

Summary for ECRC Shared Learning Journey #1: Prenatal to Three Initiative (PN3) Tuesday, April 13, 2021 from 10:00-11:00am

Overview:

- The Prenatal to Three (PN3) Initiative is a public- private partnership between the Governor’s Office of Early Childhood Development (GOECD) and Start Early. The PN3 Coalition consists of a broad base of stakeholders and aligns with the GOECD Strategic Plan for the Preschool Development Grant B-5.
- GOECD has leveraged Preschool Development Grant investments to address critical resource gaps.
- Policy Highlights:
 - HB158 provides the legislative framework for covering critical home visiting and doula services to families through Medicaid.
 - HB2170 will extend Early Intervention services and expand access to infant mental health consultation and services. The creation of the Whole Child Task Force will also support trauma-responsive schools.
- Philanthropic investments have been critical in supporting the PN3 initiative—especially to support family engagement in the planning and implementation of various projects.

Workgroup Discussion:

- Workgroup members noted the importance of engaging licensed-exempt providers in this work as they are often under-resourced and underrepresented in policy discussions.
- Family engagement should begin at the early stages of any initiative. We shouldn't be creating separate "tables" for family engagement but ensure the voices of families are threaded throughout all discussions. Members discussed the desire to move from a model of family “engagement” to a model of family “empowerment.” It is important to recognize the resources and supports needed to reach true engagement/empowerment (e.g. stipends to compensate parents/caregivers).
- Investments in home-based programs are critical to increasing enrollment—this has been a big push during the pandemic and has allowed programs and families to continue services and interventions remotely.
- Subcommittee structure must be grounded in data from communities. Subcommittees should not be siloed but should cut across different issue areas and sectors across the prenatal to five landscape.

Key Takeaways:

- **Align:** There was a consensus to align to priorities and policy objectives from the PN3 agenda and other state and local initiatives (e.g. the Early Learning Council, Healthy Chicago 2025, Chicago's Racial Equity Rapid Response Team (RERRT), etc.)
- **Arrange:** Subcommittees should not be siloed but should be arranged to cut across different areas across the prenatal to five landscape. Subcommittee structure must also be grounded in data from communities.
- **Adapt:** as we establish the structure for the ECE advisory table, we will need to learn and adapt as we go. It will be important to build in the space, time and supports necessary to translate families’ and providers’ lived experience into policy solutions.
 - e.g. include smaller organizations, establish a family engagement committee, utilize existing community structures to deepen two-way communication for both listening and sharing information about ECRC.