

**GRANT ANALYSIS FORM
OPERATING & CAPITAL GRANT PROJECTS/PROGRAMS**

Department/Division: Health / Maternal & Child Health

Contact Person & Phone No: Lori Lutz, #6002

Category of Request

New Grant

Grant Continuation

Change in Previously Approved Grant

Previous Council File No. 031647

Previous Council File No.

Project/Program Title: Early Child Care Grant

Grantor Agency: U.S. Department of Health and Human Services

Grant Application Date: July 21, 2004

Anticipated Award Date: Sept. 1, 2004

Please provide the following information:

1. Description of Grant Project/Program (Include Target Locations and Populations):

The Milwaukee Health Department (MHD) Health and Safety in Child Care (HSCC) will work to assure the health and safety of young children (ages birth to five) who attend group and family licensed child care centers. The HSCC program will work with child centers and child care workers that are participating in the collaborative project of Milwaukee Public Schools, Milwaukee Area Technical College, and Milwaukee County in a project called PACES (Partners Acting on the Commitment for Early Success) and will expand to non-PACES facilities. HSCC program works in child care facilities located in areas identified as having a large percentage of children at high risk primarily Milwaukee's central city. All programs must serve children and families in W-2 and the facility must be in operation for at least two years to assure sustainability. The PACES child care centers are participating in a quality improvement activities and attend regularly scheduled director's meetings, staff trainings, and continue to improve the quality of programming in their center. Public Health Nurses have been trained at the National Training for Child Care Health Consultants (CCHC) at the University of North Carolina Chapel Hill and have a dual role in the community. MHD CCHC's work directly with Child Center Directors, staff, and families on improving the health of children and train other health professional to become CCHCs. MHD CCHCs conduct training, observe staff to child interactions, develop center policies in the area of health and safety, make referrals to medical insurance assistance and other community resources for children and families. The Environmental Hygienist assesses child care facilities for environmental, health and safety hazards, including playground safety, and develop an improvement plan, and assists with coordinating services for child care facilities. The health educator provides educational sessions for parents, children, and child care workers. Currently, HSCC program works with 70 child care facilities with licensed capacity to serve a total of over 4,500 children.

2. Relationship to City-wide Strategic Goals and Departmental Objectives:

MHD is committed to strengthening the connection between the health community and the child care community, thus establishing its ultimate goal of promoting the optimal health and well being of children in child care and to promote school readiness and healthy beginnings. City of Milwaukee is saturated with child care programs, there are over 2,500 child care facilities. Few early childhood educators and child care staff have specific training in nursing, medicine or other health professions. But with appropriate child care health consultation, all child care programs can provide safe and healthy environments for children to learn and grow. The range of quality for these facilities ranges from poor quality/ harmful, to mediocre care, to quality care. Low-income parents may choose child care centers based on accessibility, location, cost, and convenience instead of high quality. In order for a child care center to be considered a quality environment, the health and safety of the environment and the practices of the early childhood professionals are essential. Children cannot be in environments where there are poor sanitation practices, environmental hazards, and where there is difficulty in receiving health services.

3. Need for Grant Funds and Impact on Other Departmental Operations (Applies only to Programs):

HSCC CCHC works internally with various other programs including lead program, immunization program, environmental program and medical insurance assistance. HSCC program coordinates with many of the MHD programs in a collaborative effort that does not duplicate services and streamlines MHD funding expenditures. Assessment of the health and well being of children has been difficult for the MHD with the advent of Wisconsin Works (W-2). Traditionally, Public Health nurses were able to follow high-risk infants and young

children through home visits. Early childhood settings can provide an access point to comprehensive and coordinated health services. CCHCs can access children where they are, namely child care settings. Grant funds will extend the MHD's ability to provide direct health and safety consultation to early childhood programs; education for child care staff and provide continuing education units, and make referrals to medical insurance assistance for children, families, and child care staff. Early intervention related to lead poisoning, immunizations, review of children vision and developmental screening, and environmental hazards, safe sleep, nutritional services will promote health and school readiness of pre-school children.

4. Results Measurement/Progress Report (Applies only to Programs):

- a. The percentage of immunization records of centers reviewed, referral for immunizations, and follow up with families and child care centers., and updates in Wisconsin Immunization Registry
- b. The number of reportable communicable diseases related to child care centers.
- c. Consultation services provided in the areas of injury prevention, assessing parents and centers' needs for health and safety training, and providing referrals to community services and linking children and families to medical assistance.
- d. The percentage of centers that have participated in environmental assessments and developed plan of action in the areas of environmental hazards.
- e. Number of TB skin tests for child care staff
- f. Lead Screening and testing for high risk children
- g. Number of referrals to Medical insurance assistance program
- h. Number of training sessions to staff, families and children and continuing education units.

5. Grant Period, Timetable and Program Phase-out Plan:

September 1, 2004 – August 30, 2005 There is not a phase-out plan at this time. Funding ends in the mid fiscal year for the City. The Program Manager has applied for an additional grant for \$150,000 for fiscal year January 2005, but this will not fund all the positions and program.

6. Provide a List of Subgrantees:

Contract with Planning Council for Health and Human Services for Evaluation of the Program Year 2 and 3

7. If Possible, Complete Grant Budget Form and Attach to Back.