

Early
Childhood
Comprehensive
Systems Plan

V I S I O N

*A culturally responsive,
comprehensive and accessible
service delivery system for
young children that links service
providers, empowers families,
and engages communities.*



Contents

Overview

<i>Introduction</i>	2
<i>Importance of the early years</i>	4
<i>How are we doing in Alaska?</i>	5
<i>How was the Early Childhood Comprehensive Systems Plan developed?</i>	6
<i>What resources guided the work?</i>	8
<i>How to use this plan</i>	9

ECCS Plan

<i>Vision & Mission</i>	10
<i>Summary of Plan Outcomes</i>	11
<i>System Infrastructure (outcome #1-3)</i>	13
<i>Medical Home (outcome #4)</i>	14
<i>Mental Health (outcome #5-7)</i>	16
<i>Early Care and Learning (outcome #8-11)</i>	19
<i>Family Support & Parent Education (outcome #12)</i>	25
<i>ECCS Partners</i>	26



To see the full plan visit our website:

hss.state.ak.us/ocs/childplan

Introduction

The purpose of the Early Childhood

Comprehensive Systems Project is to build and implement systems that support families and communities in their development of healthy children who are ready to learn when they enter school. This five-year initiative is funded through a federal Health Resources and Services Administration grant and facilitated through the Office of Children's Services in the Alaska Department of Health and Social Services. The first two and one-half years of the project were focused on developing the statewide Early Childhood Comprehensive Systems Plan. The next two and one-half years will be focused on implementation.

The Plan represents the past, present, and future. It incorporates the thinking from several past planning efforts as well as new ideas and solutions; recognizes the needs of today's young children and their families; promotes "best practices," those proven to

be most successful; and gives us a vision for the future. The Plan does not intend to represent everything currently underway for young children, but strives to address systems gaps and identify improvements needed to assure that Alaska's young children have the greatest opportunity for positive health and developmental outcomes.

Challenges and opportunities

exist for implementing this Plan. Funding is decreasing in the very areas that need to be broadened to accomplish all of our goals. The Plan requires a fundamental shift in thinking about how we utilize funding and resources. Its success is dependent on partnerships, collaboration, and extensive communication. Although partnering produces a much better product, it requires a considerable investment in time and commitment. While there may be challenges, this is also an exciting time for early childhood. There is a new awareness on the part of a broader community about the importance of early childhood. Non traditional partners are increasingly more aware of the

long-range implications of the early years. The recommendations in the Plan align with current initiatives and efforts in Alaska.

The Plan will provide direction in Alaska for the development of public policy for young children. It can be used as a tool to move the agenda for young children forward. The investments that we make for young children today will pay big dividends in the future.



Importance of the early years

Experts in child development

now know more than ever before about the importance of the early years in establishing the foundation for healthy growth and development. Rapidly expanding scientific knowledge in the field has revolutionized our thinking about how the brain develops, how the mind works, and how children learn. Early childhood experiences, which are shared by families and communities, influence future development and learning in powerful and long-lasting ways.

The disparities

between what children know and can do are already apparent by the time they enter kindergarten. These differences are impacted by a variety of social, economic and environmental factors and are predictive of future functioning. We know the incredible importance of this early period in a child's life. It is imperative that we maximize the likelihood that children have experiences that promote their physical and emotional well-being.



How are we doing in Alaska?

Alaska has a number of extensive and significant multi system efforts currently taking place. There is no single point, however, at which these efforts for early childhood coalesce. The challenge is to bring together existing efforts under a broadened umbrella, without negating or duplicating the work already being done.

Significant systems gaps include a lack of:

- A guidance structure to promote a comprehensive and cohesive agenda for young children and their families.
- Comprehensive early childhood planning, policy development and funding alignment.
- A service delivery system that focuses on prevention and early intervention as well as meeting the needs of families with multiple issues.



There is a clear need for reducing gaps and improving coordination of services in Alaska.

- In Alaska, 38 percent (22,989) of children under age 6 live in low-income families. (National Center for Children in Poverty, 2004)
- 10.6 percent of children in Alaska have special health care needs and 23 percent of their households are living below the 200 percent federal poverty level. (SLAITS National Survey of Children with Special Health Care Needs, 2001)
- 13.2 percent of 0-3 year olds and 14.8 percent of 4-7 year olds were uninsured or had periods of no insurance coverage during 2003-2004. (National Survey of Child Health, 2003)
- Only 24 percent of Alaska children 1-5 who were eligible for Early Periodic Screening, Diagnosis and Treatment (EPSDT) care received dental services in 2000.
- Alaska has one of the highest rates of child abuse and neglect in the country. Approximately 50 percent of reports of harm are for children 0-5.
- Approximately 60 percent of Alaska children under the age of 6 have all of their parents in the workforce. (2006 NACCRRRA)
- 35 percent of child care centers asked families to withdraw a child under the age of 6 with social-emotional problems. (2005 Alaska Market Rate Survey)
- Staff turnover in child care programs is approximately 45 percent, impacting the quality of services provided to children. (2004 Alaska Market Rate Survey)

How was the ECCS Plan

The Early Childhood

Comprehensive Systems project brought together public and private partners from around the State of Alaska in a collaborative effort to review existing early childhood systems and plan for their improvement. Over 100 stakeholders participated in work groups that reviewed service delivery systems, current initiatives, funding streams, policies, best practices and information on the status of young Alaska children.

Recommendations were drafted by the work groups on how systems serving children prenatal to 8 could be improved. The drafted recommendations were approved and adopted by the Department of Health and Social Services Commissioner and the Children's Policy Team, which is comprised of Division Directors and Deputy Commissioners and endorsed by the Commissioner of the Department of Education and Early Development.

developed?

The workgroups focused on four primary areas:

Medical Home – Access to an insurance support for medical homes; provision of comprehensive physical and child development services for all children (including children with special health care needs); and assessment, intervention, and referral of children with developmental, behavioral, and psycho-social problems.

Social, Emotional, and Mental Health – Availability of appropriate child development and mental health services to address the needs of children at risk for developing mental health problems.

Early Care and Learning – Development and support of quality early care and learning services for children from birth through 8 that support children's early learning, health, and development of social competence.

Family Support/Parent Education –

Availability of comprehensive family support and parent education services that impact the ability of families to nurture and support the healthy development of their children.



What resources guided the work?

Numerous resources were reviewed and studied in the search for current best practices and leading edge activities in the early childhood field.

The following resources emerged as particularly influential:

- National Center for Infant and Early Childhood Health Policy
- National Research Council Institute of Medicine: *From Neurons to Neighborhoods-The Science of Early Childhood Development*
- Family Support America
- Zero to Three
- National Association for the Education of Young Children
- American Academy of Pediatrics
- Healthy Child Care America
- Center for the Study of Social Policy: Strengthening Families Initiative



How to use this Plan

The Plan recognizes that children and families are served in their local communities and regional hubs, which have unique perspectives and priorities. It supports partnerships and communication with service providers and focuses on broad recommendations that can be adapted to meet local needs. The Plan will be widely distributed across Alaska, and programs, agencies, and local and regional groups will be invited to use it in their own program planning and development. Communities can support the implementation of the Plan by integrating services, blending and braiding funding, sharing training and establishing policies that better serve young children and their families.

Coordination of services on the local level will have the greatest impact on families. The Plan is designed to promote systems change and create more integrated and comprehensive services where families live and raise their children.





The Vision of the State of Alaska Early Childhood Comprehensive Systems Plan is to build and implement a statewide early childhood comprehensive system that supports families and communities in their development of children who are healthy and ready to learn when entering school.

The Mission is to promote positive development and improved health outcomes for Alaska's children prenatal to 8 by creating a culturally responsive, comprehensive and accessible service delivery system that links service providers, empowers families, and engages communities.

Summary of Plan outcomes

System Infrastructure page 13

1. A permanent guidance structure will exist to provide oversight of a comprehensive, integrated service system for young children prenatal to 8.
2. State-level plans and policies will include integrated best practices for early care and learning, medical homes, parent education, family support and mental health for young children.
3. Local and regional partnerships between parents, health and social services, early care and learning programs, elementary schools, local boards and organizations will work to ensure continuity of quality, comprehensive services for young children and their families.

Medical Home page 14

4. Pediatric/family health care practices will incorporate the seven core components of medical home: care that is accessible, family centered, coordinated, continuous, comprehensive, compassionate and culturally competent.

Mental Health page 16

5. Young children and their families will receive appropriate early mental health services through Medicaid and other sources.
6. The State of Alaska will have a qualified, well-trained workforce providing for the social and emotional well-being of young children.
7. Pediatric/family health care practices/public health settings will incorporate screening for maternal depression and caregiver mental health issues.

Early Care & Learning page 19

8. Early care and learning programs for children birth through age 8 will be based on standards of best practice.
9. The early childhood workforce will be well-qualified and fairly compensated.
10. Children and families will be able to find and access appropriate early care and learning programs.
11. Families will be full and respected partners in their children's early care and learning programs.

Family Support & Parent Education page 25

12. Families of young children will have access to community-based parenting and family support programs.



Early Childhood System Infrastructure

The first three outcomes address the broad framework needed to guide a comprehensive early childhood system.

Outcome #1: *A permanent guidance structure will exist to provide oversight of a comprehensive, integrated service system for young children prenatal to 8.*

- ❖ There will be a strong and effective guidance structure with a shared vision to oversee state's efforts in supporting a comprehensive early childhood system.
 - Determine roles and membership.
 - Ensure adequate staff with the expertise and skills necessary to support the state's early childhood efforts described in this plan.
 - Annually update the Plan for an early childhood comprehensive system.

Outcome #2: *State-level plans and policies will include integrated best practices for early care and learning, medical homes, parent education, family support and mental health for young children.*

- ❖ State departments and agencies will work collaboratively to incorporate early childhood best practices into planning efforts and policy development.
 - Develop a common language and vision to

be shared with agencies/departments about best practice models of integrated services.

- Promote early childhood representation at planning meetings, committees, and existing initiatives and collaborations.
- Produce annual reports on the status of Alaska's young children that can be used for planning and decision making purposes.

Outcome #3: *Local and regional partnerships between parents, health and social services, early care and learning programs, elementary schools, local boards and organizations will work to ensure continuity of quality, comprehensive services.*

- ❖ There will be a network of effective community and regional organizations that support comprehensive early childhood services.
 - Identify existing local and regional early childhood collaborations.
 - Encourage and fund collaborations among health systems, schools and mental health, early care and learning, and family support programs.
 - Share information with local and regional groups on state efforts, initiatives, systems building, and best practices.



Medical Home

Outcome #4: *Pediatric/family health care practices will incorporate the seven core components of medical home: care that is accessible, family-centered, coordinated, continuous, comprehensive, compassionate and culturally competent.*

- ❖ Children identified with developmental or medical needs will be referred to appropriate services and receive the services and care they need, not limited by their income or insurance status.
 - Research and educate providers on appropriate billing procedures and codes for care coordination.
 - Develop a menu of models for care coordination.
 - Promote the use of parent consultants or relationships with parent navigation systems in primary care offices.
 - Promote the use of Bright Futures and other recognized guidelines for health supervision and anticipatory guidance.
 - Develop and maintain a system for managing health care information for foster children.
 - Seek sustainable funding for care coordination of services.

American Academy of Pediatrics, Alaska Chapter

Definition of Medical Home

The medical home is where a child with special health care needs and his or her family can count on having medical care coordinated by a health care professional they trust. It is not a building, house or hospital but rather an approach to providing quality and coordinated services. Primary health care providers and families work as partners to identify and access all of the medical and non-medical services needed to help children with special health care needs achieve their potential. The American Academy of Pediatrics, Alaska Chapter, believes that ideally a medical home is where care is accessible, family-centered, continuous, comprehensive, coordinated, compassionate and culturally competent.

- ❖ All children 0-8 will receive comprehensive well child checks including a developmental and mental health screening reflective of the American Academy of Pediatrics recommendations (periodicity schedule).
 - Educate providers on benefits of developmental and mental health screening.
 - Educate providers (in addition to office managers) on billing procedures and codes.
 - Distribute a menu of screening instruments to providers.
 - Coordinate with Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT) regarding distribution of information to parents on the importance of screening.
- Inventory and organize service information in easy to access modalities (Web site, referral lists, etc.).
- ❖ More eligible children will be enrolled in public health insurance programs (Medicaid, Denali KidCare).
 - Support removal of the frozen 2003 standard in determining eligibility for Denali KidCare and restoration of previous levels.
 - Partner with and support the work of groups such as the Covering Kids Coalition.
 - Partner with programs that have access to large numbers of young children and their families to facilitate enrollment in a public health insurance program and engagement with a medical home (WIC, early care and learning programs, and others).

Social, Emotional and Mental Health

Zero to Three

Definition of Early Childhood Mental Health

Early childhood mental health/social emotional competency is the capacity of the child from birth to age 5 to experience, regulate and express emotions; form close and secure interpersonal relationships; and explore the environment and learn. Infant mental health refers to how these issues affect development in the first six years of life. Early childhood mental health is synonymous with healthy social and emotional development (Zero to Three Policy Center, 2004).

Outcome #5: *Young children and their families will receive appropriate early mental health services through Medicaid and other sources.*

❖ There will be reimbursement mechanisms so young children and their families have access to the services necessary to address their social/emotional development.

- Educate providers on appropriate diagnostic procedures and billing codes.
- Utilize appropriate crosswalk between diagnosis for young children and billing requirements.
- Develop category for children “at-risk” for becoming seriously emotionally disturbed (SED) and/or broaden the definition for children 2 and under.

- Expand the number of qualified providers eligible for Medicaid reimbursement.
- Review service codes to ensure that services for young children are grounded in the environment and the family.

❖ Alaska Standards of Care will reflect best practices for young children.

- Improve Alaska's standards by investigating, reviewing, and evaluating best practices in other states.

❖ Financial resources will be available for mental health services for young children.

- Educate employers on the importance of choosing insurance that provides for mental health services to young children.
- Identify funding streams and support strategies to integrate services and supports for young children with severe emotional disturbances and those at risk for SED.

Outcome #6: *The State of Alaska will have a qualified, well-trained workforce providing for the social and emotional well-being of young children.*

- ❖ There will be a statewide early childhood mental health professional development plan which supports, connects and aligns efforts into a comprehensive system of training and education.

How young children feel is as important as how they think, particularly with regard to school readiness. (Insitute of Medicine, 2000)

- Identify current/available workforce development opportunities.
- Conduct a survey to determine current level of expertise in the field.
- Research and articulate service provider core competencies by levels of service provision (including services reimbursed by Medicaid) across all early childhood disciplines.
- Work with the universities and training entities to incorporate early childhood mental health content into their course curriculum.
- Develop a professional development plan for training and education in early childhood mental health.

- ❖ There will be a system for mental health consultation to early childhood professionals and clinical supervision and mentorship for service providers.

- Develop a system for early childhood mental health supervision and mentorship for paraprofessionals and professionals working with early childhood mental health issues (e.g., Infant Learning Program staff, behavioral health aides, clinicians, child development and family workers, and others).

Outcome #7: *Pediatric/family health care practices/public health settings will incorporate screening for maternal depression and caregiver mental health issues.*

- ❖ Health care providers will recognize the importance of caregiver mental health on early childhood social and emotional well-being and regularly screen primary caregivers for adult mental health issues.
 - Educate providers on the benefits of screening primary caregivers for risk factors.
 - Educate providers (in addition to office managers) on billing procedures and codes.
 - Distribute a menu of screening instruments.
 - Coordinate with EPSDT regarding information to parents.
 - Inventory and organize service information in easy to access modalities (Web site, referral lists, etc.).



Early Care and Learning

Outcome #8: *All early care and learning programs for children birth through age 8 will be based on standards of best practice.*

- ❖ All early care and learning programs will meet or exceed established health, safety and program standards.
 - Establish early care and learning program standards and regulations that reflect markers of quality (or standards of best practice).
 - Require early care and learning programs to meet or exceed established health, safety, and program standards.
 - Develop and implement a clear, coherent and equitable monitoring system for program compliance.
 - Develop and implement a quality rating system that encourages programs to meet high quality standards.
- ❖ Early care and learning programs will use Alaska's Early Learning Guidelines to better understand, support and enhance children's development and learning.
 - Develop and disseminate user friendly Early Learning Guidelines materials for providers.
- ❖ Early care and learning programs will use a variety of appropriate methods to regularly screen, assess, and monitor progress of individual children.
 - Develop and disseminate information to programs on the importance of regularly

screening, assessing and monitoring children's progress and the resources available.

- ❖ Health and mental health specialists will be available to assist early care and learning programs with special issues.
 - Develop and implement a system for health and mental health specialists to provide consultation and direct services in natural settings such as early care and learning programs (expand Head Start-like models).

Outcome #9: *The early childhood workforce will be well-qualified and fairly compensated.*

- ❖ There will be a statewide system of professional development in early childhood education and statewide access to that system.
 - Provide campus-based and distance-delivered education opportunities.
 - Support the university system in meeting the requirements for accreditation in Early Childhood Education.
 - Maintain a registry system that documents the individual professional development of providers.
 - Develop and implement a registry of approved trainers.
 - Maintain and publicize a Web site that provides information on professional development opportunities.

❖ Early care and learning practitioners will meet the educational standards for their position.

- Establish educational standards for early care and learning providers and embed them in requirements for programs.
- Develop and advocate for guidelines to be adopted by the State Board of Education and Early Development moving pre-K-3 teachers toward certification in early childhood development or an early childhood endorsement.

❖ A professional development framework articulating career advancement will be utilized by early care and learning providers.

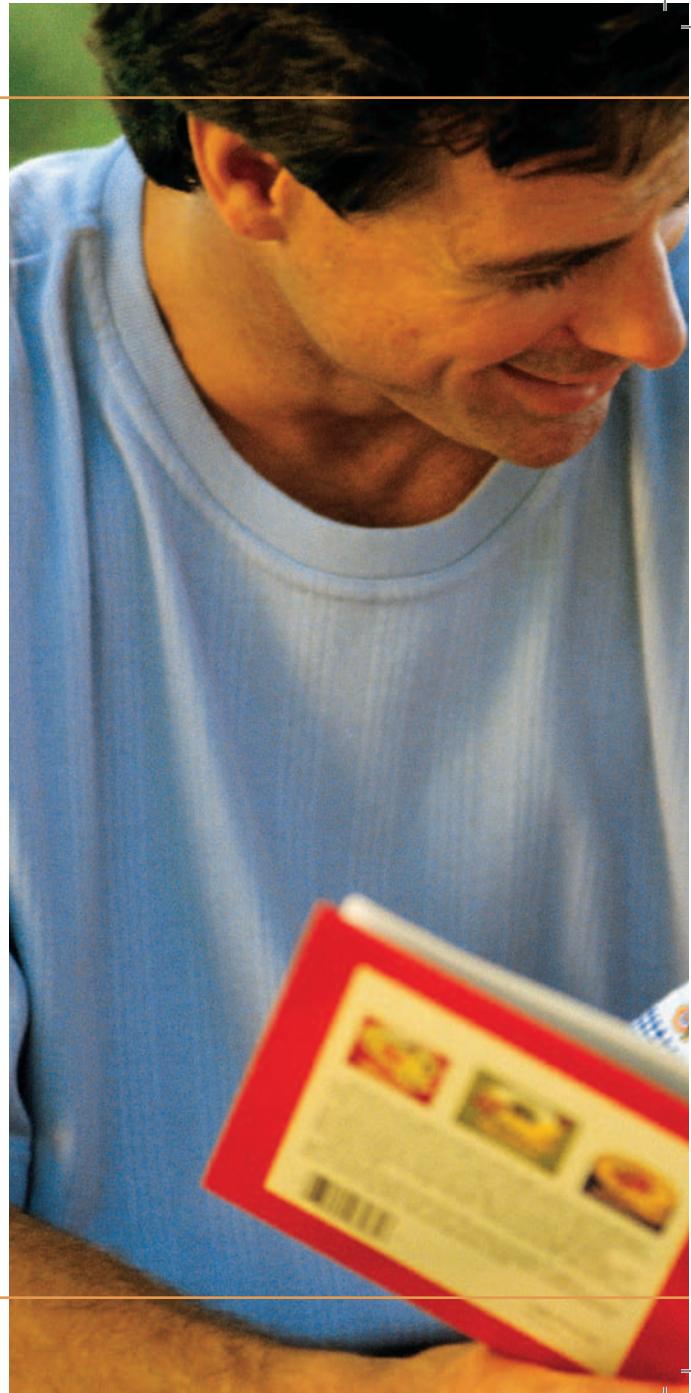
- Disseminate information about the professional development framework and encourage its use by providers and employers.

❖ Wages and benefits of people who work in the early care and learning field will be improved to reflect compensation for education and experience.

- Promote analysis of wage and benefit issues.
- Develop options for improving benefits for early care and learning providers.
- Explore the development of a system for rewarding programs which demonstrate a commitment to livable wages and benefits.
- Conduct an annual survey of providers regarding early childhood workforce issues.

Outcome #10: *Children and families will be able to find and access appropriate early care and learning programs.*

❖ There will be a range of early care and





learning program models to meet the developmental needs of young children.

- Ensure a range of program models are available.
 - Support collaboration between early care and learning programs and child protection services and provide adequate funding to ensure that children in the state's custody are placed in high quality early care and learning programs.
 - Develop a free, voluntary, universal pre-K system for 4 and 5 year-olds using a mixed delivery system with funding that follows the child.
- ❖ There will be a sufficient supply of early care and learning programs to meet the needs of families with children from birth to 8.
- Research and implement strategies to increase the supply of child care where needed, especially programs serving: infant and toddlers, children with special needs, children in rural areas, school-age children, children needing non traditional hour care.
 - Implement strategies to increase access to Head Start and Early Head Start programs.
 - Implement strategies to increase access to Early Intervention Programs.
- ❖ Families will have access to consumer information and have the resources to make informed choices regarding their child's early care and learning.
- Implement a quality rating system statewide to help parents determine the quality of care.
 - Provide consumer information to parents



that is user-friendly and available in multiple formats, languages and locations (such as places of employment, medical offices, WIC, Public Assistance, etc.).

- Develop public service announcements for radio and television with consumer information regarding quality care and learning programs.

❖ Families with financial needs will have access to resources to help cover the cost of child care.

- Support a child care assistance rate schedule in which parents pay no more than 10 percent of their income for child care.
- Support a child care assistance rate equivalent to the 75th percentile of the current market rate.
- Support adequate funding for child care assistance programs.
- Provide support in helping parents and providers understand the child care assistance system.
- Support child care assistance being available for families whose income is up to 85 percent of the State Median Income.

Outcome #11: *Families will be full and respected partners in their children's early care and learning programs.*

❖ Early care and learning programs will have active family support and parent involvement components.

- Research and disseminate information on best practices in outreach, engagement and family support models.
- Support the implementation of family support

models such as Strengthening Families in all early care and learning settings.

- Require the use of the Strengthening Families Self-Assessment in early care and learning programs.
- Train child care licensers in the Strengthening Families Self-Assessment Tool.

❖ Early care and learning programs will be responsive to the different cultural and language needs of the families and

Young children whose caregivers provide ample verbal and cognitive stimulation, who are sensitive and responsive, and who give them generous amounts of attention and support are more advanced in all realms of development compared with children who fail to receive these important inputs.

(Lamb, 1998; Smith, 1998)

children that they serve. *(Support children in the continuation of their home culture and language while helping them to speak, read and write English.)*

- Encourage programs to recruit, hire, and train staff representing the cultures that they serve.
- Provide training information and strategies to providers on how to successfully engage families of diverse cultures.
- Create opportunities for community members with diverse backgrounds to participate in a network of support for early care and learning programs.

❖ Early childhood programs will facilitate the transitioning of children and their families to new classrooms/programs by implementing key elements that characterize early care and learning standards of best practice.

- Promote continuity between early care and learning programs by supporting key elements of effective early childhood programs: developmentally appropriate practice, parent involvement and support services for children and parents.
- Develop and disseminate information on the importance of transitioning children and their families and assist programs in developing transition procedures.
- Support collaboration between early care and learning programs, Infant Learning Programs and school districts.



Family Support America
***Principles of Family
Support Practice***

- Staff and families work together in relationships based on equality and respect.
- Staff enhance families' capacity to support the growth and development of all family members – adults, youth, and children.

Family Support & Parent Education:

Outcome #12: *Families of young children will have access to community-based parenting and family support programs.*

- ❖ Programs serving young children and their families will be responsive to emerging family and community issues and model the principles of family support in all program activities.
 - Create a statewide family support clearinghouse that: serves as a repository of information regarding best practices in family services;

- Families are resources to their own members, to other families, to programs, and to communities.
- Programs affirm and strengthen families' cultural, racial, and linguistic identities and enhance their ability to function in a multicultural society.

- Programs are embedded in their communities and contribute to the community-building process.
- Programs advocate with families for services and systems that are fair, responsive, and accountable to the families served.

supports interdisciplinary training; provides technical assistance; distributes information to programs, stakeholders and policy makers; and links to services.

- ❖ All families with young children will have access to a user-friendly, culturally competent, integrated service delivery system.
 - Promote “one door opens every door” by supporting: community-based family resource centers; one-stop shopping service delivery models; family-to-family support; integrated case management.
- ❖ Families will be well informed regarding parenting and child development issues.
 - Support programs that provide easily accessible parenting information and referrals for all Alaska families with young children (“parent lines,” Web-based services, home-based delivery, etc.).
- ❖ Families will be supported in their role as primary caregivers.
 - Encourage funding of programs that promote families as resources to their own members, to other families, to programs, and to communities.
 - Encourage employers to develop family friendly policies (e.g., family health benefits, on-site childcare facilities, flexible work schedules, changing stations in restrooms, access to parenting information, etc.).
 - Support and recognize community activities which promote health and wellness in families with young children.

ECCS Partners

Many thanks to the partners who contributed to the development of the ECCS Plan

Medical Home:

Department of Health and Social Services

- Division of Public Health
- Division of Health Care Services
- Division of Public Assistance
- Governor's Council on Disabilities and Special Education
- Commissioner's Office

Municipality of Anchorage, Department of Health and Human Services

Alaska Chapter of the American Academy of Pediatrics

All Alaska Pediatric Partnership

Alaska Primary Care Association

Alaska Native Tribal Health Consortium

Alaska Native Medical Center

Mat-Su Services for Children and Adults

Family Voices

Alaska CARES

Stone Soup

SEARHC (Southeast Alaska Regional Health Consortium)

Yukon Kuskokwim Health Corporation

Upper Tanana Development Corporation Head Start

Covering Kids Coalition

Sunshine Community Health Center

Andrea Bateman, M.D.

Carol Joyce Buchholtz, M.S.

Early Care and Learning:

Department of Health and Social Services

- Division of Public Assistance
- Office of Children's Services
- Division of Public Health

Department of Education and Early Development

- Teaching and Learning Support

University of Alaska Fairbanks

- School of Education, Department of Early Childhood Education

University of Alaska Southeast,

- College of Education, Department of Teaching & Learning, Early Childhood Program
- Professional Education Center, Center for Teacher Education, (SEED) System for Early Education Development Council

University of Alaska Anchorage

- College of Education, Department of Counseling & Special Education
- Center for Human Development

Child Care Connection

Association for the Education of Young Children- Southeast Alaska

Play-n-Learn Child Development Centers

Alaska Childcare Resource and Referral Network

Southcentral Foundation Head Start Program

Chugiak Children's Services Head Start Program

North Star Borough Early Childhood Commission

Families First

Parents As Teachers

Mental Health:

Department of Health and Social Services

- Division of Behavioral Health
- Office of Children's Services
- Commissioner's Office

Department of Administration

- Office of Public Advocacy

Christian Health Associates

Psychology Resources

Mental Health Board-Children's Committee

Yukon Kuskokwim Health Corporation

Southcentral Foundation

Norton Sound Health Corporation

Bristol Bay Area Health Corporation

Sitka Tribe of Alaska

Alaska Behavioral Health Association

Blanket of Wellness

Juneau Youth Services

Tundra Women's Coalition

North Star Hospital

Rural Alaska Community Action Program Head Start Programs

Kids' Corps Inc. Head Start Program

Play-n- Learn Child Development Centers

Anchorage Community Mental Health Center

Elmendorf Air Force Base, Family Support Program

Family Centered Services

Child Care Connection

Zero to Three: Partnering with Parents Project

Disability Law Center

Marianne VonHippel M.D.

Jeanine Jeffers-Wolfe

Family Support & Parent Education:

Department of Health and Social Services

- Office of Children's Services
- Division of Public Health
- Division of Public Assistance
- Governor's Council on Disabilities & Special Education

Assets for Youth Program, Association of Alaska School Boards

Association for the Education of Young Children

- Southeast Alaska

Partnership for Families and Children

Anchorage Native Medical Center

Kids' Corps Inc. Head Start Program

Child Care Connection

Success By Six

United Way of Anchorage

Stone Soup

North Slope Family Services

Municipality of Anchorage, Department of Health and Human Services

Alaska Youth and Family Network

Catholic Community Services

Mat-Su Services for Children & Adults, Inc.

REACH

Denali Family Services

Hoonah City School District, Parents As Teachers Program

Anchorage School District, Child in Transition/Homeless Project

Reclaiming Futures

Alaska Injury Prevention Center

Prevent Child Abuse America-Alaska Chapter

Resource Center for Parents and Children

Volunteers of America

Family Training Associates

For more information:

*Early Childhood
Comprehensive Systems*
Office of Children's Services,
DHSS, State of Alaska

550 W. 7th Avenue,
Suite 1800
Anchorage, Alaska 99501

hss.state.ak.us/ocs/childplan
(907) 269-8923
(907) 269-3988 fax

Frank H. Murkowski
Governor

Karleen K. Jackson
Commissioner

Tammy Sandoval
Deputy Commissioner, OCS

This publication was released by the Office of Children's Services, Department of Health and Social Services, funded by HRSA and produced at a cost of \$1.97 per copy, to explain the Early Childhood Comprehensive System, and printed in Anchorage, Alaska (AS 44.99.210)

