Anoka County Community Action Program (ACCAP) is an EHS-CCP grantee in Minnesota. The partnership serves 99 infants and toddlers in Anoka and Washington Counties. The combination of rural, urban, and suburban regions in the service area prompted ACCAP to select both center-based partners, which are more accessible to urban/suburban families, and FCC partners, which are more accessible to rural families. The partnership includes five New Horizon Academy centers; Crayon Box Child Care Center; CAPE, a teen parent program; and Room for Growing-North. Based on the child care providers’ individual needs, ACCAP uses partnership funding to enhance the quality of child care by offering comprehensive services, lowering ratios and class sizes, instituting research-based curricula and assessments, increasing professional development and education opportunities for staff, and improving children’s learning environments and playgrounds.

FAST FACTS

<table>
<thead>
<tr>
<th>99</th>
<th>50</th>
<th>10</th>
<th>2</th>
<th>$1.6M</th>
</tr>
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<tbody>
<tr>
<td>Children Directly Benefiting</td>
<td>Children Indirectly Benefiting</td>
<td>Child Care Partners</td>
<td>counties</td>
<td>Total Grant Amount</td>
</tr>
</tbody>
</table>

THE MODEL STANDOUTS

Supporting Families with Nontraditional Work Hours: A community needs assessment indicated that many families are working two or three jobs and need child care during nontraditional hours. ACCAP partners with a child care site that provides services during nontraditional hours (6 pm to 11 pm), and it also partners with two FCC centers that offer care on the weekends.

Supporting Young Parents: One of ACCAP’s child care partner sites is CAPE, a child care program for teen parents and their children. This program enables teenage parents to finish school and go to college while their children are cared for and learning. During the summer, when the center is closed, teen parents can take their children to alternate EHS-CCP sites so they can continue their studies or get a summer job.

Professional Development: Using partnership funds, ACCAP supports staff in attaining an infant/toddler CDA by paying for coursework and providing mentoring. They also make use of state resources to assist early educators in accessing higher education. In addition, they have a “grow your own” initiative that supports and encourages parents of enrolled children to earn their own CDA. ACCAP is becoming a CDA training site so that courses are more easily accessible to both staff and parents. In addition to supporting staff in furthering their credentials, ACCAP provides practice-based coaching and intensive training on a variety of topics, including curricula, assessments, parent education, inclusion of

“I now have a school in my home.”
—FCC Partner
New Horizon Academy also supports partners’ professional development by offering all of their trainings to other EHS-CCP partners. Mixed-Income Delivery System: Because their child care partners are already serving a mix of Early Head Start-eligible and non-eligible children, most of the classrooms in the partnership are mixed-income. All infants and toddlers, whether enrolled in the EHS-CCP or private pay, benefit from facilities and homes that are licensed, meet safety requirements, have low teacher-to-child ratios and class sizes, have qualified teachers who receive ongoing supervision and coaching, offer responsive caregiving, and promote parent engagement activities.

Continuity of Care and Tuition Assistance: During early implementation of the EHS-CCP, Minnesota froze Child Care Assistance (CCA) funding. That year, families who were income eligible and on the wait list for CCA could apply for tuition assistance with ACCAP. In addition, when there are lapses in CCA, eligible families who are already enrolled in the EHS-CCP programs can apply for continuity-of-care support while they reapply for CCA. This ensures that children continue to receive quality care and that parents are still able to work during the reapplication process.

THE RESULTS

• 13 additional teachers attained an infant/toddler CDA, and one staff person is working on a bachelor’s degree in early childhood development.

• 60 percent of partners did not have appropriate outdoor equipment prior to the EHS-CCP; now all of them do.

• Staff from all partner sites completed more than 236 hours of training on a variety of topics, including assessments, curricula, and classroom quality.

• 24 additional children received referrals to the Minnesota Help Me Grow system to be evaluated for early intervention. Access to Help Me Grow ensured that developmental delays and disabilities were caught early.

• All the EHS-CCP partners were quality rated at four stars, the highest rating available in Minnesota. Two child care partners moved from a one-star rating to a four-star rating, with support from the EHS-CCP program.

• Prior to the EHS-CCP, none of the partners had access to mental health supports for children and families. Now, all partners have access to Fraser Mental Health Services, a local mental health provider.

THE TAKEAWAYS

Stability in funding is critical to the early care and learning system in Minnesota. Funding in the early childhood system is often volatile, making it difficult to operate a business, particularly one offering high-quality services. Though the state needs much more funding to make a systemic change, this new stream of funding adds stability to the system and helps the existing private-sector child care market stay afloat.

The grantee and its partners agree: The EHS-CCP is good for Minnesota’s children and families. Expanding the Early Head Start model into private child care programs increases access to services such as children’s mental health and employment assistance for parents. It builds the community’s capacity to support the whole child, and it empowers the whole family.
Partnership funding allows child care partners to decrease their teacher-to-child ratios, which is expensive but critical to high-quality early care and learning experiences. During such a consequential period of brain development, it is important that early educators have the time and space to dedicate individualized attention and support to each child. While child care partners knew this was important, a lack and funding used to make it difficult to implement.

The partnership model facilitates more mixed-income settings. It also expands important benefits, such as more highly trained teachers, research-based curricula, and improved learning spaces to all children in partner centers, not just those directly enrolled through the EHS-CCP. Many Minnesotans have incomes that fall just above Early Head Start eligibility, and they still need help to afford high-quality child care in order to work. The partnership model gives families choices. The grantee and its partners now see many families have babies, return to the workforce, and succeed because of the care they now have.