable if programs provide services that are intensive and dedicated to the enhancement of educational and social skills (Reynolds & Temple, 2007, p. 16).

What is also interesting is Perry was an urban study, Abecedarian a rural study, and the Child-Parent Center an inner city study, yet the results of all three are very similar with effects enduring over two decades. Such evidence provides a strong indication that these effects could be generalized if quality preschools of equal calibre were implemented in other localities. According to Reynolds (2008) the active ingredients to reproduce similar outcomes with high returns are:

1. Opportunity for More than 1 Year of Participation.
2. Well-trained and Compensated Teachers.
3. Class Sizes under 18 and Child to Staff Ratios less than 9 to 1.
4. Instruction that is Diverse & Literacy Rich.
5. Comprehensive Family Services.
6. Average Yearly Cost per Child no Less than \$5,000 (2004 dollars).

These are the elements that leaders involved with Align should give careful consideration to as the initiative moves into the action and pilot phases of the project.

Table 4.2 – Comparison Chart of the Three Longitudinal Studies.

Characteristic	High-Scope Perry Preschool Project	Carolina Abecedarian Project	Child-Parent Center Program
Years of operation	1962–1967	1972–1977	1983–1985
City and context	Ypsilanti, MI	Chapel Hill, NC	Chicago, IL
Location	Urban	Rural	Inner city
Location	Elementary school	University center	Elementary school or adjacent to
Number of sites	1	1	24
Child attributes	Low SES	Low SES	Low SES
	IQs of 70–85	High risk	Reside in Title I area
Race/ethnicity	100% black	96% black	93% black
			7% Hispanic
Entry age	3 years	1–4 months	3 years
Mean duration	1.8 years	5 years	1.6 years
Length of day	Part day	Full day	Part day
Other components	Weekly home visits	Nutrition	Outreach
			Occasional home visits
			Health services
Mean class size	22	12 (infancy)	17
			12 (preschool)
Mean child-to-staff ratio	5.7 to 1	3 to 1 (infancy)	8.5 to 1
		6 to 1 (preschool)	
Curriculum emphasis	Cognitive and social	Language and social	Language and social
	Child-initiated	Traditional	Teacher-directed
Staff compensation	Public school	Competitive with public schools	Public school
School-age services	None	K to grade 2	K, grades 1 to 3

(Table imported from Reynolds & Temple, 2008, p. 115).

“A recent US survey found that 87 % of the populace supports public funding to guarantee every three and four-year-old access to a top-notch preschool” (Kirp, 2007, p. 3). However, agreeing that something is important and doing it is not altogether the same thing as the later is much more difficult and as Chicago has found not easily sustained. The numbers of CPC sites have decreased from 25 to 13 (Kirp, 2007, p. 43). The consequences of reduced resources and diluted services caused two long-term head teachers-principals to resign in 2006, so disheartened by the lack of will and funds to continue to sustain a working model that has demonstrated positive outcomes enduring over twenty years, they gave up the fight. Their perception was reinforced as decreased positive effects were found according to Reynolds results in 2002. He said, “people downtown who make these decisions don't see what works for kids” (Kirp, p.43). Quality is the bottom line. Good programs benefit kids, especially those at-risk, whereas weak programs may even have a negative effect (Kirp, p.42). It is feasible that the Align Initiative will encounter similar obstacles. Conducting a literature review, allows the learnings of others to instruct those in leadership, so they can pre-plan how to address related issues.

Targeted Programs Versus Universal Programs.

Targeted programs versus universal programs is a major discussion that eventually surfaces regarding models for early education and it remains the most controversial with supporters on either side. Based on the Chicago experience a community can attain an affordable universal model for preschool or a quality targeted model for preschool, but it appears neither government nor private contributors can sustain a quality universal preschool system. As mentioned earlier, the Child-Parent Centers in Chicago came close; unfortunately their numbers have decreased from 24 to 13 operating sites (Kirp, 2007). Literature surrounding this issue continues to bring into context the sharp contentions between quality and affordability.

According to Lynch (2007), high quality Pre-K programs are cost beneficial and worthy of government funding, both in universal and targeted formats. He advocated: “a case for public investment in either a targeted or a universal pre-k program can be made with the best policy depending in part on whether a higher value is placed on the ratio of benefits to costs (which are higher for a targeted program) or the total net benefits (which are higher for a universal program)” (p. 31). He also found, that during the first eight years of a targeted program, costs exceed offsetting budget benefits, but by a declining margin. From the ninth year on, offsetting budget benefits exceed costs by a growing margin each year, culminating in a net budgetary surplus of some \$57 billion in 2050 for the U.S. (Lynch, p. 6).

High-quality universal pre-K programs costs almost \$6,300 per child and could be expected to enrol nearly seven million participants by 2008, when it is fully phased in the U.S. However, by the same year, offsets for some of the current expenditures on state pre-K programs, special education and Head Start services for children who will be attending the proposed universal pre-K program, would require approximately \$33.3 billion in additional government outlay (Lynch, 2007, p. 6). According to this description, Edmonton already offers a universal pre-K system through the neighbourhood Head Start programs and with Alberta Education's, Program Unit

Funding for children with special needs accessible by most service providers. Still, other researchers estimate that quality programs in 2006 cost between \$8000 - \$13,000 in the U.S., so the additional costs may be much higher than Lynch's estimate (Reynolds & Temple, 2007, p.12; Kirp, 2007, p. 58). Partners in the Align Initiative would be wise to do a comparable accounting analysis.

"Schechter (2002) found that low-income children in economically integrated preschools fared better than comparable children in targeted programs that served only low-income children" (as cited in Lynch, 2007, p. 19). This kind of data can not be immediately applied to the Canadian context or to Edmonton, as Albertans enjoy one of the premium public education systems in the world, with the majority of students integrated into their neighbourhood school and only a few students educated in private institutions compared to the U. S. educational scene. It may however, have some application to specific schools in very low SES neighbourhoods that educational consultants could evaluate.

Lynch makes other statements that seem contradictory but are more applicable to the Canadian context. "Children in public pre-k had larger gains than children in all other forms of preschool. Several researchers have concluded that the quality of private preschools on average is so poor that they offer little or even no benefit to participants" (Lynch, 2007, p. 26). Some service providers would insert that these remarks are an accurate summation of the present daycare landscape in Edmonton. But, again terms such as private, public, universal and targeted can sometimes add to confusion as the U. S. and Canadian contexts are very different. Consequently, it would be misleading to compare these results directly to the Alberta / Edmonton framework. Therefore, research needs to be evaluated in context and data carefully extracted if there is any intention for application. Authenticity and credibility, important elements from a leadership perspective, can also suffer if accuracy and understanding are not part of the evaluative process. Furthermore, attempts at replications and implementation are likely to go awry.

All the same, it is especially true that "well-designed preschool programs can help many children overcome glaring deficits in their home environment" (Nash, 1997, p. 2). Considerably less data is available to compare children's development from non-risk environments and to what degree they might benefit from universal programs prior to their kindergarten year. It is quite safe to assume that the ratio of improvements or benefits would not be the same for these youngsters than have been attained for their at-risk counter parts. Policy makers and program directors have to carefully consider what purpose they are attempting to achieve.

It is unfortunate that sometimes targeted programs fail to reach many of the children they are designed to serve. "Lowest SES group has a greater percentage, but a smaller number, of vulnerable children. Conversely, children in the middle SES groups are less likely to be vulnerable, but because of the size of the group, this is where the most vulnerable children are found. Restricting programs to vulnerable children in the low SES group therefore misses the majority of children experiencing difficulties" (McCain, Mustard, & Shanker, 2007, p. 42). This was an observation also made by stakeholders of the Align Initiative. Therefore, consideration of this argument adds weight for the advocates of universal programs. However, an alternative smart-system model is presented under proposed improvement strategies, Chapter Seven that utilizes Alberta's two universal gateways (Health care / immunization and Education /

kindergarten) to locate the children in need of intervention or support services in order to provide them with at least three years of mediation.

Table 4.3 - *Cost-effectiveness Estimates for Preschool Programs to Third Grade*

Developmental stage	Focus	Location	2002 dollars			
			Benefits	Costs	B – C	Ratio
Preschool						
Child-Parent Centers	Targeted	20 Chicago sites	74,981	7384	67,595	10.15
Perry Preschool	Targeted	1 Ypsilanti site	138,486	15,844	122,642	8.74
Abecedarian Project	Targeted	1 NC site	135,546	67,225	68,321	2.02
RAND study of preschool in CA	Universal	State of CA	11,375	4339	7036	2.62
National PreK	Targeted	National	18,126	5700	12,426	3.18
Synthesis for 2050 (Lynch 2007)	Universal	National	11,400	5700	5700	2.00
Synthesis study (Aos et al. 2004)	Targeted	58 programs	17,202	7301	9901	2.36
Kindergarten						
Full-day K* synthesis	Universal	23 programs	close to 0	2343	Negative	<0
School-age						
Tennessee STAR, small classes, K-3	Universal	79 schools	23,913	8454	15,459	2.83
K-2 synthesis of small classes (25 to 15)	Universal	38 studies	6054	2170	3886	2.79
Grade 3-6 synthesis of small classes (25 to 15)	Universal	38 studies	2995	2170	825	1.38
Child-Parent Centers school-age	Targeted	20 sites	6928	3268	3660	2.12
School-age						
Reading Recovery*	Targeted first graders	General	1610	4830	-3220	0.30
Skills, Opportunities, and Recognition	Universal	Seattle schools	14,810	4712	10,098	3.14
PK-3 intervention						
Child-Parent Centers	Targeted	20 sites	40,245	4447	35,798	9.05

Note: Lynch's (2007) estimates were the most conservative. Total benefits relative to costs were \$12.10 and \$8.20 for targeted and universal programs. Using the relative program cost for the Abecedarian Project, the ratio of benefits to costs was \$3.78. Full-day kindergarten cost is relative to half-day kindergarten in Washington State (Aos et al. 2007) and is converted to 2002 dollars. Estimates from syntheses of small classes (Aos et al. 2007) based on a reduction from 25 to 15 students per class.

* Estimates are not based on formal cost-benefit analyses.

(Table imported from Reynolds & Temple, 2008, p. 129).

As both the public and catholic school boards in Edmonton have recently opened their doors by extending their spectrum of programs with either full-day Kindergartens or preschool programs in certain neighbourhoods; the transition from targeted to universal may be slippery. The Table 4.3 created by Reynolds and Temple shows that the cost-benefit ratio for targeted is programs much higher than it is for universal programs. The school boards along with the Align Initiative might learn from the Chicago experimentation to carefully consider their purpose for a particular program along with the high cost of sustainability to deliver quality programs before attempting to implement universal preschool programs.

Due to the increasing number of working parents and those who want more than “mere child minding”, (Kirp, 2007, p.49) parents have become more demanding and preferences may be tied to convenience. Therefore, governments and school boards may feel compelled to respond by implementing a universal program; if so they should first consider the full-day kindergarten program. Costs are reduced in adding the half day because space and resources for the most part are already secured. Transportation and secondary costs are diminished for both programs and parents. In addition, it decreases

the number of changeovers for children while increasing the optimum opportunity for a successful transition to the important school years.

However, there are other considerations that come into this discussion as well. The loudest parental voice does not speak for all parents; consequently parental choice is a concern. Some parents wish to stay home during these critical and formative years in a child's development and to nurture and raise them according to their culture, traditions and values. This is becoming an increasingly difficult option and unavailable to many parents unless they are either very wealthy or understand the decision will require tremendous sacrifice. Dr. Mustard (2008) and others advocate for communities and governments to consider the necessity and benefits of extending maternity/paternity leaves to at least 18 months with one day off per week until the child is three years old. The attachment theory and the consistency of at least one caregiver are major elements to consider in the formation of a child's sense of well-being. He discusses other benefits along the lines of health, social, emotional, and educational with cost savings and enduring effects because of the investment in children early (McCain, Mustard, & Shanker, 2007). The bottom line when discussing care for small children is the parent/adult ratio, the quality of time spent with the child and what the child actually perceives as care (do they feel loved, cared for and valued).

Soft elements such as love are not discussed much in the literature as they are so difficult to measure. Still, a great deal of community leadership has "moved from the head to a heart that cares for people. It is more about how you care and less about what you know" (Page, 2006). Maslow's well-known hierarchy of needs underscores essential qualities that are needed for children and individuals to develop a healthy sense of self. Caring from the heart is why when quality care is found in the home, no preschool program will be able to duplicate it. Perhaps Align can facilitate more discussions around care of children in their own home with a stay-at-home parent, a more viable and culturally sensitive option. This is an area where the government could also review present policy, to see what adjustments may be made in the framework that would support a variety of alternatives. For further discussion on this matter see the Chapter Seven.

Summary of Model Literature Review - Key Elements

Finding principles of effectiveness are critical to securing long-term effects and cost-effectiveness. According to Reynolds & Temple (2007), "a coordinated system in place beginning at age 3 and continuing to the early school grades is the first step in effectiveness" (p. 14). When programs provide coordinated or "wrap-around" services under a centralized leadership structure rather than under a case-management framework effectiveness is increased. In addition, program implementation within community partnerships utilizing one administration can promote stability in a child's learning environment which can provide smoother transitions from preschool to kindergarten and from kindergarten to the early grades. The CPC program provides a viable example of an established public funded program in the third largest school system in the United States (Reynolds & Temple 2007, p. 14-15).

Based on accumulated research evidence, greater investments of funds are warranted in ensuring that programs and interventions strategies are high quality

following the key principles of effectiveness found in the most cost-effective programs. "Among these are the provision of services that (a) are of sufficient length or duration, (b) have high intensity, (c) have low class sizes and ratios of children to teachers, (d) are comprehensive in scope, and (e) are implemented by well-trained and well-compensated staff" (Reynolds & Temple, 2008, p.134).

The Top 10 Characteristics of Programs that Work are:

1. Program is of sufficient duration
2. Low Staff-to-child ratios and small class size
3. Highly trained and educated staff
4. Experienced, skilled and committed staff
5. High levels of interaction between the staff, children and parents.
6. Parent involvement
7. Respectful and trusting relationships between the staff, children and parents
8. A stimulating and safe physical environment
9. An adaptable program that meets the individual needs of each child
10. Low staff turnover

(Reynolds & Temple, 2008, p.134; West Virginia et al. 2002, p. 24).

Partnerships are key. Southeast Kansas Community Action Program (SEK-CAP) found through the use of joint training, planning / problem solving together, with a team-based support for individual children, meaningful partnerships can be formed. Building alliances with families, child-care providers, mental health teams, and special services staff who can work together to extend the work beyond the classroom are most valuable (Fox, et al. 2005).

The successful components to the SEK-CAP model are:

1. Start small by sharing training opportunities with other partners
2. Practice good leadership principles
3. Emphasise the importance of building relationships with community partners
4. Implement strategies in the home and give support to parents
5. Devote resources to become a training site for other early childhood programs (Fox, et al. 2005).

This illustrates a crucial element as the best community models implement key leadership principles which greatly aid their success. Leaders who take responsibility for the vision and direction of an organization by putting others at the center and giving them attention while serving their interests are most effective in gaining trust and credibility as well (Kouzes & Posner, 1993).

Another key principle of effectiveness is that program length strengthens learning gains. The CPC program was offered beginning at age 3 so children had two years of intervention prior to kindergarten. Preschool length was positively associated with school readiness skills, lower rates remedial education in the early grades. "Moreover, the total number of years of participation of CPC preschool and school-age intervention linked to higher school achievement and well-being into adulthood" (Reynolds & Temple, 2007, p.15).

Studies with cost-benefit analyses usually include components such as: family centered home-visitation, preschool or prekindergarten programs, full-day kindergarten, and class-size reduction programs. Although programs at all ages show evidence of returns above cost recovery, some improvements are short-term and others have long-term benefits lingering into young adulthood. Preschool programs for 3 and 4 year-olds generally have the highest financial returns. For example, “returns for Perry Preschool Program assessed at age 40 were estimated at over \$16 per dollar invested” (Reynolds & Temple, 2007, p.14). Or stated another way, by the year 2050, the annual benefits of targeted pre-K programs in the U.S. are expected to total \$315 billion (\$83 billion in government budget benefits, \$156 billion in increased compensation of workers, and \$77 billion in reduced costs to individuals from less crime and child abuse) and would surpass the costs of the program in that year by a ratio of 12:1 (Lynch, 2007, p. 4). “In other words, even adjusting for a very wide range of estimates for the effects of current preschool participation and the impact of high-quality pre-k on children from different economic backgrounds, high quality *universal* pre-k has substantial long-run benefits for government budgets, the economy, and crime reduction. Over time, governmental budget benefits alone outweigh the costs of high quality pre-k; that is, high-quality pre-k pays for itself” (Lynch, 2007, p. 30). Doing good now will benefit us all later - using dollars and cents to persuade business and government that today's investment will pay off big – tomorrow, is a basic message that needs to be communicated (Kirp, 2007).

Chapter 5 - Canadian Perspective

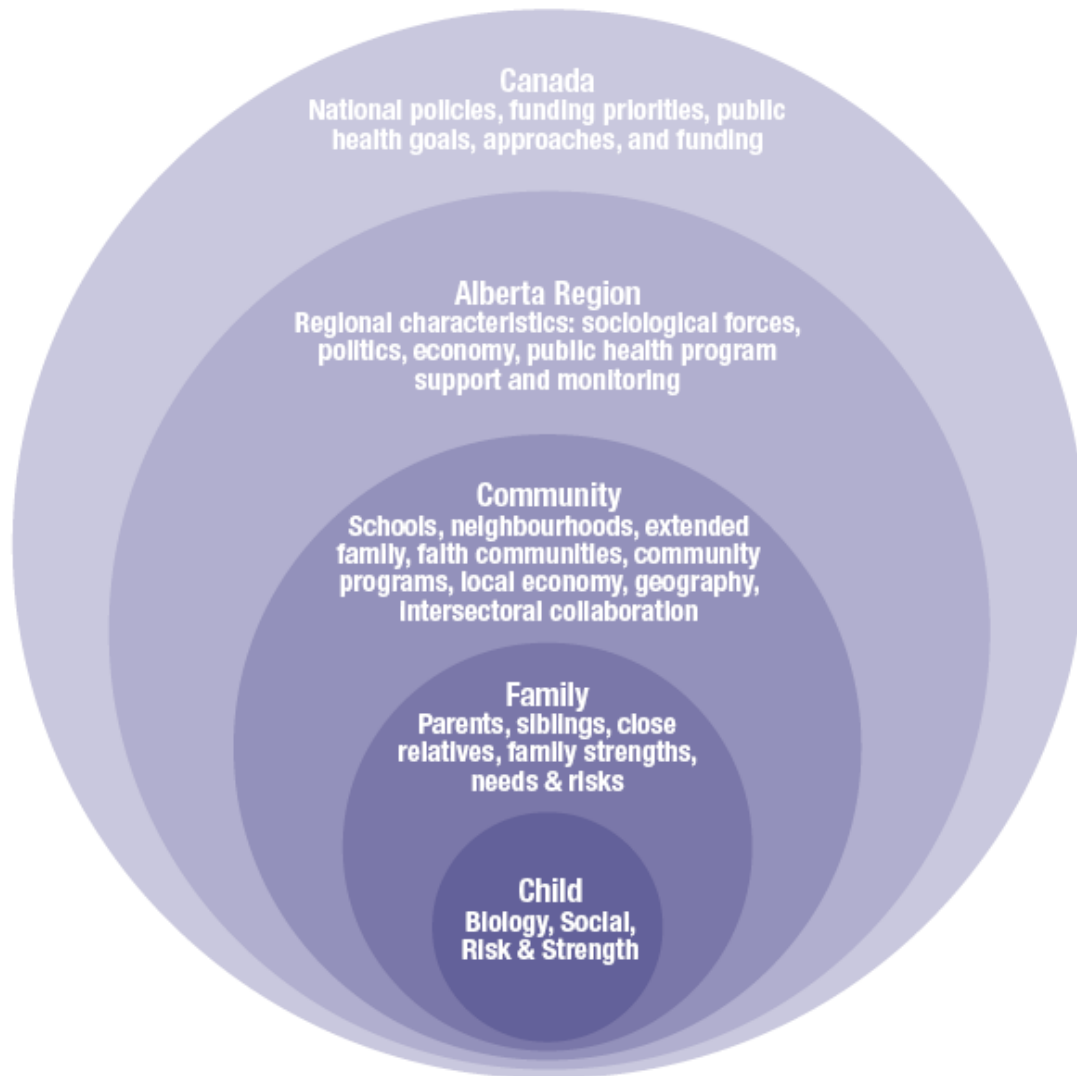


Figure 5.1 - Is similar to that presented in Bronfenbrenner's theory of humans (Zeletic - CAPC, 2008).

Ontario

Ontario Better Beginnings

Ontario's Better Beginnings, Better Futures (BBBF) has been in operation since 1991 with seven prevention programs. It utilizes components such as home-visitation, child care, and in-school programs to prevent emotional and behavioural problems in children, while at the same time promoting healthy child development. This program has helped increase the ability of the communities to respond effectively to the social and economic needs of their families. This program has demonstrated success in lowering the emotional problem rates and showed improved social skills and cooperative behaviour of

the children. However, significant improvement in parenting skills, which researchers contributed to the frequency, intensity, and scope of the intervention provided to parents occurred only at one site. The improvement was credited to the regular home visits over four years along with referrals to other community resources (Early Childhood Learning Knowledge Centre [ECLKC], 2007).

The ability to attract community members to the table contributed to the success of this program. Other community leaders can learn from their methods by paying particular attention to the ways in which staff and professionals sometimes dominate interactions with community members. Actions such as the formal manner in which professionals conduct meetings, make decisions, and dominate discussions during meetings can stifle participation. Whereas avoiding the use of professional jargon and sharing leadership responsibilities like chairing meetings, can facilitate community involvement (Nelson, et al. 2000).

In addition, Ontario's Better Beginnings, Better Futures prevention programs have a policy requiring at least 51% community representation on each decision-making committee (ECLKC, 2007). This is an impressive ratio that is not usually seen in collaborative initiatives. Nelson et al. (2000) advises researchers and professionals to be humble and better listeners. They go onto encourage community leaders to create safe and friendly processes which are vital for recruiting and maintaining the interest and participation of different stakeholders. Program directors are cautioned not to overload or exploit parent volunteers, who are not being paid for their participation, but rather to recognize and support their contributions. In other words, leaders must proactively ensure the equal status of community members and those employed. Finally, directors should continuously recruit new members from interested parents and community members, as turnovers of volunteers are natural and inevitable.

As an application, to ensure adequate parental input into the collaborative process the Align Initiative should attempt to bring at least one parent or community representative with them to decision planning meetings. This suggestion could immolate the manner in which a broad base of stakeholders have been consulted and whose input was instrumental in the progress of the Initiative. For instance, periodic, focus meetings throughout the year at important junctions could facilitate this process with an open invitation extended for further involvement for any willing parent. Perhaps this suggestion seems overtly challenging, but government and business are searching for innovative solutions. Ontario's Better Beginnings has demonstrated successful implementation of parental involvement through firm policy. To be effective change agents, professional representatives should be connected with the grassroots population they wish to help.

Toronto Hub Model - Toronto First Duty

Much of the information shared in this section was gained first hand as a member of the Align steering committee was able to visit three of the project locations while she was in Toronto. She provided the Align Initiative with a report upon her return (N. Petersen, personal communication, January 29, 2008). Additional information was gained by visiting the website which can be accessed at <http://www.toronto.ca/firstduty>. Continuing investigation and in-depth analysis of service integration is on-going.

Knowledge gained from Toronto's First Duty is being used to inform Toronto's Best Start as well as to aid the province in planning for full day kindergarten programs.

Toronto First Duty, began with 5 pilot studies comprised of providing a seamless service of early learning and care for children 2 – 12 years old from 7:00 am onwards. The available programs span from daycare – early learning and care – to kindergarten which are blended together. The child care environment is rich in early literacy and numeracy with adult caregivers engaged in activities with 3 -5 year olds. Nutrition is also a big part of this program with morning and afternoon snacks and lunch is provided as well.

In order to implement the “hub model” a lot of work had to be done beforehand with unions and around logistics. Leaders with this vision for an integrated system were adamant about all staff planning together and being utilized in a more fluid style according to needs. Now, the entire staff work in strong collaboration and there is movement amongst themselves from room to room. Even space is not compartmentalized, but is used in a flexible manner along with sharing resources and expertise. Globally throughout the building, staff are responsible for all children. This paradigm shift is necessary for a holistic approach and to project the feeling of belonging to an extended family, where care and learning are integrated.

Along with programming for children, support is offered to parents. This has been challenging from a language perspective, as some Toronto schools have more than 100 languages represented among the school population. Some support has been to encourage family literacy with programs actually taking place in apartment buildings with wonderful participation and parents showing an eagerness to learn. Some pilots offered “reading club nights” where parents and children come together for twelve weeks, to have fun with rhymes, rhythms, songs, and reading. Here parents were able to learn from each other.

Implementing a Hub model has been a challenge. Barriers such as: unions, previous school system, differences in operations between existing collaborators, signing space and partnership agreements, not to mention funding sources all had to be dealt with. However, organizers feel that testing results from evidence based research in actual classroom environments will add more validity to the outcomes.

British Columbia (B.C.)

EDI Mapping

Dr. Clyde Hertzman (2004) has gained the attention of researchers world-wide as director of the Human Early Learning Partnership (HELP) and because of his work mapping B.C.'s school districts using the Early Development Indicator (EDI). The Early Development Indicator is used by kindergarten teachers early in the school year to rate the development of five year olds in five developmental domains, which are: physical, social, emotional, language / cognitive, and lastly communication. Dr. Hertzman, as the Principal Investigator, has mapped the nine school districts in the province and further partitioned these zones into 470 neighbourhoods according to results obtained with the EDI. The results of the EDI reveal social vulnerability factors and highlight counter-intuitive patterns that can be examined more closely. B. C. is the first jurisdiction in the

world that has maps indicating how children are progressing in their early development (Hertzman, 2004).

In response many communities have formed Early Childhood Coalitions or Children First Initiatives to discuss the results and plan programs, supports, and services to address the needs in order to ensure optimal development for all children. "Early childhood development, from before birth to school age, refers to not a program or service, but rather an understanding of the way a child functions at a given age" (Hertzman, 2008). This is why many educators in Alberta are so excited, the deadline for proposals to oversee the implementation of the EDI in this province just closed on September 19th, 2008 and service providers are waiting to hear the formal announcement of who will be coordinating this effort. The initial plan focuses on Edmonton and the surrounding, along with a few other regions in Alberta (K. Sliwkanich, Education Manager, Alberta Education, personal communication, September 18, 2008).

In 2005, it was also recommended that work continue at the provincial level to build a common network for ECD community development initiatives in B.C. (Schroeder, p. 21). Given the feedback from Align stakeholders this would be a good recommendation for Alberta to follow as well. A minimal, yet common framework with sustained funding allows service providers to plan more effectively and to utilize present resources more efficiently. There is a great need for stability among community partners in order meet the growing demand for early childhood services.

Through Dr. Hertzman's work and by consulting with communities, the ten most common barriers to access from the parent perspective are as follows:

- Program or service not available
- Lack of transportation is a significant barrier
- Costs too much
- Time of program is not convenient
- Service is not in the language of the family
- Fragmentation of services
- Lack of Information - don't know what is available.
- Conflicting expectations between parents and service providers.
- Isolation, social distance, parents do not feel comfortable accessing services
- Parental consciousness (Schroeder, 2005).

From the B.C. experience, Align can gain understanding that the system needs to be more flexible and responsive to engage hard to reach families. "Breaking down barriers for families often involves first breaking down system barriers. Families need access to an integrated range of services, which are close to home and understand their cultural, social and developmental needs. Families need to feel a level of trust and safety with service providers" (Schroeder, 2005, p.18). Utilizing the EDI map, will help in this endeavour to identify strengths, gaps, and priorities so together government and community can respond more accurately to meet the needs present in our society.

B.C. Children First Initiatives

Along with these noteworthy accomplishments are B.C.'s Children First Initiatives; who are at various stages across the province. Many common themes emerge from the literature when examining Early Childhood Services. These include: building capacity amongst families and communities, increasing effectiveness of services providers, delivering services in a seamless manner, increasing efforts to involve *hard to reach* families, improve early identification and screening of children and families needing services, improving referral, follow-up and transitional plans, and to improve overall outcomes of services. These frame the objectives of B.C.'s Children First Initiatives which embrace increased collaboration, partnerships and innovation amidst government expectations that outcomes for children will improve immensely. B.C.'s Children's First Initiative began in 2000 with three pilot projects but by 2005 it had grown quickly to include 44 community initiatives (Schroeder, 2005) and as of 2008 this number has nearly doubled. The New Westminster initiative will be discussed in-depth below as an illustration of the intent the B.C. government has provided through Children First.

Research and the experience of Early Childhood Development (ECD) and school providers, tells us the earlier we can intervene with adequate supports for a child/family to meet their need, the better the results for that individual child along with schools, communities, and classrooms. Children's development is most enhanced with a holistic approach to service provision. "When life is made better for one child, at the earliest stage possible, life is made better for the whole community....Therefore, optimizing children's development must focus on creating quality environments for children across the entire continuum of services" (Schroeder, 2005 p. 49 & 30).

One cautionary note for initiatives that commence relying on non-guaranteed provincial funding is it can be eliminated or reduced at any time. A case in point, is Port Alberni, who found their \$300,000 annual funding was cut to \$44,000 in just one year as redistribution of funds became necessary when more initiatives came on board. Therefore, new ECD enterprises would be wise to develop a sustainability plan for their endeavours as seed money is likely to expire after a few years. "There are also a few examples, most prominently on Vancouver Island, of initiatives that are jointly funded by Children First and Success by Six" (Schroeder, 2005, p. 11). This model follows earlier recommendations by Reynolds where fragmentation is reduced and effectiveness increased by employing one facilitator in a single administrative structure (Schroeder, 2005). It also gives evidence to good strategic planning, which is an important aspect of leadership.

New Westminster Children First Initiative

An in-depth examination of one B.C.'s Child First Initiatives was presented originally to the Align steering committee, to provide a comparison model. (See Appendix J for Highlights of the 2005 Status Report and Appendix K for a Table Summarizing the Key Elements). The New Westminster Children First Initiative was selected because of its similarities to the undertaking of the Align Initiative. This B.C. community coalition first began in September 2003, following a Simon Fraser Region wide Symposium. The New Westminster Early Childhood Development Steering

Committee began meeting regularly to discuss the development of a strategic plan. The committee consisted of a coalition of service providers and community members. Representatives included: ECD service providers along with Child care, Aboriginal Community Development worker, City Parks and Recreation, a City Counsellor, Public Health, School District, Public Library, and Health Canada (Berndt, 2005). "Fine tuning" of the committee structure was identified as being a critical step as the committee moved from planning to implementation, and as the committee began working with endorsing funding allocations from the United Way through Success By Six. The committee has since developed more specifically defined 'Action Teams.' These teams include a 'Current Initiatives Team,' 'Public Information Team' 'Evaluation Team' and a 'Committee Structure Team.' All of these teams currently report back to the ECD Steering Committee for final endorsement of decisions and activities. Decisions are made through a modified consensus model" (Berndt, 2005, p.18).

One involvement was mapping existing and developing ECD resources and initiatives in New Westminister area into the Strategic Plan Community Data Bank. With the goal of increasing and improving inter-sectoral collaborations, the ECD Committee has mapped capacity building projects into the strategic plan to promote ongoing service provision in the community (Berndt, 2005).

The Public Information Team with support from Ministry of Children and Family Development (MCFD) produced a 'developmental wheel' describing typical developmental stages of children for use by families and caregivers of young children. This tool is available for service providers to give to parents, and to distribute at community events such as the Pre-School Health Fair, Diversity in Early Development event, All Together –Event for New Canadians, and Community Connections-intergenerational story telling. To further promote their collaborative efforts a logo, pamphlet, display board and balloons were designed by the committee (Berndt, 2005, p.119).

A future direction this initiative is exploring is the implementation of a Hub model in New Westminister. As other major stakeholders have expressed interest in working at various levels of partnerships to improve and increase supports for families with young children that are easily accessible and provide a range of services to meet the needs of families it appears to be an attainable goal (Berndt, 2005, p.120).

Saskatchewan

Saskatchewan Education Initiatives

In 1992 the Saskatchewan government began exploring more coordinated and collaborative approaches to delivering services to at-risk children and families. A number of pilots for integrated school-linked services were undertaken across the provinces, with the following objectives:

- providing the physical, social, emotional, cultural, and spiritual supports children require in order to learn, and to remove the barriers to learning and to provide experiences for success in life

- create a collaborative culture among service systems and providers in order to establish a coordinated, comprehensive, and responsive continuum of human services;
- make the most effective and efficient use of existing community and provincial resources;
- enhance family and community participation in and shared responsibility for education and the well-being of children;
- increase the participation of Indian and Métis people in the planning, management, and delivery of education and other human services; and
- enable teachers to focus on teaching and student learning, and empower schools and other community service agencies to enhance their effectiveness by working collaboratively with one another to meet the needs of children holistically (Government of Saskatchewan 1994: 3-4; as cited in Skage, 1996).

To accomplish these goals the government of Saskatchewan has organized themselves differently with the Children's Services Branch providing strategic leadership within the preK-12 education sector in the area of *Supports to Learning*. This area includes: Special Education and Intensive Supports, School PLUS and Community Education, Diversity, Provincial Alternative Special Needs Schools, Youth in Custody, Early School Entrance, Early Childhood Intervention Programming, and English as a Second Language support. (Government of Saskatchewan, 2007)

Community Schools Program

In 1980, the Government of Saskatchewan established the *Community Schools Program* in eleven inner-city elementary schools as a means to address the growth in urban Aboriginal poverty. Since that time, the program has expanded to more urban sites, as well as to rural and northern areas, along with secondary and K-12 schools. School divisions that wish to have a school(s) considered for *enhanced funding* through the Community Schools Program need to carefully document school and community strengths and needs and afterwards prepare a proposal for Saskatchewan Learning. There is some onus placed on the community and the local school to demonstrate the critical needs and their readiness to meet them by documenting ways they have explored partnership prior to receiving a *Community School* designation. They must also explain how the community, board of education, school personnel and students were involved in the decision to seek official Community School designation. "Therefore, the Community School Program is designed to achieve the active participation of *all* in solving the problems that exist in the community. It is purported to be characterized by a change in response to changing needs, a continuous experimentation that seeks out satisfactory ways of achieving common goals, with careful evaluation of the results of its activities" (Government of Saskatchewan, 2007).

School^{PLUS} and Community Education

School^{PLUS} and *Community Education* unite to promote the development of comprehensive, holistic learning environments and enable school systems, community

groups and families to be responsive and innovative in meeting diverse learning needs. The government's Children's Services branch is responsible to provide leadership and support in the following areas: policy development and implementation, consultation and collaboration with those involved in service delivery for children and their families, and to assist with funding protocols for comprehensive supports.

The following two illustrations may provide Alberta associations with more ideas of how organization at the government level can better support collaboration at a local level, as Saskatchewan is presently using this system with positive results. School^{PLUS} thinking is enabling communities to forge new and creative partnerships in order to meet the needs of children and families. One principal, acknowledged that "what makes the school so successful is this strong support system" (Krips, 2007, p. 32). Many government departments partner with each other to ensure needs are met. Their alliance is composed of the department of Community Resources who provides a full-time Community Liaison Worker and a part-time Education Liaison Worker. Child and Youth Services provide a family therapist. In addition, the school employs a Home/School Liaison Worker who deals with student attendance, along with an Elder who oversees all cultural planning (Krips, p. 32). These partnerships allow the Sākeew school to effectively deal with the personal needs of children as there is always someone to help them through their difficulties.

Another Saskatchewan community, Davidson, has a program called *Roots & Shoots*, where adults from the community are paired with elementary students in gardening projects. In a complimentary manner, the community health nurse delivers lessons on nutrition that are linked to their gardening activities. Additionally, the parent's morning out program was invited to use school space and as it grew, it increased their activities to include clothing swaps and special speakers which eased the transition for many parents and children to pre-school education. Finally, the *Artists in Residence* program is another partner that has increased student awareness and skill development in drama and the visual arts. Davidson Elementary School has established itself as a hub of community activity, enriching the quality of education for children within the community (Krips, 2007, p. 7-10). The joint community efforts confirm that "nothing new that is really interesting comes without collaboration" (Krips, p. 53).

KidsFirst

Saskatchewan *KidsFirst* program, though similar sounding, is very different than the B.C. Children First Initiatives. It is essentially is a program enhancer meant to boost present programs. It is a joint initiative of: Ministry of Education, Ministry of Health, Ministry of Social Services, Ministry of First Nations and Métis Relations, and includes numerous agencies with primary funding coming from the Government of Canada (Government of Saskatchewan, 2007). KidsFirst has been directed to nine communities where the need of vulnerable families is the greatest. All babies born in Saskatchewan hospitals are screened to assess challenges faced by the families and to determine KidsFirst eligibility. If communities do not have a KidsFirst program, public health services connect families to alternative services and programs. KidsFirst as voluntary program may offer families:

- Support from a home visitor who provides assistance regarding child development, parenting and connecting to the community;
- Help to access services such as child care and parent support groups;
- Early learning opportunities for children; and
- Help regarding literacy, nutrition, transportation and specialized counselling services. (Government of Saskatchewan, 2007)

There are regional KidsFirst Early Childhood Community Developers who work with stakeholders and partners, including tribal councils, First Nations service agencies and Métis Friendship Centres to develop strategies that support vulnerable families. These community developers work within the borders of the provincial regional health authorities with the main focus of facilitating planning and collaboration around early childhood development (Government of Saskatchewan, 2007).

Alberta

Although British Columbia embarked on the initial Children First Initiatives about eight years ago, Alberta just started a series of similar pilot projects this past year. By following afterwards, Alberta Education benefits from the shared knowledge that is now available, both from these initiatives and also from B.C.'s implementation of the EDI.

Provincial Innovative Practices

In 2007, the Government of Alberta provided funding to pilot six projects to discover the best ways to screen and assess preschoolers in order to support young children with learning and developmental delays. Projects in the Chinook, David Thompson, East Central, Aspen, Brooks and Capital Health regions have been allocated \$7.9 million over three years to implement and evaluate developmental screening and follow-up programs. In addition, the Alberta Centre for Child, Family and Community Research (ACCFRC) will be responsible for the provincial evaluation of these pilot projects. As such they will provide stakeholders with annual summary reports or symposium opportunities (ACCFRC, 2008). These pilots will be followed with interest and the knowledge exchange forthcoming should provide further direction for the Align Initiative.

For example, the *Grow Along with Me* pilot project in the Chinook Health Region (Lethbridge and Area) is looking at creative ways to connect with parents of young children along with their regular immunization schedule. Such as: a 18th month Wellness Clinic, a Birthday Party / Developmental Check Up at three years, along with using START - a Short Term Assessment & Response Team, and utilizing play based assessments where a parent accompanies the child through specific centers. Parents will also be requested to fill out the Ages and Stages Questionnaire (ASQ - available from the Paul H. Brookes Publishing Co.), which is a parent completed, child-monitoring assessment. The pilot is based on four core components: (a) Screening (b) Follow-Up (c) Capacity Building (d) Info Management.

The *Mill Woods Preschool Developmental Screening Project* is a pilot taking place in south Edmonton with one representative sitting on the Align Steering Committee

(Capital Health Region). The focus of this effort is concerned about early identification and improving screening outcomes, which is one of the areas that the Align is also interested in. This initiative uses similar strategies as those proposed by Grow Along With Me by relying on the 18-month immunization, which currently reaches 90% of children in the target community. Also by having multiple entry points it is expected that with the collective efforts of the 9 participating partners that 800 children living in Mill Woods will benefit from developmental screening compared to the approximately 80 children previously screened each year. Many families marginalized by income, cultural or language barriers find providing an enriching environment to support their children's development a real challenge, which research says puts children at further risk for developmental delays (ACCFRC, 2008).

Cultural misunderstandings, even though processes are well-intentioned, set up by formal systems, including screening tools, can create anxiety for immigrant, refugee, Aboriginal, and low income parents. Sometimes fear of judgments and intervention that removes children from their parents creates barriers (ACCFRC, 2008).

Growing Together in the David Thompson Health Region (Red Deer and other localities) specifies what the model will look like with the following outline:

- Home Visiting Programs – ASQ screenings will also be available through other program providers such as the Early Intervention Program (EIP),
- Screening Days – Each Parent Link Centres will offer at least two screening days per year. The centres will host these and assist families in the completion of the ASQ.
- Native Friendship Centres - will also be explored to specifically increase screening opportunities for First Nation children.
- Walk-Ins – Each Parent Link Centre will make available “on the spot” screenings for families as well.
- If necessary staff will be able to assist families in the completion of the ASQ.
- Paediatric Rehabilitation Program (PRP) – All children referred to PRP will complete an ASQ with the assistance of the PRP Intake Resource (ACCFRC, 2008).

This initiative anticipates that 80% of children, 18-26 months of age will be screened at least once using the ASQ.

An Innovative Approach to Collaborative Pre-school Screening and Follow-up: (East Central Health Region – from Camrose to Lloydminster). Again, this region uses multiple entry points as well to maximize the efforts to screen infants and young children to ensure they have optimum opportunity for development. The first link is health based with public health nurses and paediatricians being front-line. As children reach their 2nd or 3rd birthday, screening will be more community based. One objective is to provide a variety of parenting programs that will further build the capacity of all families with preschool aged children. “East Central’s central intake process, as part of the Paediatric Regional Integrated Services Model (PRISM), will be utilized to manage referrals of children requiring further follow up services and will manage the data collection in a consistent manner” (ACCFRC, 2008).

Speech and Language Services

A quick synopsis of this service in Alberta may provide additional innovative ideas. Alberta is experiencing a serious shortage of Speech and Language Pathologists (SLP) in the province, so service providers are looking for alternative models that will increase effectiveness and maximize the use of resources simultaneously. The old saying that “necessity is the author of great invention” seems to be applicable to this situation. A couple of illustrations will demonstrate the innovative practices that are being tried in the province.

Periodic Speech and Language drop-in Clinics in East Central Health Rehabilitation: (east of Edmonton in the Lamont, Vegerville, and surrounding areas) is a new pilot in this rural region. Fortunately, this medium has proved to be very flexible and is easily adaptable to the various vicinities. Thus far, it is an effective strategy continuing in practice with the following benefits: it is a good use of therapist's time, allows for good parental access, and has gained the support from other stakeholders e.g. Schools. “Often the system dictates the work that we do, but it is not always the most important work.” (J. Evans, personal communication, January 28, 2008).

Camrose County Community Rehabilitation is a new facility that has opened up other options for delivery of speech and language services. For example, using Speech and Language Therapy Assistants (SLP-A) to run after school articulation groups at the clinic which include parents is a new service that is offered. School groups and after school groups such as language, literacy, and listening skills is provided in eight week blocks with an additional 6-8 weeks follow-up to transfer skills into the classroom. This represents a paradigm shift. Historically, services have begun with programming either in preschool or school and then when the child has reached a certain level of proficiency, homework assignments go to the parents to review with the child as therapy sessions move onto the next step. In this new model, therapy begins with the child and empowers the family with increased knowledge, skill training and support from the onset. It is then strengthened with follow-up, when it is time to for the child to transfer skills to the context of their peer group. Though born out of necessity, this has proven to be a practical, successful model that utilizes the available .6 SLP full-time equivalency (FTE) very efficiently as well as effectively.

Provincial Climate and Research Enterprises

Research is of keen interest to service providers who wish to base their practices on solid evidence. Not only is there interest but also action as a result of additional funding and partnerships that have recently developed. For instance, The Alberta Centre for Child, Family and Community Research (ACCFRCR) is a not-for-profit, charitable organization that is operating arms-length from government. Their focus is to be an innovative resource that develops and mobilizes evidence-based priority research into policy. Acknowledging that children and their families share fundamental needs with children everywhere, they strive to make their research relevant and centered on the most important issues. It is expected that the Center will “substantially advance our

understanding of the impact of, and need for, government policies and programs to improve child health and well being" (www.research4children.com).

Community-University Partnership (CUP) launched a new centre for children and families. "The centre was developed to address some gaps that community practitioners were seeing in tools to assess the needs of children before they reached school age", said Rebecca Gokiert, director of the Early Childhood Measurement and Evaluation Resource Centre (ECMERC) (CUP- www.cup.ualberta.ca). Edmonton serves a diverse population therefore instruments and resources that are used need to be fair and accurate as assessment tools or when implemented in practice.

University of Alberta's (U of A) Dr. Jane Drummond acknowledged "Because of CUP, both the campus and community culture are changing. I see my own culture, that of the researcher, becoming more and more realistic in the questions we address, the interventions we develop and the teaching we do" (<http://www.expressnews.ualberta.ca/article.cfm?id=7970>).

CUP places emphasis on Community-Based Research (CBR) and defines it: as an "approach to research in which partners from the community, university, and/or government negotiate a shared agenda. Partners develop principles of working together and identify project parameters, including scale and scope. Partners contribute equitably according to their diverse expertise, experiences, and interests at various times throughout the project. An overall goal of CBR is to work in the space between research and policy/practice to share and mobilize findings in ways that can inform policy, practice, and/or research" (<http://www.cup.ualberta.ca/practitioners-cbr-workshops>).

The Community-University Partnership for the Study of Children, Youth, and Families (CUP- www.cup.ualberta.ca) and the Alberta Centre for Child, Family & Community Research (ACCFRC-www.research4children.org) are two research arms that are cooperating on a workshop series to assist the community in their research endeavours and will collaborate on other projects from time to time as well. Fortunately, for the Align Initiative both of these partners are located in Edmonton.

Alberta Children and Youth Initiative (ACYI).

Ensuring that children are safe, healthy and ready to learn is the most important goal of any society. Investing in families and communities through services that support healthy child and youth development creates the foundation for a strong society and economy (<http://www.child.gov.ab.ca/home/501.cfm>).

The Alberta Children and Youth Initiative (ACYI) began in 1998 as a collaborative partnership of government ministries working together on issues affecting children and youth. It envisions that Alberta's children and youth will be well cared for, safe, capable learners, and healthy. The government acknowledges that children and youth issues cross many government ministries which make initiatives a challenge. The ACYI arose in recognition of the need for a coordinated government-wide effort as being critical for the effective and efficient support of children, youth and their families. "Working together, government ministries and communities can more effectively address these issues" (<http://www.child.gov.ab.ca/home/501.cfm>).

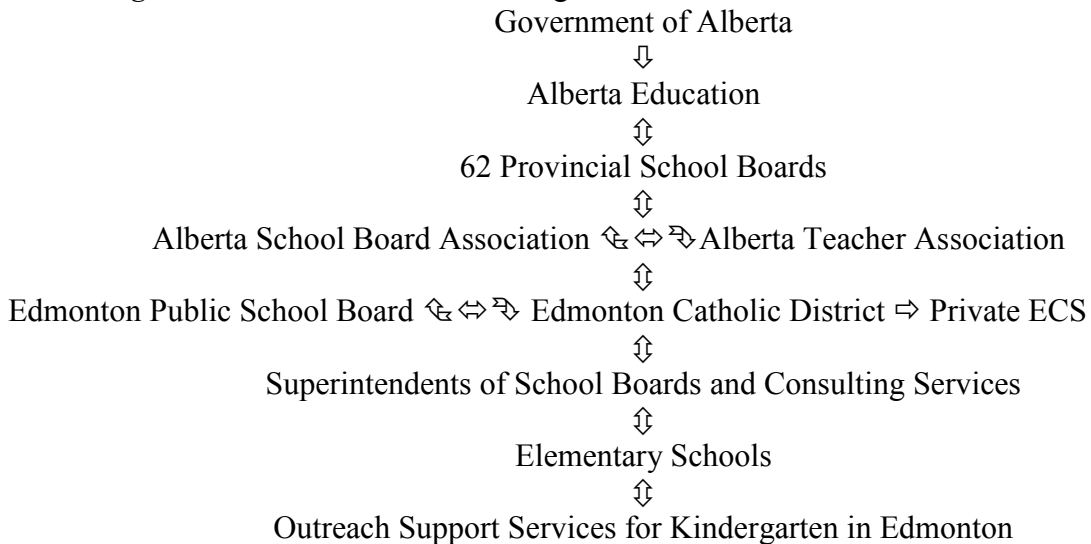
Children Services Sponsor Provincial Parent Link Centres.

Parent Link Centres are designed and sponsored by the government of Alberta in collaboration with community partners to help parents or caregivers by providing information and support that will assist them with child development and health. There are five Parent Link Centres in Edmonton including, two with specific cultural focuses: Francophone and Aboriginal. The government has also added a virtual centre through their website at <http://www.parentlinkalberta.ca>; here parents can access valuable information about: pregnancy, communicating with your child, child care, discipline, child development, health, and safety.

Educational Objectives (Alberta – Edmonton)

Consistent with the theme of the Align project and the application of leadership models and theories, the flow chart below illustrates multiple authority levels and the many stakeholders involved in the education process. Each level represents a different perspective and membership base. Because of this changes to policy and practice are slow. It is like a train comprised of box cars: the contents of each box car are committed to that container. This analogy helps to evoke the realization that turning and manoeuvring is not an easy or a quick process for a large organization. This holds true for the department of Education in Alberta. Yet, this ministry accountable for educational results and improvements and cares deeply about the early start of Alberta's children. The Alberta Education Budget for Kindergarten to the Grade 12 education system for the 2007-08 fiscal year is nearly \$5.8 billion - an increase of \$204 million or 3.7% over the previous fiscal year (Alberta Education, 2007). Furthermore, their research department is actively engaged in discovering best practice initiatives.

Figure 5.2. Alberta's Education Organizational Flow Chart



Similar flow plans could be made for the other government ministries that especially affect children like Children and Youth Services and Alberta Health and

Wellness. In order to effectively meet the needs of children and their families these three ministries especially need to work closely together. The Alberta Children & Youth Initiative (ACYI) is one strategy that was introduced in the past decade. It at least provides a system for ministries to communicate with each other. It was designed to be a collaborative partnership for ministries to work together on those issues that overlap affecting the care, safety, education and health of Alberta's children. Align stakeholders have discussed this and found that lack of coordination amongst the ministries is a present barrier to community partnerships.

The recent provincial mandate came from Premier Stelmach's plan to improve Albertans' quality of life to provincial ministers in the form of a letter and is available to the public on the government website <http://education.alberta.ca>. The mandates that the current Minister of Education, Dave Hancock is to lead and which are of interest to the Align Initiative states:

- Increase student participation and completion rates in health, math, science and Career and Technology Studies courses to grow the technology and science sectors.
- Increase broad-based supports and early intervention initiatives for at-risk children to improve their learning outcomes.

This mandate includes both long range and short range goals along with the rationale for the government's interest. The primary reason for the second mandate listed here is to: "promote strong and vibrant communities and reduce crime so Albertans feel safe" as stated in (#3) of the top five priorities named in the letter.

Government staff are aware of the research regarding quality preschool programs. So, the Government of Alberta (GOA) philosophical approach is "Alberta's children will have a healthier future if they have a healthier beginning". All this is good news for the Align Initiative. Thus, the government mandate can be a source of informing the Initiative of what priorities are most likely to find support, especially funding from government departments. Such as:

1. Targeted Programs for at-risk children
2. Programs that build partnerships within the community
3. Programs that look at the "whole" child and provide a broad-base of support
4. Programs that are successful in achieving positive outcomes
5. Collaboration with partners to produce positive health outcomes

Initiatives that incorporate these elements are more likely to be given serious consideration and ultimately support.

Albertans want a responsible government that will be accountable for its decisions; consequently this conservative government will be more predisposed to give attention to initiatives that combine priorities and mandates – as they need to demonstrate the most "bang for the buck" as well. The vision of the Align Initiative fits well with these government priorities.

City of Edmonton & Local Perspective

The two largest school boards in Edmonton are also interested and involved in early education already. The Edmonton Public School Board (EPSB) is responsible for educating 80,000 students within their 200+ schools. EPSB's mission statement is: "the

mission of Edmonton Public Schools (EPS), as an advocate of choice, is to ensure that all students achieve success in their individual programs of study. It is the belief of Edmonton Public Schools that parents, students and community members are committed as partners and accept their respective responsibilities in education. The mission is being accomplished through exemplary staff performance, program diversity, measured student achievement of outcomes and decentralized decision making. As recognized leaders in public education and in our continuing commitment to excellence, the board has adopted the following priorities: all efforts must be directed toward supporting schools and student achievement and form the basis for district-wide professional development” (EPSB, 2006). Edmonton Public Schools had over 75 partnerships with business and industry organizations in 2006-2007, and is known for its innovation in creating programs of choice, and its successful second language programs.

The Edmonton Catholic School District (ECSD) which is publicly funded has grown to 84 schools serving approximately 32,000 students of which 51 are elementary schools. They are the fourth largest school board in Alberta and the second largest Catholic school board west of Toronto (ECSD, 2007). As society evolves, they find the education system must adapt to changes in order to meet the needs of the community they serve. Moreover, ECSD sees the mandate for education as threefold (a) the parents and guardians of their students, (b) the educational mission of the Church, and (c) the Alberta Ministry of Education. Their mission statement is: “to provide a Catholic education which inspires and prepares students to learn, to work, to live fully, and to serve God in one another. Our vision includes an emphasis on the centrality of a strong learning and teaching focus within a Catholic context resulting in the optimizing of human potential for students in our trust. The Edmonton Catholic Schools experience is more than academic achievement. Christ's teachings inspire our staff to see each child as a precious gift and a sacred responsibility. This is reflected in everything we do ensuring the best learning possible for the children entrusted in our care” (ECSD, 2007).

Both the public and catholic school boards in Edmonton have recently extended their spectrum of programs by opening their doors and offering full-day kindergartens and preschool programs in certain neighbourhoods. For the most part these additions would fall under targeted programs. For further information the reader is referred to the section Targeted versus Universal Programming in Chapter Four.

Edmonton has experienced both an increase in breadth of programs offered along with earlier identification of children needing intervention. Yet, the consensus from teachers is that improvement is still required in early identification of children for special education supports. Access to Program Unit Funding (PUF) from Alberta Education provides intensive, multi-disciplinary programming for 2 1/2 – 5 1/2 year olds. However, once a child turns 6 years this funding is currently no longer accessible (See Appendix O for more details). Therefore, if a child is not identified until 5 years old she/he will likely only receive programming support for one year, depending on birthdates, even if they continue to meet funding criteria of being severely delayed in one area or moderately delayed in two. Thus, a philosophical question to consider is if a child that meets funding criteria could access three years of programming support from the time of identification (no matter when this occurs and regardless of age), would educators feel the same sense of urgency for early identification?

There are multiple service providers throughout Edmonton and especially in the central part of the city. (See Appendix L and M for maps with services and demographic information). These maps explain some of the reasons that the Align Initiative began discussions on how services for children might be delivered differently. The maps are useful for providing an overview and for the observations they allow. For example, the highest density demographically of children does not coincide with where the highest numbers of services exist. In fact one long-term Head Start provider in central Edmonton closed their doors at the end of June 2008. Sister Nancy of the Atonement Home said “if only we could put wheels on our building and roll it to the Mill woods Area that would be wonderful”(personal communication, February 28, 2008). This closure was the source of mixed feelings and is the result of various factors beyond the program's ability to control. However, their courageous and even admirable step brings to the forefront many of the issues raised in this paper.

Major components of programs represented by service providers are:

- Child care
- Early Learning
- Home Visitation
- Parent Supports
- Culturally Sensitive

These are extremely important and could each become major studies that the Initiative may wish to pursue. Nevertheless, individual programs will not be highlighted in this portion of the paper as they are simply too numerous. The reader is referred to Chapter Six and to Appendix N for a complete summary of questionnaire findings from the nine participating organizations, where existing programs are briefly described. However, three examples arising from participating organizations which are engaged in collaborative ventures follows.

City Centre Education Project (CCEP).

The City Centre Education Project (CCEP) got underway in 2001 with the coming together of seven EPS inner city schools, where leadership begin to collaborate about meeting their key challenges. These included: families in poverty, declining enrolments, lower student achievement rates, and aging facilities. The result was principals proceeded to share resources, and to pool assets along with scarce funds in order to increase their effectiveness with students and in the community. This innovative partnership educates approximately 1700 students with education outcomes improving (<http://tamarackcommunity.ca/g3s5g.html>).

Edmonton Public Schools has a long history of site-based decision making in its schools that draws on input from all staff, parents and the community at large. This creates a competitive system because of open boundaries where children are permitted attend any school that has room. Therefore, schools need to be entrepreneurial while developing resources and attractive cultures to attract and maintain a strong student base. Even though schools in this area were offering breakfast programs, clothing programs, counselling, etc. student achievement rates remained static. The superintendent at the time, Dr. Emery Dodsall brought administrators together and encouraged them to seek solutions as they shared their concerns. This involved making some tough decisions like

closely two schools before forming the collaborative venture. Teamwork involved three levels: within schools, across schools, and with the greater community and has continued. The result has been a greater focus on learning, increased attendance, supports provided for families with increased contribution, and improved outcomes as schools have become the hub in the community.

Inter-Agency Head Start Network (IHSN).

The Inter-Agency Head Start Network (IHSN) presently consists of directors and managers from nine Edmonton and area Head Start agencies. Programs include Head Start, Early Head Start, Aboriginal Head Start, Francophone Head Start and Resource Supports for Early Learning and Child Care. Collectively, they aim to provide early learning and family support programs by working together with a broad range of community partners. This group meets on a regular basis to ensure that the best possible Head Start services are available to low-income families with preschool children in the Edmonton area. "In 2006-07 Head Start programs in Edmonton served 1500 children (1250 families) across the IHSN partnership" (IHSN Power Point Presentation).

So far this network has focused on joint initiatives that have comprised of: expanding programming options, developing terms of reference, developing standards of development, mapping projects, professional development, and collaboration on assessment and data collection. In addition they have formed a Community Response Plan (CRP in 2005), which has strengthened, united, and formalized the relationships between the participating Head Start agencies. The six priorities of the IHSN Community Response Plan are to: increase public awareness, enhance funding levels, establish best practice standards, influence the political landscape, appraise universal access, and to expand their capacity. "The goal of IHSN is to achieve excellence in their practice and quality outcomes for the children and families being served" (<http://www.abheadstart.org>).

Oliver Centre.

The Oliver Centre began operation in 1980 as a non-profit community agency. It was originally based in the Oliver School, but now has a satellite program at Calder School and supports for the Early Learning & Care Program at Alex Taylor (which supports programs with children that may have additional needs). The Centre now has an enrolment of over 300 children and their families, who are served through a variety of programs. In 1986 the program expanded to include preschool programming. Currently the preschool program serves 80 children and their families between the two program locations with wrap around child care. Year round services enable low-income families to remain in the workforce and student families to complete their education. The expansion of services for younger children and the later addition of Head Start Child Care spaces has been a stabilizing factor for families.

"The goal of the various programs is to provide children with social and school readiness skills. Parents are supported through home visitation and parent groups" (www.Olivercentre.com). The Centre provides a broad base of supports and services to meet the needs of families and children with varying ability levels and multi-ethnic

backgrounds. Consequently, adequate funding is a challenge for the Centre which has many as ten financial sources. Reliance on short-term contractual funding has created feelings of uncertainty regarding ongoing services for children, families and job security for staff a direct. A focus for the future is to obtain sustainable funding for all programs served by Oliver Centre.

The strength of the Oliver Center is it provides programs for the entire 52 weeks of the year, with a continuum of services for children from 12 months to 12 years old within one location.

Overview of services:

- 7am- 6 pm
- 5 Registered Social Workers on staff
- 2/3 daily nutritional compliment
- Food left over from the day available for families to take home
- Access to Outreach support for challenges
- Newcomer families, Aboriginal, Low income
- Parent Programs available in the evening with meals for children provided.
- Individual Education Plan for all children including parent involvement and engagement

Thus, this program is very similar to the Hub models described earlier. It's success can be partially measured by the 70% of children that are serviced until they are 12 years old through their clubhouse program. Hence, the experience gained from these services will be valuable to the Align Initiative as they consider possible pilot projects.

PART 3 – IMPROVEMENT PROJECT: ALIGNING ECS IN EDMONTON

Chapter 6 - Synthesis Report of the Align Questionnaire Findings

This portion of the paper begins with an amalgamation of all the responses to the Questionnaire from the representative organizations on the Align Steering Committee. It was an extensive survey querying many areas that members felt they did not have enough knowledge of or where information was needed to ensure future decisions would be based on a solid foundation. A comprehensive review of the findings is provided in this Chapter. However, if readers are interested in a summary of the actual questionnaire they are referred to Appendix N which contains the original questions with replies inserted into the document.

Eight out of nine organizations represented on the Align Steering Committee responded to a 32 item questionnaire, although other stakeholders were invited to do so, only one other organization completed it. Based on responses the average year for organizations to begin delivering targeted services in the Edmonton City Center Neighbourhood was 1989 with combined years of service at 115 years; which represents a significant amount of experience these organizations bring to the region. The participating organizations that responded to the questionnaire were: ABC Head Start, Bent Arrow – White Cloud Head Start, Norwood Child & Family Resource Centre, Capital Health Services, Oliver Centre Early Learning Programs for Children & Families Society, Success by Six, E4C – Early Head Start, Edmonton Catholic Schools, and Edmonton Public Schools.

Collectively organizations work to ensure that quality early childhood services are available to support parents in nurturing the optimal development of their children so that they might enjoy healthy and successful outcomes in their futures. A brief synopsis of the philosophy, the principles, and the values that will direct and sustain this collaboration follows.

The broad statements below serve to express the philosophy for the comprehensive preschools and family support programs of these organizations:

- Healthy children begin with healthy families
- All children and families are unique and have individual strengths
- Parenting is challenging and sometimes requires access to outside supports
- The first six years are critical to a child's development
- Communities are diverse – organizations need to be respectful of cultural contexts and deliver programming in a holistic manner.

Sustaining principles that will guide this aim are:

- Parents are respected and essential / integral partners in the process
- Provide children with a variety of play experiences aimed at developing cognitive, emotional, physical and social development
- Community members are welcomed as valuable contributors
- Ongoing monitoring and evaluation will be implemented.

Lastly, values adapted from Capital Health (2007) that the Initiative aspires to adhere to are:

- Child-centered services delivered with excellence by asking “what decision is in the best interest of the child and family and act accordingly?”

- Stewardship of resources will be prudent and based on best practices
- Integrity of staff and organizations will be maintained through ethical and professional behaviour.
- Respect for each individual as everyone deserves to be treated with a full measure of dignity and compassion.
- Decision-making is based on research and evidence with the people being affected having the greatest degree of involvement possible.
- Partnerships with key stakeholders will be accessed when support to implement major goals is required, especially innovative solutions that enhance and improve services.

Services

Services provided by representative organizations include both universal and targeted programs. Universal programs meet the information and service needs of *all* children and families. Services such as health, development, immunization, screening, injury prevention, and referrals to other community programs and supports when required. Two examples of universal programs would be immunization and kindergarten. Whereas, targeted programs meet the needs of *eligible* children and families for more *specific*, intensive, long-term, or unique services and are delivered in partnership with other community-based programs and professionals. Two examples of target programs would be Head Start and Early Education sites for children with special needs.

A vast array of services is available through the representative organizations with Align. The combined list of programs and services that they deliver directly include: Multicultural and Interpretive Services, Head Start Programs, Parent Link Centres, Child Care Centres, Preschool Programs, Home Education Visitation, Family Support Groups and Parental Training, Community Connections, Mental Health Consultation, Health Services, Early Education, and Kindergarten. Kindergarten includes both full day and half day programs with additional support through Program Unit Funding (PUF) grants for children with special needs as supported by Alberta Education. For a full description of program objectives see Appendix N under the Questionnaire Synthesis and summary of services.

Growth Plans

Organizations described their future growth plans in a manner that is consistent with the desire to align the current early childhood services into a coordinated system. This requires exploration on how to develop and implement strategies with other community partners to better meet the needs of young children and parents that:

- Build on strengths and increase the capacity of early childhood services to meet the growing needs in the community;
- Facilitate collaborative approaches to supporting the development and well-being of all children in a seamless continuum of service
- Attract and retain early childhood professionals and emerging leaders;
- Strengthen the links between child care, early childhood programs and school age services and initiatives;

- Identify and address gaps in services. (Such as CHS to develop developmental screening that would be implemented across jurisdictions – including health, education, children's services and community).

Funding Sources

Funding sources for organizations vary. A good portion of financial support for most programs is from government sources: Alberta Education, Children Services, Health Canada, federal and provincial subsidies, and the City of Edmonton. Other sources of funding include: United Way, foundations, private donations, and parental fees. Most programs have multiple funding sources and some organizations have up to ten different sources of financial support, each with their own accountability framework. Strings are often attached to the dollars dictating criteria and eligibility which are forwarded onto accessibility by families. Funds are earmarked for certain categories which makes budgeting difficult. In the end, a lack of funding continues to create uncertainty from year to year for programs as well as for agencies as a whole. Therefore, funding issues historically have made it difficult to establish a consistent culture around early learning opportunities for families.

Weaknesses or Challenges for Organizations

Funding.

The majority of organizations identified their main concern as insufficient, sustainable funding. Present levels of funding are simply not adequate to sustain current service delivery expectations. Increased financial resources are a must or restrictions regarding their use relaxed, if partnerships are to be explored. Sufficient funding is a constant concern especially for private operating organizations. These agencies continue to seek additional funding sources to fund the core functions of their programs. Moreover, funding uncertainty inhibits the ability to plan into the future to create an optimal environment to provide the necessary programs and resources for families. Even though the opportunity to access *project based funding* creates increased services; they unfortunately are generally time limited and require additional commitment on the agency's part to explore and secure alternative funding sources to sustain services. Some organizations suggested funding for full day programs and funding for bussing would also improve services. Therefore, the lack of funding is restrictive to organizational growth and improvements.

Funding variations also present obstacles when it comes to organizational collaboration. Creativity alone is insufficient to overcome these barriers and requires more leeway from funders and legislation policies. Suggestions for additional funding include:

- Community Partnership Enhancement Fund (CPEF).
- Cross Ministerial Funding
- Additional funds for ELL (English Language Learner) children
- Policy changes - education student count

- There could be government funding from several sources if Align can demonstrate an innovative partnership for children and families that are at-risk.
- Also, a standard source of funding for all Head Starts programs (may be attainable with collaborated efforts) that would distribute funds according to enrolment and size of the program.

Staffing.

The next weakness identified by organizations was staffing. In Edmonton's current booming economy staffing issues are problematic across all sectors. In addition, private agencies with their multiple funding sources struggle to maintain wage parity thus staffing is a greater concern for them than it is for the school boards. The salaries offered are not on par with other sectors, which creates difficulty retaining highly qualified individuals. As a result already stretched resources need to be diverted from program delivery to support recruitment and retention strategies. Most organizations report staff sustainability and training as an on-going challenge.

Space.

The third most common weakness identified was a lack of suitable space for programming to take place. The increased cost of space and the scarcity of physical space for programs are problematic, usually resulting in yearly moves for many agencies. It is not just space alone, but suitable space in the right location, that is accessible for parents and not too far away from the targeted neighbourhood that is desired.

Other Concerns.

A few other common concerns arose as well. One is early identification, many children that come to early learning programs have never been screened, assessed, or identified as having a delay whether mild/moderate or severe. It is really difficult for organizations to screen, assess, and to provide children a full year's worth of treatment, although both school boards do provide such services through their Outreach Programs. Edmonton Public Schools provides trans-disciplinary services through KIDS (Kindergarten Inclusive Developmental Services) and Edmonton Catholic Schools provides similar services through their Learning Outreach Teams. Therefore, transitions both from preschool programs to kindergarten and kindergarten to grade one is another area recognized as a current need demanding attention. This is especially true when families move; who should stay connected with the family to ensure a seamless transition, rather than have changeovers characterized by sporadic follow-up.

Collective Strengths of Organizations

Organizations identified their strengths as follows:

- Solid foundations based on years of experience.
- Comprehensive programs to support children and families.

- High quality programs, teacher certified, ongoing professional development, outreach teams, school working with community partners, rich literacy environments, play based, programs follow Alberta Education expectations
- Strengths are found in dedicated staff from multiple-disciplines with many long term employees who demonstrate compassion for the families served, along with capacity and skills to work with marginalised families.
- Collaboration of key community stakeholders with broad representation of services, and various levels of government working together on behalf of families with young children. Assist each other in providing services and resources.
- One agency has the ability to provide a full array of services to children ages 12 months to 12 years for 12 months of the year and supports families year round too. A variety of programs are designed to meet the needs of at-risk families.

Organizational Assets

The combined assets that organizations are willing to share to support the objectives of the initiative are wide-ranging. Long-standing experience and knowledge are key contributions that many organizations can share. Several have developed training sessions for educational assistants and others for teachers that would be suitable for the child care sector as well and they are willing to open up the parameters of these sessions to include others. For this to be successful requires a good conduit of communication between organizations. Capital Health for example produces a newsletter called *Contact* that may provide one means of sharing information if organizations submit their dates early enough.

Many organizations have a network and even some partnerships with connections to a broad base of service organizations. Capital Health leads the way with approximately 120 partnerships or community coalitions. There are several ways that this one partner can support this initiative and further partnerships may develop in terms of improving early identification of children needing intervention services. Moreover, several organizations on the steering committee have partnerships that can be expanded upon and help connections form with other organizations not yet involved with the Initiative.

Collectively the links and resources if pooled by representative organizations are extensive and could become a major source of strength for Align. Their reputations and visible presence along with expertise in various areas provide a solid foundation for the Initiative to build upon. For example, the Aboriginal Head Start programs are willing to share their cultural knowledge and experience with other service agencies. Other Head Starts are willing to re-allocate a limited number of staff hours to support specific community projects.

Partnerships

Organizations responded with several points and key insights they have gained from their experiences with successful partnerships:

1. **Joint ownership:** programs and initiatives must be co-owned in order for there to be by-in by all partners. Attention to develop group trust is critical for success.

2. **Clear vision:** successful initiatives have a clear vision and established outcomes are continually at the forefront of all the work the partnership seeks to accomplish together.
3. **Action plans:** Action plans both serve to set the direction and provide committee members with a gage by which to measure their work together. Flexibility and fluidity are often necessary to see movement being made towards agreed upon objectives.
4. **Partnership agreements and resources:** clear roles and responsibilities need to be negotiated. The most successful partnerships have committed resources (e.g. paid coordinator) and an expected time commitment on the part of the members. These need to be realistic, with timeframes attached to the actions of the committee. For more suggestions regarding partnerships see Appendix P – Steps for Value-Based Partnerships.
5. **Succession planning:** the committee's objectives are compromised when membership is not stable. In the event of a change the new member needs to be brought up to speed quickly. This is one problem the Initiative has already encountered, with only three of the original members still on the steering committee. As membership shifted, momentum was lost when time was used re-visiting old conversations and questioning the directions already agreed upon. Since, membership is bound to fluctuate; one solution might be to have committee members to take turns adopting a new member. The designated person could welcome and orientate the new member regarding the history, progress of the initiative, and to assist them in becoming part of the team more quickly.
6. **Awareness and support for associate organizations that operate a broader mandate than just Early Childhood Services.** A great issue currently facing many families in Edmonton is the lack of affordable housing. Many families are moving out of the area, out of the city and some out of the province to find affordable housing options. Fortunately, a few organizations with broad mandates try to support families with meeting their basic needs of food, shelter and clothing. Their expertises along with agencies who serve a broader range of ages have invaluable knowledge from which they can share. Familiarity of the needs and services that come before preschool and after age six can also be extremely helpful in forging plans that will be successful for the 3-6 age groups.

Recommendations

Validation and recognition for the private organizations that have existing community programs as a result of their hard work to provide programs for decades without major government funding. Obviously, some private preschool service providers feel vulnerable with both school boards opening up their own preschool programs and full day kindergarten programs. It is not a case of being territorial but a genuine concern as to how they will be able fund programs and remain viable.

The Head Start community has forged an Inter-agency Network which has been very successful in sharing information. In this same way, the Initiative needs to be aware of existing community programs already providing service, and explore how they might be helpful in brokering partnerships between government funded programs and private

organizations. This can be best achieved if all parties focus on the big picture and what is truly in the best interest of children and families. The hard part will be to give up some portion of programming to each other in order to ensure that quality services are available for children and families as needed and appropriate referrals are made in a timely manner.

Confirmed Gaps and Perceived Gaps in Services

There is a great need to have a governance structure that will allow agencies and organizations to better coordinate/collaborate with each other. This frustration was heard multiple of times throughout the Initiative and is embedded in their minutes. It may be the number one gap from an organizational sense. One Capital Health representative perceives her role as “listening to understand what gaps exist along with hearing stakeholder’s ideas about how they might be addressed. While community agencies need to set the agenda and scope of influence, government departments can see how best to facilitate and support their goals or programs in a realistic manner”.

There are a number of current gaps that organizations have identified. One is current eligibility does not allow for accommodation of all the children and families in need of programming. Despite Head Start’s relatively narrow criteria all programs have wait lists. If more children and families are going to be reached an increase in capacity is required; which brings the cyclical problems to the forefront which organizations previously identified as weaknesses. The top three organizational needs in consecutive order are funding, staffing and space. Increasing capacity would require increases in all three arenas as well.

The largest gap continues to be the ability to fill all of the current staff positions. This is primarily due to lack of funding, wage disparity, and a shortage of adequately trained personnel. Consequently, gaps in service are created as families are unable to readily access services resulting in waitlists. Another issue around staffing includes having a qualified staff pool to tap into when regular staff are sick or on training. This is a vital need especially for private agencies and child care operators.

As service providers, it is a difficult and never ending task to keep up with the changes of other community organizations. Consequently, there is often a lapse between what agencies know about each other, what methodology is current, and who is currently in what position. Out of necessity, organizations become very internally focused trying to keep up with the ever-changing demands.

In the questionnaire only one agency mentioned transportation or bussing as problematic for programs. However, transportation has come up in other discussions where leaders question the validity of transporting children from daycare to preschool to kindergarten and back to daycare. The Initiative will likely pursue the possibility of housing all these programs within one location – a seamless continuum of services. Task Force I will consider possible pilot projects and will investigate the feasibility of this option in greater depth. Fortunately, one model already exists in Edmonton under the direction of the Oliver Center. More models are also being created in B.C. with Children First Initiatives. Fortunately, one committee member had the privilege of visiting Toronto’s First Duty to observe the success this community has experienced which was discussed in greater depth in Chapter Five under the Canadian perspective.

This discussion leads into perceived gaps that organizations sense, but which have not been confirmed. Coordinated services: while there is an array of services available to families it is a navigational maze to both figure out which program offers what service and how to access the program they need. An increasing number of families do not have the financial resources to meet the growing costs and social expectations placed on families. While financial supports and subsidies are available, it too is a navigational nightmare to figure out eligibility and how to access these supports. In the end a simplified and more dignified system is required in order for families to have the financial and social support to meet their children's needs.

Expectations of programs sometimes dictate parental involvement. Though research shows there are many benefits to parental participation; it is an impediment if children are denied support because of a parent's unwillingness or inability to participate. Organizations go to many lengths to accommodate the needs and availability of families. They however must also balance these needs while considering the safety of their home educators and the hours in which it is wise to conduct home visits in order to maximize the benefits for the child and family that everyone desires to achieve. In addition, many families want to have more cultural content and resources available to them and a continuum of this type of service available for their children as they enter another system or service.

Quality Child Care and Early Learning Programs

The child care sector is vulnerable and some organizations even indicated it is in a crisis in Edmonton. While there has been an influx of incentives to child care service providers for professional development and wage enhancements, the child care programs best staged to access these incentives are the ones least in need of them. As a result there has not been a substantial increase in the quality of care in the city centre area and the lack of affordable child care spaces in the community continues to present extensive waitlists for families.

Consequently, insufficient intervention and supports for infants and pre-school children continue to persist. Funding becomes much more limited in grade one and beyond. Many children only receive one year of Program Unit Funding (PUF) from Alberta Education due to lack of early identification. Children not screened or identified prior to kindergarten, experience a loss of access as much as two years worth of services that they could have received when they were younger. But unfortunately, at present additional services can't be re-accessed because of termination of funding when a child turns six years of age. Though this specific practice may come under re-investigation as research demonstrates long-term benefits occur in the lives of children when they have access to early intervention as well as when the duration of intervention is three years or longer. These two strategies along with quality programming are emerging as the key factors in the measurable benefits that endure into adulthood.

One gap that is of concern to some programs is the ability to communicate and attract families with eligible children to half day programs. The reason for this is uncertain though agencies speculate that it sometimes because of a reluctance or fear to have their children identified with a delay, fear of being stigmatized or just an unawareness of the supports that exist. Lack of information is suspected to be great, given

the reaction of some parents who have sought help for their child, but didn't know where to look or how to proceed. This is partially confirmed by a recent Family Support for Children with Disability (FSCD) survey, which found 33-37% of families found information and access to services difficult (Malatest & Associates, 2008). However, this needs to be more thoroughly investigated by reaching a broad cross-section of parents to determine the majority of causes and concerns they have along with their present experiences upon finding support once they have sought for it.

Evaluations

A wide variety of evaluations are conducted by organizations on an annual basis as well as periodically. A variety of instruments are also employed. See Appendix N for a detailed listing of evaluations under the questionnaire synthesis. An outside organization conducted pre and post testing in the quadrant that reveals interesting data around kindergarten entry. Children who had the benefit of an early learning experience developed significantly stronger kindergarten readiness skills than children without this opportunity (N. Pedersen, personal communication, April 22, 2008).

Referral Process

It appears the referral or follow-up process for most organizations does not follow a set pattern, as it is dependent on the needs of the child and family, which are varied. However, there are common strategies that are employed once the decision that a referral is necessary is made. Connections with the family and other organizations consist of making recommendations, phone contacts, emails and information sharing with other agencies involved with the family. Some agencies employ intake workers who make appropriate referrals to the community after identifying what that family wants or needs. Still, in other programs the worker that is most connected to the family helps to identify the services and/or programs which will best meet their needs and the needs of their children.

When making a referral, the worker will follow-up with the family to provide further support when needed. On occasion, at the time of transference the worker has been in attendance along with the family. Some service providers extend worker participation with the consent of the family, so staff can collaborate with external agencies to provide the most holistic approach to service delivery. Regular meetings are held with the team and the contracted service providers to ensure continuity of care and support. One other observation that can be made is the older the child becomes the more formal the process becomes; school boards with children in kindergarten or grade school have set protocols that they follow as well.

Staff across organizations are continually increasing their knowledge of community resources and services in order to best support the families they serve, but it is an on-going struggle to stay current and well informed.

Transition Improvement Suggestions

Organizations submitted many concrete suggestions to improve transitioning planning and to help children move seamlessly through a continuum of services. They are listed here in point form as close to the original as possible.

1. Hire an additional worker during the intake – transition process.
2. Implement a process to streamline file transfers such as Individual Program Plan (IPPs) to receiving service providers or schools.
3. Offer an array of services in one location for families (e.g. Child care, Head Start, pre-school, drop-in programs, etc.)
4. Transition planning should include everyone involved. Roles, tasks and timelines need to be identified. Agreement among all team members is essential. Parents need to be in direct control of the process. A large part of transition planning is following up after the transition is made and possibly arranging a follow-up meeting to ensure the family feels supported and that the child is experiencing success.
5. It is essential to have *transition meetings* with the new program provider. These case conferences should profile the child's strengths, strategies that are effective for the child and key supports required for success, as well as recommendations for the next steps such as further professional assessment or a change in support. This suggestion however is extremely time consuming and may be unrealistic given already stretched resources. Therefore, increases to the funds and time available for quality transition planning are needed to provide adequate assistance.
6. Guide children and families through a process of *introduction* to the next service. With additional follow up after a time period of approx. 3 months, conducted with the family and the receiving agency/service.
7. When children require a specific service such as speech or occupational therapy and they are not identified as mild/moderate or PUF their access to services is greatly reduced due to waitlists in the community. Perhaps drop-in assessment clinics or other solutions can be sought.
8. There is always room for improvement; one place to start is to increase the level of communication between Kindergarten and Head Start teachers. A longitudinal study that tracks children from Pre-School through both schools systems would provide helpful data as to how the process can be enhanced to see improvement in student outcomes.
9. A strong understanding of all services available will increase the accuracy of successful referrals. Assist relationship building between programs by sharing information and linking families appropriately, support for the child and the parents throughout the transition can be provided by both agencies.
10. Ensure that a broad representation of key stakeholders have input into decision making by maintaining a strong Council of Partners.

A Seamless Continuum of Services Requires

Many organizations stated a need to create more community space. School space has become restrictive and the current utilization formula does not meet the needs of communities but rather the needs of infrastructure and planning departments that narrowly define what constitutes educational programs within facilities.

Better continuity and funding between Capital Health and education. This summary comment also alludes to earlier mention of cross-ministerial funding and to requests for one ministry responsible for children's issues. More communication and understanding is necessary from a governance perspective if front-line service providers are going to have the necessary leeway to cooperate and collaborate without so many rigid categories for how funds must be used.

Once children are in programming, providers want increased funding to support the essential services such as speech, occupational, and/or behaviour therapy for children who may require these supports not just those with "severe" identifiers. Increased funding would also support collaboration to ensure continuity when working with families regardless of their status, income, citizenship, mother tongue, etc. In this statement one can hear the earnest plea for support and help to meet the needs of children and families that are on their door step regardless, if they meet particular eligibility criteria. Likely every organization that has responded to this questionnaire has at some point closed their eyes to eligibility and recognized a great need in a child or family who did not quite fit the parameters of their mandate. Yet, they could not turn them away and so some organizations chose to provide service without supportive funding at all.

Consistent coordination and cooperation between all service providers would go a long ways in developing a seamless continuum of services. Therefore, what is required is a thorough understanding of the services and their processes, time to build strong relationships between program staff, adequate resources and effective use of resources to provide services as needed. In addition, a willingness by existing community programs to share information and to earn the trust of parents. These actions will create a welcoming supportive environment that fosters closer relationships and smoother transitions from child care to community programs to the neighbourhood school. Parents need to know what to expect, and where to go to get consistent reliable information and to be able to access information and services when they need it.

Major Barriers for the Initiative are:

1. Lack of a clear vision for Early Learning and Care: "We are often approaching our committee work with *competing priorities* in mind. We need to develop first and foremost what vision we are striving towards then use that as a measurement for the work we are doing."
2. Time and cooperation from all involved.
3. Agencies/Departments not wanting to abide by what the group decides.
4. Trust between the community agencies and the school boards.
5. Taking the time to create the links and increase knowledge of services, and limited resources such as space, funding, staff...etc.

6. Limited dollar allocations, different departments and organizations (e.g. clinical vs. educational).

Top Priority Goals

Organizations submitted 48 separate goal statements that they considered should be the priorities for the Initiative. (See Appendix N for this list including sub-points). These goals were summarized by Success by Six into the seven submitted here which were presented at the stakeholders meeting in April / 2008.

1. Develop a broad information sharing strategy related to the emergence of new and ongoing Early Learning and Care programs in City Centre Edmonton.
2. Develop and articulate a shared vision and understanding of Early Learning and Care in city Centre Edmonton.
3. Develop a strategy for coordinated planning.
4. Build a strategy for broader knowledge sharing based on the findings of this collaboration and the successful outcomes for children and their families.
5. Advocate for the financial support of all programs deemed essential.
6. Develop strategies for coordinated delivery of services.
7. Develop a comprehensive map of existing Early Learning and Care Services in North Central Edmonton.

Shared Vision

The development of a Shared Vision was discussed in Chapter 2.

Questions Organizations Submitted for the Initiative's Consideration

1. Is Early Learning the same as early schooling?
2. How do we support existing programs versus overly respond to create new ones? When decisions are made to create new programs is careful consideration given to the broader impact on other programs?
3. Does every child need an Early Learning "program"? How are we supporting families and communities to meet the needs of their children?
4. What does "universal access" mean to the committee? What role would targeted programs play in the continuum paradigm?
5. Who and how should decisions be made?

Chapter 7 - Proposed Improvement Strategies

In this chapter strategies that represent a paradigm shift will be discussed in general terms with suggestions put forward that characterize: repeated feedback from Align stakeholders, application of research stratagem, or application of leadership practices. The intention is to explore innovative, yet realistic possibilities that could improve the effectiveness of program delivery for children and their families in Edmonton and Alberta. Align does not need to follow the latest trends, rather their greatest effectiveness may be in providing the long-range viewpoint and by advocating for lasting changes that will have the most impact in improving the lives of children.

Organizational Structure – One Children's Ministry

To begin several suggestions by Align stakeholders have been made regarding the organizational structure of early learning in Alberta. One suggestion for improvement is that the government implement one Ministry for children. Morrill reviews the major impediments to service integration and outlines key strategies to address these barriers. He finds that the service delivery system for families, made up of three ministries, is fragmented, highly specialized and overly complex. He advocates for strategies that link and integrate these systems in order to emphasize prevention, deal with children and families holistically and promptly, in order to manage families' needs more effectively (as cited in Thompson & Uyeda, 2004 p. 13). The three major ministries of education, health, and social services, would remain as divisions, but the hopes of having one children's ministry is that with more collaboration and access between government departments, systems would become simplified. Better coordination at this level would then filter down to facilitate better and ease in collaboration between service providers themselves, as supporting some children and their families becomes a complex task, especially those that just fail to meet criterion for a particular support service, when help is obviously needed.

Service providers and front-line workers try their best to make accurate referrals, which are sometimes unsuccessful, although the child or the family need support in order to provide a nurturing environment for the child to develop. One outcome from a single ministry overseeing services for children could be eliminating the maze to better facilitate finding the right support. Operating an intake service where a team, knowledgeable of all government programs and private programs, could direct service providers to the most appropriate program. In the case of very complex situations that require synchronization between the existing main ministries, a coordination team might be called upon to develop and approve the best support plan for the child and the family.

This type of strategy could save on duplicating services and funds in the long run. If parents could also self-access the intake service this would provide a more family-centered approach and confidentiality could be safe guarded by having an informed consent requirement for the sharing of pertinent information.

The benefits that service providers would expect that one ministry for children may provide are as follows: A shorter more direct route to services for the child and the family because it would be less dependent on meeting the criteria of a single program, nor dependent on which budget funds are withdrawn. Also, any service provider involved

with a family could put in a request for a case conference with the children's ministry when they are aware of the involvement of other services. Coordinating such services could reduce stress and demands on the family while improving services and potentially reducing costs. Additionally, one agency could be appointed as the lead case manager with only certain services from a second provider accessed to augment the first provider's. This could free up the second agency to expand their capacity to work with other children and families. Administration time and costs should also be reduced both for agencies and government departments or at least channelled to better support effective operations by service providers. Inserting this kind of efficiency into the system which could be initiated by service providers has the potential to greatly reduce wait times while still allowing parents the choice of where they would like to receive services. Moreover it decreases the need for multiple assessments with more emphasis put on treatment and service implementation.

Sustainable Funding

According to Johnston (2002), a broader view of reform in the future will require policymakers and educators to pay more attention to formulating mutually supportive policies across the ministries of education, health, and social services. This includes establishing fiscal policies that provide sufficient funding to ensure equitable outcomes and revising accountability policies to facilitate rather than impede the reform efforts. Statements such as this, along with preferred leadership approaches, point out that success in the future will be based on collaboration and the ability to utilize shared leadership principles. This supports Align stakeholders advocating for one children's ministry with their unanimous declared need for additional funding.

Sustainable funding is the number one need reported by participating organizations. A consistent source of funding to support current base services of organizations was stressed by many as being necessary to maintain services and to provide security for both long term service providers and especially to attract new players to the industry. Extra funding would be required to spawn experimental and collaborative endeavours. Especially initially to prevent negatively impacting service providers by reducing program effectiveness or overly stressing staff with increased demands on already heavy case loads.

When contemplating implementation of a collaborative plan to counter act initiatives that are "fund driven", member organizations could carefully evaluate the resources, assets, and commitment that they can bring to the table. For example, if a pre-school program was deemed necessary in a particular area with Head Start as the initial service provider, then either the Public or Catholic school boards may consider donating space. Subsequently, the rental dollars could be applied to program delivery, thereby substantially helping the program to reach the start-up phase sooner.

Central Data Bank

In a similar manner, what stakeholders have expressed frequently in a variety of ways and using a variety of terms is the need to have a central data bank. Envisioned is a central data bank where background data collected by an initial service agency about a

child would be stored according to their Alberta Education student I.D. number (or alternatively the child's health care number), and could be updated by any registered follow-up agency. The proposed strategy safeguards data and the integrity of the system, while following Freedom of Information and Privacy Protection Act (FOIP) guidelines. It involves parents signing an informed consent form along with providing organizations or agencies with a password. Without both requirements organizations would not be able to access any data. Further safeguards could be employed such as: limiting access to two or four times per year, and certifying passwords are stored in locked compartments under the discrete protection of program directors. Data could also be saved in PDF or a similar protected format that would require an authorization procedure before new information could be added by organizations. To ensure accuracy of data, information could be inputted only from within a registered organization, based on proper documentation such as physician letters, assessments etc. Parents would be shown the information when updates are made and obligated to sign to verify the completeness and accuracy of the information. This procedure would also provide them, as important team members, an opportunity to make corrections or deletions with proper documentation, as required prior to any reports being circulated. These suggestions encourage a system of confidentiality where parents are respectfully engaged in the process.

The primary beneficiary of such a system would be the parents. This would ease the burden and the time required to fill out lengthy forms and this repetitive procedure every time another agency or organization is involved in providing service for the child. The new system would require only three pieces of information: the child's ID number, the parent's signature, and the input of the password. It also provides a way to encourage parents to accept support services for their child whether from health care agencies, community agencies, or by educational focused services.

The benefits to the child would be more timely access to services as needed because the referral process would be accelerated by the reduction in administration and a common framework would likely increase communication and understanding among community partners. The continuity of service for children would also improve by removing the barrier that a lack of information causes while files are being transferred. This would be especially true for children in foster care or who are very transient. It would also support continuity in programming while promoting improvements to the accountability and follow-up processes.

Furthermore, this data-sharing process should reduce government administrative costs as the registered agencies could take responsibility for inputting the child's information initially as well as completing updates as they occur until the child officially enters the formal K-12 educational system. At that time the school would become the lead organization responsible for the upkeep of the data bank. The benefit to the school system is enormous as all the pertinent data would be previously entered and now easily accessible. Many man-hours would be eliminated for organizations by removing the necessity of seeking out background information that is already available. This would expedite the implementation of appropriate programming for each child. Also, this system would most likely advance the use of common intake forms along with a more consistent referral process. Finally, it shifts government involvement to the important role of quality assurance which is necessary for positive outcomes. As service providers would be required to meet certain registration standards, before access to the data bank

would be granted. Lastly, this initiative is about access, better coordination, more efficient use of resources, and most importantly increased knowledge. As a result parental options are expanded and they are enabled to make informed decisions.

Parental Involvement

Parental involvement is often crucial to ensure positive outcomes for a child and essential for enduring long-term gains. Though, mandatory parental involvement is controversial, it does bear some consideration and if required under the following proposal would be more respectful than the present system of parental responsibilities. Edmonton Catholic Schools (2007) acknowledged adaptations must be made in the delivery of services in order to keep pace with our evolving society. Therefore, parental support needs to be more flexible in order to better accommodate the working parent's schedules and the needs of parents without overburdening or endangering front-line workers who provide home-visitations.

The proposed system for family involvement is based on ten points per hour which is verified by signed log-in sheets/passport (to ensure compliance with government requirements) with two required home visits, although the family could choose to have more. For example, a minimum of 15 hours would be required for a year of service or 150 points (based on ten 90 minute home visits per year). Services that qualify for at least 10 of the 15 hours could be: home visits, parent workshops, parent skill training sessions, informative sessions pertaining to the developmental difficulty of their child (such as autism or attention deficit disorder), time with an agency to discover helpful community resources, visits to a specialist, etc. Five separate and different family excursions could qualify for 5 of the 15 hours such as: library visits, swimming lessons, visits to City facilities (such as the Valley Zoo or John Janzen), etc. with each excursion worth 10 points. The reason for dividing the hours into the two categories (a) professional development for parents and (b) child enrichment are to foster the application of knowledge and practices learned (skills). It is respectful to parents, as it more closely mirrors expectations placed on staff and may encourage additional two-way communication between the home and the program. The intention of placing one third of the requirement on application is to encourage continued child enrichment opportunities once front-line workers or agencies are no longer involved, as the parents have now been introduced to services. It is expected that this method would also urge the family to have increased community interactions as well.

These proposed changes may have numerous benefits not only for the family, but also for the organizations that serve them and to government departments as well. The first benefit to families is improved flexibility. Access to services would be at their convenience according to their interests or needs, and according to their child's readiness. Most of all such a system allows parents to direct the program if they wish, while all families retain increased autonomy rather than an obligation to participate in prescribed programs.

Secondly, the benefits to organizations are primarily increased efficiency and effectiveness. Task Force II of the Initiative will be addressing parental issues and some discussions have already taken place, regarding how organizations can begin to cooperate and collaborate around parental-in-services and support. For example, increased

effectiveness could be achieved through support or in-services being offered according to neighbourhood or proximity. Parents in different programs or with children attending different school boards may live close to each other and yet be unaware of the other and their commonalities. By offering community based in-services through the cooperation of several organizations, the desired outcome is that relationships may be formed amongst families and friendships amongst children that may lead to long-term benefits. This facilitates the formation of natural parental support systems that could not be established otherwise.

In terms of efficiency, organizations would not have to be *all* things to *all* parents; rather, they could rely on the collective expertise that already resides within partnering organizations. For example, parent training from the Aboriginal perspective could be provided to families in the area regardless of program affiliation by Bent Arrow Head Start. This suggestion is related to the earlier recommendation of a central data bank where program registration could be facilitated, along with tracking and follow-up, with greater ease. Evening programs or summer programs offered by the Oliver Centre could also accept parent referrals to their program from other service providers. Such a pattern could be repeated multiple times as different organizations step forward to accept the responsibility to provide services to parents according to their areas of expertise.

The other advantage is this system could foster more cooperation and collaboration between service providers. The first year it would likely begin with a planning meeting at the start of the year to generate a yearly calendar, plotting parent services for the year and the contact person for each event. This would in turn create an email communication system increasing opportunities for organizations to inform each other of new events or changes. In addition, this model would better support the sharing of resources and promote more effective use of staff member's talents and time. Eventually, a well organized collaborative system that is responsive to parental needs and interests may be the end result.

Additional planning meetings to amalgamate or to enhance existing parent support services could be encouraged, such as the development of resources. Many service providers would welcome an effective *family functioning* instrument to determine which families are in need of additional support with possibly additional home visits to more accurately ensure that appropriate and timely referrals occur. The Alberta Centre for Child, Family, and Community Research (ACCFRC) spent some time investigating this area without achieving a clear consensus as to which instrument proved to be the best measure of Family Functioning. Researchers recommend the use of the FAM III or FAM Brief instruments according to feedback from decision-makers, although parents felt that the Family Functioning Scale was more user-friendly. This example demonstrates the need for conversation among service providers if credible instruments are used uniformly to allow better measurement of program outcomes which in turn can facilitate improvements in the future as well.

The benefit to government departments is primarily cost-effectiveness along with fostering preferred outcomes. One focus of the government is to encourage collaboration between community partners, which produces greater sustainability and cost savings. Such cost savings may include: shared resources, shared administration costs, effective use of staff members, resource development, and indirect professional development as organizations learn from each other through collaboration and co-sponsoring events. It

also encourages the long-term benefits and extension of parental involvement which is desired by the government for home visitation programs.

Suggestions for Staffing Solutions

It was noted in both the literature and from feedback via the Align questionnaire that child care facilities and private preschools have a significant problem sustaining staff and in finding staff substitutes when needed. This negatively impacts the staff to child ratio which ultimately affects program outcomes. The following proposition remains an area of potential where school boards might be able to augment this need if they offered access to their support staff after 8:30 am. At that time if school needs have not exhausted the pool of teacher assistants (TA's), then an agency's employee need could be matched, while providing additional work for TA's. This is not without cost or sacrifice on the part of the school boards who may lose some of their temporary TA's to permanent positions with another agency, or that additional work would not fall onto someone's shoulders to administer. However, creative, long-term solutions should not be dismissed because challenges arise in implementation. Instead, this example illustrates how many hurdles exist when it comes to successful collaboration among community partners such as: governance, eligibility, unions, pay differential, increased administrative costs, etc. Cost benefits analysis may be required to determine if a particular solution is worthy of the effort in order to overcome unforeseen obstacles that arise before partner agreements are implemented.

Modifications to Present Universal Systems

Two universal systems already exist within Canada and the Alberta landscape, namely provincial Health Care and a publically funded Education system. These two systems form the main gateways that children interface to receive government support. Consequently, it makes sense that if any additional universal services are to be added that they should be connected with one of these two tracks to form a premium *smart-system*. This term is being used to refer to procedures, policy, and interventions that facilitate access to services for those in need at the appropriate time. For example, universal screening for early identification that ensures timely referrals occur could be intentionally added to medical health care centers as the initial gateway. In fact, the Government of Alberta is currently piloting four projects to test this strategy in different regions of the province in various forms as described in Chapter Six.

Kindergarten, as part of the school system, is also a premium opportunity to screen for any children that have not been previously identified as needing additional support or intervention services. Both school boards in Edmonton have demonstrated the effectiveness of this approach and it is a way of ensuring that children have more than one opportunity to access services they may require. By working along with other agencies and acting as the host site for services, schools can value and support families while at the same time, allowing administrators and teachers to focus on their primary objective: student learning (Skage, 1996).

Utilizing these two gateways also builds on parent's intuitive responses and where they will most likely go to access information as they are already familiar with health

care centres and schools. Parent link centers are a newer alternative source of information which may be accessed more as parents become acquainted with their services. The Virtual Parent Link Centre offers the additional benefit of having a lot of information available via the internet.

Such a smart-system could improve these present services with add on services that consistently identify or locate the majority children in need of intervention or support services so they may receive at least three years of mediation according to research findings noted earlier. This would require an adjustment to the current Program Unit Funding (PUF) policy which has services ending when a child turns six years of age. Hence, taxpayers will appreciate this efficient use of resources to reach children with well-designed targeted programs, while capitalizing on the cost-benefits within the optimum window of child development.

However, the system described above will not find every child. The children of hard-to-reach families may not receive services as soon as would be desired. Hard-to-reach families are identified in this paper as those who are difficult to communicate with for a variety of reasons. It could be due to: language barriers, transiency, or a lack of access to communication devices like the phone or the internet. Whatever the reason, these families are not easily reached by typical advertising means like brochures in the library, doctor's offices, mail outs, or letters. Because of the decreased effectiveness of these means, the primary source for information sharing among these parents is *word of mouth*. Therefore, alternative gateways need to be put into place to capture children from these families as well. Service providers should continue to seek creative solutions such as: a resource fair sponsored by multi-cultural health brokers or the food bank where preschool screening centers may be available on location or alternatively parents can book an assessment time on another day.

Systemic Changes - Additional Strategies to Improve Current Systems

According to Edmonton Public School's review and their Early Childhood Special Education Report, about 10% of children are still in need of early intervention and support (2007). Research shows targeted programs are more cost effective. Therefore it is important to answer, how can current systems in Edmonton be improved to ensure the children who need services, receive services? (See Appendix Q for themes arising from the EPSB's review of ECS). Another direction the Align Initiative could also query is how accurate is the present system in Edmonton in finding the 10% of children that require intervention and support.

As was noted previously, the duration of interventions is linked to enduring affects, another viable option would be to compliment the present outreach services to kindergartens, which both school boards offer and who have increased identifying children that meet PUF criteria with Alberta Education by 400% over the last six years (R. Finlayson, personal communication, September 3, 2008). If the recently identified children at the end of kindergarten still meet the criteria for PUF then these children should continue to receive support services for an additional two-three years or to the end of grade three. The rationale for such a suggestion is research shows us that children need support and intervention for at least three years for optimal and enduring success (Reynolds & Temple, 2007, p.15). This would require a systemic change for Alberta

Education to provide PUF past age six and redefine optimum childhood years to include young students 3 to 8 years old or until grade three which has also been requested in some focus groups by teachers (EPS, 2007a). Although most of the funds for increasing support for identified children would fall under the mandate for education, according to Lynch (2007) and Reynolds & Temple, (2008) cost benefit analysis, other government departments would be realizing considerable and even extensive cost savings in the years to come, which makes it well worth the investment now.

As mentioned *earlier*, soft elements such as love are not discussed much in literature as they are so difficult to measure, nevertheless can anyone deny the incredible value of being loved and nurtured? If quality care is found in the home, it will be tough for a preschool program to duplicate it. Almost no discussion exists on how to allow children to remain in their own home, being cared for by a parent as a preferred or viable option.

Yet, the Alberta government has opened the door a crack for stay at home parents by subsidizing stay-at-home parents \$1200 per year. However, if any subsidy is to make a difference in making this option more realistic for families, it will have to be at least on par with the level of Kin Child care funding (\$400.00/ month). This really shouldn't be such a great leap when the level of tax deductions for supporting secondary students is taken into consideration. In this regard, the government of Alberta could consider offering to parents of preschoolers the same support they offer to parents of secondary students. For example, the government has calculated the support of food and lodging provisions to be worth \$600.00 per month for adult children during their secondary schooling according to income tax deductions (See Schedule AB[S11], line 4, 2007 at <http://www.cra-arc.gc.ca>). Therefore, similar recognition of parental support could be extended to families to enable one parent to stay-at-home and raise their children; by offering them the same income tax reduction of (\$600.00/month) per child five years and younger or in the form of child tax credits.

When the Initiative gets to the phase of surveying parents this may be one question that they may wish to ask parents. "If they could afford to have one parent stay-at-home or work-from-home would they choose this alternative and provide primary care for their children during the day?" Secondly, would a credit of \$400-\$600 per child per month (the same amount recently approved for kin care - using relatives for child care) allow them to do so? (<http://child.alberta.ca/home/710.cfm>). Obviously, many of these proposals are not within the authority of the Initiative, but when acting as an advocate for parents it is important that the full range of parental perspectives are represented.

Finally, whenever investigating one issue the pursuit does not go far, until the realization that other interrelated issues are also interconnected, which is one reason why collaboration is recommended in most modern leadership paradigms. It makes sense that if one parent was able to stay at home attending to childrearing and running the household that other pressures or stresses would decrease for families as well. Perhaps a cost analysis could be conducted to find out what long term benefits this investment may affect. Even as McCain et al. (2007) found extended benefits to health other benefits may also be found by supporting parents in raising their own children during the important formative years. It is quite feasible that reduced stress, reduced anxiety, even decreases in child obesity may be obtained if family pressures were decreased. The standard of living in monetary terms has continued to increase in recent decades. But, the question remains

from a holistic perspective if lifestyles have improved and are they sustainable; in other words “are we leading ourselves and children well”?

Summary

Anthony J. D'Angelo once said “Focus should be 90% on seeking solutions and 10% on problems” (<http://www.walkthetalk.com/index.php>). This quote illustrates the focus of this chapter. It serves too, as a reminder that the scope of this paper does not allow time to deal with all the potential obstacles that might arise with implementation of any of the above strategies. Rather the intention is to give the Align Initiative and other community leaders' relevant material for their consideration and to fuel productive discussions as we collectively work towards wise decisions.

Therefore, good ideas that are founded on evidenced based data should be fully explored and implemented if at all feasible. Albertans' are known for their “can do” spirit and perseverance which can be applied collectively by government, community, and parents working together for the good of our children and our future. If we care less about whose idea it was and embrace realistic and sound proposals then responsive communities may lead the way to solutions and innovative practices. It is certain stakeholders involved with this Initiative would be very grateful to know they had a little influence on the betterment of a system that genuinely wants to serve the best interests of children and their families.

Chapter 8 – Conclusion

This journey culminates with the integration of leadership and educational psychology. Here the intersection needed for families is more like a traffic circle. Where a coordinated intersection of service exists and children and families can enter at any point and cycle through accessing the services they need or want at the time. A linear path although easier to administrate will not suffice for the complex societal mix that makes up urban life. Perhaps “with the right issue at the right time, it is possible to retrieve the endangered idea of bipartisanship, expanding public responsibility for the welfare of children” (Kirp, 2007, p. 263).

According to a local expert Jane Hewes (2008), measuring early child development requires looking at the big picture which is composed of numerous smaller ones:

- Early identification
- Eligibility
- Accountability
- Monitoring progress
- Informed planning
- Communicating results
- Assuring quality

Thus, helping children navigate Early Childhood is COMPLEX. So far, research has demonstrated the key elements for effectiveness as follows:

1. Timing-Earlier is generally better -Brain development has sensitive periods, but its optimum plasticity extends to at least age 10 (Nash, 1997, p. 6).
2. Quality Preschool programs are cost-beneficial, and can make a lifelong difference (Kirp, 2007). Targeted interventions reap higher cost benefits. Well-designed preschool programs can help many children overcome glaring deficits in their home environment (Nash, 1997, p. 2).
3. The length of program – duration is positively correlated with improvement in learning gains. Interventions of 3 years duration or more achieve enduring effects into adulthood (Reynolds & Temple, et al., 2007, p.15).
4. PreK-3 Interventions strengthen learning gains and have long-term effects, especially if they include four important components: continuity, organization, instruction, and family support services (Reynolds, 2008).
5. Comprehensive family services are needed to support children. Research features the significant role that parents have with young children. Parents who demonstrate consistency between what they say and what they do (parental modelling) effectively influence prosocial behaviour in their children (Bee, et al., 2005, p.213).
6. Program content needs to be responsive to all children with an intensive emphasis dedicated to the enhancement of educational and social skills. Practitioners face the difficult challenge of uniting developmental and educational objectives. (Howard, et.al, 2006).
 - Intensity of instruction, services
 - Small class sizes
 - Well-trained, compensated staff

7. Transition-to-school services - key elements in promoting effective school transitions:
 - focus on relationships;
 - the importance of a strength-based perspective;
 - the critical importance of appropriate funding and resourcing;
 - effective planning and evaluation; and
 - responsiveness to contextual variation. “Families First strategy” (Dockett & Perry, 2007, p.2).
8. Strong accountability system, education can fall into short-lived fads, poorly tracked, when inadequate funding or a lack of political will to do what is right prevails (Kirp, 2007). Programs need to have on-going evaluations to measure effectiveness and cost benefit relationships.
 - Primary focus on children at risk
 - Research that crosses cultures is an important concept for urban settings (Roskos & Christie, 2007).

These are important elements for the Align Initiative to consider in their endeavours.

Even though the Align Initiative is in the early stage of organizational development they have reached important milestones. Taking the time to develop a shared understanding and a common vision is a vital goal and necessary for a successful journey. The partnership agreement will help the Initiative to make tough decisions and provides a solid platform to launch the work of the Task Forces.

This paper is very protracted and it required great effort not to let it become unrestrained. It is therefore illustrative of the immense undertaking of this Initiative. They too will have to be vigilant in maintaining control and may struggle to stay focused while managing numerous streams and directions simultaneously.

Limitations of the Study

Early Childhood is a vast subject and there are many aspects that this paper did not even attempt to address. Though many concepts were discussed through the development of this document, limitations prevented any subject from being dealt with in an exhaustive manner. Rather this document sought to provide a comprehensive picture by touching on the many issues the Align Initiative will need to keep in mind as they proceed with developing action plans through the progress of the newly formed Task Forces.

Issues for Further Study

There is several future issues that the Initiative will want to address over the next year. Consultation with front-line workers as to the needs of children, families, staff, and the organization may be a good first step. Not all strategies suggested in this paper are solely based on researched success, but also include essential feedback from stakeholders, who are involved in providing front-line services, consequently their perspective is different then that of a researcher. As this Initiative has indicated interest in conducting pilot projects, non-confirmed suggestions have been incorporated to provide background information for future discussions and decisions that Task Forces will need

to make. In addition, if Align chooses to implement a non-confirmed strategy, it can be arranged so that pre and post data can be documented to better inform future research and like-minded endeavours.

It is critical that the Initiative finds a way to hear from parents first hand as to their needs and preferences, or programs may be built on misconceptions and miss their mark. For instance, it is very doubtful that if parents were asked "how should services be improved" that they would reply, "a seamless continuum of services would best meet the needs of my family." Skage (1996) asserts that collaborations need to provide opportunities to make contact with parents and caregivers especially those in the target group. Their input and participation in planning the program cannot be overemphasized. Agency staff need to understand the importance of community-based programs, and how parents and families are in the best position to identify the needs that the proposed program should address (p. 39). Therefore, involvement of parents might be comprised of focus groups, one-to-one interviews, randomized surveys, and representative participants from various service providers. In addition, attempts to reach discontented or marginalized parents should also be made, as those are parents for whom the system has not worked and they may have valuable feedback that would help address gaps in the system. How parents would like to be involved in the Initiative itself, should be explored as well.

Moreover, Align should look at ways to improve communication and to encourage the sharing of plans as two programs targeting the same neighbourhood by two different service providers commenced this fall. It is unlikely that there is enough demand for two targeted language-based preschool programs in this area. Finally, the Initiative could consider additional ways to strengthen relationships between community partners. For example, relationship building with representatives from the Aboriginal community and engaging in cross-cultural learnings may lead to more meaningful dialogue between both service providers and families (Berndt, 2005, p.120).

Much of the credibility for the Initiative will be determined by how well they meet the needs of children as they work respectfully with parents to empower them in their crucial role. If the Initiative can reduce red tape and thereby parents find services are easier to access then its efforts will be productive. If access to services are simplified, if children are able to enter programs faster, and if transitions to other agencies are smoother then the Initiative will have achieved to great measure its original purpose.

The enormous challenge confronting the Initiative is partially illustrated by the size of this massive paper. It is unlikely that Aligning Early Childhood Services in Edmonton will achieve the full scope of its intentions without government support. "While families have primary responsibility for their children, the responsibility rests with all of us to support families in creating opportunities for children to fulfill their potential" (Twilley, 2006, p. 58). We must advocate together for stronger child, youth, and family policies which will help us become family-friendly communities. Thus, this endeavour provides a unique opportunity for individuals, community service providers, government organizations, and government departments to engage in collaboration to discover innovative solutions that will better meet the needs of children and their families.

Conclusion

In the final analysis, the cost of quality child care and education is far less than the costs to society when children are unable to meet their true potential. The costs to the public of group homes, prisons, rehabilitation programs, broken relationships, and health or life style issues are enormous. As the complexities of our society converge it reveals how difficult it is to raise a child alone; difficult for parents, difficult for teachers, and difficult for supporting agencies. Laura Luger, Chair of the Board of Global Fund for Children, affirms, "Our work is far from over. It requires passion, diligence, resources, and adherence to the fundamental belief that all children are entitled to be [nurtured] and educated in ways that allow them to have dreams and to reach their potential" (2003). By working and supporting each other, such goals become more achievable.

The right thing requires that collectively we adequately support and fund quality programs to help children develop to their full potential. Whether they have experienced a disadvantaged start, are slow to develop, or have significant special needs, children deserve the best and most effective supports. These tiny citizens are truly the hope of the future and success depends on the *community village* equipping each child with the paramount advantages to meet the challenges of the new global society.

References

- Acosta, D., Keith, J., & Patin, D. (1997). Home visits: "Shortening the path between home & school". *Schools in the Middle*, 24–25.
- Alberta Centre for Child Family & Community Research (ACCFRC). (2008). Innovative approaches to preschool developmental screening and follow-up services initiative – *Summaries of the four innovation projects funded by Alberta Health and Wellness*. (Retrieved on August 26, 2008 from <http://www.research4children.com/public/data/documents/SummariesoftheFourFundedProjects.pdf>).
- Alberta Education. (2007). *Budget 2007*. Retrieved on July 12, 2007 from <http://education.gov.ab.ca/departement/budget/2007>.
- Ammerman, R., Stevens, J., Putnam, F. (2006, February). Predictors of early engagement in home visitation. *Journal of Family Violence*, 21(2), 105-115.
- Atha, D. (2006). Class Notes. *Visioning and strategic leadership: LDRS # 501*. [Day 1 – Day 10]. Langley, BC: Trinity Western University.
- Bee, H., Boyd, D., Johnston, P. (2005). *Lifespan development: Canadian edition* [Study edition]. Toronto: Pearson Education Canada Inc.
- Berndt, L. (2005). Children first annual report for New Westminster. *B.C. Children First Initiative*. Retrieved on February 14, 2008 from www.bcchildrenfirst.ca/Community%20Reports.
- Boyum, G. (2008, February 20-24). Online Submission, *Paper presented at the Academy of Human Resource Development International Research Conference in the Americas*, Panama City, FL. (ED501687).
- Braun, S. (2008). Creating optimal learning conditions for children: Home-Visiting programs reach out to at-risk families. *ECLKC Bulletin*, 3 (1). Retrieved on March 22, 2008 from <http://www.ccl-cca.ca/NR/rdonlyres/2C254E58-E09C-4B72-BB7B-B7EAD6C8A85E/0/ECLKCBulletinHomevisiting.pdf>.
- Capital Health [Edmonton]. (2007). Young family wellness: An investment in the future. [Electronic version]. *Capital Health Primary Care Division*, Community Health Services.
- Davies, D. (1991). Schools reaching out: Family, school, and community partnerships for student success. *Phi Delta Kappa*, 75(5) 376–382.
- Dockett, S. & Perry, B. (2007). The role of schools and communities in children's school transition. *Encyclopedia on Early Childhood Development. Centre of Excellence for Early Childhood Development*. Retrieved on March 22, 2008 from http://www.ccl-cca.ca/NR/rdonlyres/09718317-FC4C-431E-BE23-9748528494B1/0/DockettPerryANG_06_26_2007.pdf.
- Drummond, J. E., Weir, A. E., & Kysela, G. M. (2002). Home visitation practice: models, documentation, and evaluation. *Public Health Nursing*, 19 (1), 21-29.
- Early Childhood Learning Knowledge Centre. (2007, December). Parenting styles, behaviour and skills and their impact on young children. *Canadian Council on Learning*. (Retrieved on March 24, 2008 from http://www.ccl-cca.ca/CCL/Reports/LessonsInLearning/LinL20071211_Parenting_skills.htm?Language=EN).

- Edmonton Catholic Schools. (2007). *Edmonton Catholic Schools – Fast facts*. Retrieved on August 25, 2008 from http://www.ecsd.net/aboutus/mission_vision.html, and http://www.ecsd.net/aboutus/pdf/fast_facts2007.pdf.
- Edmonton Public School Board. (2006). *Edmonton Public Schools annual education results report 2005-6*. Retrieved on July 12, 2007 from http://www.epsb.ca/datafiles/AnnualEdResultsReport_0506.pdf
- Edmonton Public Schools. (2007a). District review: Early childhood special education - Summary of focus groups input. *Report compiled by Special Education Branch, 7*.
- Edmonton Public Schools. (2007b). District review: Early childhood special education - Summary of interview input. *Report compiled by Special Education Branch, 7*.
- Egley & Jones. (2005). Can accountability be inviting? An Assessment of administrators' professionally and personally inviting behaviours. *Journal of Invitational Theory & Practice, 11*, 71-84 (AN 20537598).
- Finzel, H. (1994). *The top ten mistakes leaders make*. Wheaton, IL: Victor Books.
- First Call BC Child and Youth Advocacy Coalition. (2007). Results of early childhood education (ECE) staffing survey. *First Call BC Child & Youth Advocacy Coalition*. Retrieved on August 20, 2008 from <http://www.firstcallbc.org/pdfs/EarlyChildhood/1-staffing%20survey.pdf>.
- Fox, L., Jack, S., & Broyles, L. (2005). *Program-wide positive behaviour support: Supporting young children's social-emotional development and addressing challenging behaviour*. Tampa, Florida: University of South Florida, Lois de la Parte Florida Mental Health Institute, pp. 1-14.
- Global Fund for Children. (2003). What does education mean to me? *Global Fund for Children Annual Report 2002-2003*. Retrieved on September 20, 2008 from http://www.globalfundforchildren.org/pdfs/GFC_AnnualReport_2002-03.pdf.
- Gorman, K. (2006). Innovation through Collaboration: Working together for an evidence-informed health system. *Canadian Health Services Research Foundation*. Retrieved on August 5, 2008 from www.chsrf.ca/aw2006.
- Government of Saskatchewan. (2007). Early learning and child care – *Ministry Overview*. Retrieved on March 10, 2008 from <http://www.education.gov.sk.ca/ELCC>.
- Greenleaf, R. (1977). *Servant leadership: A journey into the nature of legitimate power and greatness*. New York: Paulist Press.
- Guide to State Agency Planning. (1999). *Elements of agency strategic plans*. Iowa.
- Harris A. & Hopkins D. (2000). Introduction to special feature: Alternative perspectives on school improvement. *School Leadership & Management, 20* (1), 9-14.
- Hendrick, J. & Weissman, P. (2006). *The whole child: Developmental education for the early years* (8th ed.). New Jersey: Pearson Merrill Prentice Hall, Pearson Education Inc.
- Hertzman, C. (2004). Making early childhood development a priority. *Canadian Centre for Policy Alternatives*. Retrieved on March 28, 2008 from <http://www.earlylearning.ubc.ca>.
- Hertzman, C. (2008, February). The Early Development Indicator: A tool to improve early child development in Canada. A keynote presentation at the *Measuring Early Childhood Development for Prevention and Intervention Symposium at University of Alberta*, Edmonton, Alberta.

- Hewes, J. (2008, February). Children's well being: the measure of our worth. Power point presentation at the *Measuring Early Childhood Development for Prevention and Intervention Symposium at University of Alberta*, Edmonton, Alberta.
- Holden, T. (2004). New Westminster ECD strategic action plan. *New Westminster Early Childhood Development Steering Committee*. Retrieved on September 20, 2008 from <http://www.bcchildrenfirst.ca/Community%20Reports>.
- Howard, J., Jenvey, V., & Hill, C. (2006, May). Children's categorization of play and learning based on social context. *Early Child Development and Care*, 176 (3&4), 379–393.
- Johnston, B. (2002, September). Absent from school: Educational policy and comprehensive reform. *The Urban Review*, 34 (3).
- Johnston, L. & Mermin, J. (1994). Easing children's entry to school: Home visits help young Children, 49 (5), 62–68.
- Jonson, K. (1999). Parents as partners: Building positive home-school relationships. *The Educational Forum*, 63 (2), 121–126.
- Kaner, S. (1996). *Facilitator's guide to participatory decision-making*. New Society Publishers, Gabriola Island.
- Kirp, D. (2007). *The sandbox investment: The preschool movement and Kids-First politics*. Cambridge, MA: Harvard University Press.
- Kouzes, J. & Posner, B. (1993). *Credibility: How leaders gain and lose it, Why people demand it*. San Francisco, CA: Jossey-Bass.
- Krips, I. (2007). Many roads taken: Stories of school plus. *Saskatchewan Professional Development Unit*.
- Lashbrook, T. (2006). *Better aligning early childhood development services in the central north quadrant meeting: Inter-agency Head Start Network (IHSN) and City Centre Education Project (CCEP) Proposed Partnership*. Unpublished report.
- Lynch, R. (2007). The cost effectiveness of public investment in high quality prekindergarten: a state level synthesis. *National Invitational Conference of the Early Childhood Research Collaborative*. "Critical Issues in Cost-effectiveness in Children's First Decade," Federal Reserve Bank of Minneapolis, University of Minnesota.
- Malatest R. A. & Associates. (2008). *Results of the Family Support for Children with Disabilities program survey*. Final Provincial Report.
- Maps Alberta Capital Region. (2005). Retrieved on April 15, 2008 from <http://mapsalbertacapitalregion.ca/gallery.html>
- Marzano, R., Waters, T. & McNulty, B. (2005). A plan for effective school leadership. Chapter 7 in *School leadership that works: From research to results*, Alexandria, VA: ASCD, pp. 98-122.
- McCain, M., Mustard, F., & Shanker S. (2007). Early years study 2: Putting science into Action. *Council for Early Child Development*.
- Meyer, J. & Mann, M. (2006) Teachers' perceptions of the benefits of home visits for early elementary children. *Early Childhood Education Journal*. Vol. 34, No. 1.
- Meyer, T. (1990). Home visits: A child-centered approach to an old concept. *Day Care and Early Education*, 17, 18–21.
- Morrison, D. (2007). Creating and maintaining effective partnerships. *Community Partnership Enhancement Fund and Alberta Children's Services Initiative*

- Retrieved on May 29, 2008 from <http://mapsalbertacapitalregion.ca/downloads/partnership.pdf>).
- Morrison, G. (2007). *Early Childhood education today* (10th ed.). Pearson Prentice Hall, NJ.
- Munro, C. (2007). The Children First guide to strategic planning. [Electronic version]. *Commissioned by the Office of the BC Provincial Advisor to Children*. Retrieved on March 22, 2008 from <http://www.bcchildrenfirst.ca/documents>.
- Mustard, F. (2008, January). Developing the full potential of all Albertans. Power point presentation at the *Public Interest Albert, a Symposium at the University of Alberta*, Edmonton, Alberta.
- Nash, M. (February 3, 1997). Fertile minds. *Time magazine*. Retrieved on August 22, 2008 from <http://www.time.com/time/magazine/article/0,9171,985854,00.html>.
- Nelson, G., Amio, J., Prilleltensky, I., & Nickels, P. (2000). Partnerships for implementing school and community prevention programs. *Journal of Educational and Psychological Consultation*, 11(1), 121–145.
- Page, Daryl. (2007). Course materials. *Conflict management and teambuilding*. LDRS #502 Langley, BC: Trinity Western University.
- Page, Don. (2006). Course materials. *Leadership Foundations*. LDRS #500 Langley, BC: Trinity Western University.
- Peters, R. DeV. (2008). Home-visiting programs with at-risk families. *ECLKC Bulletin*, 3 (1). Retrieved on March 22, 2008 from <http://www.ccl-cca.ca/NR/rdonlyres/2C254E58-E09C-4B72-BB7B-B7EAD6C8A85E/0/ECLKCBulletinHomevisiting.pdf>
- Petitclerc, A. (2008). An overview of home-visiting services across Canada. *ECLKC Bulletin*, 3 (1). Retrieved on March 22, 2008 from <http://www.ccl-cca.ca/NR/rdonlyres/2C254E58-E09C-4B72-BB7B-B7EAD6C8A85E/0/ECLKCBulletinHomevisiting.pdf>
- Prinz, R. (2008). *Effective parenting interventions to prevent social, emotional and behavioural problems in children and enhance child well-being*. Presented at the 40th Banff International Conference on Behavioural Science - Effective Early Learning Programs: Research, Policy and Practice.
- Pudlas, K. (2008, May). *Teacher, teach thyself: If you want to change the world – begin with you*. Paper presented at the International Coalition of Christian Teacher Educators Conference: From the Classroom to the World: Preparing Teachers to Make a Difference. Gordon College, Wenham, MA.
- Reglin, G. (2002). Project reading and writing (R.A.W.): Home visitations and the school involvement of high-risk families. *Education*, 123 (1), 153–160.
- Reynolds, A. & Temple, J. (2007). Impacts and implications of the child-parent center preschool program. *Presented at the National Invitational Conference of the Early Childhood Research Collaborative on “Critical Issues in Cost-effectiveness in Children’s First Decade,”* Federal Reserve Bank of Minneapolis, University of Minnesota.
- Reynolds, A., & Temple, J. (2008). Cost-effective early childhood development programs from preschool to third grade. *The Annual Review of Clinical Psychology* online at <http://clinpsy.annualreviews.org> p.109-139.

- Riley, R. (1998, September). Early childhood conference, Atlanta, Georgia. Prepared remarks for U.S. Secretary of Education Richard W. Riley. *Department of Education, Washington, DC*. Retrieved on July 27, 2008 from http://www.eric.ed.gov/ERICDocs/data/ericdocs2sql/content_storage_01/0000019b/80/17/0b/09.pdf.
- Riner, (2007). The Beacon and the port. *Journal of Invitational Theory & Practice*, 13, 3-7, AN 31949319.
- Roskos K., & Christie, J. (Eds.). (2007). *Play and literacy in early Childhood: Research from multiple perspectives* (2nd ed.). New York: Taylor & Francis Group, LLC. www.taylorandfrancis.com.
- Santrock, J. (2006). *Educational Psychology: Classroom update: preparing for PRAXIS™ and practice* (2nd ed.). New York: McGraw-Hill.
- Schmidt, J. (2004). Diversity and invitational theory and practice. *Journal of Invitational Theory & Practice*, 10, 27-46, AN 16402563.
- Schroeder, J. (2005). Children First, Community Initiatives to promote healthy early childhood development in British Columbia. *Status Report. Ministry of Children and Family Development*, p.1-150. Retrieved on February 14, 2008 from <http://www.bcchildrenfirst.ca/Community%20Reports/Provincial%20Report%202004.pdf>
- Senft, A. (2005). Abbotsford early childhood committee. Retrieved on February 17, 2008 from http://www.bcchildrenfirst.ca/abbotsford_children_first.htm.
- Skage, S. (1996). Building strong and effective community partnerships. *The Family Literacy Action Group of Alberta*. Retrieved August 25, 2008 from <http://www.nald.ca/CLR/partner/cover.htm>.
- Statistics Canada. (2006). <http://www40.statcan.ca/l01/cst01/famil10g.htm> and <http://www.statscanada.ca/menu-en.htm>.
- The American School Board Journal. (n.d.). *House calls: Visiting students' homes can help heal the breach between home and school*. pp.34–36.
- Thompson, L., & Uyeda, K. (2004). Family support: Fostering leadership and Partnerships to improve access and quality. In: Halfon N, Rice T and Inkelas M, eds. *Building State Early Childhood Comprehensive Systems Series, No. 14*.
- Tough, S., Johnston, D., & Siever, J. (2006). Does supplementary prenatal nursing and home visitation support improve resource use in a universal Health Care System? A Randomized Controlled Trial in Canada. *Birth: Issues in Prenatal Care*, 33 (3), 183-194.
- Trinity Western University (n.d.). *Servant leadership*. Retrieved June 2, 2008, from <http://www.twu.ca/academics/graduate/leadership/servant-leadership>.
- Twilley, L. (2006). Report on Edmonton's children and youth. *Joint project of: Success By 6 ® and The City of Edmonton's Child Friendly Edmonton Initiative*, Retrieval at www.unitedthisistheway.com or www.edmonton.ca/childfriendly, pp.1-73.
- Van Der Veer, R. (2007). *Lev Vygotsky*. [Continuum Library of Educational Thought Series Editor: Richard Bailey]. London: Continuum Publishing Group, 10.Vol. 176, (3&4), 379–393.

- West Virginia Kids Count Fund Staff. (Hall, M., Menefee, M., & Folden, P.) (2002). Report on what works in early childhood education (Electronic version). *West Virginia Kids Count Fund, Charleston*, pp 1-33.
- Woolfolk, A., Winne, P., & Perry, N. (2000). *Canadian edition: Educational psychology*. Prentice-Hall Canada Inc., Pearson Education.
- Zeletic Associates. (2008). Community Action Program for Children (CAPC) – *Alberta Region: Evaluation summary report highlights* [Electronic version].
- Zmuda, A., Kuklis, R., & Kline, E. (2004). *Transforming schools: Creating a culture of continuous improvement*. Alexandria, VA: Association for Supervision and Curriculum Development.

Appendix A - Terms Defined

“Hord (in Mawhinney 1993) warns that conflict among collaborative stakeholders can occur because of differences in how we define and understand cooperation, coordination, and other linkages between agencies” (as cited in Skage, 1996, p.17). In order to facilitate better understanding between community partners the following table is presented to assist the development of a “common language”.

Terms and Definitions – for Aligning Early Childhood Services	
At-risk	Children at-risk live in one or more of the following circumstances such as: parental low income, low education, poor health, social isolation, and lack of supportive networks, and may need help to overcome these (http://www.child.alberta.ca/home/905.cfm).
Collaboration	Collaboration is the process of working together to get things done (Gorman, 2006).
Community	A group of people bound together through mutual interest and sense of shared destiny. The "boundaries" can be geographical (like a neighbourhood, town, city, or region) or non-geographical (such as an interest group dispersed across the province, a workplace, business organization or professional association) (Skage, 1996; Government of Saskatchewan 1994).
Ethnicity	Ethnicity refers to shared patterns of cultural heritage, nationality, race, religion and language (Santrock, 2006, p.168)
Family	Families have many different forms and can be defined as any combination of two or more persons bound together by ties of mutual consent, birth and/or adoption. Families together share responsibility for some or all of the following: physical maintenance, care, and nurturance of family members; addition of new family members through birth or adoption; and socialization of children (Skage, 1996).
Hard-to-Reach Families	Hard-to-reach families are identified as those who are difficult to communicate with for a variety of reasons (e.g. language barrier, lack of communication devices, or transiency etc) (Hildebrandt, 2008).
Innovation	Innovation is not only doing things in a new and different way, but also ensuring these things will be implemented or adopted where past approaches may have failed (Gorman, 2006).
Inputs	Resources dedicated to the program (D. Morrison, 2007).
Outputs	The direct product of your activities, usually measured by volume of work accomplished (D. Morrison, 2007).
Partnership	Encompasses a broad number of types of relationships. It is "an undertaking to do something together..., a

	relationship that consists of shared and/or compatible objectives and an acknowledged distribution of specific roles and responsibilities among the participants which can be formal, contractual, or voluntary, between two or more parties" (Skage, 1996; Partnership Resource Kit 1995).
Quality Child care	Quality child care characteristics: licensed, safe, low caregiver/child ratio, developmentally appropriate practices (DAP), individual needs accommodated respectfully, culturally sensitive, communicate and provide resources to families, provide staff training & development, and use an accredited program (G. Morrison, 2007, p. 189).
Socioeconomic Status or SES	Socioeconomic Status (SES) is the organization of people according to economic, educational and occupational characteristics (Santrock, 2006, p.168).
Targeted programs	Targeted programs meet the needs of eligible families for more intensive, long-term and unique services and are delivered in partnership with other Capital Health and community-based programs and professionals eg. Head Start (Capital Health, 2007).
Universal access	Universal programs meet the information and service needs of all families with respect to health and development, immunization, screening and injury prevention and provide linkages to other community programs and supports eg. Kindergarten (Capital Health, 2007).
Values	We define <i>values</i> as beliefs that guide our actions. (Nelson et al. 2000, p.2).

Table compiled by Lavon Hildebrandt on behalf of the Align Initiative, September 30, 2008.

Appendix B - List of Acronyms

ACCFCR	Alberta Centre for Child, Family & Community Research
ACYI	Alberta Children and Youth Initiative
ASQ	Ages and Stages Questionnaire
BBBF	Better Beginnings, Better Futures
CAPC	Community Action Program for Children
CASA	Child Adolescent and Family Mental Health
CBR	Community-Based Research
CFSA	Children & Family Services Authority - Region 6 (Edmonton Area)
CHA or CHS	Capital Health Authority / Capital Health Services
CPC	Child-Parent Centers in Chicago
CPEF	Community Partnership Enhancement Fund
CSCN	Conseil Scolaire Centre Nord (Francophone School Board for North Alta.)
CUP	Community-University Partnership (connected to the U of A)
DAP	Developmentally Appropriate Practice
ECD	Early Childhood Development
ECMERC	The Early Childhood Measurement and Evaluation Resource Centre
ECS	Early Childhood Services
ECSD or ECS	Edmonton Catholic School District / Edmonton Catholic Schools
EDI	Early Development Indicator (Preschool Assessment Tool)
EIP	Early Intervention Program
ELC	Early Learning and Care
ELL	English Language Learner
EPS	Edmonton Public Schools
EPSB or EPS	Edmonton Public School Board / Edmonton Public Schools
FOIP	Freedom of Information and Privacy Protection Act
FTE	Full Time Equivalency
IET	Invitational Education Theory
IHSN	Inter-Agency Head Start Network
IPP	Individual Program Plan
KIDS	Kindergarten Inclusive Developmental Services
MCFD	Ministry of Children and Family Development (BC)
NCA	National Children's Agenda
PBS	Positive Behaviour Support
PIE	Partner in Excellence
Pre-K	Pre-Kindergarten
PRISM	Pediatric Regional Integrated Services Model
PRP	Pediatric Rehabilitation Program
PUF	Program Unit Funding from Alberta Education
SEP-CAP	Southeast Kansas Community Action Program
SES	Socioeconomic Status
SLP / SLP-A	Speech and Language Pathologists / SLP-Assistants
START	Short Term Assessment & Response Team,
TA	Teacher Assistants

Appendix C - Possible Reasons to Seek Community Partners

Financial benefits	<ul style="list-style-type: none"> • more efficient economically in a time of restraint • for sponsorship, fund-raising • pooling resources because of funding difficulties • avoiding duplication & wasting precious resources • funding requirements often include building ties to community, obtaining community support, etc.
Sharing resources & expertise	<ul style="list-style-type: none"> • utilizing people's strengths • offsetting the workload when it is too much for one agency • sharing materials and access to libraries • input from other communities (aboriginal)
Referrals, access to families, and finding supports for clients	<ul style="list-style-type: none"> • greater awareness of other agencies' services and programs • clients don't always connect with agencies that can help them • provides a way for all partners to reach more families • certain agencies have access to "hard to reach" families • some agencies have more time, staff, and resources to recruit hard to reach families
An integrated approach to better client needs	<ul style="list-style-type: none"> • sharing information, new serve clients' needs ideas to create better services • inter-disciplinary case conferencing to identify and address • providing clients with more consistent information and services • streamlining services for clients ("one stop" services) • avoiding duplication of services
Recruitment/access to target group	<ul style="list-style-type: none"> • looking for agencies who have a 'captive audience' or group already formed (Adult Basic Education, friendship centre, hospital, public health nurses) • looking for a good location, where parents can be contacted • looking for agencies who have early contact with parents of newborns
Because it "makes sense"	<ul style="list-style-type: none"> • agencies share similar goals • agencies are trying to reach the same kinds of people • collaborating seemed like a natural evolution • coordinator wanted a holistic approach to supporting families • coordinator wanted to improve families' access to other services • collaborating with health agency seemed like a natural step

(Imported by Skage, 1996, p. 30-31).

**Appendix D - Aligning Early Childhood Services Partnership Agreement
(Logic Model)**

Aligning Early Childhood Services Partnership Agreement	
<p>Vision Statement: Aligning Early Childhood Services is dedicated to working collectively to create an environment that supports the best opportunities for all children.</p>	
<p>Mission: This initiative commits to working cooperatively with community partners to ensure that quality early childhood services are coordinated to support parents and by working together to enrich children’s lives, and help them attain their full potential.</p>	
<p>Statement of Need: Currently numerous programs are serving children in Edmonton, sometimes operating in competition for resources, and unable to be responsive to a demonstrated need. Better coordination of planning and delivery of services will support programs to be sustainable or to operate at maximum effectiveness, and better provide a continuum of services for young children and their families.</p>	
<p>Rationale:</p> <ul style="list-style-type: none"> • The first 5 years are critical to a child’s development. Research shows that the best impact includes developmental opportunities through preschool and into the school age years. • By taking advantage of the opportunity to increase understanding of services, service providers and transition processes, providers can better inform and support children and families. • Joint planning and delivery may lead to efficiencies and support use of best practices. 	
<p>Shared Beliefs and Values:</p> <ul style="list-style-type: none"> • Focus on the whole child, family, and community • Embrace and respect diversity • Work toward a strength based perspective • Available and accessible high quality programming for all 	<p>Broad Strategy: Create a structure to share information that supports informed decision making re: ELC program development / coordination and the allocation / support of ELC programs within Edmonton. Resources and information to support decision making may be guided by or initiated through:</p>

<p>children is essential</p> <ul style="list-style-type: none"> • Services are informed and delivered based on the needs of those being served (informed choices for parents) • Building on the experience and expertise of existing programs and services for children and families • Partnership and engagement of key stakeholders is essential • Relationships are key • Respect for each members’ contribution • Respect for each agency and program, and information shared • Information is used for the benefit, not harm of any partner 	<ul style="list-style-type: none"> • Community Needs Assessments (considering program, community and family) • Consciously seeking mechanisms to continuously engage the broader community • Informed by current research and program models (local and non-local examples) • Consciously striving for a broad and inclusive decision making structure • Collaborate within existing program services • Communication is key involving: information sharing and increasing opportunities (info hub) • Increase parental choices and access to knowledge – prevent children from falling between the cracks.
<p>Target Group:</p> <ul style="list-style-type: none"> • Families with Children 0-8 years of age • Families facing multiple barriers such as transience • Families from diverse backgrounds and cultural groups • Low to mid SES • Broad developmental spectrum 	
<p>Goals:</p> <ul style="list-style-type: none"> • Increase understanding of Early Learning and Care in Edmonton. • Develop strategies for coordinated delivery of services. • Develop a broad information sharing strategy related to the emergence of new and ongoing Early Learning and Care programs in Edmonton – more realistic knowledge mobilization. 	
<p>Activities:</p> <ul style="list-style-type: none"> • Centralized Data Bank • Research and Evaluation • Financial sustainability • Partnership agreements • Increase parent involvement 	

- Improving quality of Child Care
- Gathering and coordinating Data Mapping
- Shared learning / PD across existing programs
- Pilot Project/s – to demonstrate what changes need to be made
- Develop an information sharing structure to guide or support decisions

Expected Outcomes:

- Identify models of partnerships for Early Learning and Care
- More influence on policy and decision-making
- Increased understanding and responsiveness to community needs

Commitment of each partner:

- Each participant will attend meetings regularly, participate fully, and follow through on commitments.
- Each partner will provide space for rotating meetings, including snacks.
- Each partner will share information and take responsibility for the manner in which they bring information forward.
- We commit to doing our part to uphold the elements of the partnership agreement.

Structure of Partnering Organizations: *See Partnership Structure Diagram*

AELC committee will meet a minimum of four times per year. (Role of influence, knowledge mobilization, facilitation, and to advocate on behalf of children, families, as a collective voice).

Task force chair/lead will attend AELC Committee meetings and bring information and updates on progress and requests for needed support/information to the larger committee.

Task groups will meet as necessary to achieve the goals identified.

Decision Making Procedure: Consensus decision making is not an objective of this initiative. Committee members are key communicators within their own organizations and may facilitate and influence future decisions.

Conflict Resolution Plan:

Conflict will be handled through a professional code of conduct. This will include but not be limited to:

- Addressing the member most closely connected to the issue directly
- Address issues in a timely manner

- Name the issue clearly and professionally
- Bring the issue to the larger committee if a broader discussion or support is required.

Evaluation:

Annual evaluation of the progress of the AELC Committee to take place in May/June. Task force groups are to identify outcomes and evaluate their progress toward goals.

Reporting:

Task groups to report to AELC Committee on:

- Progress toward goals
- Resource/support needs for the Committee

Partner agencies report as they are able to on:

Information to increase partnership opportunities, understanding of services, and success in providing Early Learning and Care services in Edmonton.

Each partner is responsible to represent their organization/group and report back to their respective organizations as required.

(Compiled by Ilene Fleming and Kelly Hennig, founding members of the Align Initiative, May 29, 2008).

Appendix E - Strategic Planning Guide: B.C. Children's First Initiative



(Figure imported from Munro, 2007).

Appendix F - Home Visitation Highlights

Quotes on Canadian Characteristics & Evaluations

- “Until these programs are subjected to a rigorous evaluation, such as those being carried out in Manitoba and planned for Saskatchewan, their benefits to young children and their families will remain unclear” (Peters, 2008, p. 2).
- “Most effective home-visiting programs are only one part of what is considered an optimal, comprehensive service system for early childhood development” (Peters, 2008, p. 2).
- “By introducing visitors into the family home, these programs reach out to families who might not otherwise seek supportive services” (Braun, 2008, p.2).
- “Service providers can directly observe the family home environment, and have greater opportunity to build on family strengths (for example, devotion to their child, social support from extended family) as well as address risk factors that may negatively affect the child’s learning and development (for example, poor parenting practices, lack of knowledge of child development, or lack of available support services in the community). Through this direct, more intimate contact, providers are also better able to tailor their support and guidance to meet the needs of their clients” (Braun, 2008, p.3).
- “Positive results do not necessarily end in childhood; in some cases they remain apparent throughout a child’s life, continuing even into adulthood” (Braun, 2008, p.3).
- “The most effective programs are based on theories of development and behaviour change. They also address the many different dimensions of family life, target risk factors identified in the research literature, follow a well constructed curriculum across the series of visits, and include a child education component. (Braun, 2008, p.4).
- “General characteristics of successful programs. These characteristics have to do with the number of visits of a program, the qualifications of the visitors, and the content of the program. It is important to keep in mind, though, that none of these elements alone guarantee positive outcomes – they work in concert with one another to produce positive results” (Braun, 2008, p.4).
- “Home-visiting programs should form one component of a broader approach that also includes other family support services, such as high-quality child care” (Braun, 2008, p.4).
- “One that is built on a foundation of healthy public policies that address the systemic causes of poverty and family disadvantage, one that includes a comprehensive system of early childhood development programs and services, and one that is connected by a nationwide resource network that supports rigorous evaluation of early childhood development programs” (Braun, 2008, p.5).
- “They aim to foster safe and healthy child development, improve parenting knowledge and skills, promote positive parent-child relationships, help families’ access community

services, and enhance family functioning. Several home-visiting programs identify potential participating families at birth in the hospital or during a universal home visit (i.e., systematically offered to all families) by a public health nurse shortly after birth. Most of them use standardized tools to identify families at risk and to assess their needs. Generally, home visitors provide emotional support and information, model positive parenting practices, and help families link with community services” (Petitclerc, 2008, p. 5).

- “Programs vary from province to province “(e.g., *Building Blocks* and *Infant Development Program (IDP)* in British Columbia, *Families First* in Manitoba, *Kids First* in Saskatchewan, *Les services intégrés en périnatalité et pour la petite enfance* in Quebec, *Direct Home Services* in Newfoundland-Labrador, *Healthy Beginnings* in Nova Scotia, *Best Start* in Prince Edward Island, and *Healthy Families* in the Northwest Territories) (Petitclerc, 2008, p. 6).
- “Results of the *Manitoba Families First* evaluation showed that, after one year, participation in the program led to outcomes similar in magnitude to those reported in recent meta-analyses of home visiting programs, including increased positive parenting behaviour, improved parental psychological wellbeing, but no effect on some other outcomes such as social support” (Petitclerc, 2008, p. 7).
- “In conclusion, home-visiting programs across Canada share similar objectives and common approaches, but also vary in such characteristics as the background training required for home visitors and the use of a standard curriculum. Based on the information we could gather, only two provincial programs are being submitted to evaluation studies using valid research designs, which makes it difficult at this point to assess the impact of home-visiting programs on children’s development in Canada” (Petitclerc, 2008, p. 8).

(Compiled by Lavon Hildebrandt for the Align Initiative March 26, 2008).

Appendix G – Home-visiting Programs across Canada

Home-visiting programs across Canada and target populations:

Province or Territory	Program name	Target families
British Columbia	Building Blocks	Vulnerable families and children (0 to 3 years)
	Infant Development Program (IDP) www.idpofbc.ca and Aboriginal IDP www.aidp.bc.ca	Families with an infant at risk for or with a developmental delay or disability (0 to 3 years)
Alberta	Home visitation programs: www.ahvna.org	Parents or parents-to-be who face challenges that may place their babies at risk and prevent them from reaching their full potential
Saskatchewan	Parent Mentoring Program of Saskatchewan (PMPS) www.pmps.ca	Pregnant women and parents of children 0-5 who are at low psychosocial risk
	Kids First	Pregnant women and families with children 0-5 living in vulnerable conditions, who are at moderate to high risk
	Early Childhood Intervention Program (ECIP)	Children at-risk of developmental delays or handicaps, aged birth to school age, and their families
Manitoba	Families First	At-risk families from pregnancy to age 5
Ontario	Healthy Babies Healthy Children program (HBHC)	Families with risks to healthy child development, from pregnancy to age 6
Quebec	Services intégrés en périnatalité et pour la petite enfance à l'intention des familles vivant en contexte de vulnérabilité	Pregnant women and families with children 0-5, where the mother is less than 20 years of age, or pregnant women and families with children 0-5 living under extreme poverty conditions
New Brunswick	Early Intervention Home Visiting Program http://www.gnb.ca/0017/Children/ecireviewindex-e.asp http://www.gnb.ca/0017/ELCC/index-e.asp	Children 0-4 with an identified developmental delay or "at risk" of developing one due to environment, established or biological factors
Newfoundland and Labrador	Healthy Beginnings: Supporting Newborns, Young Children and their Families (home visiting is part of program)	Families with young children who have increased potential for physical, cognitive, communicative or developmental difficulties
	Direct Home Services Program	Families of infants and preschool aged children who display delayed development or are at risk for delayed development
	Child, Youth and Family Services (Family support services) (home visiting is part of the program)	Families who require additional support for basic life skills and parenting
Nova Scotia	Healthy Beginnings: Enhanced Home Visiting	Families of children 0-3 who face challenges
Prince Edward Island	Best Start Program	Families who face challenges for parenting
Yukon	Healthy Families Program	Overburdened families, prenatally and/or at birth, through school age
Northwest Territories	Healthy Families Program	Families with children 0-6 who face greater parenting challenges
Nunavut	No Nunavut-wide program; but it is possible for community groups to obtain funding for home-visiting programs through the Healthy Children Initiative	

(Table imported from Petitclerc, 2008).

Appendix H - Cost Benefit Comparison Analysis per child

Itemized Benefits Per Participant in 2006 Dollars for the CPC Preschool Program

Costs and Benefits	Benefit Per Participant	Percent of Total Benefit
Program Cost	8,277	--
Program Benefits		
Child care	2,049	2.4%
K-12 education savings	6,026	7.2%
Child welfare savings	976	1.2%
College	-689	--
Participant earnings	25,376	30.2%
Taxes	8,958	10.7%
Crime savings		
Criminal Justice System	8,819	10.5%
Victimization	32,517	38.7%
Tangible	7,578	9.0%
Intangible	24,939	29.7%
Total Benefits	84,032	100.0%
Public and crime victims	56,837	67.6%
Participants	27,195	32.4%

Note. See the CBA report for the estimation procedures. The negative benefits of college attendance reflect the fact that taxpayers fund 2/3 of the cost of college. This cost slightly offsets the earnings increases to participants as well as the increased tax revenues. Earnings are estimates of total compensation before taxes.

(Imported from Reynolds & Temple, 2007).

Appendix I – The Most Common U.S. Programs Mentioned in Research Literature

Program	Type	Age	Citations
High/Scope Perry Preschool Program	Model	40	19
Chicago Child-Parent Centers	Large scale	21	14
Carolina Abecedarian Project	Model	21	13
Houston Parent-Child Development Center	Model	11	12
Infant and Health Development Program	Model	8	11
Comprehensive Child Development Program	Large scale	5	8
Early Training Project	Model	20	8
Prenatal/Early Infancy Project/Nurse-Family Partnership Program	Model	15	8
Milwaukee Project	Model	14	8
Philadelphia Project	Model	18	7
Consortium for Longitudinal Studies	Model	27	6
Educational Testing Service Head Start Study	Large scale	8	6
New Haven Follow-Through Study	Large scale	17	6
Institute for Developmental Studies	Model	13	5
Louisville Experiment (Head Start)	Model	16	5
Even Start	Large scale	7	4
Harlem Training Project	Model	12	4
Maryland Head Start	Large scale	17	4
Yale Child Welfare Research Project	Model	10	4
Avance Family Support and Education	Large scale	5	3
New York State Experimental Prekindergarten	Large scale	9	3
Panel Study of Income Dynamics Head Start Longitudinal Study	Large scale	25	3

(Imported from Reynolds & Temple, 2008, p.114).

Appendix J - Highlights of the 2005 Report on Children First Community Initiatives

Children First Initiatives: Promoting Healthy Early Childhood Development in British Columbia

- “The Interior has shown leadership in the development of a regional ECD network. This group brings together ECD community developers from around the region to share resources and provide a common voice for young children” (Schroeder, 2005 p.12).
- “In order to best support and improve the system of supports for children, you must have good data about the system and those who access it” (Schroeder, 2005 p.13).
- “Boundary and Abbotsford have used local resources in conjunction with the support of Human Early Learning Partnership (HELP) to develop in-house capacity to gather information on a range of local indicators and to create maps” using the same EDI neighbourhood boundaries (Schroeder, 2005 p.13).
- Other initiatives have surveyed parents in their communities and used the information in their planning activities.
- “Initiatives have gathered information not just on what services exist, but also on what other informal supports are available in the community and on how accessible these are to children and families”. (p.13)
- “Child care services are an integral component of a continuum of services for young children. However, child care services have traditionally been organized distinctly from other early child development services at the policy level” (Several communities have developed strategies to facilitate partnerships and increase participation. For example, in Port Alberni they provide funding for early childhood educators to pay a substitute so that they can attend meetings) (p. 14).
- All of this takes place in a festive and non-threatening environment. One innovative example of this is the Community Arts Initiative that has been developed by the Burnaby ECD coalition. These events use arts and drama activities to engage families and to increase awareness of the importance of the early years (p. 17).
- Brochures, directories, fridge magnets and websites are also employed. *Richmond Children First* created a family calendar with photos of local children, extensive information and tips on child development and local program and event details. Often parents will not attend to information until they are in immediate need of it. Having a variety of mechanisms for communicating with parents increases the likelihood that they will have the information available when they need it (p.17).
- In some communities, coalitions have sponsored joint training sessions that have included child care and early child development service providers (p.29).
- Relationships have been formed that function outside the hours the ECD Committee sits together. People feel a positive shift in understanding that as a community we all need to work together for the common good and pool our resources while at the same time blurring the lines of our own individual agendas (99).

- The longer term aim of integrated planning efforts is to develop more integrated services for children and families (p. 30).
- Physical integration provides convenience to families and service providers (p.48).
- Holistic approaches that make sense to kids and their families do not necessarily meet goals of government ministries (p.49).
- Perhaps the most exciting thing is that agencies are now taking the initiative to be pro-active about addressing the community ECD plan priorities without being coaxed and cajoled. For example the Library has found monies in their budget to start literacy outreach initiatives at the Food Bank, the Aboriginal Headstart program and Kla-how-eya Cultural Centre (p. 112).
- Some initiatives admit to struggling to keep parents at the table and to garner adequate input from non-profit day care operators (p. 114).
- Many initiatives experience limited involvement of parents and multicultural community at the ECD table (p.123).

(This Highlight Summary was prepared by Lavon Hildebrandt for the Align Initiative March 26, 2008. All quotes have been taken from – Schroeder, 2005).

Appendix K - Summary of Key Elements from BC Children First Initiatives

This project aims to address the Coalition’s prioritized goal of developing community capacity to offer universal, preventative early childhood programs that are successful and sustainable (Schroeder, 2005, p.142).

Category	Key Elements from BC Children First Initiatives Ideas to Consider
Assessment	<ul style="list-style-type: none"> - Host Developmental Screening events in Hub areas - Screening Day in conjunction with a Band Health Day. - Exploring how the new provincial Vision and Hearing screening strategy fits with the current approach to screening for developmental delays (p. 112). - Nippissing screening tool is now being administered as a regular part of public health nurse ECD activities. - Assessments by Health Station Nurse Services will be provided three times per week (p. 129).
Barriers	<ul style="list-style-type: none"> - Hard to reach families - Transportation, isolation and trust issues - Child-minding needs to be provided for parenting workshops and for other programs. - Agencies offering family resource programs are trying to locate them close to where families live and/or can get to easily. - Agencies try to hire program staff who speak the language of specific groups - Some examples of consistent barriers are program costs, lack of time, transportation issues, lack of access to affordable / flexible childcare, transportation (p.146). - Some gaps in programs and services offered include ensuring culturally appropriate / accessible programs and services, lack of knowledge about what services/programs are available, and access issues for more remote communities and marginalized groups(p.146). - Ideas to minimize these barriers include outreach programs, multi-faceted public awareness campaigns and community coordination of programs focusing on location and flexibility (p.146). - BLT is providing a Mother Goose shuttle van that will introduce between the Words On Wheels Bus and Munchkin Land Discovery Centre with the intent of maximizing the opportunity for families to make new connections in a way that is comfortable and familiar (p. 150).

<p>Fundraising</p>	<ul style="list-style-type: none"> - Meeting with policy makers & funders. - Primary source for initiatives has been provincial funding. - Funds must be awarded within the context of a well-researched community ECD plan that has been developed collaboratively and widely discussed with all stakeholders. There must be agreement at the outset about what are the community's priorities (p.19). - A comparison of Initiatives indicate that those communities who hired even part-time staff were able to accomplish more at faster pace even when fundraising levels were similar eg. Abbotsford vs. Mission (p.95 -100). - Committee determines projects that will further the community's ECD priorities and then recommends to the CSM how Building Block and Make Children First funds should be spent. This year the group also took responsibility for determining how Surrey/White Rock's share of the Success By 6® funds should be allocated (p. 111).
<p>Organizational Structure</p>	<ul style="list-style-type: none"> - Representation from parents/grandparents - Participation of Aboriginal & Multi-cultural communities. - Representation from the faith communities. - Use of Action Teams: Assessment Planning Team, Prenatal committee, Children First Steering Committee, Autism Committee, Dads in Action, FASD committee, EDI committee, Education committee, Social Planning committee. - Formation of a Public Partners ECD group to discuss potential collaboration opportunities and projects (p. 111). - Parent input into the initiative has primarily been through surveys. - Parental input is encouraged by use of evaluation questionnaires (p.149). - Create focus groups to provide a medium to hear the voice of parents – need to increase the voice of parents (p. 143). - Community Arts Initiative plan to use the arts, drama and storytelling as a way to reach out and collect information from local parents and caregivers from various neighbourhoods – at the first event over 100 people attended (p.123). - Host informal community conversations – by inviting a few people to talk together. Conversations will invite a sharing of experiences, perspectives and ideas about what can be done to foster the raising of healthy children in healthy families in a healthy community. Feedback from these dialogues will be incorporated into a subsequent process to create a community plan (p.133).

<p>Organizational Structure</p>	<ul style="list-style-type: none"> - Create a 5 year Early Childhood Action Plan and evaluation framework. - Evaluation to be completed by outside consultant. - ECD plan “Valuing Our Children: Taking First Steps Together” was released. The document provides an overview of the community research to date, the strategic planning framework used and articulates vision, goals, priorities and recommended actions (p. 111). - The committee contracted with an independent contractor to provide the committee with community research – to include a review of existing ECD assets, socio-economic characteristics of the community, information (EDI) on school readiness, and an overview of early childhood development “best practice” (p. 114). - Creation of new ECD specialist positions. - Working with other Children First initiatives in the Region to support the development of a joint Health/MCFD regional ECD framework and plan (p.113). - Complete an in-depth needs assessment for the various neighbourhoods. Then discuss a process and criteria to consider when selecting and working in a community (p.122). - Collaborate: how to reach a chosen future (preparation for the development of a community plan for early childhood development and resource development p. 132). - Host all day working meetings called “Coming Together” to guide community process (p. 141).
<p>Public Relations</p>	<ul style="list-style-type: none"> - Promotional Materials – logo, posters, pamphlets, display boards, directories, fridge magnets, and a wallet sized card with key emergency and general information numbers. - Use ‘The Early Years: The Precious Years’ pamphlet. - <i>Developmental wheel: HANDS Health, Activities, Nutrition, and Development.</i> The information is presented on a wheel with each pie shaped section containing information about a specific age and stage of a young child’s development. The developmental wheel stages are broken into the following : 0-3 months, 3-6 months, 6-9 months, 9-12 months, 12-18 months, 18-24 months, 3 years, 4 years and 5 years. Each wheel includes a developmental checklist and has community resources listed on the back (p.104). - Launch a Website. - Use a catchy name such as: Community Action Toward Children’s Health (CATCH) - Okanagan - Attend Food Bank on a regular basis to distribute materials

<p>Public Relations</p>	<p>and books for single parents (Senft, 2005).</p> <ul style="list-style-type: none"> - Regular early childhood page in bi-weekly paper. - Ad in the Parks, Recreation and Culture guide, Delta learned from their parent survey that this is the information source of choice of parents of preschool children (p. 109). - Communicate via email newsletters and mailing / distribution list copies of the committee's minutes. - Annual ECD meetings with presentations. - Mission publishes a Parent Resource Quarterly, which lists community activities, supports and resources (p.99). - BLT sends out current information monthly to each child from Kindergarten to Grade 3 (p. 149). They have also compiled a 32-page resource guide of all community supports for children 0-6 and their families. This is distributed to all new parents, day cares, doctor's offices, and many other locations within the community. - Plan an awareness campaign, including a family event. - Four working Groups are chaired by members of the ECD Steering Committee (p. 102). - Presentations on the importance of ECD have been made to the School Trustees, City Council, the community paper editors and one of the rotary clubs p. 112). - Meeting with faith groups and the business community to explore ways that they can contribute to making the community more child and family friendly (p.112). - Make Service providers aware of the committee to Align Early Childhood Services.
<p>Referral Process</p>	<ul style="list-style-type: none"> - Establish Referral pathways from improved early screening and identification. - Develop a flow chart that utilizes the community asset inventory and provides a visual representation of the range of services available to families during the early years of a child's development. May also help to identify the strengths and gaps in service (p.104).
<p>Resources</p>	<ul style="list-style-type: none"> - Asset Mapping of Community. - Professional Resource Binder: the binder includes referral forms and referral process information for each agency. - Create an Inventory of Children's Programs/ Services/ Resources (see <i>Sea to Sky Resource Directory</i> for a sample (http://www.bcchildrenfirst.ca/Sea-to-Sky/2005%20RESOURCE%20DIRECTORY.pdf)) - Parent resource guides. - Child Care Options maintains an updated database of childcare programs. - Initiatives strive to bring together a previously diverse group of child care providers to share resources, substitute

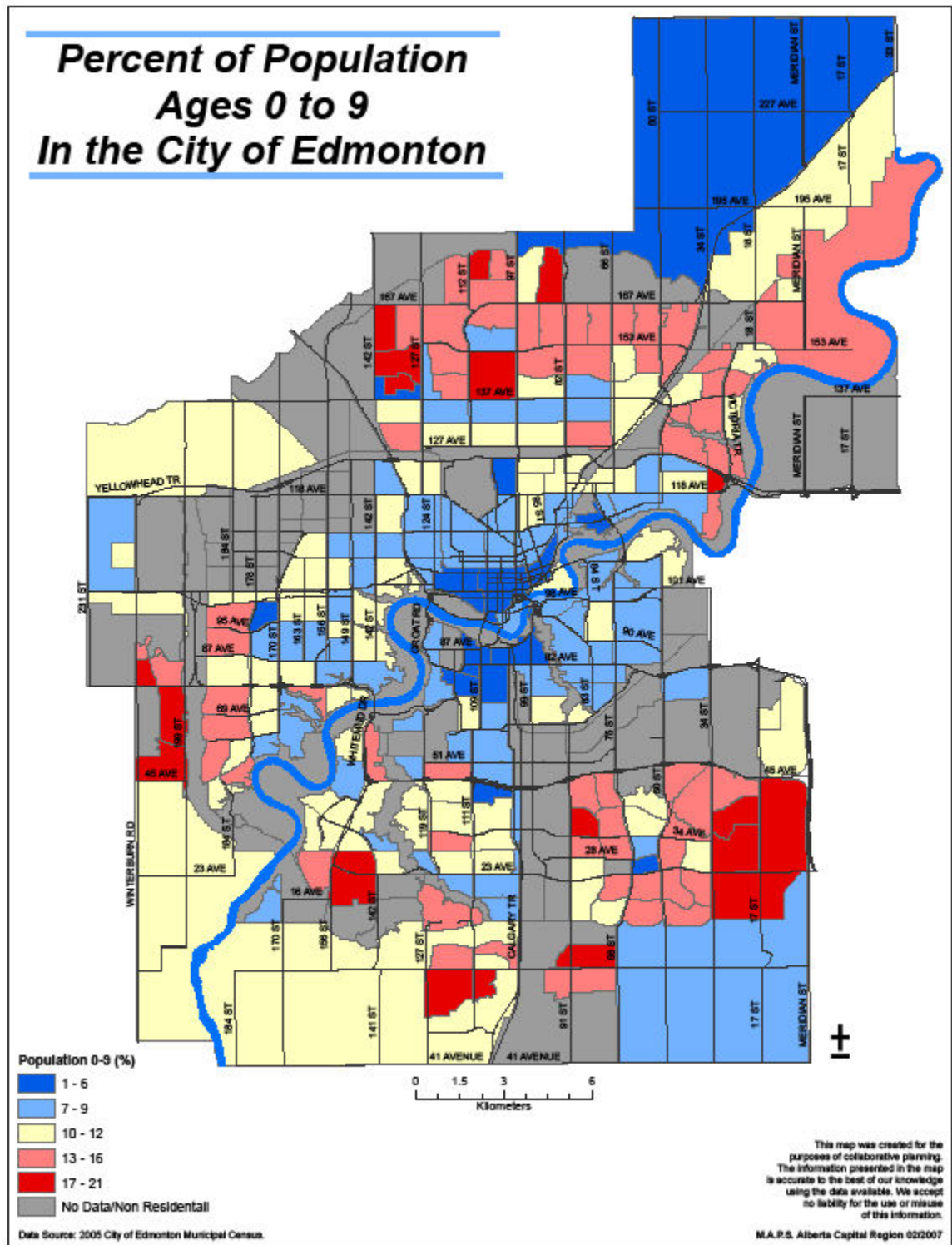
	<p>teachers, training and local advocacy efforts. This has been a very successful approach (p. 28).</p> <ul style="list-style-type: none"> - Use Search Institute’s “Early Childhood Development Asset Building Framework” as a tool for raising community awareness of the importance of healthy early childhood development (p.131). - Storytelling and Early Literacy Information events on Saturdays, putting up Family Literacy Displays in the Local Grocery Stores and Schools/ Daycares with lots of information for parents (p.141). - Munchkin Land Discovery Centre is an educational family centre which includes the following components – “Teaching from the Heart” (interactive, purposeful, educational play), “Partners in Education” (parenting workshops), and “Cooking up a Story” (seniors will partner with families to create nutritious and inexpensive meals and Story Time p. 150). - The collection of resources offered through the various initiatives include: arts, reading, safety, speech & language, coping, child care, support for caregivers, physical health, dental, problem solving, gross & fine motor skills, music, social/emotional, nutrition, behaviour, challenges, and cultural & diversity.
<p>Services / Programming</p> <p>Services / Programming</p>	<ul style="list-style-type: none"> - Increase Community Awareness about Children’s Health, “completed over 30 community presentations on brain development and early childhood generic information” (p.96). - Early identification and screening plan which include area doctors in the discussion regarding other available resources and screening points (p. 100). - Family Mentoring programs and Bridging programs (to provide continuity of support as a <i>Bridge</i> to families who are transitioning out of time limited programs p. 104). - <i>Kits for Kids</i> in ten developmental theme areas which include: Literacy, Sibling Relationships, Daily Activities, Emotions and Behaviour, Milestones, My World (Family, friends, community, world), Nutrition, Sleep, Taking Care of My Body, and Transitions (Daycare, Preschool, Kindergarten) Each bag/kit contains children’s books related to the theme, felt board stories, a puppet, music, a video and an adult resource book as well as a duo tang containing additional resources. Four kits have been developed in each theme area and will be distributed on loan through the Langley Library (p. 105). - Family Drop-In programs - Develop a database of programs and services.

	<ul style="list-style-type: none"> - Mobile Child-minding Program which supports the participation of low income parents in parent support groups or community kitchen initiatives. Any of the agencies participating in Make Children First may ask to book the child-minding service but priority is given to groups based on census data (p. 111). - Here We Come...events for three year olds. Children were invited through a variety of methods to drop into the school between 4 and 7pm. Families were given a passbook and followed a bunny trail to activities in different classrooms. The goals for Here We Come included; universal opportunity for 3 year developmental screening, parent connection with elementary schools, parent connection with community resources, and an increased awareness of child/parent opportunities around play, parenting, literacy/numeracy, cognitive development, and the importance of quality child care/preschool. The idea behind this fair is to get children developmentally screened well before Kindergarten. It also acts as an introduction to the school for children and their families. At these events screening was done by Audio logy, Speech and Language, Vision, Occupational Therapy, Nutrition, Dental, etc...(p. 137 & 143). - Expand and strengthen a literacy outreach program at local soup kitchen (p. 137). - Community Assets Inventory/Mapping and Needs Assessment and bringing awareness of the existence and importance of programming and services (p. 147).
<p>Training</p>	<ul style="list-style-type: none"> - Recruitment and training of volunteers. - Develop family mentoring programs. - Mother Goose training will be offered in each of the First Nation Communities to First Nation volunteers (p. 127). - Good Beginning Training is being piloted in the Esquimalt First Nation. - Training for Developmental Screening is also included in the attached Building Healthy Foundations Project (p. 142).
<p>Workshops & Fairs</p>	<ul style="list-style-type: none"> - Abbotsford hosted the 2nd Annual Preschool Aged Children’s Sports Day with over 550 in attendance, 300 of which were children – many new partnerships were created as a result of this event (p. 96). - Presented curriculum on school readiness for Punjabi Community at all elementary schools with over 30% Punjabi population (p. 96). - Workshop on the importance of ECD was held with Immigrant Services (p. 112).

	<ul style="list-style-type: none">- Fairs: Preschool Fair, Ready, Set School Fairs, Family Fair with Heart.- Parenting with Pizzazz Conference focused on kindergarten readiness and early literacy.
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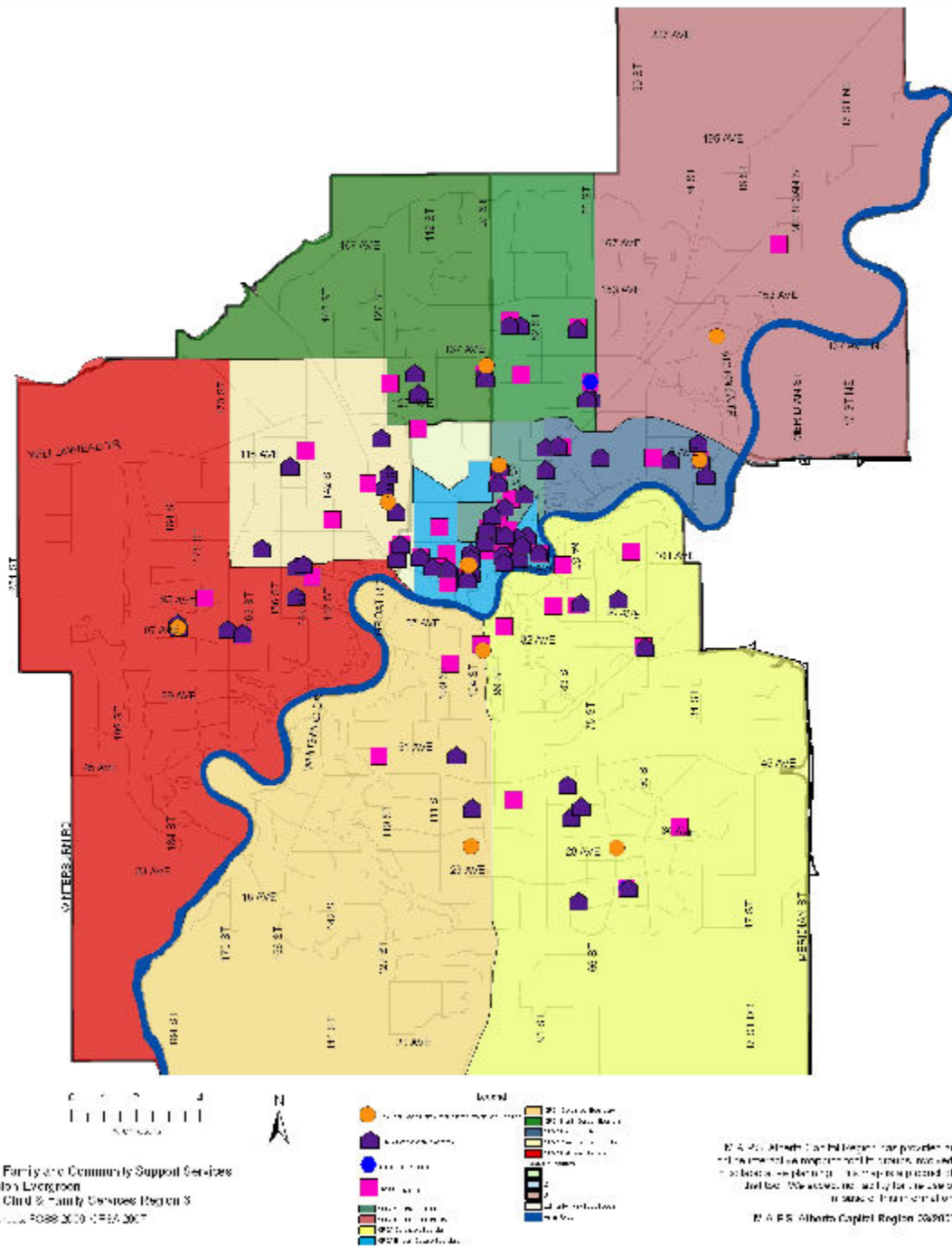
(Table of Key Elements was prepared by Lavon Hildebrandt for the Align Initiative. Unless otherwise specified the above information was taken from - Schroeder, 2005).

Appendix L – Population of Children Ages 0 – 9



Appendix M – Programs and Services within Edmonton

FCSS* and CFSA* Programs and Service Boundaries in the City of Edmonton



Appendix N - Synthesis of 2008 Aligning ECS Questionnaire

Enquiry	2008 Questionnaire Synthesis Align Initiative’s Collective Response
Name of Organization	Compiled Integrated Responses of the Committee to Align EDS – Edmonton (9/10 organizations on the committee responded to the Questionnaire).
Year of Inception	Average Year of Inception is 1989.
Years of Service in Quadrant - (Defined as Edm. City Center Neighbourhood from North of the River to the Yellowhead Tr. and from 124 St – Gretzky Way)	Various programs in the quadrant have a combined delivery of services that span over 115 years.
Mission Statements of Organizations	<p>Collectively Organizations Aim to:</p> <ul style="list-style-type: none"> • Build an integrated system that it is child centered • Enhance healthy development in children and to support and strengthen families • Build on the strengths of children, families, & staff • Be respectful of cultural contexts and deliver programming in a holistic manner. • Inspire and prepare children to learn, to work, and to live fully • Assist individuals in becoming active participants in their community <p>Advance positive individual, family and community life. Together, we build strength, capacity and understanding.</p>
Guiding Philosophy and Principles of the Organizations	<p>A Comprehensive Preschool and Family Support Program is based on the following:</p> <p>BELIEFS</p> <ul style="list-style-type: none"> ☐ Healthy children start with healthy families. <ul style="list-style-type: none"> • Each child is a precious gift and sacred responsibility. • Because parents are their children’s first teachers, they have the right and responsibility to be actively involved in their child’s education. • Support children and families’ to develop physical, mental, emotional and spiritual well being. • We believe literacy is a foundational block for healthy families ☐ All children and families are unique and have individual

strengths.

- A strength-based approach is used to serve children and their families
- Acknowledge that children and their families develop multiple strengths and assets that will make the family unit more successful.
- Creatively and flexibly is needed to meet the needs of families

□ **Parenting is challenging.**

- It takes a whole community to raise a child.
- Enabling parents to build more secure relationships and to enhance their parenting skills may require various resources and supports from intervention to prevention.

□ **The first six years are critical to a child's development**

- Children and their families deserve quality programming
- Children need a learning environment that will enhance their development, and prepare them for a more successful entry into school and community.
- Teach and encourage children to develop beliefs, attitudes and skills necessary to live a productive life.

□ **The Community is diverse** – embrace and celebrate these differences.

- Children and families will be supported in the context of their community.
- Everyone has something to contribute and everyone's potential can be realized in a healthy and vibrant community.
- A safe and supportive community is everyone's responsibility.
- Courage, compassion, commitment, and connection - these values form the foundation for positive change in people's lives.

The Initiative to Align Early Childhood Services in North/Central Edmonton aspires to adhere to:

◆ **Child - Centered**

An integrated system that consciously asks itself - what decision is in the child's and families best interest and act accordingly.

◆ **Excellence**

Exemplary, effective, and accessible services achieved through research, education and the application of best practices.

◆ **Stewardship**

Prudent use of resources and strategic investments that add value.

◆ **Innovative**

Creative, leading edge solutions that enhance services and improve productivity.

◆ **Respect**

The right of all people to be treated with dignity. Programs are guided by the belief that everyone is entitled to a full measure of dignity, respect and compassion. We accept each person at their

services that promote healthy child and family development.

Head Start Program

The Head Start program is guided by a Learning-through-Play philosophy. Learning experiences are based on a curriculum that includes active, hands-on, conceptual learning leading to understanding and the acquisition of basic skills. Learning concepts are integrated across traditional subject matter divisions and delivered through interactive teaching and cooperative learning. The goals of the program are: that children will achieve greater independence and increased school readiness, parents will have an increased understanding of their child's developmental progress and learn ways to assist them in a developmentally appropriate manner, and that families will experience increased supports and have better access to resources.

A variety of Head Start Programs exist with variations highlighted here:

- ½ day Head Start preschool programs are the most popular
- Early Childhood Services support (assessment, individual educational plans, transition services) for children experiencing delays, disabilities or who are learning English as a second language (ELL)).
- Home Education for children with special needs (23 visits / year)
- Family support (weekly parent groups, regular support visits as needed and referral/support within the community)
- Community connections (network / partnership meetings, volunteer services etc.)
- Mental Health services as needed (consultation and/or family support)
- Health services (includes height / weight screens, vision, dental for all children and health visits as needed)
- Aboriginal Head Start programs that provide pre-school children with an opportunity to develop and learn their culture values and the skills necessary to be successful in the school system.

Oliver Centre

- Child Care – year round, open from 7am to 6pm, ages 12months to 6 years.
- Half Day Head Start – 10 months Sept to June, 3 hours, Mon thro Fri ages 3.5 to 5 years.
- Out-of-School Program – year round, open from 7am to 6pm, ages 6 to 12 years.

Healthy Families Program

The Healthy Families Program offers long term home visitation

for first time parents who have little support and who want information and support regarding parenting and child development. Involvement with the family ideally begins prenatally or before the infant reaches 3 months of age. Family Support Workers answer questions and concerns, role model learning through play and connect parents to other services as needed. Opportunities are provided for hands-on activities with the child as well as group and community activities to meet other parents and broaden their social supports. The program is offered free of charge and is voluntary.

Family Support Services Program

The Family Support Program ensures that every family's unique set of strengths, circumstances and needs are met. Family support describes the act of providing the family with the assistance they require to enable them to nurture and sustain the well being of their children and family unit. All program participants have access to the Family Support Workers whose primary role is to assist families based on their identified needs and goals. The service provides centralized functions that support the multiple programs that serve the children and their families at the Centre which includes home visitation, intake and referral, nutrition services, parent support groups, resource library, volunteer services, health for two, and early literacy.

Edmonton Catholic Schools serves children in various programs including preschool programs, Kindergarten programs and grades 1-12. Our preschool programs include: Hand in Hand (a special needs program for 2 1/2-4 1/2 year olds) 100 Voices (an ESL community program for 3 1/2-4 1/2 year olds – all children in community are welcome), Junior Kindergarten programs (both English and French immersion at a variety of schools) and regular K programming that includes both full day and half day programs.

Edmonton Public Schools -K.I.D.S. – “To provide ongoing transdisciplinary support to parents, teachers, teacher assistants and children who qualify for Program Unit Funding and Mild-Moderate Funding included within their community kindergartens and Early Learning Classrooms within EPSB. The K.I.D.S. Team facilitates child-based assessment and offers strategies to school staff through consultation and collaboration. The model supports developmentally appropriate learning experiences in kindergarten classrooms and provides transitional support to year one programming.

City Centre Education Project (CCEP): Early learning sites are intended to have children engage in the formal learning process one year earlier than Kindergarten. The children in these programs will

	<p>begin to develop their language, numeracy, social and emotional skills and be that much more prepared to enter kindergarten. The program is instructed by a certified teacher and through play based activities is set up to develop vocabulary, literacy, numeracy and social skills. The program also engages the family in a supportive, collaborative relationship with the school earlier in the child’s development.</p> <p>Other agencies extend their family services to include:</p> <ul style="list-style-type: none"> - Feeding hungry people - Providing affordable housing - Offering safety and support <p>Multi-Cultural Brokers provided prenatal (including prenatal education and Health for Two), postnatal, breastfeeding and parenting support services to 1,015 women and families in 25 different languages. Interpretation translation services are also provided. Team members do more than just speak the client’s language; they understand their clients’ cultural beliefs about children and parenting and are able to help families understand Western culture and the Canadian health system.</p> <p>Capital Health Partners that deliver services directly include: Region 6 Child and Family Services, Multicultural Health Brokers Co-operative, Head Start Programs, Parent Link Centres, Child Care centres, and School Boards (which include preschool programs, Early Education, Kindergarten - both full day and half day programs, with additional support through Program Unit Funding for children with special needs as funded by Alberta Education).</p>
<p>Focus of Service/s Provided in the Quadrant</p>	<ul style="list-style-type: none"> • Early intervention for pre-school children. Total inclusion in all programs. • Supports for low-income or student parents. • Early Learning Outreach Teams provide speech and language, occupational therapy, physical therapy, and psychology services as required on an individual basis. All programs are operated in schools with certified teachers.
<p>Number of children Being served</p>	<p>Over 400 children are currently being served which is an increase of 150% over the past 18 – 19 years. (This number excludes both school boards and Capital Health services from which statistics are available individually. This stat is accurate for the remaining six community agencies).</p>
<p>Describe Future Growth Plans of Organization</p>	<p>Align the current early childhood services “system.” Develop and implement strategies with other community partners to meet the needs of young children and parents that:</p> <ul style="list-style-type: none"> • Build on strengths and increase the capacity of the early childhood system to meet the growing needs in our community;

	<ul style="list-style-type: none"> • Facilitate collaborative approaches to supporting the development and well-being of all children in a seamless continuum of service • Attract and retain early childhood professionals and emerging leaders; • Strengthen the links between child care, early childhood programs and school age services and initiatives; • Identify and address gaps in services, such as CHS to develop developmental screening that would be implemented across jurisdictions – including health, education, children’s services and community.
<p>Criteria for Programs offered</p>	<p>Criteria for programs range from universal access to some programs with special criterion:</p> <ul style="list-style-type: none"> - Families with low income - Children with special needs severe, moderate, and mild. - Children under the age of 6, - Children requiring ELL support. - Geographical boundaries.
<p>Describe Funding Sources</p>	<p>Most Community Program Service Providers rely on multiple funding sources which may include:</p> <ul style="list-style-type: none"> ○ Alberta Education & Special Services Branch – ECS Funding (PUF, ELL, M/M) ○ City of Edmonton - Family and Community Services (FCSS) ○ Children’s Services – Early Intervention (EI) & Early Childhood Development Initiative (ECDI) ○ Health Canada - Community Action Programs for Children (CAPC) ○ Region 6 Children & Family Service Authority (CFSA) ○ Alberta Advanced Education and Technology ○ Parental Fees & Government subsidy ○ Federal Government ○ United Way ○ Foundations and Donors Private Donations
<p>Identify Strengths of Organization</p>	<ul style="list-style-type: none"> □ Solid foundations based on years of experience. □ Comprehensive programs to support children and families. □ High quality programs, teacher certified, ongoing professional development, outreach teams, schools working with community partners, rich literacy environments, play based, programs follow Alberta Education expectations □ Strengths are found in dedicated staff from multiple-disciplines with many long term employees. □ Collaboration of key community stakeholders with broad representation of services, and various levels of government working together on behalf of families with young children. Assist each other in providing services and resources.

	<ul style="list-style-type: none"> ❑ At least one agency has the ability to provide services to children ages 12 months to 12 years and supports families year round. The organization provides a variety of programs designed to meet the needs of at risk families. ❑ Strengths include compassion for the families served, along with capacity and skills to work with marginalised families, ❑ Families from the inner city can still receive service when they move close to one of four satellite sites.
<p>Identify Weaknesses of Organization</p>	<ul style="list-style-type: none"> ○ Lack of Funding: ○ Funding is piece meal and from multiple sources – each with a separate accountability framework. Current funding is simply not adequate to even sustain current service delivery expectations and insufficient to promote partnerships. Lack of funding continues to create uncertainty from year to year within each program as well as for entire organizations. Increased financial resources are a must. ○ Staffing: it is a struggle in this economy to maintain wage parity. The salaries offered are not on par with other sectors, which creates difficulty retaining highly qualified individuals. As a result already stretched resources need to be diverted from program delivery to support recruitment and retention strategies. Staff sustainability is always a problem ○ Space: The increasing cost of space and the scarcity of physical space for programs is a continued challenge which sometimes results in yearly moves. ○ Most of the children that come to early learning programs have never been identified, screened or assessed for delay whether mild/moderate or severe. It is really difficult – to screen, assess and treat children all in one year. ○ Transitions when families move, who stays connected with the family to ensure a seamless transition?
<p>List the assets of the Organization that might be beneficial to this initiative if they could be shared.</p>	<p>Resources:</p> <ul style="list-style-type: none"> • Re-allocate a limited number of staff hours to the support of community initiatives. • Share quality in-services and training for staff that include multiple-disciplines with others. • Connections with other agencies may increase access to additional resources. • Links: • Connections to various systems and stakeholders with a broad mandate for children within 0-6 years while serving as a broker of resources to support initiatives and programs. • Organizations collaborative efforts and supports to address many of the family issues and support early health and child development could be expanded into other environments. • Various agencies are willing to participate in a pilot project that

	<p>would support a continuum of service delivery.</p> <ul style="list-style-type: none"> • Use existing relationships with other agencies, who may be invited to the table, to help to connect agencies together or schools to agencies. <p>Experience:</p> <ul style="list-style-type: none"> • Visible positive presence in Edmonton communities since 1985. • Knowledge from a long history of providing services. Desire to help create more programs to meet the needs of preschool children and their families in a collaborative supportive way. • Aboriginal cultural knowledge and experience. • Service providers demonstrate excellent models for working along side the family to develop lifelong skills and to build capacity in a non threatening way. • Existing model of collaboration from which others can learn. <p>Partnerships:</p> <p>CHS has a number of formal partnerships and community coalitions that address issues that affect our target populations. These include:</p> <ul style="list-style-type: none"> • Joint Action for Children’s Agenda (26 partners) • Success By 6 Council of Partners (30 partners) • Health For Two Network (34 agencies) • Intensive Home Visitation Program (13 agencies) • Community University Partnership (17 partners) • Head Start (8 partners in 22 sites) • Early Intervention Program (3 agencies) • Early Childhood Development Initiative (8 agencies) • Child Care Network (10 agencies) <p>CHS also produces the newsletter <i>Contact</i> that provides valuable information and targeted teaching.</p>
<p>What recommendations could the organization suggest based on past experiences that pertain to the collaborative efforts of this initiative?</p>	<p>The following are several points related to successful partnerships:</p> <ul style="list-style-type: none"> ❑ Joint ownership: programs and initiatives must be co-owned in order for there to be buy-in by all partners. Attention to develop group trust. ❑ Clear vision / objectives: Successful initiatives have a clear vision and established outcomes are continually at the forefront of all the work the partnership seeks to accomplish together. ❑ Action plans: Action plans both serve to set the direction and provide committee members with a gauge by which to both measure their work together and see the movement being made towards agreed upon objectives. (Need for fluidity & flexibility). Our best chance of affecting change is by starting early, impacting families when children’s development is malleable and parents are still open to accepting help. It is the wrap around services that will make a difference to their success in school and out. ❑ Partnership agreements: clear roles and responsibilities need to be negotiated. <ul style="list-style-type: none"> • We need to have a governance structure that will allow for

	<p>agencies to better coordinate/collaborate initiatives.</p> <ul style="list-style-type: none"> • Some consideration needs to be given to those organizations that run on a very limited budget and who operate other programs beside those focused on Early Childhood Learning. <ul style="list-style-type: none"> ❑ Resources: the most successful partnerships have committed resources (i.e. paid coordinator) and a time commitment on the part of the members. There needs to be realistic time commitments attached to the actions of each the committee. ❑ Less Territorial: Set aside issues/concerns of territory and look at the big picture of how to best serve the families of early learners. “Does it matter if the child is in a Head Start vs. a pre-school or a school based program”, as long as the program provides quality experiences for the child. Appreciate one another’s areas expertise and resource capacity. Organizations need to look beyond the fragmented delivery of services and look at collaboration and a full integration of service delivery. ❑ Succession planning: the committee’s objectives are compromised the moment membership is not stable. In the event of a change the new member needs to be brought up to speed quickly. If membership continually shifts momentum is lost quickly and too much time is spent re-visiting old conversations and questioning the directions already agreed upon.
<p>Identify Known Gaps in the Organization’s Services</p>	<ul style="list-style-type: none"> • Eligibility: current eligibility does not allow for accommodation of the number of children and families in need of programming. • Children not pre-screened or identified prior to kindergarten so unable to access services when they are younger. • Wait lists: Despite our relatively narrow criteria all programs have wait lists. If we are to reach more families we would have to increase our capacity to meet that need. <ul style="list-style-type: none"> - Insufficient intervention and supports for infants and pre-school children that is year round and affordable. - Ability to attract families to ½ day school based program. • Staffing: The largest gap continues to be our ability to fill all of the current staff positions. This creates gaps in service as families are not able to readily access all services due to staffing shortages and waitlists. <ul style="list-style-type: none"> - Issues around having qualified staffing pool to call on when our regular staff are sick or on training. • Transiency: The inner city is very transient; one of the gaps is that many families want to get out of the inner city, so there is a need to have connections/contacts in the other communities to link them to. This would help to maintain supports and allow for continuity of service for the family. • Community agencies need to set the agenda and scope of influence and then government departments can see how best to facilitate and support their goals and programs in a realistic manner.

<p>Identify Perceived Gaps for Children and their Families</p>	<ul style="list-style-type: none"> □ Quality Child care: The child care sector is vulnerable and in crisis. While there has been an influx of incentives to child care service providers for professional development and wage enhancements; the child care programs best staged to access these incentives are the ones least in need of them. As a result there has not been a substantial increase in the quality of care in the city. <ul style="list-style-type: none"> • The lack of affordable child care spaces in the community and the extensive waitlists families are facing. □ Coordinated services: While there is an array of services available to families it is a navigational maze to both figure out which program offers what service and how to access the program they need. Service providers, for similar reasons, have become very internally focused. <ul style="list-style-type: none"> • Half day programs are awkward for especially for working parents, so they may not take advantage of targeted programs. • Transportation in general is problematic, but it remains an area that could be isolated for cooperative efforts and a way to increase efficiency. • Language barriers make it more challenging to connect and establish relationships. □ Income supports: An increasing number of families do not have the financial resources to meet the growing costs and social expectations placed on families. While financial supports and subsidies are available it is a navigational nightmare to figure out eligibility and how to access these supports. In the end a simplified system is required in order for families to have the financial and social support to meet their children's needs. <ul style="list-style-type: none"> ▪ The initiative needs to consider that children living in poverty come with a multitude of complex issues. The families in the inner city often have higher needs than outlying areas. ▪ The number one issue currently facing many families is the lack of affordable housing. Consequently, many families are moving out of the area. □ Expectations of programs: Access to many programs is often conditional. For example the manner in which "parental involvement" is often defined and dictated to parents. <ul style="list-style-type: none"> • Lack of Early Identification causes many children to only receive one year of PUF funding. Often children with developmental delays are not being caught until they enter school or a quality child care program This becomes a larger issue because support is much more limited in grade one and beyond. • Families want to have more cultural content and resources available to them along with a continuum of this type of service available for their children as they enter another
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<p>What evaluation process does the organization practice and how often?</p>	<p>system or service.</p> <p>Numerous evaluation processes that occur on a yearly basis are:</p> <ul style="list-style-type: none"> ❑ Parent surveys ❑ Parent participation log ❑ Pre & Post parent evaluations ❑ Pre and Post screenings are completed on each pre-school child. ❑ Pre & Post Kindergarten Skills Inventory ❑ Individual Programs Plans (IPP) ❑ Staff satisfaction surveys ❑ Annual Staff Retreats ❑ Exit Interviews ❑ Event Surveys ❑ Kindergarten follow-up survey by preschool program (distributed to ECS-K teachers) ❑ Cultural Competency Evaluation ❑ Board self-evaluation ❑ Quarterly reports to funders and annual Funder / Partner Satisfaction Surveys ❑ Staff Retention evaluation is provided annually ❑ Use of the HOMES Data base to gather data and to aggregate reports for evaluation. ❑ Literacy Audit of printed materials and staff practice is evaluated annually ❑ Parents are encouraged to be actively involved in the Parent Advisory Committee which acts as a common voice for the agency participants with representation from all programs. ❑ Annual staff reviews of programming with goal setting for the following year. ❑ Adjustments in programming take into consideration population demographics and research on evidence-based practice. ❑ Ongoing – district wide assessments and informal classroom assessments used, observations, child based portfolios, teacher documentation, demonstration of learning with children and parents, family evenings. ❑ Engage in a strategic planning process every three to five years. Starting in the 2008-09 program year will be using the Quality Enhancement Plan (QEP) tool as a reflective tool to assess and address program delivery across the agreed upon core services. ❑ One organization used an outside agency to conduct pre and post testing in the quadrant that revealed interesting data around kindergarten entry. Children who had the benefit of an early learning experience developed significantly stronger kindergarten readiness skills than children without this opportunity.
<p>How should the shared vision for this</p>	<ul style="list-style-type: none"> ➤ The goal of the Initiative is to work collaboratively in promoting best program practice, advocacy, fund development and coordination of services.

<p>initiative be phrased?</p>	<ul style="list-style-type: none"> ➤ Open communication, with a sincere desire of reviewing where the gaps truly lie, and ensuring that through a seamless process that all children and their families will receive the supports and programming that will strengthen them in their community. ➤ Working to create an environment of shared responsibility and partnerships to create the best opportunities for all children. ➤ Supporting children within their families and communities ensures lifelong learning and success.
<p>What resources does the organization lack to optimally serve children and their families?</p>	<ul style="list-style-type: none"> ▪ A mechanism to access and support quality child care for families who require child care. ▪ Securing space within communities ▪ The main resource lacking is sustainable funding: Agencies continue to seek funding on an on-going basis to fund the core functions of their programs. The lack of ability to plan into the future due to funding uncertainty creates a less than optimal opportunity to provide the necessary programs and resources for families. The opportunity to access "project" based funding creates increased services; unfortunately they are generally time limited and require additional commitment on the agency's part to explore and secure alternative funding sources. Also funding for a full day experience for the child and funding for bussing would improve services. ▪ Funding at an inadequate levels prevent enticing quality staff to stay and thereby allow the program to respond by expanding to meet the need.
<p>What other Community Partners should be included? What could these organizations offer?</p>	<p>Also Added to Stakeholders Mail-out list.</p> <ul style="list-style-type: none"> ❑ Edmonton Mennonite Centre for Newcomers (EMCN) (Provide insights to needs of newcomers and supports required within those communities). ❑ Conseil Scolaire Centre Nord (CSCN) (Francophone school board). ❑ Family Link Centre (Resource “hub” for children and families). ❑ M.A.P.S. Edmonton (Mapping and partnership support). ❑ Parents (we need to have parent representation on the committee and to involve them throughout the implementation of the initiative). ❑ Police, Libraries, Local Daycare Centres / Day Homes – (Childcare is an issue – even if a school is interested, space is also a challenge for some). ❑ Partnerships to enrich services to families (i.e. speech and language) with continuity would be invaluable if offered in the school context. <p>Organizations that can help to engage Aboriginal families in a program while being respectful of their beliefs around child rearing and aware of historical views towards schooling.</p>
<p>What terms</p>	<p>The Terms of reference created by the committee should help define</p>

<p>should the committee seek to define to increase common understanding ?</p>	<p>common understanding.</p> <ul style="list-style-type: none"> ▪ Community ▪ Quality child care ▪ Early Learning ▪ Partnership ▪ Universal access ▪ Continuum of service ▪ At-risk ▪ Targeted programs ▪ Quality care ▪ Transition ▪ Seamless service ▪ Community ▪ Collaboration ▪ Aligning Services ▪ Literacy ▪ Openness and honesty, a desire to work more cooperatively <p>The work by Bruce Perry may help everyone around the table to have a base for common references; especially when referring to the families we are all working with. He defines the Six Core Strengths for Healthy Childhood Development as: Attachment, Self Regulation, Affiliation, Awareness, Tolerance and Respect.</p>
<p>What referral practice does the agency or organization employ when referring children and families to another service provider?</p>	<p>It appears that referrals for most organizations do not follow a set pattern, as it depends on the needs of the child and family, which are varied. Some strategies include:</p> <ul style="list-style-type: none"> ❑ Centralized, Site-based and Transitional Referrals are all employed to meet the needs of children and their families. ❑ Follow up with the family and other organizations consist of making recommendations, phone contacts, emails and information sharing with other agencies involved with the family. Other agencies employ intake workers who make appropriate referrals to the community after identifying what that family wants/needs. ❑ In other programs the worker that is most connected to the family helps to identify the services/programs which will best meet their needs and the needs of their child(ren). Staff are continually increasing their knowledge of community resources and services in order to best support the families. ❑ The Inter-Agency Head Start Network has very clear boundaries and refers families to the nearest location from where they reside. The Network is tracking and recording data according to postal codes. In addition, the kindergarten facilitator is accessed to ensure that children are placed in a school that can best meet their educational needs. ❑ Capital Health currently refers families to one of their special needs preschool programs.

	<ul style="list-style-type: none"> □ Classroom teachers initiate referrals based on observation of child in the learning environment, initially to Consulting Services. If needed support is given to the family to complete forms or paperwork to access expertise outside the district. Eg. capital health.
<p>What follow-up routine does the organization practice after making or accepting a referral?</p>	<ul style="list-style-type: none"> ○ No formal follow-up process, but a follow-up survey is sent to kindergarten teachers. ○ Follow up is conducted with the family to see if they feel they have the proper referral or received the information they were expecting. ○ When making a referral, the worker will connect with the family to provide further support when needed. If the referral is unsuccessful for some reason, the family is encouraged to call back for more support. On occasion, the referrals are attended by the worker with the family. On most occasions, the participant will provide consent for staff to collaborate with external agencies to provide the most holistic approach to service delivery. Regular meetings are held with the team and any contracted service providers to ensure continuity of care and support. ○ Follow up for a registered child would be with the parent and the Outreach Worker and teachers follow up their kindergarten children. ○ A formal transition process is followed by schools and programs within the district.
<p>What would the organization propose to improve transition planning that would help children move seamlessly through a continuum of services?</p>	<ul style="list-style-type: none"> ▪ Hire an additional worker during the intake – transition process. ▪ Implement a process to streamline file transfers (IPPs etc.) to receiving schools and other service providers. ▪ Offer an array of services in one location for families (i.e. Child care, Head Start, pre-school, drop-in programs, etc.) ▪ Transition planning should include everyone involved, roles, tasks and timelines need to be identified. Agreement among all team members is essential. Parents need to be in direct control of the process. A large part of transition planning is following up after the transition is made and possibly a follow up meeting to ensure the family feels that it was successful. ▪ It is essential to have transition meetings with the new program provider. These case conferences should profile the child’s strengths, best strategies and key supports required for success, as well as recommended next steps or further professional assessment or support. This suggestion however is extremely time consuming and may be unrealistic given already stretched resources. Therefore, increases to the funds and time available for quality transition planning are needed. ▪ Create more community space: School spaces have become restrictive and current utilization formulas do not meet the needs of communities but rather the needs of infrastructure and planning

	<p>departments that narrowly see those spaces as educational facilities.</p> <ul style="list-style-type: none"> ▪ Guide children and families through a process of introduction to the next service. With additional follow up after a time period of approx. 3 months, conducted with the family and the receiving agency/service. ▪ When children require a specific service such as speech/occupational therapy and they are not identified as mild/moderate or PUF their access to services is greatly reduced due to waitlists in the community. Perhaps drop-in clinics or other solutions should be sought. ▪ There is always room for improvement; one place to start is to increase the level of communication between kindergarten and Head Start teachers. A longitudinal study that tracks children from pre-school through both schools systems would provide helpful data as to how we can better work to see improvement in student outcomes. ▪ Strong understanding of all services available, relationships between programs to support gathering of information or linking families appropriately, support parents throughout the transition by both agencies. ▪ Ensure that a broad representation of key stakeholders have input into decision making by maintaining a strong Council of Partners.
<p>What is necessary for a seamless delivery of services to become a reality?</p>	<p>Consistent follow through and cooperation with all service providers.</p> <ul style="list-style-type: none"> • Increased trust between agencies and programs, through more deliberate, open communication, clearer understanding of the services and programs available to children and families in order for existing programs to accurately guide families. • A willingness by existing community programs to share information and to earn the trust of parents. To create a welcoming supportive environment that fosters closer relationships and smoothes transitions from child care to community programs to the neighbourhood school. • Building a strong understanding of services and processes of those services, building strong relationships between program staff, adequate resources/effective use of resources to provide services needed. • Time and resources need to be set aside to ensure successful partnerships. Clear reasons that make sense on why a partnership should happen. Clear roles, communication and commitment to follow through are essential. Respectful processes need to be established prior to a conflict occurring between partners, so that everyone is clear on how to engage when there is a difference of opinion.

	<ul style="list-style-type: none"> • Better continuity and funding between capital health and education. • Increased funding to support the necessary services such as speech/occupational therapy and behaviour therapy for all children who may require supports not just those with "severe" identifiers. Increased funding and collaboration to ensure continuity when working with families regardless of their status, income, citizenship, mother tongue etc.
<p>What are the major barriers to this initiative?</p>	<ul style="list-style-type: none"> ➢ Lack of a clear vision for Early Learning and Care: Often approach our committee work with competing priorities in mind. We need to develop first and foremost what vision we are striving towards then use that as a measurement for the work we are doing. ➢ History, funding concerns, lack of trust between agencies/organizations/school boards, lack of understanding of what each has to offer and the expertise they have within their program. ➢ Taking the time to create the links and increase knowledge of services, cooperation in the use of limited resources such as space, funding, staff... ➢ Agencies/Departments not wanting to abide by what the group decides. ➢ The systems involved are huge and are not designed to respond in a timely fashion.
<p>What are the top Goals this initiative should strive to implement, in order of priority?</p>	<p>Draft Goals - (originally 48 separate statements were submitted they have been grouped into seven main themes with corresponding sub-points).</p> <ol style="list-style-type: none"> 1. Develop a broad information sharing strategy related to the emergence of new and ongoing Early Learning and Care programs in City Centre Edmonton <ul style="list-style-type: none"> with objectives to: <ul style="list-style-type: none"> • Increase awareness and understanding of programs and services available • Provide detailed program and registration information to parents • Communicate upcoming program developments to existing programs • Establish strong relationships among agencies and service providers • Build a common understanding of the vocabulary and language related to the services provided 2. Develop and articulate a shared vision and understanding of Early Learning and Care in city Centre Edmonton with objectives to: <ul style="list-style-type: none"> • Identify best practices, quality standards and guidelines for early childhood services

	<ul style="list-style-type: none"> • Support a continuum of service delivery for children and families • Support the ongoing sharing of latest research related to early Learning and Care <p>3. Develop a strategy for coordinated planning with objectives to:</p> <ul style="list-style-type: none"> • Identify gaps in service delivery in the region • Reach consensus on services needed • Identify opportunities for sharing of resources, professional development and physical space where appropriate • Support potential partnerships in service delivery <p>4. Build a strategy for broader knowledge sharing based on the findings of this collaboration and the successful outcomes for children and their families, which will:</p> <ul style="list-style-type: none"> • Support broadening partnerships and the use of the delivery model to other areas of the city of Edmonton • Support broader system level learning and service delivery planning <p>5. Advocate for the financial support of all programs deemed essential.</p> <p>6. Develop strategies for coordinated delivery of services which will:</p> <ul style="list-style-type: none"> • Increase partnerships and collaborative efforts on behalf of all children and families • Create ways of using existing funding sources to provide richer and stronger programs • Engage all partners in developing best possible models for children and families • Include working together to provide preschool screening for children • Support implementation/advocate for the use of the Early Development Instrument <p>7. Develop a comprehensive map of existing Early Learning and Care Services in North Central Edmonton</p>
<p>What additional funding could this initiative access that individual agencies or organizations could not?</p>	<ul style="list-style-type: none"> <input type="checkbox"/> A standard source of funding for all Head Starts that would be distributed according to enrolment and size of the programs (which may be attainable with collaborated efforts). <input type="checkbox"/> Policy change – education student count <input type="checkbox"/> Community Partnership Enhancement Fund (CPEF). <input type="checkbox"/> Cross Ministerial Funding <input type="checkbox"/> There could be government funding from several sources if “we” can demonstrate an innovative partnership for children and families that are at risk. <input type="checkbox"/> ELL student funding dollars through Alberta Education
<p>Additional Comments or Issues: the committee</p>	<ul style="list-style-type: none"> • Is Early Learning the same as early schooling? • How do we support existing programs vs. rush to create new ones? When decisions are made is there consideration of the broader impact on other programs?

should consider?	<ul style="list-style-type: none"> • As service providers we need to be conscious of the precedence we set – if we say Early Learning for all – parents trust us (we place pressure on parents – who are already under some social pressure re: development of their children) • Does every child need an Early Learning “program”? How are we supporting families and communities to meet the needs of their children? • What does “universal access” mean to the committee? What would be the role of targeted programs in that continuum paradigm? Who and how should decisions be made?

(Special thanks to all Contributing Organizations: ABC Head Start, Bent Arrow – White Cloud Head Start, Norwood Child & Family Resource Centre, Capital Health Services, Oliver Centre Early Learning Programs for Children & Families Society, Success by Six, E4C – Early Head Start, Edmonton Public Schools and Edmonton Catholic Schools. Summary Table presented by Lavon Hildebrandt on March 26, 2008).

Appendix O - Special Programs Branch September 2006

ECS Program Unit Funding Handbook 2006/2007

AGE OF ELIGIBILITY FOR FUNDING OF ECS CHILDREN	
Eligibility type:	Minimum age of child on September 1 of the program year:
Child with a severe disability/delay	2 years, 6 months
Child with a mild/moderate disability/delay or child who is gifted and talented	3 years, 6 months
Regular program child	4 years, 6 months
Developmentally immature child	5 years, 6 months
Note: A child with a severe	
FUNDING CEILING BASED ON A FULL-TIME PROGRAM (800 HOURS OR EQUIVALENT)	
Number of Children Enrolled in Program Unit	2006/2007 Program Unit Rates
1	\$22,584
2	\$28,187
3	\$33,790
4	\$39,393
5	\$44,996
each additional child	\$ 5,603

Reporting of Actual Costs

At the end of the school year, ECS operators must report total actual PUF expenditures for all program units in the following manner.

- Private ECS operators report to School Reporting Branch, Manager of Transportation, on Schedule 3 of the Audited Financial Statements by November 30, 2006.
- School jurisdictions report on the ECS Program Unit Funding Summary of Actual Expenditures form provided in the *Funding Manual for School Authorities 2006/2007 School Year* by October 31, 2006.

Funding for Children with Mild/Moderate Disabilities/Delays and Those Who Are Gifted and Talented

Funding for children with mild/moderate disabilities/delays (exceptional code 30) is provided in addition to the Base Instruction funding. Identified children must be at least 3 years, 6 months of age and less than 6 years of age on September 1. Supporting documentation and an IPP are required for each child. For 2006/2007, funding of \$2,241 is provided for each eligible child.

(Retrieved from <http://education.alberta.ca/admin/special/resources.aspx>).

Appendix P – Steps for Value-Based Partnerships

Steps in the Implementation of Valued-Based Partnerships for Prevention Program Implementation:
Tasks, Processes, and Challenges
Create partnerships.
Define the problem collaboratively.
<ul style="list-style-type: none"> • Include community residents and service providers from the community where the intervention is to take place.
<ul style="list-style-type: none"> • Create a welcoming and friendly climate for partners.
<ul style="list-style-type: none"> • Abandon the role of the expert and share power with partners.
<ul style="list-style-type: none"> • Reduce barriers to participation for partners.
<ul style="list-style-type: none"> • Learn to value and build relationships Clarify values and vision and derive working principles.
<ul style="list-style-type: none"> • Collaboratively clarify values and vision to guide the project.
<ul style="list-style-type: none"> • Derive working principles (ground rules) for how the group and program should work.
<ul style="list-style-type: none"> • Engage in self-reflexive analysis of personal values.
<ul style="list-style-type: none"> • Be open to being challenged by partners.
<ul style="list-style-type: none"> • Be aware of value incongruence and strive to reduce it. Identify and merge the strengths of different partners and approaches.
<ul style="list-style-type: none"> • Identify and build on strengths of different partners.
<ul style="list-style-type: none"> • Merge deductive/nomothetic and inductive/experiential approaches to planning and implementation.
<ul style="list-style-type: none"> • Work to overcome self-doubts and mistrust of community members.
<ul style="list-style-type: none"> • Value the experiential knowledge of community partners.
<ul style="list-style-type: none"> • Find common ground and respect differences to bridge the worlds of community members and professionals.
<ul style="list-style-type: none"> • Collaboratively define and analyze the problem in terms of risk and protective factors at multiple ecological levels.
<ul style="list-style-type: none"> • Focus on the strengths of the community.
<ul style="list-style-type: none"> • Reconcile differing views and build consensus regarding a prevention program model.
<ul style="list-style-type: none"> • Build ownership and support for program model. Develop the prevention program collaboratively.
<ul style="list-style-type: none"> • Collaboratively decide on what type of prevention program to implement.
<ul style="list-style-type: none"> • Ensure that necessary hardware and software are available for program implementation.
<ul style="list-style-type: none"> • Educate and train partners in research and evaluation.
<ul style="list-style-type: none"> • Be open to learning new perspectives and ways of working from partners.
<ul style="list-style-type: none"> • Clarify roles. Research and evaluate collaboratively.
<ul style="list-style-type: none"> • Use both deductive (quantitative) and inductive (qualitative) approaches in program evaluation.

- | |
|--|
| <ul style="list-style-type: none">• Research and evaluate each of the steps. |
| <ul style="list-style-type: none">• Educate and train partners in research and evaluation. |
| <ul style="list-style-type: none">• Learn to see community members as valuable partners in research and evaluation.
stakeholder groups: those traditionally regarded as “experts” sent in to “fix” the focal problem and those most vulnerable to the problem itself. These two groups have been referred to as <i>outsiders</i> and <i>insiders</i>, respectively (Dimock, 1992), or the <i>formal</i> and <i>informal</i> sectors, respectively (Narayan, 1999)p.6 |

(Imported from Nelson, Amio, Prilleltensky, & Nickels. 2000).

Appendix Q - Summary of EPSB Review: Special Early Childhood Education

A. 2007 EPSB District Review of Early Childhood Special Education - Summary of Focus Groups Input. General themes indicated by the focus groups are listed below: p. 1-7

- Invitations were sent to district staff, parents and private ECS operators.
- **172** individuals participated in **8 focus group sessions:** (comprised of 73 Parents, 26 Principals and Assistant Principals, 9 Central staff, 19 EEd staff, 38 Outreach staff, and 6 *ECS Operators*)
- An additional **70 parents/caregivers** submitted concerns and suggestions through input packages.

1. Vision of Success (Sustained over the Long Term)

- ❖ **Student Growth** in skill areas of social, academic, motor, behaviour and communication as measured by IPP
- ❖ **Readiness and Success in Year 1** - 'possessing the skills to be a learner'.
 - **Successful Transitions** – promoting independence and self-esteem
 - **Support for Families** – access to unbiased information, education and choices
 - **Staff Expertise** and ongoing PD opportunities

2. Current Strengths (recommended maintaining)

- Outreach Programs
- Staff Expertise
- Support for Families
- Access to Specialist
- Small Class Size (Ratio)

"Emphasis was placed upon maintaining practices and approaches that are research based and meet the individual needs of the children" (EPSB Summary of Interview Input, 2007).

"Interview participants identified positive practices, approaches and supports based on individual experience. The most frequent responses included:

- **developmentally appropriate programming** (play based, floor-time model, individualized),
- **team approach** (access to experts, sharing of information & resources, trans/multi-disciplinary approaches, communication),
- **culture of support for families** (access to information, in-home instruction),
- **inclusive practices** (Outreach, community programming), and
- **professional development** (access to quality, specialized training).

"Interestingly, similar areas were identified as areas of concern or needing improvement. Overlapping responses would suggest a need for consistency in the delivery of early childhood programming for children with special education need." (EPSB Summary of Interview Input, 2007).

3. Priority Areas of Concern (to support optimal programming for children)

- **Programming** (mentioned by 12/16 interview participants) – wide range of options supported by research, developmental & play-based, and equitable & consistent across the district,
 - Inclusion*** - Participants overwhelmingly supported programming for children with special education needs in an inclusive early education setting. Thirteen of sixteen participants (81%) agreed that an inclusive environment, with typically developing peers in their community was the best programming option (EPSB Summary of Interview Input, 2007).
- **Staff** – well qualified with experience, address retention/salaries, staff shortages and common philosophical background (highest area voted for improvement as rated by 8/16 interview participants) (EPSB Summary of Interview Input, 2007).
- **Transitions** – improved communication between sending and receiving parties through each phase
- **Interagency Access** – encourage support from a variety of agencies, services are received in a timely & culturally sensitive manner, with coordination of services between ministries.
- **Screening, Assessment and Early Identification** – would be completed prior to kindergarten (mentioned by 7/16 interview participants) (EPSB Summary of Interview Input, 2007).

4. Future Directions “Focus groups identified key areas for improvement that may include district wide changes while others build and enhance current practices. Five themes emerge”:

- Outreach Programs
- Access to Programming Choice
- Research-Based Practice
- Support for Families
- Integration of Service

Next Steps

“Combined with interview input and a research and data survey, focus group input will guide and set direction for future phases, which will include a literature review, program visits and district recommendations.”

Central Support (Coordinator/Service)

Addition of central support or coordination was suggested for a variety of reasons including: intake process, monitoring, staffing, access and consistency within district (mentioned by 7/16 interview participants) (EPSB Summary of Interview Input, 2007).

Time

Time for: planning, reflection, training, assessment, system wide PD, sharing, mentoring (mentioned by 8/16 interview participants) (EPSB Summary of Interview Input, 2007).

Transportation

Safety, length of ride, access to programming close to home, should not dictate nor limit programming options.

- ❖ **Focus on Programming** Play based, developmentally appropriate, inclusive, community setting, family participation (mentioned by 7/16 interview participants) (EPSB Summary of Interview Input, 2007).

Symbol Key:

- ❖ Key focus
- Underline mentioned in two key themes
- == Double underline mentioned in more than two key themes
- Italics* Emphasis of points for the Align Initiative to consider.

B. 2007 EPSB District Review of Early Childhood Special Education - Summary of Interview Input. Sixteen interviews were conducted with Alberta Education staff, district staff, teachers, principals, support staff, exempts staff, private ECS operators, parents and experts. All participants responded to a common set of questions.

Generalizations summarized from interview input centered around four themes:

- Collaboration and Partnerships.
- Culture of Support of Families,
- Inclusion, and
- Programming

“Some Suggested Future Directions by Focus and Interview Groups

Programming - built on children's strengths and that best suits a child's needs as compared to typically developing peers was suggested. (*Building on a child's strengths would require a paradigm shift as current assessment and programming is determined by delays or deficiencies*). Parents, staff, and experts alike agree that a key programming component for children with special education needs is communication. Speech language pathologists were identified as integral members of the learning team. (EPSB Summary of Interview Input, 2007).

Support for Families

- Family Centered: family **involved** in identifying needs and implementing programming “Parent involvement is a necessity, information, workshops, education, engagement, enabling the family, part of the team, providing programming throughout the year, continuing an in-home component” mentioned by 11/16 participants (EPSB Summary of Interview Input, 2007).
- Support for Transitions: assure families understand and are **involved in the transition process**, inform families of changes (funding changes, access to supports), provide information that will support families to make informed decisions, **authentic choice**
- Build Knowledge: exposure to and awareness of typical development (Interview Input), workshops, mentoring opportunities with experts in the home and other natural learning environments, clarity of information from the district
- Access to Information: link families to community resources, provide opportunities to strengthen the families role when making decisions regarding their child-**how**

“To create a supportive culture for children with special education needs, families need access to information and opportunities to develop awareness and understanding about

typically developing peer and strategies to address children with diverse special needs. Parents require the opportunity to observe experts (In-home Specialist, SLP, OT, PT, Teacher) modeling appropriate strategies so that the learning process can be reinforced and supported at home.

Exposure to and awareness of typical development is crucial. Many responses indicated that an awareness of typical development was a concern for parents. An understanding of typical development and milestones is necessary for partners in: playschools, pre-schools, daycares, community programs, health centres and within the medical profession. Participants suggested methods or strategies that could include: information from public health centers, mandatory screening (vision, hearing, communication / cognitive, physical and social milestones). Information on behaviours that could 'Red Flag' concerns and opportunities to observe and interact with typically developing peers in their community.

Strategies to provide Parent Education can be presented in a variety of forms. Suggestions included: workshops, information sessions, parent support groups, community programs. Several responses emphasized the importance of unbiased and consistent information being provided. Providing information that is culturally sensitive was noted as increasingly important when communicating with parents. Parents who understand information are able to formulate educated decisions involving their children. All responses supported empowerment of families to make informed choices" (EPSB Summary of Interview Input, 2007).

"School boards must: ensure parents have information needed to make informed decisions." (Standards for Special Education, June 2004).

Integration of Interagency Services and Supports [Confirming]

- Provincially: increase involvement and partnerships among Education, Capital Health and Child and Family Services, clarify roles to ensure optimal access to resources and supports
- Regionally: more integration of services with other agencies (GRIT, Linkages, Private ECS operators), surrounding school boards, ESHIP
- District: mentorship opportunities for AP's, teachers, TA's, exempt staff, sharing of expertise, time for PD, central coordination"
- Generally, responses fostered the ideas of sharing resources and expertise provincially, locally, among district schools and within the community (EPSB Summary of Interview Input, 2007)."

(Edmonton Public Schools, 2007. District Review: Early Childhood Special Education and Summary of Focus Groups Input and Summary of Interview Input).