



# Nebraska Early Childhood Strategic Plan

A dynamic plan developed by and for Nebraskans to provide all Nebraska children and their families with access to quality early childhood services that support children's healthy development from birth through age 8.

OCTOBER 2020

*Facilitation of the Nebraska Early Childhood Strategic Plan is provided by the Buffett Early Childhood Institute at the University of Nebraska as part of a broad collaborative effort of the Nebraska Department of Health and Human Services, the Nebraska Department of Education, the Nebraska Children and Families Foundation, and a number of other organizations.*

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# Overview

The Nebraska Early Childhood Strategic Plan is a dynamic plan by and for Nebraskans that seeks to ensure that all children have access to quality early childhood services.

The strategic plan is based on findings from a comprehensive statewide needs assessment conducted in 2019 and informed by input from families, early childhood providers, and other stakeholders representing communities across Nebraska and all sectors of the state's early childhood mixed delivery system.

The plan describes an intentional set of goals and objectives for improving the early childhood experiences of the more than 235,000 children, birth through age 8, who live in Nebraska today, with special emphasis on addressing significant disparities that exist across the state.

## VISION AND GOALS

The overarching vision of the Nebraska Early Childhood Strategic Plan is to provide all Nebraska children and their families with access to quality early childhood services that support children's healthy development from birth through age 8.

The plan defines four interrelated goals, each with corresponding objectives. These goals are intended to create a more integrated early childhood system—and work on any one of the goals will impact and inform the other goals.

- **Goal 1: Access** — Each child and their family can access the quality early care, education, and other essential services they need to support each child's healthy development.
- **Goal 2: Quality** — All early care and education settings provide quality experiences for children.
- **Goal 3: Collaboration** — Communities coordinate a locally designed mixed delivery system that provides continuous care and meets the needs of families.
- **Goal 4: Alignment** — Statewide systems align to support communities in creating an integrated and comprehensive mixed delivery system for all children.

## LOOKING AHEAD

The vision, goals, and objectives provide an organizing framework and clear targets for the work ahead. In the coming months, stakeholders across the state will be engaged to continue the strategic planning process. Conversations will be held to seek additional information about opportunities and needs from the diverse communities and stakeholders across the state, informing the development of strategies and action plans for accomplishing the goals. The intent is to build on Nebraska's strengths—locally, regionally, and statewide—to ensure equitable access to quality early childhood services for all children birth through age 8. Learn more about how to get involved at [NEarlychildhoodplan.org](http://NEarlychildhoodplan.org).

# How to Navigate This Document

In this document, you will find information about the following:

## ***Needs Assessment and Strategic Planning Process***

- Needs Assessment – A summary of the strategies used to better understand Nebraska’s early childhood resources and needs, including an overview of key findings related to Nebraska’s children and families, early childhood system, and early care and education providers.
- Strategic Planning – A summary of the planning process and the stakeholders involved, including values that were developed to guide collaborative efforts to improve early care and education in Nebraska.

## ***Strategic Goals***

Each of the four strategic goals is addressed in its own section that includes the following:

- A statement of the goal and its objectives followed by a brief summary of key needs assessment findings relative to the overall goal.
- A subsection for each of the goal’s objectives. Each subsection states the objective, summarizes key needs assessment findings that led to establishing the objective, and briefly describes initial strategies that have been recommended to achieve the given objective.

## ***Initial Implementation Strategies***

This section lists the complete set of goals, objectives, and initial implementation strategies that were identified by stakeholders to achieve each objective. Additional strategies and action plans will be developed through ongoing engagement with Nebraskans in 2021 and beyond.

# Needs Assessment and Strategic Planning Process

The science of early childhood development makes clear that the early years, from birth through age 8, are a time of unparalleled human growth and development—and that healthy development during these pivotal early years requires reliable, positive, and consistent interactions between the developing child and familiar, caring adults. First among those familiar, caring adults are parents and family members. Yet, because of today's economy in which most parents of young children work outside the home, families often rely on professionals in early care and education settings to provide positive interactions and experiences that young children need to thrive. This means that early childhood professionals, and the programs and services they deliver, play an incredibly important role in supporting young children and their families.

Over the past several years, Nebraska has identified early care and education as a priority. Motivated and committed people across the state are striving to provide our young children with the care and education they need to thrive intellectually, socially, and emotionally. These efforts involve a combination of state, local, university-based, and philanthropically funded initiatives, many of which include collaboration across sectors and communities, demonstrating Nebraskans' willingness to work together on behalf of children and families. Collectively, these efforts all point in the same general direction. However, increased coordination, collaboration, and communication are needed to ensure that individual initiatives complement and enhance each other.

As Nebraskans, we want to invest our time, resources, and money in evidence-based strategies that are mutually reinforcing and propel us toward our common goal of creating an early childhood system that will improve the life of every child, every family, and every member of the early childhood workforce in every community across the state. To this end, Nebraska has undertaken a collaborative, inclusive, and statewide approach to assessing early childhood needs and preparing for systems change by conducting the Preschool Development Grant Needs Assessment, which was completed in 2019, and by developing the Nebraska Early Childhood Strategic Plan presented here.

The overarching purpose of Nebraska's needs assessment and strategic planning efforts is to identify changes that are needed to facilitate the coordination of resources and create a more integrated early childhood system that provides seamless access to all services needed to support the child's development and well-being. The work is supported by a grant awarded to Nebraska through the Preschool Development Grant Birth through Five (PDG B-5) Initiative administered by the Office of Child Care, Administration for Children and Families, U.S. Department of Health and Human Services. The work is led by Nebraska's Department of Health and Human Services, with support from the Nebraska Children and Families Foundation and in close partnership with the Nebraska Department of Education. The Buffett Early Childhood Institute at the University of Nebraska is collaborating with these organizations to support

assessment, planning, and evaluation efforts. The work is grounded in a commitment to build on existing knowledge and resources across the state, and many other partners and stakeholders are actively engaged at the state, regional, and local levels.

## **NEEDS ASSESSMENT: UNDERSTANDING NEBRASKA'S EARLY CHILDHOOD RESOURCES AND NEEDS**

In 2019, Nebraska conducted a statewide early childhood needs assessment that engaged stakeholders from communities across the state. In addition to identifying and analyzing existing early childhood data and reports, the needs assessment team gathered state-level, regional, and local data by conducting surveys, focus groups, and interviews with stakeholders across Nebraska. These data collection efforts included the following:

- **Statewide surveys with families and early care and education providers.** Nebraska's needs assessment team placed a strong emphasis on understanding the needs and concerns of families and early care and education providers in communities across the state. Two large-scale statewide surveys—the Focus on Nebraska Families survey and the Early Childhood Program and Leadership survey—were conducted in partnership with the Bureau of Sociological Research at the University of Nebraska–Lincoln. Results from these surveys served as the foundation for the needs assessment.
- **Focus groups with families.** A series of focus groups with families provided deeper, more nuanced information about families' perspectives.
- **Interviews and surveys with key informants.** The needs assessment team also conducted individual interviews with key informants, who provided high-level perspectives on strengths and gaps in Nebraska's early childhood mixed delivery system. The online key informant survey gathered similar information from a broader audience of stakeholders, including leaders and service providers from state agencies, early childhood nonprofits, Educational Service Units, public schools, and institutions of higher education.
- **Stakeholder meetings.** Several meetings were held, both in person and via videoconference, to engage stakeholders representing all regions of the state and all sectors of the early childhood system. Participants represented a wide range of roles and organizations, including public schools, state agencies, Head Start grantees, home visitation programs, and university faculty. Stakeholder input guided the themes and issues addressed in the needs assessment as well as the analysis of the survey data from families and providers. Stakeholder input also informed the development of the key informant survey.

These data collection and analysis efforts focused on understanding Nebraska's resources, characteristics, strengths, challenges, and needs related to all aspects of the state's early childhood system. Key findings related to (1) the population of young children and their families and (2) Nebraska's early childhood system are briefly summarized below. Additional findings related to these and other aspects of early care and education in Nebraska are summarized, as relevant, throughout this document. More information about the needs assessment is available online at [NEearlychildhoodplan.org](http://NEearlychildhoodplan.org).

### ***Nebraska’s Population of Children Birth Through Age 5 and Their Families<sup>1</sup>***

Nebraska is a large state with diverse communities and needs in different regions. The major urban centers are in the eastern part of the state, with widespread micropolitan and rural areas outside the larger cities. The state has 93 counties, including remote rural counties (regions with a population of less than 2,500), micropolitan counties (which include a small town or micropolitan community with a population between 2,500 and 250,000), and metropolitan counties (which include a metropolitan community with a population of 250,000 or more). The rural-urban continuum of communities in Nebraska results in dramatic variations in tax bases, programs, and implementation possibilities for local communities across the state. To help us better understand how these variations impact families and providers, stakeholders representing communities across this rural-urban continuum were engaged throughout the needs assessment process. In addition, needs assessment data were disaggregated according to the three types of counties. In 2019, there were more than 154,000 children age 5 or younger in Nebraska. More than half (56%) of these children live in the “big three” metropolitan counties of Douglas, Lancaster, and Sarpy—which encompass the state’s largest cities of Omaha and Lincoln. Approximately 27% of young children live in micropolitan counties, and 17% of young children live in remote rural counties.

The needs assessment team also sought to understand how children’s experiences vary based on other social characteristics, such as their racial identity, gender, and ability status as well as their family’s culture, structure, language, and economic status. In communities across the state, stakeholders expressed the desire to ensure that, no matter where a family lives or what challenges they face, every child in the state has access to quality early care and education. Understanding the population of young children in the state—including factors that contribute to their vulnerability—was identified as a necessary step toward ensuring that all children in the state can access quality early care and education and other essential services. Key steps taken to develop this understanding included conducting the statewide Focus on Nebraska Families survey and creating a shared definition of vulnerability.

### ***Focus on Nebraska Families Survey<sup>2</sup>***

The Focus on Nebraska Families survey was mailed to over 90,000 households across the state, yielding responses from 3,541 families with children birth through age 5. Overall, 81.5% of respondents reported that their child was cared for by someone other than a primary caregiver in the preceding week. This is consistent with employment estimates, which suggest that, in about 80% of Nebraska households, all adults in the household are working outside the home.

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1 While PDG-funded activities, such as the needs assessment, focus on children birth through age 5, it is important to note that in Nebraska, and in this strategic plan, early childhood is defined as birth through age 8.

2 The findings of the needs assessment here reflect data collected from families and providers in the summer of 2019. Ongoing needs assessment work in 2020 and beyond will address the impact of the COVID-19 pandemic.

The survey also captured information about conditions that may negatively impact children's development, using 15 vulnerability indicators defined by the PDG B-5 Initiative. Based on survey results, it is estimated that around 60% of Nebraska families with children age 5 and under have one or more vulnerability factors. Overall, 62% of families reported at least one condition that might negatively impact their children's learning and development. This includes 36% of families who experience two or more factors that may make their children vulnerable, 27% of families who experience poverty, and 26% of families who reported that their child has a disability.

While race and ethnicity do not directly cause vulnerability, families of color may be more likely to experience other conditions that contribute to vulnerability, such as systemic racism and discrimination. In the needs assessment, every family who identified their child as Black/ African American, Asian, American Indian/Alaska Native, or Hispanic also reported at least one indicator of vulnerability. Families of color were more likely than White, non-Hispanic families to report multiple indicators of vulnerability.

### ***Defining Vulnerability***

In addition to surveying families about vulnerability indicators, issues of vulnerability were addressed in focus groups with families, the surveys of early childhood providers and key informants, and meetings with stakeholders across the state. Based on this input and previously reported data, Nebraska developed a new definition of vulnerability that encompasses many factors that may adversely impact the learning and development of young children.

#### **What do we mean by "vulnerability"?**

Children are considered vulnerable when they experience conditions that could have a negative impact on their development and learning. Poorer developmental outcomes are expected when children experience multiple conditions.

Conditions that contribute to vulnerability include, but are not limited to, the following:

- Parent with mental illness (including maternal depression)
- Discrimination based on perceptions of a child's or family member's race and/or ethnicity
- Trauma, including adverse childhood experiences
- Poverty
- Low socioeconomic status
- Homelessness or housing insecurity
- Food insecurity
- Inadequate prenatal care
- Low birthweight
- Teen parents
- Parents without high school education

- Primary language at home other than English
- Special health needs or disability
- State care/foster care
- Immigration or refugee status
- Discrimination based on perceptions of a child’s gender identity or of family members identifying as lesbian, gay, bisexual, transgender, queer or questioning, intersex, asexual, or allied

By adopting this definition of vulnerability, program designers, policymakers, and community leaders across Nebraska now have a more complete set of factors to consider during their planning and systems change efforts.

A core assumption of the needs assessment and strategic planning efforts is that Nebraska’s children, especially those who experience vulnerability, will thrive more in an integrated early childhood system that provides seamless access to all services needed to support the child’s development and well-being.

### ***Nebraska’s Early Childhood System***

Like many states across the nation, the system of early care and education in Nebraska is a patchwork of efforts and initiatives that have developed at different times throughout our history in response to specific needs and contexts. As a result, Nebraska has a “mixed delivery” early childhood system, meaning that early care and education services are (1) delivered in a variety of settings and (2) are embedded within different parts of the economic system. For example, most schools and many community-based child care centers operate in the not-for-profit sector, whereas home-based owner-operated child care centers function as small businesses in the for-profit sector. Furthermore, a variety of services that are essential for early childhood development—such as nutrition, housing, health care, and parental support services—are also delivered through various agencies and organizations at the state, regional, and local levels. This mixed delivery system of early childhood programs and services entails various regulatory standards and monitoring requirements that are not coordinated across settings and funding sources.

To effectively plan for systemwide change across the state, it was first necessary to establish a shared definition of what constitutes Nebraska’s “early childhood system” and to develop a better understanding of the population of early care and education providers across the state.

### ***Defining Nebraska’s Early Childhood Mixed Delivery System***

Working with stakeholders across the state, the needs assessment team developed the following definition, which expands Nebraska’s earlier definition of a “mixed delivery” system and intentionally integrates components of early care and education with other essential services that support healthy early childhood development.

**What do we mean by "Nebraska's early childhood mixed delivery system"?**

Nebraska's early childhood mixed delivery system encompasses early care and education services offered in a variety of settings (such as homes, child care centers, and schools), as well as an array of other services that are essential for early childhood development (such as health care, nutrition, housing, and parenting support services). These services are delivered through various providers, programs, organizations, and agencies that have traditionally functioned as distinct and independent entities. Changes in policies and procedures at the state level are needed to support better coordination and alignment across all levels of Nebraska's early childhood system.

**Services in Nebraska's Early Childhood Mixed Delivery System**



The three main types of settings in which early care and education services are offered include various subtypes, as follows:

- Home-based settings
  - Family child care homes (licensed, license exempt, or not licensed)
  - In-home child care
  - Home visitation, including early intervention
- Center-based settings
  - Private child care centers (profit and nonprofit)
  - Preschools
- School-based settings
  - Public schools
  - Private schools

Other essential services for early childhood development, such as the health care and social services shown above, are offered by state agencies and state, regional, and local organizations to meet the needs of children and families.

By including both early care and education and other essential services in the definition of its early childhood mixed delivery system, Nebraska is directing the conversation about systems change toward improved coordination of these programs and services. Definitions of several other key terms were developed during the needs assessment process. These definitions, along with more details about the strengths and challenges in Nebraska’s existing early childhood mixed delivery system, are available in the needs assessment report and are summarized as relevant throughout this strategic plan.

### ***Nebraska’s Population of Early Care and Education Providers***

As of 2019, Nebraska’s early care and education system was composed of more than 3,100 licensed child care providers, representing home-based, center-based, and school-based settings, as well as nearly 300 providers who are not subject to licensure, including Head Start and Early Head Start grantees and preschool programs in public schools. In addition, Nebraska families also rely on family, friends, neighbors, and other unlicensed providers to care for their children. These providers could not be identified and are therefore not included in the count of providers given here, nor were they included in the survey of providers in the needs assessment.

The Early Childhood Program and Leadership survey was mailed to a total of 4,002 leaders from all child care centers, family child care homes, Head Start and Early Head Start programs, license-exempt providers, and public PreK programs in Nebraska, yielding responses from 1,337 early care and education providers. Respondents to the survey were roughly representative of the overall population of providers in Nebraska and included providers from metropolitan areas (42.1%), micropolitan areas (44.1%), and rural areas (13.9%). (These numbers indicate a slight overrepresentation of providers in micropolitan areas and a slight underrepresentation of providers in metropolitan areas.) Key findings from the provider survey are presented throughout this strategic plan.

## **STRATEGIC PLANNING: CREATING A MORE INTEGRATED EARLY CHILDHOOD SYSTEM IN NEBRASKA**

Findings from the needs assessment provided a strong foundation for the strategic planning process. Through this process, Nebraska is striving to create a more integrated early childhood system by changing how the components of that system work. Currently, components of the system—including early childhood organizations, agencies, programs, and service providers—often function as distinct and independent entities.

Nebraska now seeks to establish a more interconnected, intentionally coordinated, and easily navigated network of components. Members of this network will work collaboratively to support all young children and their families in accessing quality early care and education programs as well as the other essential services for early childhood development that help children thrive. The efforts to create more integration emerging from this strategic plan will build on numerous ongoing initiatives to create more collaboration and cooperation between and among organizations at the community, regional, and state levels.

The strategic planning process prioritized engagement with a wide range of stakeholders. In fall 2019, Nebraska’s Early Childhood Interagency Coordinating Council received an overview of the needs assessment findings and designated a task force to oversee the strategic planning process. Input from stakeholders was gathered through in-person and virtual Strategic Planning Advisory Team meetings in communities across the state. In these meetings, participants discussed key gaps and opportunities for improvement in Nebraska’s early childhood system, and they shared recommendations for strategic actions to achieve desired outcomes. Stakeholders provided recommendations for how to fill the gaps and address barriers based on their experiences as providers, early childhood professionals, teachers and administrators, community leaders, resource coordinators, and parents. In addition, stakeholders articulated core values to guide Nebraska’s approach to systems change.

### ***Values to Guide Systems Change in Early Care and Education in Nebraska***

The following values informed the development of the strategic goals and will guide systems change efforts throughout the implementation of this strategic plan:

- **Equitable access for all children and families.** No matter where a family lives or what challenges they face, including special health care needs and mental health needs, every child in Nebraska deserves access to quality early care and education and other essential services.
- **A whole child approach to healthy development.** Children thrive best when supported by an early childhood system that is aligned around a philosophy of care and quality that incorporates physical, social, emotional, and educational needs of children and their families.
- **Shared responsibility for creating an effective early childhood system.** Everyone—including parents, early childhood professionals, schools, businesses, community leaders, state agencies, nonprofit organizations, and elected officials—has a vested interest in supporting the healthy development and learning of each child.

- **Community leadership and collaboration.** Community leaders, including families and early childhood educators, work together to leverage local strengths and resources to determine how best to meet the needs of families with young children within specific communities.
- **Continuity of care.** Policies and processes are most effective in supporting healthy development of children when they facilitate the coordination of resources, creating a more integrated early childhood system that provides seamless access to all services needed to support every child’s development and well-being.
- **Wise stewardship of resources.** Building on existing systems and partnerships, deliberate decisions are made based on the best available data, and strategies are chosen based on evidence of their effectiveness.
- **Continuous improvement.** The integrated approach to building sustainability of ongoing needs assessment, strategic planning, and performance evaluation ensures that Nebraska expands its capacity for creating sustainable change at the community and state levels.

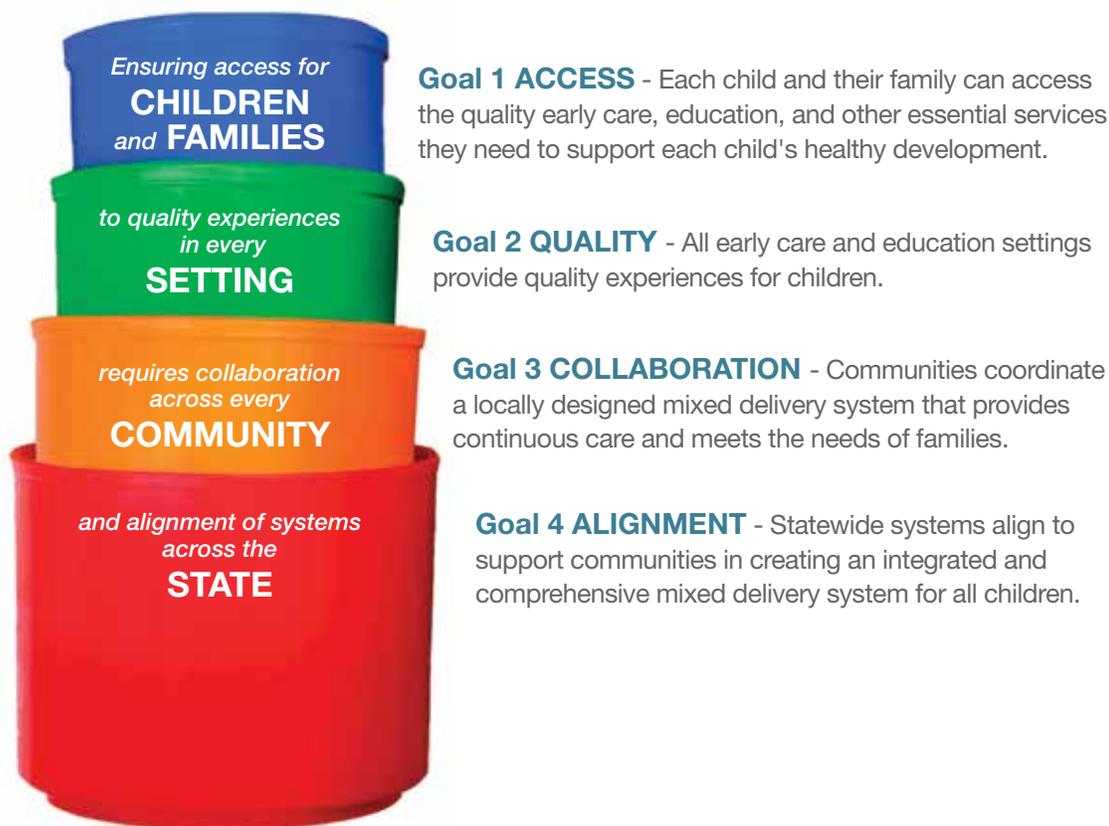
In alignment with the core values articulated by stakeholders—and based on a review of feedback from Strategic Planning Advisory Team meetings, key findings from the needs assessment, and action plans from other statewide efforts—the overarching vision, four strategic goals, and corresponding objectives were developed.

# Strategic Plan Vision, Goals, and Objectives

The overarching vision of the Nebraska Early Childhood Strategic Plan is to provide all Nebraska children and their families with access to quality early childhood services that support children's healthy development from birth through age 8.

To achieve this vision, we will pursue four interrelated goals. These four goals are intended to create a more integrated early childhood system—and work on any one of the goals will impact and inform the other goals.

Objectives provide clear targets for each goal. Together, the goals and objectives provide an organizing framework for the work ahead that is based on shared definitions of key concepts and responds to identified needs, as described in the following sections.



# Goal 1: Access



**GOAL 1: Each child and their family can access the quality early care, education, and other essential services they need to support each child’s healthy development.**

**Objective 1.1** *Increase availability of quality early care and education services in communities across the state by creating funding strategies that pay providers for the full cost of quality services.*

**Objective 1.2** *Increase families’ access to quality early care and education services by improving continuity of care and removing barriers.*

**Objective 1.3** *Create coordinated and aligned resource, referral, and enrollment systems across the state, regional, and local levels that make it easier for families to find and enroll in (or access) quality early care and education services.*

**Objective 1.4** *Increase access to essential services especially for vulnerable families and families living in rural areas.*

Goal 1 focuses on ensuring equitable access to quality early care, education, and other essential services for every child and every family in the state. For children to receive quality early care and education services, such services must be available in the communities in which they live and accessible to their families. The terms availability and access are both relevant to families’ search for quality care for their children, but they are not interchangeable.

## **What do we mean by "availability" and "access"?**

Availability refers to having enough early care and education options in a given community—in terms of capacity, quality, and types of services—to meet the needs of families living in the community.

Access refers to a family’s ability to actually enroll their child in the early care and education setting that best meets the child’s and family’s needs, without facing undue barriers.

The objectives for Goal 1 target the systems changes that are needed to increase availability of and access to quality early care, education, and other essential services in communities across the state.

### **1.1 Increase availability of quality early care and education services in communities across the state by creating funding strategies that pay providers for the full cost of quality services.**

The needs assessment provided a unique opportunity to understand how early care and education services are currently used by families across the state. Overall, 81.5% of families in the survey reported that their child was cared for by someone other than a primary caregiver in the preceding week. The majority of families reported using a home-based provider as their primary source of care and education (66%). Families reporting vulnerability factors were much more likely than families without those factors to use a home-based provider. In addition, the families reporting vulnerabilities (38%) and those living in remote rural areas (36%) were more likely than others to use unlicensed providers.

In many areas of the state, the demand for affordable, quality early care and education services exceeds the supply. Key needs and challenges related to increasing the availability of quality services across Nebraska include the following:

- **The needs assessment revealed a significant lack of available space in the early care and education system.** Among those who responded to the providers' survey, 73% reported that they turned families away due to lack of space. Over 50% of the providers reported having a wait list, with center-based and micropolitan providers reporting a wait list most often, and school-based and metropolitan providers reporting the longest wait lists. The majority of providers reported that they had no vacancies for infants and toddlers, and home-based providers reported having the fewest vacancies. Of those who responded to the survey, those in remote rural areas (76%) reported a lack of available options more often than those in metropolitan (48%) or micropolitan areas (61%).
- **Nebraska has a shortage of affordable, quality early care and education options.** Results from a previous statewide survey (Nebraskans Speak About Early Care and Education, conducted by the Buffett Early Childhood Institute and Gallup), also indicate that quality early care and education is not available or affordable for all families in the state. A family's ability to access quality early care and education is often dependent on how much they can afford to pay. Many communities do not have the resources to provide families with a variety of early care and education options—particularly quality options. Even when quality options are available, many families do not have the financial resources to pay for the quality of care they want for their child.

In its January 2020 report, *Elevating Nebraska's Early Childhood Workforce*, the Nebraska Early Childhood Workforce Commission makes the case that any effort to increase availability of early care and education options must also ensure the affordability and quality of those options. As reported by the commission:

- **We lose more than we gain when we sacrifice access to quality early care and education for affordability.** A dollar spent on mediocre- or low-quality care is a lost opportunity to invest in the future. In contrast, a dollar spent for quality early care and education yields an average return of \$4, and in circumstances where children are

extremely vulnerable, the return can be as high as \$13. This return includes money saved on special education, health care, social services, and the criminal justice system, as well as money earned from greater educational attainment, increased earnings, and improved productivity.

- **Programs intended to assist parents with the cost of early care and education are not designed with children's needs or business stability in mind.** Government programs originally designed to support parental employment by helping to pay all or part of child care expenses, such as child care subsidy, do not pay service providers enough to cover the actual cost of providing those services. In the providers' survey, half of the providers reported that they did not accept the child care subsidy because of complicated administrative processes and low reimbursement rates. In short, service providers who accept child care subsidy payments do so at a net loss to their bottom line or personal budget. Further, such assistance programs for employment support can actually undermine enrollment stability, making a child's early learning and development contingent upon a parent's employment status rather than basing it on the child's developmental needs.
- **Increasing availability of affordable, quality early care and education for all Nebraskans requires investment.** The total cost of quality early care and education is funded by combining public and private investments that ensure every child in Nebraska has access to quality care and education regardless of the setting their parents choose for them. The public sector, in partnership with the business and philanthropic communities of the private sector, must work together to ensure that no family seeking quality early care and education services is priced out of participation, safeguarding the imperative to provide equitable access to quality services for every young child in Nebraska.

### ***Moving Forward***

Goal 1 of this strategic plan is based on the understanding that increasing the availability of quality early care and education is inextricably linked with the need to create new funding strategies that pay providers for the full cost of quality services. This will involve policymakers, community leaders, business leaders, and providers coming together to find new ways to collaborate, build partnerships, and expand funding sources, with a focus on helping providers maintain stable revenue. Goal 1 is closely related to and dependent on Goal 4, which involves revising state-level policies and procedures to facilitate new funding strategies.

### ***1.2 Increase families' access to quality early care and education services by improving continuity of care and removing barriers.***

A family's ability to enroll their child in an early care and education program that meets their needs is contingent upon a number of factors. Findings from the needs assessment reveal that three major barriers constrain families' ability to access the care and education that they need for their children: availability, cost, and flexibility. For example:

- **Lack of vacancies in early care and education programs is a fundamental barrier to access.** As noted above, for many families, there are simply not any available placements that meet their needs. In response to a survey question about challenges to finding early

care and education, 35.7% of families said they were challenged by having too few options. Not surprisingly, this challenge is disproportionately experienced by families in remote rural areas (75.7%) compared to those in metropolitan (47.6%) or micropolitan areas (60.9%).

- **Cost was the barrier most often reported by families as a barrier to enrolling their child in child care.** A family's ability to access quality early care and education is often dependent on how much they can afford to pay. Even when quality options are available, many families do not have the financial resources to pay for the quality of care they want for their child. Cost was a greater barrier for families in metropolitan (53%) and micropolitan (48%) areas than for those in remote rural areas (36%). Families that reported vulnerability factors were nearly four times more likely to report that it was difficult or very difficult to pay for their child care.
- **The current family eligibility criteria for the child care subsidy limit continuity of care for children from families who experience vulnerabilities.** Early care and education services for families experiencing vulnerabilities are not consistent across the birth to 5 continuum. Families may qualify for programs that provide care and education for their child from birth to age 3, but there is then nothing available to support the child until they can enroll in public PreK at age 4. Policy changes are needed to make it more likely that eligible families can successfully enroll their child in continuous, quality early care and education services from birth through age 5.
- **Many families are challenged to find early care and education arrangements that accommodate their scheduling needs.** Among families surveyed, 29.2% reported that they had experienced lack of flexible hours as a challenge to finding early care and education. In focus groups, families described scenarios in which, due to the cost of early care and education, they must arrange their employment schedules so that they do not need full-time care, staggering schedules with a partner or working nontraditional shifts. This creates a need for part-time or irregular care arrangements that are not offered by many providers. Most families (75%) said care with more flexible hours was important to them, but they had difficulty finding it.

### ***Moving Forward***

Increasing access to quality early care and education services will require removing barriers to improve continuity of care. Barriers to be addressed by the plan include availability, affordability, and scheduling flexibility of child care, as well as other barriers reported by families, such as problems with transportation to and from early care and education settings, as well as lack of access to essential support services, including mental health services (see objective 1.4). Families and stakeholders also described the need to address unique issues related to transportation, flexibility of hours, and additional costs faced by families of children with disabilities. In addition, the plan emphasizes the need to identify and support young children with learning disabilities, behavioral problems, or mental health needs, and provide supports to eliminate suspension and expulsion practices in early care and education programs (see Goal 2).

### ***1.3 Create coordinated and aligned resource, referral, and enrollment systems across the state, regional, and local levels that make it easier for families to find and enroll in (or access) quality early care, education, and other essential services.***

Another major concern that emerged from the needs assessment was that there is not a widely known, reliable source of information for families about available early care and education options. This leaves families to rely on informal and less reliable sources. For example:

- Most families (80%) relied on friends and family for information about services for children 5 and under. Web searches were also commonly used (62.7%).
- More than half (57%) of families report that they get information from their local school district about services for their children 5 and under.
- Nearly all families surveyed (more than 90%) reported that they would like to have a list of early care and education providers in their area with information about cost, quality ratings, availability, and user reviews.
- Families who reported having vulnerability factors said they also need additional information and resources to navigate the various forms of free or low-cost care that are available to low-income families (e.g., Head Start/Early Head Start, child care subsidy, public school programs, and Educare).

#### ***Moving Forward***

Efforts are needed to strengthen the state's infrastructure to better support communities in connecting families to services. This will include facilitating access for families experiencing vulnerabilities by strengthening and expanding existing "navigator" services, improving existing state and community resource and referral tools, and simplifying enrollment systems across early care and education programs and other essential services.

### ***1.4 Increase access to essential services especially for vulnerable families and families living in rural areas.***

All families responding to the Focus on Nebraska Families survey reported using essential services, such as medical and mental health care and dental care. The families who reported vulnerability factors reported much more difficulty accessing the full range of essential services they need. There are many services for which families experiencing vulnerabilities have greater need, due in part to the very circumstances that make them vulnerable. These include support for children's social and emotional development, nutrition assistance, Medicaid, job training, and support for families experiencing domestic violence. Among respondents who indicated having children with disabilities, 28.4% indicated that it was somewhat difficult, 9.6% indicated that it was very difficult, and 1.5% indicated that it was not possible to obtain care. In focus groups with families in rural areas, participants explained that certain types of services simply are not available in their community.

In the needs assessment, we explored the role of early care and education providers in helping families access essential services. Because of their regular interactions with children and families, early care and education providers have the potential to serve as a critical link

connecting families to the essential services they need. However, the needs assessment findings suggest that very few providers currently fulfill that function. Less than 10% of providers offer essential services to families directly, and only about 20% of providers report that they refer families to essential services.

***Moving Forward***

The strategic plan calls for assessing gaps in the availability of essential services for early childhood development and expanding access to those services with a focus on better serving children and their families who are experiencing vulnerabilities and those who live in rural areas.

## Goal 2: Quality



### **GOAL 2: All early care and education settings provide quality experiences for children.**

- Objective 2.1** *Establish shared, statewide definition of quality to shape and direct all early care and education systems change efforts.*
- Objective 2.2** *Promote the provision of quality early care and education throughout the state by promoting, supporting, and training the early childhood workforce.*
- Objective 2.3** *Promote the provision of quality early care and education through improved family engagement practices.*
- Objective 2.4** *Promote the provision of quality early care and education by assessing the physical spaces and facilities where children receive care.*
- Objective 2.5** *Increase the provision of quality early care and education throughout the state using the Step Up to Quality system.*

Goal 2 of this strategic plan focuses on ensuring that the care provided to each child in the state is quality care, consistent with a definition of quality that aligns with what Nebraskans value. Traditionally, the definition of “quality” in early care and education, in Nebraska and in the wider national early care and education system, has focused on features of the care environment, creating a common perception that quality happens in the setting around the child. This perception is reflected in assessment practices in Nebraska, where the quality of early care and education has most commonly been assessed at the program level, with an emphasis on health and physical safety provisions. While such environmental provisions are important, they do not account for the child’s experience of quality, which involves other factors that are known to have the most impact on children’s development—such as the nature of the interactions between children and the adults who care for them. Yet, these are the factors that Nebraskans value most, as reflected in the following findings from the needs assessment:

- **Nebraska families value a “whole child” approach to quality. In surveys and focus groups, parents defined quality largely in terms of their child’s relationship with their teacher or caregiver.** When choosing care and education for their young children, parents said they valued staff who are warm, kind, and well educated; communicate with them frequently about their child’s development; and support whole child development by addressing physical, social, emotional, and educational needs of children and families in a clean, sanitary environment. Other factors, such as cost, curriculum, licensure, location, and even recommendations from friends and family, were comparatively less important

to parents. Families who reported vulnerability factors were more likely to say they based their decision on whether the provider is affordable and accepts child care subsidies. They also place comparatively more value on providers' ability to accommodate special needs, connect them with resources in the community, and provide bilingual education.

- **Providers rated child-teacher interactions as the most important aspect of program quality, followed closely by physical environment and materials.** Providers overall rated curriculum, assessment, and program administration as less important for quality, but center- and school-based providers gave higher ratings to these characteristics than home-based providers.

The objectives of Goal 2 are intended to establish a shared definition of quality that is centered on the child's experience of quality and to ensure that this definition guides improvement and assessment efforts across all components of the early care and education system.

### ***2.1 Establish shared, statewide definition of quality to shape and direct all early care and education systems change efforts.***

Through the needs assessment and strategic planning processes, Nebraska has developed a new definition of quality early care and education for the state.

#### **What do we mean by "quality early care and education"?**

Quality in early care and education is defined in terms of each child's experience. A child experiences quality early care and education as physical and emotional safety in the context of frequent, warm, one-on-one interactions with a caring adult who engages the child in language rich and educational activities. To increase the likelihood that a child experiences quality, early care and education settings are structured to promote the well-being of early childhood professionals and to foster the child's healthy development and learning. The delivery of quality care and education across settings is facilitated by policies and continuous quality improvement practices that prioritize the child's experiences.

Adults in all settings promote quality experiences through:

- Sensitive and responsive interactions with each child
- Developmentally appropriate instruction that engages the whole child (physical, emotional, cognitive, social) and is individualized to each child's unique skills and needs
- Engagement with families in the care and education of their children and in learning about their child's development
- Inclusion of the families' and children's culture and language

Early childhood settings promote quality experiences through:

- Caregivers and teachers who have the qualifications and training they need to build positive relationships with the children and families they serve

- A professional environment that promotes the physical and mental well-being of caregivers and teachers by providing appropriate compensation and professional supports
- Learning resources and structures—such as classroom materials, routines, and teacher-student ratios—that are designed to meet the developmental needs of the children being served
- Facilities and equipment that are clean, safe, and designed to foster children’s healthy development and learning

Local, state, and federal agencies and organizations promote quality experiences through:

- Economic, social, regulatory, and funding policies designed to enable early care and education providers to cover the costs of quality programs delivered by qualified professionals
- Continuous quality improvement practices that include observations of the child’s experiences of quality in addition to observations of the structure and facilities of the care setting

### ***Moving Forward***

Nebraska will further develop this definition by describing characteristics of quality care and education across different settings. In addition, Nebraskans will work to expand the use of this new definition into as many contexts as possible so that the child’s experience of quality is the focus of everyone’s work. For example, the strategic plan calls for incorporating the new definition of quality into the following:

- Professional development materials and programs
- Community-level collaboration plans for improving early care and education
- State programs, policies, and operations related to early care, education, and other essential services for early childhood development
- Curricula for preparing early childhood professionals
- Early childhood assessment tools and programs
- Public and private programs that deliver early care and education

### ***2.2 Promote the provision of quality early care and education throughout the state by promoting, supporting, and training the early childhood workforce.***

Nebraska’s new definition of quality early care and education highlights the important role that the early childhood workforce plays in providing quality care. Among the factors that contribute to quality early care and education programs, none is more important than the quality of the professionals delivering those programs. Perhaps the greatest opportunity to improve quality in Nebraska’s early care and education system lies in building the capacity and professionalism of the state’s early childhood workforce.

From 2017 to 2019, the Nebraska Early Childhood Workforce Commission, a collaborative group of more than 40 public- and private-sector leaders, worked in collaboration with others from across the state to identify the strengths and challenges of Nebraska’s early childhood workforce. The commission published its findings in the January 2020 report, *Elevating Nebraska’s Early Childhood Workforce: Report and Recommendations of the Nebraska Early Childhood Workforce Commission*. As described in this report, Nebraska’s early childhood workforce confronts numerous challenges, including the following:

- **Varied early care and education settings.** Nebraska’s early childhood professionals work in various settings—including homes, child care centers, and schools—and expectations and requirements for their professional practice vary based on setting and funding. Although there is no shared understanding of what constitutes quality early care and education across settings, the needs of children do not differ based on where they receive their care and education.
- **Inconsistent regulations.** Regulatory inconsistency across early care and education settings has significant implications for the early childhood workforce, affecting such qualification indicators as teacher licensure and credentialing. Members of Nebraska’s early childhood workforce confront contradictory expectations based on where they work rather than consistent professional standards based on what their day-to-day work with children entails.
- **Low wages.** In 2016, the median wage in our state for early childhood professionals teaching in community-based child care centers was \$18,706 per year—nearly \$1,400 below the federal poverty line for a family of three. Because of this, 27 percent of home-based early childhood professionals and 20 percent of center-based professionals in Nebraska rely on some form of public assistance just to make ends meet.
- **High turnover.** Not surprisingly, low wages and lack of supportive professional environments create significant hardships for many early childhood professionals, resulting in high turnover and high rates of depression. In a statewide survey conducted by the Buffett Early Childhood Institute, more than three-quarters of child care centers reported that they experienced turnover of lead teachers or assistant teachers during the prior year.

Challenges such as these make it difficult for Nebraska’s early care and education providers to recruit and retain qualified staff. In the needs assessment, both families and providers expressed frustrations regarding staffing. For example:

- **Families described several barriers to their child’s experience of quality, nearly all of which relate to staffing.** Many families expressed a frustration with high rates of staff turnover and settings that were short-staffed, because these conditions interfered with the caring, one-on-one interactions that families want for their children.
- **Nearly half of providers indicated that it is difficult for them to hire staff with appropriate qualifications, with center-based and metropolitan providers experiencing more difficulty.** Overall, providers reported that 28% of all caregivers

in their programs had obtained a bachelor's degree. Programs in remote rural areas have a higher percentage of professionals with bachelor's degrees (35%) than those in micropolitan (26%) or metropolitan (27%) counties.

At the same time, members of the early childhood workforce face a variety of challenges that make it difficult for them to access the professional development and educational opportunities they need to further develop their skills and knowledge. For example:

- **Access to professional development for members of the early childhood workforce varies based on setting.** School-based providers are four times more likely than home-based providers to report that they offer formal conferences to talk to staff about their progress, and ten times more likely to report that they provide mentoring programs for their staff. Online training, Early Childhood Training Centers, and Educational Service Units were reported as the most frequently accessed sources of professional development. Overall, compared to center- or school-based providers, home-based providers reported their caregivers had less access to professional development resources. Providers reported that the most common barriers to staff participation in professional development are when sessions are offered at inconvenient times (e.g., when staff are working) and difficulty finding substitute caregivers.
- **Access to professional supports for the workforce also varies based on setting.** For example, school-based providers were much more likely to report that staff have access to a family support resource, mental health consultant, or guidance counselor to help support children with challenging behavior.
- **Some members of the early childhood workforce face barriers to higher education.** The Nebraska Early Childhood Workforce Commission reports that current and aspiring early childhood professionals from some communities and groups in Nebraska face significant socioeconomic and/or educational-opportunity barriers that prevent them from pursuing higher education.

### ***Moving Forward***

If we are to recruit and retain the early childhood workforce Nebraska needs, we must ensure that early childhood professionals are adequately compensated for their work and have the professional supports they need to provide quality care and education to all children and families they serve. The strategic plan calls for building on the work of the commission, with a focus on the following:

- Developing a competency-based framework that defines common conceptual understandings of quality
- Providing professional development pathways that are affordable, accessible, and equitable
- Expanding options for and increasing access to professional development for providers across settings, to include increasing supports available to home-based providers
- Strengthening the state's coaching workforce to better meet providers' needs

- Enhancing capacity of the workforce to meet the needs of children with special needs and disabilities
- Enhancing the well-being of the workforce by ensuring they have adequate wages, benefits, and other support services

### ***2.3 Promote the provision of quality early care and education through improved family engagement practices.***

Providing quality early care and education includes engaging families effectively. When parents have clear information about their child’s development and needs, and when they are engaged in their child’s care setting, they are better able to support their child’s development and learning. Quality early care and education programs, therefore, approach family engagement thoughtfully. With a clear intention to be inclusive, they adopt family engagement practices that are racially, culturally, and linguistically responsive to all children and families they serve.

The needs assessment data suggest that there is a need to improve communication between families and early care and education providers. In the survey of Nebraska families, parents reported that they value providers who communicate with them frequently about their child’s development (92.5%). However, parents also reported that they had rarely or never talked to providers about parenting issues (77%), improved educational opportunities for their children (71%), or their child's development (43%). The topic parents most frequently talked about with providers was their child's behavior (63%). Similarly, providers reported low rates of engagement with parents, with 50% of providers reporting that none of the families in their program participate in parent-teacher conferences.

#### ***Moving Forward***

The strategic plan calls for increasing the supports available to providers to help them adopt effective and responsive strategies to engage parents as partners and to communicate more effectively about children’s development and needs. In addition, the plan calls for providing parents with the information and tools they need to nurture their child’s growth, development, and education.

### ***2.4 Promote the provision of quality early care and education by assessing the physical spaces and facilities where children receive care.***

In the needs assessment, Nebraska stakeholders identified several factors of early care and education settings that contribute to the safety, developmental appropriateness, and quality of the physical environment. These factors include, but are not limited to, the following:

- Practices to ensure physical health and safety (including safe food handling, appropriate storage of cleaning products and medicines, cleaning and sanitizing practices, toy and equipment safety, etc.)
- Toilets, sinks, and other fixtures and furniture that are easily accessible to children, including children with disabilities
- Appropriate amount of physical space for the number and age of children being served in each classroom or home for play, education, and nap time

- Playground and outdoor spaces that allow children to connect with nature and promote physical activity
- Bathrooms adjacent to classrooms and to playgrounds when possible
- Appropriate acoustics
- Windows in classrooms and common areas
- Soothing colors, open spaces, and different types of lighting that are comfortable, homelike, and inviting
- Entryways, common areas, and hallways that foster engagement with other children and teachers

Because the physical spaces of early care and education settings vary significantly, not all of these factors apply to all settings, but the first factor—regarding physical health and safety issues, including cleanliness—is relevant in every setting. In the family survey, a clean and sanitary environment was rated among the most important factors that families consider when choosing an early care and education setting for their child. In focus groups, some families expressed concern about the poor condition of facilities in their area. Some families, particularly Black and Latino families, felt torn between choosing a clean, modern facility and one that felt safe and comfortable for them and their child.

Among providers, 11.7% reported that facilities issues were a barrier to their participation in the state’s quality improvement program, Step up to Quality as described in 2.5.

### ***Moving Forward***

Additional assessment is needed to better understand the nature and scale of concerns Nebraskans have about early care and education facilities and to support providers in making the improvements necessary to ensure quality in their physical spaces and facilities.

### ***2.5 Increase the provision of quality early care and education throughout the state using the Step Up to Quality system.***

Nebraska’s quality rating and improvement system, Step Up to Quality, provides a path for providers to improve the quality of early care and education. In addition, Step Up to Quality is designed to improve child development and school readiness outcomes, provide families with a tool to evaluate the quality of child care and early childhood education providers, and provide accountability for public funds invested in early care and education. With a focus on increasing quality and accountability in the state’s early childhood system, Step Up to Quality focuses on core areas of quality that represent provisions that are believed to contribute to children’s experience of quality care and education. These areas include curriculum, learning environments, teacher-child interactions, child outcomes, professional development and training, family engagement and partnerships, and program administration.

Programs that participate in Step Up to Quality progress through five steps that are intended to denote increasing levels of quality. In 2019, there were 183 Step 1 Programs, 125 Step 2 Programs, 54 Step 3 Programs, 41 Step 4 Programs, and 19 Step 5 Programs. Coaching and financial incentives become available when providers reach Step 3 of 5.

Currently, participation in the Step Up to Quality program is low among eligible providers and lowest among home-based providers.

### ***Moving Forward***

The strategic plan calls for investing in the following changes to the Step Up to Quality system:

- Adapt the Step Up to Quality system to better reflect the state's new definition of quality, which focuses on the experiences of the child.
- Make the system processes more flexible and efficient for providers.
- Tailor the system to meet professional development and quality improvement needs of all provider types.

In addition, the strategic plan calls for expanding public outreach and education to promote use of the Step Up to Quality system, creating incentives to encourage providers' participation in the system, and establishing an ongoing review schedule to evaluate the effectiveness of the system.

# Goal 3: Collaboration



**GOAL 3: Communities coordinate a locally designed mixed delivery system that provides continuous care and meets the needs of families.**

**Objective 3.1** *Create more collaboration among early care and education providers, schools, families, coaches, and businesses in communities and regions across the state.*

**Objective 3.2** *Provide models for communities to build customized collaboration plans that meet local families' needs.*

**Objective 3.3** *Build or expand capacity within communities to support continuity of quality care for children making transitions across early care and education settings, including those from early care and education settings to Kindergarten.*

Success in building an integrated early care and education system that provides quality care to each child depends on coordination of community-level and statewide resources, which requires strong relationships and effective communication among stakeholders representing all sectors of the system. Goal 3 focuses on supporting local community leaders, early childhood providers, and school personnel to build their capacity to coordinate local resources for families and their children.

### **3.1 Create more collaboration among early care and education providers, schools, families, coaches, and businesses in communities and regions across the state.**

Nebraska has a strong history of community-level leadership and collaboration in early care and education, and examples of coordination within and across the early care and education system exist at the state, regional, and local levels. Such coordination, however, is not consistently found across all communities and regions in the state. For example, in the needs assessment survey, early care and education providers were asked to describe how they engage with other providers and schools. Their responses suggest that while there is some cooperation between schools and providers, there is little true collaboration. The most common types of cooperation reported were providing before- and after-school care, transportation to and from school, and enrichment activities during school breaks. Only 27% to 37% of providers reported engaging with school personnel in activities such as the following:

- Communicating about children's needs
- Preparing transition plans
- Participating in meetings for children with special needs
- Participating in professional development activities together

Key informants and stakeholders suggested that the lack of collaboration between providers and public schools is due, in part, to the fact that public school teachers and staff do not see the benefit of collaborating with home- and center-based professionals and do not regard them as peers. Home-based providers reported the fewest connections to other providers and less access to professional development resources in the community, as compared to center-based and school-based providers.

### ***Moving Forward***

Authentic collaboration begins with building relationships that are based on mutual understanding, trust, and a commitment to prioritize shared goals over individual interests. The strategic plan calls for increasing collaboration and community-level coordination by building on existing community coalitions in the state and sharing best practices for creating new collaborations across sectors.

### ***3.2 Provide models for communities to build customized collaboration plans that meet local families' needs.***

Given the rural-urban continuum of communities in Nebraska, and the socioeconomic and cultural diversity of populations in those communities, there is no single model of coordinating early care and education programs and services that will meet the needs of every community in the state. Instead, stakeholders in each community or region will need to collaborate with each other, in consultation with other communities and statewide organizations and agencies, to develop coordination plans that meet the needs of children and families in their area. Existing models of effective coordination within and across the early childhood system will provide the foundation for such plans.

The needs assessment team identified multiple organizations that support and participate in statewide collaboration efforts across the early childhood system, including the following:

- Early Childhood Interagency Coordinating Council
- Nebraska Early Childhood Collaborative
- Nebraska Children and Families Foundation
- First Five Nebraska
- Nebraska Department of Education
- Nebraska Department of Health and Human Services
- Nebraska Early Childhood Workforce Commission
- Nebraska Early Childhood Data Coalition
- Early Childhood Planning Region teams (29 across the state)
- Early Learning Connection Coordinators

In addition, multiple initiatives supported by state resources are underway with the intention of building collaboration at the community level. Some of these initiatives have been rolled out statewide, and some are still pilots in only one or two communities. Examples of community-level coalitions and collaboratives include the following:

- Sixpence Early Learning Fund
- Nebraska Early Childhood Pyramid Model

- Community Collaboratives
- Bring Up Nebraska
- Communities for Kids
- All Our Kin
- Superintendents' Early Childhood Plan

In the needs assessment, key informants revealed that many of these initiatives are unfamiliar to them. Furthermore, key informants identified several factors that can hinder collaboration with other organizations, including the following:

- Competition between organizations
- Lack of time to meet
- Lack of staff and/or capacity
- Restrictive or limited funding
- Location or distance between organizations
- Lack of awareness or understanding of other organizations' roles and what they offer

### ***Moving Forward***

The strategic plan calls for developing a statewide infrastructure to help support coalition building within and across Nebraska's communities. Building on Nebraska's existing models of collaboration and coordination, organizations in the statewide early childhood system will work together to define how each can best support greater capacity in local systems and provide resources for communities to design and implement their own early childhood coordination plans. As each community, or group of communities in a region, creates more coordinated and integrated early childhood systems, they will do so by building on the strengths and resources that are locally available to meet families' needs. When community leaders identify gaps in their local system, they may turn to other communities or to state-level organizations to seek information or resources to begin to fill those gaps. Ultimately, the more coordination and alignment at the state and community levels, the easier it will be for families to access the services they need for their child's healthy development.

### ***3.3 Build or expand capacity within communities to support continuity of quality care for children making transitions across early care and education settings, including from early care and education settings to Kindergarten.***

Enhancing collaboration and coordination among early care and education providers, schools, and families is an important step toward improving the continuity of care in communities across Nebraska. Positive transitions from one early care and education setting to the next create stability and promote children's positive developmental and learning outcomes. Across Nebraska, families and early care and education providers are seeking assistance in understanding how best to promote positive transitions for young children, including what is needed to prepare children for Kindergarten.

In the needs assessment, key informants ranked factors important to preparing children for Kindergarten. Their highest-rated factors were (1) the need for parents to read to their children

and (2) the need for children with special needs to be identified and receive services before entering school. Other factors they identified included (1) children and parents visiting the Kindergarten classroom prior to entering school and (2) communication between Kindergarten teachers and professionals who work with children birth through 5 about what is expected of children in Kindergarten.

The needs assessment survey of providers revealed that most providers do not engage in any practices to support children's transition to Kindergarten. Overall, 47% of providers reported having children visit a Kindergarten classroom. Less than 30% reported that they communicate directly with families or Kindergarten teachers to prepare children for this transition. In focus groups, many families expressed concerns that their children would not experience quality in the transition to Kindergarten. Their concerns included the following:

- Length of the school day and whether their child could stay focused and engaged for such a prolonged period
- Kindergarten activities may be too structured and not allow for play, exploration, and creativity
- Too much emphasis on testing and assessment
- Bullying and that the teacher may not prevent or respond to the problem

### ***Moving Forward***

Nebraska needs to develop a better understanding of what supports children and families need to ensure success in Kindergarten, and how schools and community programs can provide that support. A study of transitions that occur between birth and age 5 would support this understanding. In addition, the strategic plan calls for identifying effective strategies for building relationships between and among early care and education providers and school personnel, as well as among community leaders, families, and other stakeholders. Working together, these stakeholders would be able to identify new or expand the use of existing models and resources that support providers and schools in implementing effective transition practices and ensuring continuity of care for every child.

# Goal 4: Alignment



**GOAL 4: Statewide systems align to support communities in creating an integrated and comprehensive mixed delivery system for all children.**

- Objective 4.1** *Create more alignment and integration of vision and planning across state-level organizations, including agencies, nonprofits, private and philanthropic organizations, and advocacy groups.*
- Objective 4.2** *Promote the importance of early childhood and the value of quality early care and education to the community, state, and economy.*
- Objective 4.3** *Expand the state's capacity to support coordination and alignment of early childhood programs and services through integrated data systems that track outcomes and support decision making at the state and community levels.*
- Objective 4.4** *Conduct ongoing needs assessment and strategic planning efforts to expand the knowledge gained and to continue to inform the efforts to transform the early childhood system.*

The focus of Goal 4 is to implement systems changes at the state level that will support better coordination and alignment across all levels of the early childhood system. Starting with an aligned vision for early care and education that will shape funding and policy decisions, this goal will promote the value and importance of early care and education to all Nebraskans and build the state's capacity to capture and use more integrated data to inform future decision making and improve access to quality early childhood services. Finally, this goal charges the state to continue to learn about the gaps in the system through ongoing needs assessment and to continue stakeholder-driven strategic planning.

## **4.1 Create more alignment and integration of vision and planning across state-level organizations, including agencies, nonprofits, private and philanthropic organizations, and advocacy groups.**

In general, all the partners in the state's early childhood system are working toward improving outcomes for young children through their programs and services. However, the needs assessment revealed that the organizations working in Nebraska's mixed delivery early childhood system are often not familiar with the work of other organizations and do not have an understanding of how their own work complements or conflicts with the work of others. The Nebraska Early Childhood Strategic Plan provides a strategic framework for developing shared understandings and increasing coordination among partners and stakeholders.

The strategic plan establishes Nebraska’s intent to create a more integrated early childhood mixed delivery system in which children continuously experience quality services from birth through the transition to school. With this shared intent and the supporting strategic vision, goals, and objectives, the state can begin to address the systemic barriers that prevent families, especially families with vulnerability factors, from accessing quality early childhood services. Many of these barriers stem from state-level policies and procedures, including funding and administrative policies that restrict access to services. For example:

- **Early childhood programs must apply for and combine funding from multiple sources, some of which have inconsistent quality standards, in order to cover operating expenses.** In its analysis of funding available to the early childhood system, the Nebraska Early Childhood Workforce Commission mapped the paths that federal and state funds take to reach providers, families, and the early childhood workforce. This effort demonstrated that the funds flow through a network of policies and programs that contain standards and rules that are not coordinated or may even conflict. As a result, providers must spend time and energy navigating the policy and regulation requirements necessary to “braid” funds from different sources in order to bring in adequate operating revenue. The administrative effort required to braid funding draws their time and energy away from the children in their care.
- **Programs intended to assist parents with the cost of early care and education are not designed with children’s needs or business stability in mind.** As described under Goal 1, cost is one of the top barriers that families face in accessing quality early care and education programs and other essential services. One of the state’s tools to address the cost barrier for families is the child care subsidy. However, many providers do not participate in the subsidy programs because the administrative processes are too burdensome and the reimbursement rate is too low. In the needs assessment, key informants identified the following three systemic barriers that, if removed, could enhance equitable access to quality care:
  - First, the current funding for child care subsidy does not cover the full cost of providing quality care. That is, the providers who accept the child care subsidy in addition to the family’s contribution are likely to operate at a loss rather than covering the full cost of care for eligible children.
  - Second, the policies and processes providers must navigate to receive the subsidy payment are burdensome. This limits providers’ willingness to participate in the child care subsidy program, which in turn limits access for families who cannot afford the full cost of care.
  - Third, the current family eligibility criteria for the child care subsidy limit families’ access to quality child care. Early care and education services for families experiencing vulnerabilities are not consistent across the birth to 5 continuum. Families may qualify for programs that provide care and education from birth to age 3, but there is then nothing available for their child until they can enroll in public PreK at age 4. Policy changes are needed to make it more likely that eligible families can successfully enroll their child in continuous, quality services from birth through age 5.

- **Families experience barriers to accessing essential services when eligibility criteria are defined differently for different programs.** Interviews and surveys with key informants identified systemic barriers that limit families' access to essential services. For example, misalignment of eligibility requirements limits access to public assistance programs (including the child care subsidy) that provide essential services for families experiencing vulnerabilities.
- **Multiple policy barriers restrict the use of funds along program lines.** Such policy barriers may prevent early care and education providers from accessing the programs and funds that will help improve the quality of their program.

### ***Moving Forward***

The strategic plan calls for creating an aligned vision for Nebraska's early childhood mixed delivery system that will shape funding and policy decisions and will facilitate coordination of services. In particular, the plan calls for establishing a statewide task force to investigate and make recommendations for alternative funding and administrative policies that would facilitate access to quality early care and education programs and other essential services for every child and family in Nebraska. For example, the task force would address the following:

- Recommend changes to state policies to make accessing state and federal funds more efficient for providers.
- Align and simplify tools, applications, processes, and systems to make accessing early care and education easier for families.
- Align and simplify tools, applications, processes, and systems to make accessing essential services easier for families.

## ***4.2 Promote the importance of early childhood and the value of quality early care and education to the community, state, and economy.***

When asked about the systemic barriers that limit access to quality early care and education for families with vulnerability factors, key informants reported that the lack of understanding about the importance of quality early childhood education by the public, by policymakers, and by community leaders prevents the necessary investment and prioritization of resources to ensure each child has access to quality early care and education. Stakeholders across the state voiced a similar theme—emphasizing that everyone needs to understand the value and impact of quality early care and education on children, the community, the economy, and the nation.

### ***Moving Forward***

The strategic plan calls for a statewide effort to create awareness and shared commitment to the fact that everyone—including parents, families, early childhood providers, schools, businesses, community leaders, state agencies, elected officials, and nonprofit organizations—has a vested interest in supporting the healthy development and learning of each child.

#### ***4.3 Expand the state's capacity to support coordination and alignment of early childhood programs and services through integrated data systems that track outcomes and support decision making at the state and community levels.***

Currently, Nebraska community leaders and policymakers do not have access to the full range of data needed to make fully informed decisions about early childhood policies, funding, and programs. While they use the data that are available to make the best decisions possible, additional work is needed to develop and implement a network of early childhood data systems that will allow leaders across the state to measure and track progress toward the strategic plan goals and community priorities. The needs assessment identified several ways in which current data collection and management processes limit our understanding, including the following:

- **Data limitation: Understanding the population of families experiencing vulnerability factors.** Until now, the state has had limited data to represent the number of families with young children who experience conditions that make them vulnerable, such as food instability, housing instability, or mental illness. The 2019 needs assessment captured some of this information for the first time, but the following challenges remain:
  - The primary weakness of Nebraska's administrative data (i.e., data held by state agencies) about the population of young children and families is that they are not integrated at the individual level. This makes it very difficult to estimate the number of children or families that are experiencing multiple vulnerability factors.
  - Prior analysis of risk or vulnerability in Nebraska's young children has focused primarily on poverty. Using those data points, the number of children in the population with developmental delays, other disabilities, and other vulnerabilities are underestimated. These estimates are used to inform funding decisions.
  - Much of the available data does not capture the conditions experienced by populations experiencing one or more vulnerabilities that impact the children's long-term outcomes.
- **Data limitation: Understanding how families use early care and education services.** While the needs assessment provided some insights into how families use early care and education services, other available data do not provide a picture of Nebraska families' use of such services. Existing limitations include the following:
  - Most available data describe children and families experiencing vulnerability factors through the reports by state programs about how families use essential services, not early care and education services.
  - Data collected on capacity from licensed child care providers provide an estimation of the number of spots available, but do not provide the actual enrollment of licensed providers. Therefore, estimates of the system's capacity are rough and likely inaccurate.
- **Data limitation: Understanding how data are used to inform policy decisions.** Based on the needs assessment survey of families, more than 60% of children birth through age 5 in Nebraska are cared for every day in a home-based setting, and families

experiencing vulnerabilities most often choose family child care homes or unlicensed care settings. Data about the needs and characteristics of children experiencing vulnerabilities served in these settings are simply not captured, leaving these children and families underrepresented in decisions about policy and funding.

- **Data limitation: Data integration challenges.** One of the main advantages of the 2019 needs assessment has been the ability to describe the needs and gaps facing families across the state using the same questions at the same time. While there are several state agencies and other organizations that collect statewide or regional information about families and the programs they use, there are limited mechanisms that would allow agencies and other organizations to exchange data for combined or comparative analyses. Such analyses would significantly improve our understanding of the full range of needs of families in different parts of the state.

### ***Moving Forward***

The strategic plan calls for developing and implementing a system of shared measurement and accountability that includes feedback loops to support continuous improvement. This effort will include building capacity in the state's Early Childhood Integrated Data System, with a focus on establishing collaborative data sharing, increasing families' access to services, and improving the quality of early care and education.

#### ***4.4 Conduct ongoing needs assessment and strategic planning efforts to expand the knowledge gained and to continue to inform the efforts to transform the early childhood system.***

While the needs assessment conducted in 2019 provided a more comprehensive understanding of Nebraska's early childhood system and of the challenges that families and providers are facing than has been available before, there is still more to learn if we are to continue identifying and prioritizing actions that will have the greatest impact. As summarized earlier in this report, additional information is needed to better understand the nature and scale of concerns Nebraskans have about early care and education facilities (see section 2.4) and how best to support positive transitions (see section 3.3). In addition to targeting topics identified in the 2019 needs assessment, Nebraska will benefit from asking families and providers to answer questions over time in order to create a more in-depth understanding of the factors that present the most barriers to accessing and providing quality early childhood services. These conversations will inform the development of strategies and action plans for accomplishing the goals and objectives of this plan. The intent is to build on Nebraska's strengths—locally, regionally, and statewide—to ensure equitable access to quality early childhood services for all children birth through age 8.

### ***Moving Forward***

As the needs assessment and strategic planning efforts continue, we will invite stakeholders to help us identify additional strategies that respond to the strengths and needs of their communities. In addition, we will ask stakeholders to identify and recommend solutions to address new or worsening needs and gaps that have emerged during the COVID-19 pandemic. Initial implementation strategies have been identified and are provided in the next section.

# Initial Implementation Strategies

Following is a list of goals and objectives with implementation strategies that were identified in early 2020. In 2021 and 2022, Nebraskans will be engaged through meetings, interviews, surveys, and focus groups to further develop the plan, with a focus on identifying additional strategies and action plans for accomplishing the goals. Stakeholders will be invited to participate in conversations to ensure the plan addresses the priorities and needs of Nebraskans in diverse and unique communities across the state.

The following areas of focus will be central to the development of additional implementation strategies and detailed action plans:

- Ensuring equitable access to services. The next stage of strategic planning will include a special focus on listening to community voices to ensure that, no matter where a family lives or what challenges they face, each child in Nebraska can access quality early childhood education and other essential services.
- Defining quality in early care and education. A top priority in the planning process is to achieve a shared understanding across Nebraska of what quality means in early care and education settings and to infuse that definition into every aspect of the work.
- Collaborating with communities. Continuing work with communities will focus on collaborating with community leaders, including families and early childhood educators, to identify strategies and action plans that leverage local strengths and resources to support the needs of children and families within specific communities.
- Aligning statewide systems. Stakeholder conversations will also highlight changes that are needed to ensure that statewide policies and processes align with the Nebraska Early Childhood Strategic Plan, facilitating coordination of resources and creating a more integrated early childhood system that provides seamless access to all services needed to support the child's development and well-being.

## GOAL 1 STRATEGIES

***Goal 1: Each child and their family can access the quality early care, education, and other essential services they need to support each child's healthy development.***

***Objective 1.1:*** *Increase availability of quality early care and education services in communities across the state by creating funding strategies that pay providers for the full cost of quality services.*

Strategy 1.1.1 Expand funding sources that pay providers for the full cost of quality care, including the expansion of child care subsidy, other public funds, and public/private endowments.

- Strategy 1.1.2 Support early care and education providers as business owners in maintaining stable revenue while providing quality care to children.
- Strategy 1.1.3 Build on Nebraska’s public/private partnership tradition by engaging the business community to support quality early care and education.
- Strategy 1.1.4 Provide specific culturally relevant outreach to informal care providers among refugee and immigrant populations, offering resources and information to promote licensure and practices that promote learning.
- Strategy 1.1.5 Assess current partnerships among early care and education providers to identify and remove barriers to new partnerships, such as barriers related to regulations, reporting requirements, and costs.

**Objective 1.2:** *Increase families’ access to quality early care and education by improving continuity of care and removing barriers.*

- Strategy 1.2.1 Make quality care affordable for families by changing eligibility criteria so more families can access the child care subsidy.
- Strategy 1.2.2 Improve the continuity of care experienced by each child by addressing barriers related to transportation and the need for flexible and expanded hours of operation.
- Strategy 1.2.3 Examine the unique barriers related to transportation, flexibility of hours, and additional costs faced by families of children with disabilities with the aim of making changes that will increase access to affordable, quality care for children with disabilities.
- Strategy 1.2.4 Increase awareness among families and early care and education providers about how best to identify and support young children with learning disabilities, behavioral problems, or mental health needs, and provide supports to eliminate suspension and expulsion practices in early care and education programs.

**Objective 1.3:** *Create coordinated and aligned resource, referral, and enrollment systems across the state, regional, and local levels that make it easier for families to find and enroll in (or access) quality early care, education, and other essential services.*

- Strategy 1.3.1 Building on existing programs, align and expand current resource and referral tools and supports within and across state agencies and other programs, including those at the regional and community levels, to make accessing information about early childhood services easier for families.

- Strategy 1.3.2 Assess the capacity of current resource and referral teams to determine whether they can expand their role(s) to become “central navigators” in helping families find quality early care and education services.
- Strategy 1.3.3 Continue efforts to simplify enrollment applications to make it easier for families to access and receive all services for which they or their children are eligible.

**Objective 1.4:** *Increase access to essential services especially for vulnerable families and families living in rural areas.*

- Strategy 1.4.1 Assess gaps in essential services for children and families experiencing vulnerability and families living in rural areas.
- Strategy 1.4.2 Expand access to essential services for children and families experiencing vulnerability and families living in rural areas.

## **GOAL 2 STRATEGIES**

**Goal 2:** *All early care and education settings provide quality experiences for children.*

**Objective 2.1:** *Establish shared, statewide definition of quality to shape and direct all early care and education systems change efforts.*

- Strategy 2.1.1 Engage stakeholders to further develop the description of the provisions of quality of care across different settings.
- Strategy 2.1.2 Incorporate the Nebraska definition of quality early care and education into the programs, operations, and systems that shape the provision of that care, including the following:
  - a. All professional development materials to support quality care in home-, school-, and center-based settings
  - b. Community-level collaboration efforts
  - c. State agency programs, policies, and operations
  - d. The curricula that lead to early childhood education professional qualifications at high schools and colleges
  - e. Early childhood assessment tools and programs
  - f. The early childhood programs of public and private organizations

**Objective 2.2:** *Promote the provision of quality early care and education throughout the state by promoting, supporting, and training the early childhood workforce.*

- Strategy 2.2.1 Establish a system-wide competency framework for members of Nebraska’s early childhood workforce.

- Strategy 2.2.2 Develop professional pathways that are affordable, accessible, and equitable in order to recruit and retain an early childhood workforce that provides quality care.
- Strategy 2.2.3 Expand options and increase access to professional development for providers and early childhood professionals in each setting type.
- Strategy 2.2.4 Increase the supports available to home-based providers to help them more easily access professional development resources and improve quality.
- Strategy 2.2.5 Strengthen and sustain a quality coaching workforce through regional- and state-level infrastructure that is locally delivered and flexible enough to meet each provider's needs.
- Strategy 2.2.6 Enhance the capacity of the workforce and providers to implement evidence-based practices (i.e., those set by the Division of Early Childhood) to meet the needs of children with special needs and disabilities in community-based settings.
- Strategy 2.2.7 Enhance the well-being of the early childhood workforce through adequate wages, benefits, and other support services.

**Objective 2.3:** *Promote the provision of quality early care and education through improved family engagement practices.*

- Strategy 2.3.1 Increase the supports available to providers to engage parents as partners in providing early care and education for their children.
- Strategy 2.3.2 Increase the supports available to providers to communicate effectively with parents about their children's development and needs.
- Strategy 2.3.3 Provide parents with information and tools to support them in nurturing their children's growth, development, and education.

**Objective 2.4:** *Promote the provision of quality early care and education by assessing the physical spaces and facilities where children receive care.*

- Strategy 2.4.1 Assess and address any issues with early care and education facilities that present barriers to providing quality care.
- Strategy 2.4.2 Support providers to make improvements in facilities to provide quality care.

**Objective 2.5:** *Increase the provision of quality early care and education throughout the state using the Step Up to Quality system.*

- Strategy 2.5.1 Invest in significant changes in Step Up to Quality standards and indicators to focus on ensuring that each child experiences quality early care and education.
- Strategy 2.5.2 Invest in significant changes in Step Up to Quality processes to make enrolling and participating in the program more flexible and efficient for providers.
- Strategy 2.5.3 Expand the public relations campaign to promote the use of Step Up to Quality.
- Strategy 2.5.4 Create incentives to encourage providers and early childhood professionals to participate in Step Up to Quality and advance through the program.
- Strategy 2.5.5 Tailor the Step Up to Quality program and supports to meet the professional development and quality-improvement needs of all provider types.
- Strategy 2.5.6 Establish an ongoing review schedule to evaluate the effectiveness of Step Up to Quality in documenting and elevating the quality of early care and education in Nebraska.

### **GOAL 3 STRATEGIES**

**Goal 3:** *Communities coordinate a locally designed mixed delivery system that provides continuous care and meets the needs of families.*

**Objective 3.1:** *Create more collaboration among early care and education providers, schools, families, coaches, and businesses in communities and regions across the state.*

- Strategy 3.1.1 Building upon community coalitions across the state, identify additional methods to build relationships between and among early care and education providers and school personnel within communities.
- Strategy 3.1.2 Share resources with community leaders and providers on best practices for collaboration and communication across sectors of the early childhood mixed delivery system.

**Objective 3.2:** *Provide models for communities to build customized collaboration plans that meet local families' needs.*

- Strategy 3.2.1 Develop and implement a statewide infrastructure for coalition building that can support continued coordination, collaboration, and communication across sectors at the community or regional level.

- Strategy 3.2.2 Support communities, or groups of communities, in creating high-functioning and sustainable infrastructures to provide early care, education, and other essential services to children and families.
- Strategy 3.2.3 Establish and implement community-wide or regional early care and education coordination plans.

**Objective 3.3:** *Build or expand capacity within communities to support continuity of quality care for children making transitions across early care and education settings, including those from early care and education settings to Kindergarten.*

- Strategy 3.3.1 Create or expand distribution of resources that support early childhood providers and school personnel in implementing effective transition practices.
- Strategy 3.3.2 Using existing models and resources, increase awareness about what is needed for the transition to Kindergarten by sharing information between schools and early care and education providers, and with families.
- Strategy 3.3.3 Promote continuity of care for each child by developing or expanding child-specific information sharing between the early childhood provider and school personnel prior to the transition.
- Strategy 3.3.4 Ensure that Kindergarten classrooms and teachers are ready to meet the individual needs of every age-eligible child, regardless of their abilities.

## **GOAL 4 STRATEGIES**

**Goal 4:** *Statewide systems align to support communities in creating an integrated and comprehensive mixed delivery system for all children.*

**Objective 4.1:** *Create more alignment and integration of vision and planning across state-level organizations, including agencies, nonprofits, private and philanthropic organizations, and advocacy groups.*

- Strategy 4.1.1 Create an aligned vision for quality early care and education across state-level early childhood programs that is informed by communities, providers, and parents.
- Strategy 4.1.2 Establish a task force across public, private, and nonprofit organizations to study and propose alternative funding and administrative policies to support fully funded, quality care across all early care and education settings.

- Strategy 4.1.3 Explore state policies that restrict how state and federal funds can be braided and recommend changes, specifically where these policies limit the number of children who can be served in quality care settings.
- Strategy 4.1.4 Align and simplify tools, applications, processes, and systems within and across state agencies and other programs to make accessing services easier for families.

**Objective 4.2:** *Promote the importance of early childhood and the value of early care and education to the community, state, and economy.*

- Strategy 4.2.1 Inform Nebraskans of the importance of quality early care and education and what is at stake for Nebraska's future.
- Strategy 4.2.2 Seek Nebraskans' commitment to support quality early care and education.

**Objective 4.3:** *Expand the state's capacity to support coordination and alignment of early childhood programs and services through integrated data systems that track outcomes and support decision making at the state and community levels.*

- Strategy 4.3.1 Develop and implement systems of shared measurement and accountability in support of a collective impact model.
- Strategy 4.3.2 Create and implement feedback loops for continuous improvement within and across systems.
- Strategy 4.3.3 Build capacity in the state's Early Childhood Integrated Data System (ECIDS) to establish collaborative data sharing capacity by streamlining information collection and management and integrating data systems.
- Strategy 4.3.4 Build capacity in the state's ECIDS to increase families' access to services by increasing the information available to families and helping families find and enroll in services.
- Strategy 4.3.5 Build capacity in the state's ECIDS to improve the quality of early care and education by expanding and integrating information about professional learning opportunities, and to improve service coordination and transitions.

**Objective 4.4:** *Conduct ongoing needs assessment and strategic planning efforts to expand the knowledge gained and to continue to inform the efforts to transform the early childhood system.*

- Strategy 4.4.1 Continue the efforts to gather longitudinal data on key findings from the Year 1 PDG needs assessment.

- Strategy 4.4.2 Expand data collection efforts to assess needs and gaps in aspects of the early childhood system not addressed by the Year 1 PDG needs assessment including but not limited to:
- Transitions children experience between birth and age 5, before reaching the transition to Kindergarten (Objective 3.3)
  - Issues with the physical spaces (facilities) in which children receive care (Objective 2.4)
- Strategy 4.4.3 Engage stakeholders statewide to refine and revise the Nebraska Early Childhood Strategic Plan.
- Strategy 4.4.4 Implement, monitor, and report progress on the Nebraska Early Childhood Strategic Plan.



## Learn More and Get Involved

The Nebraska Early Childhood Strategic Plan is designed to create a more integrated system of early childhood services and to ensure that, no matter where a family lives or what challenges they face, each child in Nebraska has access to quality early childhood services. The goals and objectives build on a strong foundation of existing and expanding collaborative relationships and ongoing initiatives across the state, providing a clear framework and targets for the shared work ahead. At the same time, the goals and objectives are broad enough to allow stakeholders across Nebraska to define, implement, and refine strategies and action plans that respond to the strengths and needs of specific communities and populations.

The Nebraska Early Childhood Strategic Plan is a dynamic plan by and for Nebraskans. As we develop detailed implementation strategies, we need the continued input and participation of people from across the state who share our commitment to providing equitable access to quality early childhood services that support children's healthy development from birth through age 8. Learn more about how you can get involved at [NEarlychildhoodplan.org](http://NEarlychildhoodplan.org).

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