



Early Childhood Iowa Monday Musings October 19, 2015 2015 Vol. 2, No. 38

Welcome to the ECI **Monday Musings**. It is a compilation of information, practical advice, training announcements, and/or success stories. **Monday Musings** is intended to disseminate information to Early Childhood Iowa Stakeholders in a timely fashion. (We may on occasion send out a separate email with information if it needs immediate attention or if for a specific audience.)

Please let us know if you have something you would like to contribute or have suggestions or comments at jeffrey.anderson@iowa.gov

Back Issues of Monday Musing are available [here](#).

***No man will make a great leader who wants to do it all himself or to get all the credit for doing it.
-Andrew Carengie***

State Information:

Medicaid Member Education and Enrollment Events

Iowa Medicaid will host a mix of in-person meetings and webinars branded as “tele-townhall meetings” in the top 17 populated cities in Iowa. These meetings will provide the public with an opportunity to receive information about the transition, ask questions directly to DHS staff, and receive *in-person enrollment assistance*.

The tele-townhalls will feature a short presentation for those with Internet access and also will be available via conference call. Iowa Medicaid will work with local venues such as public libraries to offer the in-person meetings and tele-townhalls free to the public, in order for a larger audience to view the presentation. These presentations will be designed to provide the public with the ability to participate in the process and address any questions the members have. Iowa Medicaid will track the questions that are asked, and use these meetings to prepare for further communications materials and planned responses.

To view the schedule: [Medicaid Member Education and Enrollment Events](#)

Federal Information:

The White House Rural Initiative Highlights the National Center of Excellence on Early Childhood Mental Health

Last week, SAMSHA, in partnership with ACF and HRSA of the Department of Health and Human Services, announced the launch of the National Center of Excellence for Infant and Early Childhood Mental Health



Consultation. The White House highlighted the launch with a blog by Roberto Rodríguez, Deputy Assistant to the President for Education and Doug O'Brien, Senior Policy Advisor for Rural Affairs with the White House Domestic Policy Council. The Center for Excellence will be funded at about \$6 million over the next four years to build strong state and tribal systems of early childhood mental health consultation and meet the social-emotional and behavioral health of young children and their families.

Read the full blog [here](#) and related blogs [here](#) and [here](#).

October is Sudden Infant Death Syndrome (SIDS) Awareness Month!

By Katherine A. Beckmann, Ph.D, M.P.H., Senior Policy Advisor for Early Childhood Health and Development Office of the Deputy Assistant Secretary and Interdepartmental Liaison for Early Childhood

About 3,500 babies die suddenly and unexpectedly each year in the United States.^[1] These deaths are the result of unknown causes, Accidental Suffocation and Strangulation in Bed (ASSB), and Sudden Infant Death Syndrome (SIDS). SIDS is defined as an unidentified cause of death in a baby younger than one year, even after the performance of an autopsy, examination of the death scene, and review of the infant's and family's clinical histories. Most SIDS deaths occur when babies are between one and four months of age and the majority (90%) of SIDS deaths occur before six months. However, SIDS deaths can occur anytime during a baby's first year.^[2] Approximately, 20 percent of SIDS-related deaths occur in child care settings.^[3]

The Safe to Sleep® campaign (formerly known as Back to Sleep®) aims to educate parents, caregivers,



and health care providers about ways to reduce to the risk of SIDS and other sleep-related causes of infant death. Over the past two decades, we've made great progress in helping to reduce the risk of SIDS by more than 50 percent across the country, as a whole. However, disparities still exist. For example, African American infants are twice as likely as white infants to die of SIDS. Similarly, American Indian/Alaska Native infants are three times as likely as white infants to die of SIDS.

How can you make a safe sleep environment?

- Always place baby on his or her back to sleep for all

sleep times, including naps.

^[1] CDC, NCHS, Compressed Mortality File, cause of death is determined using the following ICD-9 Codes: SIDS (798.0), unknown cause (799.9) and ASSB (E913.0). For 2000-2013, cause of death is determined using the following ICD-10 codes: SIDS (R95), unknown cause (R99) and ASSB (W75).

^[2] Trachtenberg, F., Haas, E., Kinney, H., Stanley, C., & Krous, H. (2012). Risk factor changes for sudden infant death syndrome after initiation of Back-to-Sleep campaign. *Pediatrics*, 129(4), 630-638.

^[3] [Moon, R., Patel, K., & Shaefer, S.](#) (2000). Sudden infant death syndrome in child care settings, [Pediatrics](#), 106, 295-300.

- Have the baby **share your room, not your bed**. Your baby should not sleep in an adult bed, on a couch, or on a chair alone, with you, or with anyone else. Try room sharing—keeping baby's sleep area in the *same* room next to where you sleep
- Use a **firm sleep surface**, such as a mattress in a [safety-approved crib](#), covered by a fitted sheet
- Keep soft objects, toys, pillows, crib bumpers, and loose bedding **out of your baby's sleep area**
- Dress your baby in **no more than one layer of clothing more than an adult would wear** to be comfortable, and leave the blanket out of the crib. A one-piece sleeper or wearable blanket can be used for sleep clothing. Keep the room at a temperature that is comfortable for an adult.

What can you do to spread the word?

Now is a great time to start planning October events to get the word out about safe infant sleep! Here are ideas and **free** resources to help you plan **SIDS Awareness Month** activities:

- ✓ **Community events:** Set up a booth at community events, such as health fairs, state fairs, or downtown markets.
- ✓ **Educational seminars:** Organize an educational seminar or [presentation](#) with specific populations, such as African American congregations, early childhood education students, first responders, or older community members.
- ✓ **Fundraising events:** If you're hosting a fundraising event, include [Safe to Sleep® materials](#) in the registration packet.
- ✓ **Public Service Announcements:** Ask your local radio or TV station to share [information about SIDS](#). If you have local stories to include, broadcasts with testimony from parents affected by infant death can be particularly powerful.
- ✓ **Display Resources:** Create a display with information or brochures for use in children's hospitals, barber shops and hair salons, obstetrician offices, and pediatrician offices.

For Families

- [Parents' Guide to Safe Sleep](#)
- A grandparents brochure on safe infant sleep ([English](#) and [en español](#))
- A safe sleep environment one-pager ([English](#) and [en español](#))

For Early Care and Education Providers

- Participate in the free American Academy of Pediatrics [online training](#), *Reducing the Risk of SIDS in Child Care*, and receive a certificate of completion for 1.0 contact hour (per your specific state SIDS in-service requirements)
- [Child Care Providers Guide to Safe Sleep](#)
- [Door hangers](#) for general outreach, African American, and Hispanic communities
- [Brochures](#) for general outreach as well as African American, American Indian/Alaska Native, and Hispanic communities
- Use the *Reducing the Risk of SIDS in Child Care Speaker's Kit* to educate your community about SIDS in child care. It is available [in English](#) and [en español](#).

For General Education Training:

- A Safe Infant Sleep video [in English](#) and [en español](#).

- Healthy Native Babies Project [materials](#) for American Indian/Alaska Native communities
- [Brochures](#) for general outreach as well as African American, American Indian/Alaska Native, and Hispanic communities

For more information, please visit <http://safetosleep.nichd.nih.gov>, <http://www.cdc.gov/sids/index.htm>, and <http://www.healthychildcare.org/SIDS.html>.

HomVEE 2015 Evidence Review and Other New Resources

The Home Visiting Evidence of Effectiveness (HomVEE) review has just released several new resources, including results of the 2015 evidence review. Please visit the HomVee website for more detail (<http://homvee.acf.hhs.gov/WhatsNew.aspx>) or click on the links below.

This year HomVEE reviewed several new program models such as: [HealthConnect One's® Community-Based Doula Program](#), [Healthy Beginnings, Promoting First Relationships®](#), and [Nurses for Newborns](#). It also updated a review of: [Health Access Nurturing Development Services](#) (HANDS) Program. Both HANDS and Healthy Beginnings meet the U.S. Department of Health and Human Services' (HHS) criteria for an evidence-based program model. Sponsored by HHS, HomVEE is a thorough and transparent review of the research literature on home visiting.

A new three-page [summary brief](#) describes the HomVEE review process, review results, and the 19 program models determined to meet the Department of Health and Human Services' criteria for an "evidence-based early childhood home visiting service delivery model." The brief is based on the information presented in this new [Executive Summary](#) which provides more detailed information on all 44 home visiting models.

About HomVEE

Sponsored by HHS, [HomVEE](#) is a thorough and transparent review of the research literature on home visiting. The HomVEE team assesses the evidence of effectiveness for home visiting program models that target families with pregnant women and children from birth to kindergarten entry (up through age 5).

Visit the HomVEE [website](#) to find:

- A comprehensive overview of review procedures, standards, and results.
- Descriptions and reviews of program models, including evidence of each model's effectiveness, details on the studies, and a summary of findings by outcome domain.
- Outcome domain reports, which list the review results by type of outcome and include evidence of effectiveness for outcomes in the domain, a summary of findings for the domain by program model, and details on specific outcomes and measures.
- Implementation profiles with information such as prerequisites for implementing a model, training requirements, estimated costs, implementation experiences, and contact information for program model staff.
- A search tool that can be used to find specific studies.

Visit the HomVEE [website](#) for more information.

Other Information:

Thanks for Complaining

From the McCormick Center for Early Childhood Development.

While this blog is about an early learning center, the thoughts could apply to many program and system building situations.

“Years ago I found myself frustrated by the griping I was hearing from teaching staff. Complaints like ‘We have no input into who gets hired,’ ‘Parents just don’t care,’ and many others were a common part of their repertoire. These comments seemed harsh and hearing staff complain took its toll on me. My initial reaction was to be defensive—to stop the complaints as quickly as possible. In some cases I was successful, but more often than not the complaints just kept coming. And then one day I had an epiphany.”

In our most [recent blog post](#), Jill Bella, Director of Quality Supports, offers four reasons complaints provide valuable information about a program.

Free Resources for Highlighting the Importance of the First 2000 Days of a Child’s Life

If you’re interested in engaging your staff, families, constituents, or community about the importance of the first 2000 days of a child’s life and why early learning is a priority, consider accessing the resources of North Carolina’s First 2,000 Days Toolkit.

To access these free resources, go to

<http://www.first2000days.org/first-2000-days-toolkit/#.VhKtXyuK92B>

You’ll need to provide your name, email, zip code, and organization (a funder requirement) but will then be able to download all the materials.

Planned Language Approach

From the Iowa Head Start Collaboration Office:

At the registration link below is a flier about all the training opportunities that are available for different parts of the Planned Language Approach. They are scheduled as part of the **Iowa Culture and Language Conference**. Of course the conference also includes many other workshops and keynotes of interest.

This is a convenient way to get new staff oriented to PLA or give existing staff a refresher on PLA basics.

[Please consider registering today.](#)

The Merits of Early Investment

A new report from the [National Research Center on Hispanic Children & Families](#) shows positive results for Latino children in Miami-Dade County, Florida, who attended public school pre-K or subsidized center-based child care. Children in these programs entered kindergarten scoring above national averages in pre-academic and social behavioral skills. These students performed well through third grade (when the study ended), measured by their GPA and score on a standardized reading comprehension test.

The Center is led by Child Trends and Abt Associates, with university partners.

[READ MORE](#)

For more information about Early Childhood Iowa, visit our website:

<http://www.earlychildhoodiowa.org/>

To join the ECI Stakeholders, please complete the commitment survey at:

<https://www.surveymonkey.com/s/FSXR5F2>

2015 ECI Meeting Calendar:

ECI State Board

10:00 – 1:00

November 6 (Des Moines)

ECI State Dept. Directors

8:30 – 10:30 AM

October 2

ECI Stakeholders Alliance

3 – 4 Hour meetings

December 8 (PM)

ECI Steering Committee

October 1 (9:00 AM – Noon)

November 5 (9:00 AM – Noon)

ECI Area Directors

December 9

2016 ECI Meeting Calendar:

ECI State Board

10:00 – 1:00

January 8

April 1

June 3

September 9

November 4

ECI State Dept. Directors

8:30 – 10:30

May 6

October 7

ECI Stakeholders Alliance

3 – 4 Hour meetings

February 23 (TBD)

May 10 (PM)

September 13 (AM)

December 13 (PM)

ECI Steering Committee

Time Varies

January 7 (9:00 AM – Noon)

March 3 (9:00 – 4:00 PM)

April 7 (9:00 AM – Noon)

June 2 (9:00 AM – Noon)

August 4 (9:00 AM – 4:00 PM)

October 6 (9:00 AM – Noon)

November 3 (9:00 AM – Noon)

ECI Area Directors

April 6 All day

(June will be regional meetings)

September 13 (afternoon)

December 7 All day

Early Childhood Iowa Day on the Hill

February 23, 2016