

# NIAGARA BEST START NETWORK

## Highlights of 2007-08 Integrated Community Plan

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### **History and Context**

In 2005, the Government of Ontario requested that all municipal regions in the province develop integrated community plans for the delivery of early child development services, including child care. This initiative was entitled Best Start. The idea was to put families at the centre of service planning and delivery, and then create structures, processes and ultimately a "system" that could respond to all children's needs. Neighbourhood service centres called "hubs" were to be created in or near elementary schools, to make it easier for parents to access services and supports for their children.

While Niagara had long been recognized as a national leader in children's early learning and care and eagerly accepted this challenge, it recognized that achieving such an ambitious vision would be anything but simple. Not all of the services to be integrated are funded by the Province, which meant that their participation in Best Start would be wholly voluntary, and in many cases, would represent a significant commitment of vital staff and volunteer resources. It is to their credit that so many of Niagara's service agencies went above and beyond their own mandates to be part of Best Start.

In addition to this high level of community commitment and cooperation, Niagara had the advantage of some prior experience with integrated programming and service delivery. Working partnerships to accomplish specific goals for specific populations were not uncommon prior to Best Start. A number of groups were even involved in integrated planning activities. They emerged as champions for the Niagara Best Start Network.

### *Niagara Region Children's Services*

In addition to being the Consolidated Municipal Services Manager (CMSM) for the Ministry of Children and Youth Services and bearing primary responsibility for funding and coordinating a wide variety of early child development services, Niagara Region Children's Services had a history of supporting and encouraging community development initiatives.

### *Niagara Region Public Health Department*

The Niagara Region Public Health Department had long been involved in health promotion for the 0-6 population. Working both on its own and in partnership with a wide range of community groups and organizations, it had coordinated many successful initiatives related to children's early development and care.

### *Early Years Action Group-Niagara Region*

The Regional Niagara Public Health Department was instrumental in forming the Early Years Action Group-Niagara Region (EYAG-NR). The EYAG-NR's work is based on that of researchers McCain and Mustard, who assert that early brain development sets the stage for lifelong learning, behaviour and health. The EYAG-NR's past successes centre on the areas of children's rights, school readiness, research, and literacy. One of the group's best known accomplishments was the 2002 introduction of the Niagara Children's Charter of Rights based on the United Nations Convention on the Rights of the Child.

### *Ontario Early Years Centres*

The success of the Ontario Early Years Centres (OEYCs) has provided Niagara with a tremendous advantage in understanding some of the key elements necessary for the success of the service "hubs" envisioned in the Province's Best Start strategy. Niagara's OEYCs are widely acknowledged as a model for integrated service delivery, based on their strengths in forming partnerships with other organizations; the delivery of workshops and mobile programming for parents and children; community outreach through

satellite sites; and making resource and toy lending services more widely available.

### *Niagara Child Care Sector*

The Niagara Child Care Sector (NCCS) had been in existence since the 1970's and was widely accepted as the voice of Niagara's home and centre-based child care programs, practitioners and networks, particularly on issues related to standards of practice. One of the Niagara Child Care Sector's most significant accomplishments was the development and delivery of the Quality Child Care Niagara (QCCN) initiative. QCCN trains early childhood educators to help identify and service children with special needs who are enrolled the area's licensed child care programs.

### *The Business Education Council of Niagara*

Early on, the Business Education Council of Niagara agreed to provide the Niagara Best Start Network with infrastructure support, including project management and clerical expertise. It had a long record of success in engaging area school boards and the wider business community in projects that benefit the Niagara community.

Understanding that there were many other groups and service agencies providing early learning, child care and other developmental services to area children, the groups cited above were quick to reach out to others to help form the Niagara Best Start Network. As new members joined the group, and its Terms of Reference were formalized, the Best Start Network agreed upon a vision, later refining it to become the one in place today:

*Niagara--a community that ensures every child will reach optimal potential through cooperative investment in the Early Years.*

- *All children in Niagara region are safe, healthy and respected.*
- *All families in Niagara are supported to provide children with the best possible opportunities early in their lives.*

### **Demographic & Economic Considerations**

Planning and delivering services and supports for children and their families involves considering the context of the community in which the children and families reside. How large the population is, how diverse it is, and how households are dispersed over the community's total area are all factors that affect the cost of service delivery. Since many of the services available to children and their families are funded by tax dollars, the overall economy of the area must also be taken into consideration. Despite very real and immediate needs in some sectors of the community, there is a limit to what taxpayers can be expected to contribute to these services. Some of the demographic and economic factors considered by the Best Start Network included the following:

### **What is the Niagara Best Start Network?**

The Niagara Best Start Network is a strategic umbrella group focused on planning and advocating for integrated services for children under the age of six. It is comprised of a steering committee, known as the Early Years Niagara Planning Council, as well as a number of standing and ad hoc committees. The Niagara Best Start Network is broadly representative of the community and currently includes representatives from:

- Boards of Education
- Brock University;
- Consolidated Municipal Services Manager (CMSM) – Regional Niagara Community Services Department – Children's Services Division;
- Early Identification and Intervention Services;
- Central South-West French Language Best Start Network;
- Niagara Aboriginal Children's Planning Council;
- Niagara Child Care Sector Executive;
- Niagara College;
- Ontario Early Years Centres
- Regional Niagara Public Health Department

Individuals and organizations involved in the Niagara Best Start Network and critical to its success, are invited to join the Council as representatives of the following broad categories:

- Parents/Guardians;
- Parenting Programs;
- School Programs;
- Public Libraries;
- Health and Specialized Services;
- Income and Security Programs;
- Population-Specific Services;
- Community Services;
- Policy Makers/Funders, including the Ministry of Children and Youth Services; Ministry of Education;
- Early Learning & Care Programs; and
- Other children/family focused services/programs as required.

### *Geography and Transportation Challenges*

The Niagara region spans 715 square miles and consists of 12 municipalities, including the urban areas of St. Catharines and Niagara Falls and rural settings such as Wainfleet and West Lincoln. More than 400,000 people live in Niagara, yet transportation between cities is available almost exclusively by private automobile. Many of the area's smaller communities lack even a local public transit system.

### *Cultural & Linguistic Diversity*

Not only is the population of Niagara widely dispersed; it is also quite diverse. According to the 2001 Statistics Canada Census, large portions of the population identify the language spoken most often or on a regular basis at home as being other than English. Some 25% of Thorold and 20% of Niagara Falls residents speak Italian at home. Nearly a third of West Lincoln residents speak Dutch at home, as do nearly a quarter of those residing in Wainfleet and Lincoln. Some 20% of Niagara-on-the-Lake residents speak German at home, while 12% of Welland residents identify French as their primary speaking language. Niagara's Aboriginal population is quite dispersed, however larger concentrations live mainly in Fort Erie, but higher concentrations are also seen in but are not limited to Port Colborne and Welland. Proximity to Canada's busiest immigrant processing centre (Fort Erie) adds an additional element of linguistic and cultural diversity.

### *Literacy Challenges*

In addition to the language diversity that exists in Niagara, adult literacy rates in Niagara are far below the provincial average. Nearly 60% of adult Niagarans do not meet provincial literacy expectations. Despite this reality, children in Niagara are doing well with respect to literacy, with those in grades three and six exceeding provincial averages.

### *Employment and Household Income*

In 2001, unemployment rates in Niagara were less than the provincial average of 6.1%, however there were municipalities that had unemployment rates that were higher than the provincial average including Welland (6.8%) and Port Colborne (6.7%). Household income varied widely and was below the average for the province. In significant portions of Welland, Niagara Falls, Port Colborne and St. Catharines, average incomes were less than \$46,732 per year. The sheer number of low-income families in Niagara means that province-wide measures such as the new income testing formula used to calculate child care fee subsidies often have very serious implications for the area.

### *Child Poverty*

Related to low household income is the issue of child poverty. When compared to the provincial average, Niagara has a higher percentage of children whose parents rely on Ontario Works. Families in Niagara are also twice as likely as their peers living elsewhere to be reliant on the Ontario Disability Support Program. The effects of child poverty in Niagara are beginning to be measured and mapped through the region-wide application of the EDI, as well as other research initiatives including the federal Understanding the Early Years (UEY) project and the Ontario Early Years Niagara Region Data Analysis Coordinator position.

## **Community Needs Identified in 2006—Accomplishments To Date**

The following summary briefly describes the progress that the Niagara Best Start Network has made in addressing these specific needs:

### *Licensed child care spaces, particularly infant and toddler spaces*

While more than 250 new child care spaces have been created since 2006, additional spaces are still needed to meet the demand for infant and toddler age groups.

### *Shorter wait times for infant special needs services*

Special needs services for infants are still in short supply, as they are for all children under the age of six.

### *Expanded preschool and school aged speech services, particularly in French*

Access to preschool and school aged speech services has been expanded in the last year, particularly for

school aged Francophone children attending the Francophone public school system.

*Additional Special Needs Resource Teachers to service area child care centres*

The Special Needs Steering Committee is in the process of implementing its new Pathways approach, which will improve access to services and help identify children in need of resource teachers. Extended hours, weekend care and training to help centres keep up with complex behaviours remain critical needs.

*Funding gaps between the Ontario Early Years Centres and similar Resource Centres*

The Ontario Early Years Centres are in their sixth year and have grown a great deal, but funding has been the same since beginning. At the same time, Resource Centres have received little additional funding. Ongoing annualized funding has not been available so these centres must rely on one time grant funding to increase and enhance their programming.

*Mechanisms to ensure that Niagara's Aboriginal and Francophone populations receive a share of the Best Start allocation, so they may develop plans to achieve their unique early learning and care aspirations*

Niagara Region Children's Services has introduced the required mechanisms.

*Engagement of Niagara's physicians and primary health care providers in the implementation of a robust 18-month strategy to monitor healthy child development and link families with community resources*

A pilot project is currently underway in Niagara Falls, involving nine local physicians, two nurse practitioners, and a host of early learning and care service providers.

*Greater access to evidence-based parent education programs*

A dedicated task group has been formed and partner contributions and community funding secured to develop a strategy for delivering integrated, evidence-based parenting programs across the region.

*Increased access to mental health services for both children and adults*

This continues to pose a challenge, although some gains have been made, particularly in public awareness programming related to Post Partum Depression and Mood Disorders. Additionally, the Fort Erie Native Friendship Centre is also making strides toward enhancing its capacity to refer clients to other agencies for specialized assistance.

*Mobile programming or some other means of addressing the lack of public transportation that prevents many low income families from accessing services that could benefit them.*

While the lack of transportation continues to complicate the delivery of early learning and care services, Niagara's Aboriginal community has introduced a number of measures that appear to be addressing this issue.

**Key Goals Identified in 2006—Accomplishments To Date**

In developing its initial Integrated Community Plan, the Niagara Best Start Network set five key goals that encompassed both the community needs it had identified, as well as the broader parameters set forth by the provincial government. These goals are summarized below, along with highlights of the progress that has been made toward them.

*Creation of Hubs and Formal Service Linkages*

To better understand the provincial Government's vision of a neighbourhood hub and adapt it to suit the Niagara context, the Niagara Best Start Network has surveyed the community, visited hubs in other jurisdictions, and has begun the initial hub identification process.

*One Child, One Plan*

One of the biggest challenges families who require services for their children face is the complexity and volume of the paperwork required to access these services. The Niagara Best Start Network identified the goal of streamlining this process for parents, and better coordinating the efforts of the various service providers families rely on. While there is still much work to do, by creating opportunities for community

agencies to interact at the highest level and on a more formal basis with one another, the Best Start initiative is making a difference to Niagara families.

#### *Licensed Child Care in Schools*

The provincial allocation of tax dollars for the creation of new licensed child care spaces made possible the addition of 285 new spaces, giving Niagara a total inventory of over 7,000 licensed spaces. The provincial requirement that these funds be used to expand child care in schools, led to nine sites being chosen --seven in the English language school system and two in the French language school system. An additional positive step has been taken by the District School Board of Niagara and the Niagara Catholic District School Board to centralize their transportation planning and management processes to increase access to bus transportation to and from school sites.

#### *Earlier Identification & Shorter Wait Times*

For families who are worried about developmental delays, the top priority is getting a professional diagnosis, so that treatment can begin as soon as possible. Niagara faces a severe shortage of doctors and healthcare professionals, and one of the ways it has coped with this situation is through QCCN. The Niagara Region Children's Services Department continued to fund QCCN, allowing more child care providers to be trained to screen children for common developmental issues and refer them on for further testing. In 2006, QCCN resulted in more than 200 children being referred for further help.

The Niagara Region Public Health Department has also incorporated developmental screening into many of its programs, so that even more families may access these services. One of its most important early intervention initiatives is its expansion of the use of the Larson prenatal screening tool in prenatal classes. Uptake of the Niagara Region Public Health Department prenatal classes increased by 56% in 2006, and its data collection and recording methods were enhanced to permit further mapping and analysis allowing for an increased ability to target appropriate initiatives and programming to meet community needs.

As a result of more children being screened, Niagara now faces the challenge of ensuring that children who require further testing and treatment actually receive them in a timely fashion. A wait list management strategy is being developed. Service agencies such as Speech Services Niagara that have received additional funding have directed much of it to hiring the additional staff needed to treat the growing number of children identified as needing their services.

The Regional Niagara Public Health Department has also developed a local pilot project, the 18 Month Well Baby Visit to enhance earlier identification as well as enhance physicians' knowledge of community resources, so that family health teams will feel more comfortable referring patients to local organizations for help and support.

#### *Communication & Inclusiveness That Optimizes Development*

The Niagara Best Start Network recognized early on that in order to make services more easily accessible to area families, communication among service providers would need to be enhanced and perhaps formalized. It has continued to inventory and clarify the roles, responsibilities and services provided by its members and the adjunct groups they represent.

The Best Start Network has taken two additional and important steps. One is reaching out to groups, service agencies and others who have traditionally been "out-of-the-loop" in terms of Niagara's extensive network of supports for families and children. The other is reaching beyond Niagara's geographical boundaries as necessary to achieve the critical mass required to deliver highly specialized services in a cost-effective manner.

Examples of the former include working with representatives from Niagara's Aboriginal community to form the Niagara Aboriginal Children's Planning Council (NACPC) coordinating a media event to launch the new organization, and developing a plan to deliver cultural sensitivity training to service providers so that non-Aboriginal service agencies are better equipped to meet the needs of Aboriginal families. Examples of the latter include the Centre de Santé Communautaire Hamilton/Niagara's recent purchase of a video conferencing system that will allow the organization to deliver highly specialized services to Niagara's Francophone population. This system will facilitate such things as having a French-speaking child

psychologist located elsewhere work with Niagara families.

### **Goals and Strategies for Moving Forward in 2007/2008**

Minor adjustments have been made to the goals the Niagara Best Start Network originally identified in 2006. The original goal of *creating hubs and formal service linkages* has been adjusted to reflect the community consensus that the process may be recognizing existing programs or facilities as potential hubs and expanding upon them, rather than seeking to build entirely new facilities. The original goal of *licensed child care in schools* has been adjusted to ensure that new child care programs do not compete with or compromise the viability of existing programs. This goal is now articulated as *licensed child care in or near schools*.

In working toward the goals identified in 2006, the Niagara Best Start Network has run headfirst into an increasingly urgent community challenge: the need for a comprehensive strategy to address child poverty.

The Niagara Children's Planning Council recognizes that it is positioned to be a community leader in addressing child poverty in its work to achieve Niagara Best Start goals. In the network's leadership initiative to begin tackling child poverty in 2007-08, a concerted effort will be made to source and analyze relevant data for the purpose of informing all early learning and care planning decisions and advocacy strategies.

#### *System Integration*

Moving forward in 2007/2008 involves developing and implementing goals and strategies for both system integration and coordinated service delivery. In the fall of 2007, the Niagara Best Start Network will be hosting a professionally facilitated session to ensure that members of the network and the various adjunct groups they represent understand the concept of system integration. At this session, a community capacity exercise will be demonstrated where network members will brainstorm strategies to move the Niagara community forward with system integration.

Three groups in Niagara are leading the way with respect to system integration. Their successes provide a roadmap of sorts for other groups:

The Joint Implementation & Planning Committee is a subcommittee of the Speech Services Niagara Advisory Committee and the Healthy Babies, Healthy Children/Infant Education Advisory Committee. The committee is accountable to both advisory boards. The committee meets monthly to discuss issues of service coordination between the agencies and to bring the staff together to facilitate team planning. It has created the "community infant and preschool services team" with a service binder and yearly meetings and is now looking at geographically established teams. This concept is closely aligned with the Province's Best Start vision in terms of integration.

The Special Needs Steering Committee was formed by Niagara Region Children's Services in 2003 in response to a need to improve collaboration and service delivery for families of children with special needs enrolled in licensed child care. It has introduced a new model of service delivery for high needs children requiring one-on-one support. It has also facilitated collaboration between Niagara Child and Youth Services and Quality Child Care Niagara to develop a behavioral screening tool, programming strategies and support for families and child care service providers.

The Early Years Niagara Research Advisory Group guides and makes recommendations with respect to child development research in Niagara, including the Understanding the Early Years Research project. The group is currently spearheading the development of a community report that will allow policymakers and the public to better understand the factors that affect children's early development by providing a neighbourhood level assessment of key developmental indicators.

Additionally, enhanced funding for three specific programming areas-- *Preschool Speech and Language; Infant Hearing and Blind-Low Vision Early Intervention*-- has provided Niagara with an opportunity to test and develop its capacity for integrated service planning. The early results are very promising. Some highlights include:

- Quality Child Care Niagara's introduction of a Speech and Language Checklist that allows child care program staff to identify potential developmental concerns earlier, so children can be referred for further testing and support and the addition of staff to help reduce the wait list for Speech and Language supports;
- The screening of nearly 4,000 Niagara newborns for hearing difficulties and the addition of staff to reduce wait times for specialized children's hearing services; and
- The introduction of a new Blind-Low Vision Early Intervention program that will launch in the fall of 2007.

#### *Hub Development*

Niagara is in the initial stages of building a common vision for Best Start hubs, which includes reviewing the Ontario Early Years Centres' Plan and endorsing that existing Ontario Early Years Centres, regionally funded Resource Centres, and federally funded projects like Brighter Futures be considered as hubs. The Early Childhood Community Development Centre is recognized as a hub for early learning and care professionals in Niagara.

Niagara has identified three necessary precursors to hub development:

1. Determining the future growth of hub development using EDI results, mapping the use of services, and determining service providers' existing strengths.
2. Increasing community engagement, both with parents and within the Best Start Network itself, to ensure that our progress reflects the needs and aspirations of the families to be served.
3. Compiling a complete service inventory, including all existing sites at which early child development services may be obtained and the days and hours during which service is available.

#### *Building Trust & Strengthening Working Relationships*

In the coming weeks and months, building trust and strengthening the working relationships that exist among the members of the Niagara Best Start Network will be a key focus. Meetings of the Niagara Best Start Network will take place in various locations around the region, allowing partner organizations to showcase their facilities and highlight best practices.

This type of outreach is essential, as so much has been gained from the Network's preliminary efforts. The Network's Aboriginal partners have brought valuable information about how much of a difference supports such as transportation, refreshments and child care can have on the ability of families to participate in programs that can benefit them. Physically moving the meetings from place to place allows such accomplishments to be more readily shared.

Continuing to develop these kinds of positive relationships will involve a variety of other practical measures as well, including the translation of important documents and resource materials into other languages, so they may be more widely used. The Early Childhood Community Development Centre (ECCDC) has taken an extra step in this regard and will be developing resource collections customized for use in Francophone centres, and in Aboriginal settings. Additionally, French language story times for pre-schoolers will be offered at the Welland Public Library. Further investments in translation are already being planned by a number of Niagara's service agencies.

#### *Transparency & Accountability*

The Niagara Best Start Network looks forward to working with stakeholders across the region and beyond to ensure that every child in Niagara truly does receive the very best possible start in life. Since embarking on this journey, the Niagara Best Start Network has had the privilege of witnessing and sharing in the successes of its many community partners. While the Network has embraced the provincial government's Best Start vision, it also understands that from the service provider's perspective, the value of Best Start is in the community planning and development process itself. This creates the mutual awareness that makes it possible for the necessary partnerships, documentation and referral processes to develop organically, as two or more agencies commit to a specific type of collaboration to solve a specific type of family problem. Niagara has seen many examples of this already.

While this component of the provincial Best Start initiative has been invaluable, the benefit of developing

a system that directs, co-ordinates, monitors and documents such relationships is less readily identified. For cash-strapped community agencies that are already struggling to reduce wait times and deliver essential services to families in need, even the reporting process required to contribute to a quarterly or annual report on "integration" activities may mean a significant diversion of scarce resources away from children who need help. The Niagara Best Start Network is committed to developing a more balanced approach.

The Niagara Best Start Network recognizes that from a family's perspective, an ad hoc solution found quickly will be perceived as more effective and efficient than access to a "system" that, on paper, anticipates and meets their every need, but lacks the resources required for timely service and leaves their child on a waiting list for months or years. Moving forward, the Niagara Best Start Network is committed to creating neighbourhood-level mechanisms that allow families to report gaps in service and suggest ways to improve the service delivery process, and to responding to such reports in a timely manner. After all, the only true measure of effective service integration is a family's sense of how well their child's needs are being met.

### **Acknowledgments**

We wish to express our sincere gratitude and appreciation to all of the groups and individuals who have helped make Niagara's Best Start planning process a success. We look forward to working with you and learning from you in the weeks and months to come.

Sincerely,

Margaret Andrewes, Co-Chair  
Dr. Robin Williams, Co-Chair