

# Approaches to Providing Comprehensive Services in Early Head Start-Child Care Partnerships

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## The Central Role of Comprehensive Services in Early Head Start-Child Care Partnerships

In 2014, the Administration for Children and Families (ACF) distributed 250 grants across states and localities in the United States and its territories to establish Early Head Start-Child Care Partnerships (EHS-CCPs) to expand access to high-quality child care. A cornerstone of Early Head Start (EHS) is the provision of comprehensive services. Comprehensive services refer to addressing the needs of infants and toddlers in ways that go beyond the immediate daily routine for care and education; they also include addressing the needs of the family. When EHS programs partner with community child care programs in Early Head Start-Child Care Partnerships (EHS-CCPs), one aspect of quality the child care programs work to expand is the provision of comprehensive services. In some cases, a child care program will provide these services for the first time when they become part of a partnership; in other cases, programs will extend their existing offerings of comprehensive services to include further services or additional children and families as part of a partnership.

This resource explores the following key questions related to the delivery of comprehensive services in EHS-CCPs, based on findings from six partnerships:

- What are the new or extended services that child care partners in EHS-CCPs provide to children and families as they undertake the provision of comprehensive services?
- How does the partnership support child care partners as they initiate new services or extend the comprehensive services they are providing?
- How do child care partners in EHS-CCPs feel about this extension of their services?
- What are parents' reactions?

### What are EHS-CCPs?

Early Head Start-Child Care Partnerships (EHS-CCPs) extend EHS services by partnering with independent community child care providers to offer high-quality and comprehensive services. EHS supports children and families using a two-generation approach that includes early childhood education, health and developmental screenings for children, support for parents in finding a job or pursuing further education, and other resources to help meet families' needs. Partnering programs agree to follow EHS standards (for example, adhering to certain teacher to child ratios); in return, programs gain access to professional development resources for staff and other materials from the EHS-CCP grantee agency. The EHS-CCP model helps extend high-quality child care to the youngest children (from birth through age 3) within communities.

- What challenges do partnerships face in supporting the provision of comprehensive services and how are they addressing these challenges?

## Learning from Six EHS-CCPs About the Provision of Comprehensive Services

This resource is intended to help guide EHS-CCPs undertaking the introduction or expansion of comprehensive services among child care partners. The toolkit draws upon the experiences of six EHS-CCP that participated in a project with Child Trends aimed at learning about the experiences of those implementing partnerships as well as the reactions of parents receiving care for their infants and toddlers through these partnerships. During the summer of 2017, Child Trends researchers visited the six partnerships, conducting interviews and focus groups with 111 partnership participants, including key partnership staff (partnership grantee directors and lead staff and directors and providers in partnering child care centers and family child care homes) and families. Parents also completed a survey which asked about the types of comprehensive services they had received. In November of 2018, key representatives of each of the partnerships came together with Child Trends staff to discuss and reflect on what they were learning about the implementation of their partnerships and consider what they might want to share with others launching or further implementing such partnerships. One area that was identified for sharing was partnership experiences with providing comprehensive services.

### Study Participants

- Six EHS-CCPs, including one state grantee and five local grantees across five states
- Partnerships varied in size from 2 to 70 child care partners with between 2 and 20 child care center partners and 0 to 50 family child care partners
- Number of funded EHS-CCP slots varied from 38 to 566

### Purpose of this toolkit resource

In this resource, we first share information about the nature of the comprehensive services these six partnerships provided, how they were implemented, and about the reactions of staff and of families to extending the reach of the child care programs to provide comprehensive services. We then describe the challenges these six partnerships faced concerning the provision of comprehensive services and how staff sought to address them. In an attempt to help other partnerships learn from the experiences of these six EHS-CCP, we then provide a tool aimed at helping other partnerships think through their decisions about how child care partners can structure the provision of comprehensive services in a way that addresses the Head Start Program Performance Standards<sup>1</sup> while taking into account the unique needs and resources of their programs. While these six partnerships cannot possibly encompass all the experiences of partnerships with comprehensive services the group strongly agreed that sharing the experiences of this specific set of partnerships could be helpful to other partnership grantee staff and child care partners.

<sup>1</sup> HSPPS detail the minimum requirements and standards that all EHS/HS programs must follow to maintain compliance. The standards are based in early childhood development research and provide guidance around comprehensive services (e.g., education and child development program services, health program services, and family and community engagement program services, etc.) EHS/HS programs can offer.

## Comprehensive services offered by the six partnerships

Interviews with staff from each of the six EHS-CCP and questionnaires completed by parents at these partnerships indicated that the partnerships focused on helping the child care partners deliver comprehensive services in each of the major categories for such services identified in the HSPPS. We group these services into the following categories<sup>2</sup>:

- A. Identifying children’s health and developmental needs through screening and discussion with parents
- B. Ensuring that children have regular sources of needed health care
- C. Ensuring that children are provided with formula and diapers while they are cared for at the center or family child care home
- D. Ensuring services for children with disabilities or other special needs
- E. Collaborating with parents (through home visits and communication at the center or family child care home) on child and family health
- F. Collaborating with parents (through home visits and communication at the center or family child care home) on children’s learning and development
- G. Collaborating with families (through home visits and communication at the center of family child care home) to address family needs beyond health care and children’s learning and development

For example, regarding Category A, all six partnerships reported offering health and developmental screenings for each of the children participating in the partnerships. Regarding Category D, for children who were identified as needing services based on assessment results, partnership grantee staff in all six partnerships offered families referrals to services such as speech therapy, early intervention, and occupational therapy.

Four of the six partnerships indicated serving populations of families and/or children facing particular challenges or experiencing particular vulnerabilities. These included children who had experienced homelessness, children who had experienced abuse and neglect, children of teen parents, children of veterans, dual-language learners, families that had experienced domestic violence, families that had experienced a natural disaster, and children with disabilities. The partnership grantee staff who were interviewed indicated that they intentionally formed these partnerships to serve particularly vulnerable children and families and ensure they would receive services to address the specific challenges they face.

Perhaps because of the special issues the families in most of the partnerships were facing, these partnerships gave particularly detailed responses about the services they provided to address parental health needs (Category E) and family self-sufficiency needs (as part of Category G). For example, according to the parents who completed questionnaires about the comprehensive services they received, at least some parents in each of the partnerships reported help finding mental health or substance abuse services, and parents in nearly all of the partnerships reported help finding health services (Category E). Parents in all of the partnerships reported receiving help getting or paying for things parents needed in an emergency or short term; and parents in nearly all of the partnerships reported receiving help with finding a job, help finding education or job training, and help finding or paying for housing (Category G).

In addition to providing services to meet the needs of families outside of child care settings (e.g., through referrals to mental health services and help finding a job), all six partnerships discussed the value of

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<sup>2</sup> Please note that these categories were developed by the authors for the purpose of this resource. The Office of Head Start and HSPPS may categorize comprehensive services in other ways.

supplying formula and diapers for children in their care (Category B). Child care partner staff indicated that the EHS-CCPs helped them to provide these basic necessities so families would not have to worry about purchasing extra diapers and formula for the time children would be cared for at the center or family child care home, relieving some financial burden on enrolled families.

## How did partnerships help child care partners expand the provision of comprehensive services?

During the site visits, the six partnerships described using different approaches to help child care partners extend their provision of comprehensive services.

Staff at four partnership sites reported having a family advocate as part of the partnership grantee staff. A family advocate is a dedicated staff person who works with families on goal setting, career development, financial assistance, and connections to community resources. Staff at one partnership reported having several specialists on site to deliver comprehensive services in addition to their family advocate. The specialists included a nutrition coordinator, who provided nutritional screenings for children and worked with child care partners to prepare menus for classrooms; a mental health coordinator, who helped teachers conduct behavioral and social-emotional health screenings for participating children and helped teachers interpret the results of the assessments; an education and disability coordinator, who worked with child care partners to introduce them to developmental screenings and provided support on curriculum implementation; and a health coordinator, who oversaw child health assessments and services for children, including dental care services.

Other partnerships used existing community resources to locate services for children and families. For example, grantee staff at one site reported attending community fairs and other events to help identify services that their families could utilize.

## Reactions to the provision of comprehensive services

Grantee staff in all six partnerships reported that offering comprehensive services to families was a highlight of the partnerships, with one saying “laying the foundation for parents—not just as a place for their children to stay, but as a place that can provide them with education, that can teach them how to budget, etc.” was a huge benefit. Staff in partnerships serving populations of children and families with high needs were particularly likely to emphasize this highlight of the work. Grantee staff and child care partners commented that they saw improvement in parents’ ability to articulate and achieve goals, such as obtaining a GED. One child care partner noted,

*“Once they come here, the child comes here, it opens doors for them [parents] for a lot of things. I’ve had parents go to school; I’ve had parents obtain jobs, get higher income, higher payments. And overall it’s the kids; the kid’s life changes.”*

Child care partner staff expressed pride in their ability to engage and work with parents, especially those within families they perceived as more difficult to reach, such as families experiencing homelessness.

During focus groups and surveys, parents reported a strong appreciation for the comprehensive services they were offered and felt that they and their children had benefitted. Specific aspects of the comprehensive services for which parents expressed appreciation included information on child safety and development and resources for their children, such as diapers, formula and food.

## Challenges to providing comprehensive services

Partnership staff reported several challenges in providing comprehensive services to families. These included:

**Difficulty identifying appropriate services in the community.** For example, respondents for a partnership located in a rural community reported difficulty finding health care providers that offered certain health services, such as lead and hemoglobin tests. Respondents from another partnership reported that it was challenging to meet families' mental health needs, since affordable mental health services were difficult to find in their community.

**Stigma associated with certain services.** For example, child care partner staff in one partnership indicated that they found it difficult to provide services for children with special needs involving mental health and behavioral issues, as some parents refused services for their children in these areas due to stigma.

**Barriers to family involvement.** As part of comprehensive services, EHS-CCPs are required to engage families through family events and volunteering opportunities and to engage with parents about their children's development during parent-teacher conferences, home visits, and informal conversations. Partnership staff reported that family engagement, especially through family events, could be a challenge. Grantee staff and child care partner staff in multiple partnerships noted parents' full-time work schedules, parents' need to care for other young children at home, parents' struggles with mental health conditions, and parents' daily hassles as sources for this challenge. Staff at one partnership also noted that their partnership was not able to provide transportation to and from family events and that this was a barrier to participation.

## What other partnerships can learn

From the extremely helpful information Child Trends gathered from staff and families at six EHS-CCP, we have learned that:

- Because there are multiple comprehensive services required by HSPPS, each of which require differing skills and resources, it may be helpful for partnerships to have a listing of the categories in which comprehensive services fall and specific examples of each category, in order to plan for the delivery of a full set of comprehensive services.
- There are also multiple possible providers of comprehensive services. This indicates it may be helpful for partnerships to develop a written plan for who in the partnership is responsible for which comprehensive service (see [Partnership Agreements](#) resource for more information on defining roles and responsibilities). Such a listing can help identify where further resources or training are needed and where there are gaps. For example, in EHS-CCPs, it may be the child care partners themselves who take on the comprehensive services that involve engaging with parents about family events and in daily communication about the child, while grantee staff may take the lead in providing specialized referrals for services for a child with a disability. Outside organizations that provide services for early care and education providers across a community, region or state, such as a state Quality Rating and Improvement System, may be the source of some services as well, for example, mental health consultation.
- Even though families and staff note great appreciation for the comprehensive services that EHS-CCP provide, child care partners face challenges in providing these services. Articulation of the challenges faced in providing specific services can lead to thoughtful planning about how to address those challenges.

# A Tool for Planning Comprehensive Services in EHS-CCP

Partnerships can use the tool included at the end of this document to help specify the kinds of comprehensive services that they already have in place and those for which they need to develop service provision strategies.

- The left side of the table lists specific types of comprehensive services, organized according to the categories we have developed to help summarize the types of comprehensive services included in the HSPPS.
- In the right side of the document, partnership staff can list who is currently providing the comprehensive service, or whether further resources and planning are needed for the provision of the specific service.
- Partnerships can use the tool to specify the plans that they already have in place, or are developing, for the provision of comprehensive services.
- For partnerships that would appreciate detailed guidance on the types of comprehensive services they might consider providing to address family needs, we also provide detailed examples of working in collaboration with families to address needs from the six partnerships with which Child Trends researchers worked.
- Because challenges partners face in providing comprehensive services appear to vary by the specific type of service, specifying the challenges child care providers experience when providing particular services can be a helpful first step in identifying solutions.

## Additional resources on the provision of comprehensive services

The following resources provide additional information on the delivery of comprehensive services in EHS-CCP:

- [Comprehensive Services & School Readiness Guides](#): This tool from the Office of Head Start provides protocols to identify strengths and needs in key performance areas related to delivering comprehensive services and meeting school readiness goals.
- [Putting it Together: A Guide to Financing Comprehensive Services in Child Care and Early Education](#): This financing guide from CLASP geared towards state policy makers describes how states can finance comprehensive services in early childhood settings by using funds in innovative ways, encouraging state and local partnerships, and learning from other state initiatives.

|  |  | Our Partnership Is <u>Already Providing</u> This Service  |   |  |  | Our Partnership Is <u>Planning For</u> The Provision Of This Service                 |   |  |  |
|--|--|---|---|--|--|--|---|--|--|
|  |  | <p><b>Who:</b></p> <p>Is this service provided by partnership grantee staff, child care staff, or a community resource?</p> | <p><b>What:</b></p> <p>What is the specific service being provided?</p> | <p><b>How:</b></p> <p>How is the service being provided?</p> | <p><b>Challenges and Opportunities:</b></p> <p>Is the partnership facing any challenges in providing this service? Are there opportunities or resources available for expanding or strengthening this service?</p> | <p><b>Who:</b></p> <p>Who is the partnership planning on providing this service?</p> | <p><b>What:</b></p> <p>What specific service is the partnership planning?</p> | <p><b>How:</b></p> <p>How is the partnership planning to provide this service?</p> | <p><b>Next Steps:</b></p> <p>What steps are needed? Are any challenges anticipated? How might they be addressed? Are there opportunities or resources available for the partnership to draw upon in this area?</p> |

**I. Categories of Head Start Program Performance Standards related to comprehensive services**

|   |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|
| <p><b>I.A.</b> Identifying child's health and developmental needs through screening and discussion with parents and staff</p> | <p>Perform or obtain vision and hearing screenings within 45 calendar days of enrollment</p> |  |  |  |  |  |  |  |  |
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|   |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| I.A. Identifying child's health and developmental needs through screening and discussion with parents and staff | Conduct developmental and behavioral screening for every child within 45 days of enrollment and on a regular basis |  |       |      |                               |  |       |      |             |
|   | Identify each child's nutritional health needs   |  |       |      |                               |  |       |      |             |

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|  |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>I.B.</b> Ensuring the child has regular sources of needed health care | Ensure that children have a source of health care and are up to date on all primary and preventative health care, including medical, dental, and mental health services within 90 days of enrolment and on an ongoing basis. |  |       |      |                               |  |       |      |             |

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|  |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <p><b>I.B.</b> Ensuring the child has regular sources of needed health care</p>  | <p>When a health problem is identified, facilitate further diagnostic testing, evaluation, treatment, and follow up, and help parents obtain any prescribed medications, aids or equipment for medical and oral health conditions.</p> |  |       |      |                               |  |       |      |             |
| <p><b>I.C.</b> Ensuring that children are provided with formula and diapers while they are cared for at the center or family child care home</p> | <p>Ensure that diapers and wipes are provided for children enrolled in the program</p>   |  |       |      |                               |  |       |      |             |

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|  |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| I.C. Ensuring that children are provided with formula and diapers while they are cared for at the center or family child care home | Ensure that formula is provided for children enrolled in the program   |  |       |      |                               |  |       |      |             |
| I.D. Ensuring services for children with disabilities or other special needs   | Ensure that the individualized needs of children with disabilities, including but not limited to those eligible for IDEA services, are met, including during period of determination of IDEA eligibility |  |       |      |                               |  |       |      |             |

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|   |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>I.D.</b> Ensuring services for children with disabilities or other special needs | Work with local agency responsible for implementing IDEA, the family, and other service partners to assure that services for a child with a disability are planned and delivered in accord with IFSP or IEP as appropriate |  |       |      |                               |  |       |      |             |
|   | Ensure that IFSPs and IEPs are being reviewed and revised as required by IDEA  |  |       |      |                               |  |       |      |             |

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|  |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <p><b>I.D.</b> Ensuring services for children with disabilities or other special needs</p> | <p>Ensure that additional services for children with disabilities are provided in regular EHS classroom or family child care home to the greatest extent possible</p>  |  |       |      |                               |  |       |      |             |
| <p><b>I.E.</b> Collaborating with parents on child and family health</p>                   | <p>Provide opportunities for families to learn about pregnancy health and postpartum care, as appropriate, including breastfeeding support and treatment options for parental mental health or substance abuse problems, including perinatal depression.</p> |  |       |      |                               |  |       |      |             |

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|  |   | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>I.E.</b><br>Collaborating with parents on child and family health | Provide opportunities for parents to learn about preventive medical and oral health, emergency first aid, environmental hazards, and health safety practices at home                        |  |       |      |                               |  |       |      |             |
|  | Provide opportunities to help families become familiar with the services their children will receive while enrolled and to enroll and participate in a system of ongoing family health care |  |       |      |                               |  |       |      |             |

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|  |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>I.E.</b><br>Collaborating with parents on child and family health | Provide opportunities to discuss the child's nutritional status with staff as well as to discuss with staff and identify issues related to child mental health and social and emotional well-being |  |       |      |                               |  |       |      |             |
|  | Assist parents in understanding how to access health insurance for themselves and their families   |  |       |      |                               |  |       |      |             |

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|  |   | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>I.E.</b><br>Collaborating with parents on child and family health             | Help parents continue to follow recommended schedules of well-child and oral health care  |  |       |      |                               |  |       |      |             |
| <b>I.F.</b><br>Collaborating with parents on children's learning and development | Recognize parents as their children's primary teachers and nurturers and implement strategies to engage parents in their children's learning and development, supporting the parent-child (including the father-child) relationship |  |       |      |                               |  |       |      |             |

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|  |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>I.G.</b><br>Collaborating with families in a family partnership process to address family needs | Help families identify needs, interests, strengths, goals, and services and resources that support family well-being, including family safety, health, and economic stability. |  |       |      |                               |  |       |      |             |
| <b>II. A more in-depth look at resources to support family well-being (I.F.)</b>                   |  |  |       |      |                               |  |       |      |             |
| <b>II.A.</b> Family self-sufficiency: help with...   | Finding a job  |  |       |      |                               |  |       |      |             |

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|   |   | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| II.A. Family self-sufficiency: help with... | Getting to and from work                                |  |       |      |                               |  |       |      |             |
|   | Identifying opportunities for education or job training |  |       |      |                               |  |       |      |             |

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|   |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| II.A. Family self-sufficiency: help with... | Finding English as a Second Language (ESL) Classes |  |       |      |                               |  |       |      |             |
|   | Counseling on how to manage money                  |  |       |      |                               |  |       |      |             |

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|   |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| II.A. Family self-sufficiency: help with... | Arranging for cash assistance via TANF (Temporary Assistance for Needy Families) |  |       |      |                               |  |       |      |             |
|   | Arranging for support from unemployment insurance                                |  |       |      |                               |  |       |      |             |

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|   |   | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| II.A. Family self-sufficiency: help with... | Arranging for SNAP (Supplemental Nutrition Assistance Program)                            |  |       |      |                               |  |       |      |             |
|   | Arranging for WIC (the Special Supplemental Food Program for Women, Infants and Children) |  |       |      |                               |  |       |      |             |

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|   |   | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| II.A. Family self-sufficiency: help with... | Securing child support  |  |       |      |                               |  |       |      |             |
|   | Securing Social Security, Retirement Disability, or Survivor's Benefits |  |       |      |                               |  |       |      |             |

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|  |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>II.A.</b> Family self-sufficiency: help with... | Arranging for payments for providing foster care |  |       |      |                               |  |       |      |             |
| <b>II.B.</b> Housing: help with...                 | Finding or paying for housing                    |  |       |      |                               |  |       |      |             |

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|                             |                                 | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| II.B. Housing: help with... | Securing housing assistance     |  |       |      |                               |  |       |      |             |
|                             | Arranging for energy assistance |  |       |      |                               |  |       |      |             |

|   |                                | Our Partnership Is <u>Already Providing</u> This Service |       |      |                               | Our Partnership Is <u>Planning For</u> The Provision Of This Service |       |      |             |
|---|--------------------------------|--|-------|------|-------------------------------|--|-------|------|-------------|
|   |                                | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| II.C. Health and mental health services: help with... | Finding health services        |  |       |      |                               |  |       |      |             |
|   | Finding mental health services |  |       |      |                               |  |       |      |             |

|  |                                    | Our Partnership Is <u>Already Providing</u> This Service |       |      |                               | Our Partnership Is <u>Planning For</u> The Provision Of This Service |       |      |             |
|--|------------------------------------|--|-------|------|-------------------------------|--|-------|------|-------------|
|  |                                    | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>II.C.</b> Health and mental health services: help with... | Finding substance abuse services   |  |       |      |                               |  |       |      |             |
|  | Finding child development services |  |       |      |                               |  |       |      |             |

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|---|--|--|-------|------|-------------------------------|--|-------|------|-------------|
|   |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>II.D.</b><br>Resources during a family emergency: help with... | Finding family crisis support                                  |  |       |      |                               |  |       |      |             |
|   | Finding needed material resources, such as clothing or diapers |  |       |      |                               |  |       |      |             |

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|--|--|--|-------|------|-------------------------------|--|-------|------|-------------|
|  |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| <b>II.D.</b><br>Resources during a family emergency: help with...    | Finding food resources (e.g., through a food pantry) |  |       |      |                               |  |       |      |             |
| <b>II.E.</b> Parenting and child development resources: help with... | Parenting classes                                    |  |       |      |                               |  |       |      |             |

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|---|--|--|-------|------|-------------------------------|--|-------|------|-------------|
|   |  | Who:   | What: | How: | Challenges and Opportunities: | Who:   | What: | How: | Next Steps: |
| II.E. Parenting and child development resources: help with... | Home-school library and play materials to borrow |  |       |      |                               |  |       |      |             |
|   | Nutrition guidance                               |  |       |      |                               |  |       |      |             |