



## FIRST THINGS FIRST

*Ready for School. Set for Life.*

AGENDA ITEM: Child Care Health Consultation

BACKGROUND: The Regional Director was given direction to research the possibility of a San Carlos Apache Tribal Program to implement this strategy for all the Quality First centers and providers in the region. It was the intent of the Regional Council and the San Carlos Apache Tribe's Education Committee for services to be provided by an entity within the Tribe. The Tribal Education Committee gave their guidance to move forward with an outside non-tribal entity due to an unsuccessful 2 years search. The Regional Director and Ann Kaskel, Child Care Health Consultation Program Manager for First Things First, have researched several options for consideration by the Regional Council.

RECOMMENDATION: The Regional Director recommends looking further into options 1 and 3 as it seems these could be the best options.

Strategy	Options for Regional Council	
Child Care Health Consultation (CCHC)	<p><b>OPTION 1:</b>            Sharing a CCHC with one or more neighboring region(s) who are currently providing CCHC services.</p> <ul style="list-style-type: none"> <li>• San Carlos Apache is currently funded for 7 TSU's The Gila contract is at 8 TSU's</li> <li>• The Graham/Greenlee contract is at 9 TSU's</li> <li>• <i>(Note: A half time CCHC is at 20 TSU's)</i></li> </ul>	
	<p><b>Pros</b></p> <ul style="list-style-type: none"> <li>• Either contract will benefit from adding San Carlos Apache TSU's to their existing contract</li> <li>• A trained CCHC is in place and can begin service ASAP (Note: training for a CCHC is at least 1 month)</li> <li>• Either could complete SFY2013 contract while Regional Director continues to seek a CCHC for San Carlos Apache Region for SFY2014.</li> </ul>	<p><b>Cons</b></p> <ul style="list-style-type: none"> <li>• Either CCHC may incur greater travel time.</li> <li>• 2 separate Child Care Health Consultants will be used for the entire region</li> </ul>
	<p><b>OPTION 2:</b>            As needed CCHC option as a starting point. Draft proposal (still in development) of an as needed CCHC <i>attached</i>.</p>	
	<p><b>OPTION 3:</b>            The University of Arizona Cooperative Extension currently delivers CCHC services in four regions. During initial conversations with the U of A Cooperative Extension they have expressed a desire to assist. Additional conversions would be needed if choosing this option.</p>	
	<p><b>Pros</b></p> <ul style="list-style-type: none"> <li>• San Carlos Apache develops own contract</li> <li>• May be able to hire locally</li> <li>• One Child Care Health Consultant will serve the entire region</li> </ul>	<p><b>Cons</b></p> <ul style="list-style-type: none"> <li>• Small contract size makes for filling a position a challenge</li> </ul>

## **First Things First**

### **PRN CCHC PLAN**

#### **Need:**

FTF became the administrative center for the CCHC program in Fy13. The CCHC program Manager has worked to ensure full implementation of CCHC contracts within regions currently supporting the QF and CCHC strategies. A significant issue has emerged during the first six months of FY13. Several CCHC contracted positions remain unfilled for a variety of reasons. The primary reason demand for CCHC services in rural and tribal areas does not fit with regional capacity. If a region has less than 10 centers of homes the cost of hiring training and providing services varies from \$2250 to less than \$10,000 which makes hiring difficult. The challenges include individual regional contract size, the lack of qualified applicants, cost of recruitment and training and excess travel requirements in rural areas. Attrition is also an additional issue in rural and tribal areas.

#### **A solution:**

Develop a Statewide PRN (as needed) CCHC position who can deliver CCHC services in rural and tribal regions that are experiencing difficulty finding highly qualified staff to fulfill CCHC contract. This position can also be charged with doing some recruiting in rural areas for a qualified candidate that can later be trained and supported in the region.

#### **Position Description:**

- PRN CCHC will be a CCHC with at least 6 months experience working with QF.
- The PRN CCHC position will be willing to travel to all areas of the State knowing that it will require extended overnight stays for up to a week at time.
- The position will be a contracted position with an existing CCHC contracting agency for a defined length of time based on need.
- Additional expectations include building relationships in regions and work with local agencies to locate a highly qualified individual to fill open positions and provide sustainable CCHC service delivery to the region.

80% of position is direct services: provide CCHC services to contracted QF centers/homes that qualify and agree to Tier 3 or Tier 2 CCHC services. If time allows, The PRN CCHC can visit Tier one centers to introduce the CCHC services.

20% position spent on recruitment of a regional CCHC – identify and work with the key informants and existing regional, tribal networks in region to identify an interested and qualified person, coordinate training and provide orientation as needed.

**Estimated Costs:**

The costs associated with this position will be correlated with the number of QF centers and homes requiring CCHC services. Savings associated with not having the CCHC position for the first half of FY13 can be used to contract for this position. Salary savings will offset the additional costs for additional travel expenses.

**An example:**

Navajo Nation currently has 3 QF centers but expects there to be significantly more this coming year. It is difficult to hire a CCHC and train her when there is only 3 centers. A PRN CCHC can support the 3 centers in that region as well as the Navajo Apache region where the CCHC has left the position unfilled. The PRN CCHC can also help recruit someone regionally that can meet the growing needs for services in those regions.

**Planning**

The regions that are interested in contracting for this service can pool the funding into the contract amendment and CCHC services can be provided in these regions.

Piloting the program in FY13 year using funding that has been allocated for CCHC for FY13 will help us determine the amounts needed in future years.