
OFFICE OF GOVERNOR RONNIE MUSGROVE
INTEROFFICE MEMORANDUM

TO: GOVERNOR
FROM: RILEY
SUBJECT: NATIONAL COMMITTEE ON PARTNERSHIPS FOR CHILDREN'S HEALTH: INVESTING INTELLECTUAL CAPITAL IN EARLY CHILDHOOD HEALTH CONFERENCE (CHARLOTTE, NC, OCTOBER 18, 2000)
DATE 10/16/00
CC: SIMMONS
BOYD
FILE

Governor Jim Hunt is hosting this conference sponsored by the National Committee on Partnerships for Children's Health. Governors Hunt, Siegelman and Sundquist will also be attending the conference. You are scheduled to speak to the conference at 9:15 Wednesday morning. Dr. Cathy Grace will be introducing you. Sara Rosenbaum, Director of George Washington University's Institute for Health Services Research and Policy will speak in the session before yours. An attorney, she specializes in Medicaid policy and is expected to discuss CHIP's impact on early childhood health, so you might enjoy hearing her comments.

The Partnership's goal for this conference is to improve the health of our youngest children by coordinating child health strategies in early childhood education environments. The Partnership's vision is to advance this goal by engaging postsecondary institutions in systemic strategies that combine research, evaluation, professional development and training, knowledge dissemination, and public education and policy, drawing from all relevant disciplines. The immediate objective is for each state to select an initial and appropriate child health priority (with indicators and benchmarks) and to develop a practical mechanism for coordinating, supporting, and rewarding the participation of postsecondary institutions in the multiple strategies that will lead to measurable progress. The Partnership's long-term objectives are to strengthen the early childhood education, child health, and postsecondary systems, and to recognize and reward colleges and universities not only for academic and athletic excellence, but also for social excellence – the ability to work together to apply knowledge to community needs.

Mississippi's 10-member team to this conference includes:

- Barbara Beaulieu, Director of MUW's Child and Parent Development Center
- Carol Burnett, Office of Children and Youth, DHS
- Dr. Susan Buttross, Director of UMMC's Division of Child Development

- Judy Couey, Assistant Bureau Director for Instructional Development, MDE
- Dr. Cathy Grace, MSU's Early Childhood Institute
- John Hale, Pearl River Valley Opportunities (Head Start)
- Roy Hart, Director of First Steps, Department of Health
- Billy Night, Singing River Educational Association (Head Start)
- Donna Simmons
- Julia Washington, Operation Shoestring

The Partnership has developed the “Charlotte Compact” (attached for your reference) which they hope the four participating governors will sign. The compact is developed around the following ten steps that each state agrees to take:

1. Encourage academic leaders, especially those in health-related disciplines, to visit early childhood settings.
2. Coordinate strategies across institutions, disciplines and sectors through a new strategic partnership with a concrete, measurable focus.
3. Organize the involvement of higher education as a partner in bridging early childhood health and education.
4. Invest this mechanism with the authority and the responsibility to coordinate postsecondary partners in a coherent child health strategy.
5. Focus the resources of public and private institutions, and use the strengths of 2-year institutions in these strategic partnerships to benefit children.
6. Establish within the next five months a plan of action that includes a coordinated agenda with clear benchmarks and roles for multiple institutions.
7. Use new technologies to address data collection, service delivery, and training needs.
8. Leverage federal, state, and philanthropic funding.
9. Institutionalize both the coordinating mechanism, and the child health strategies introduced in early childhood environments.
10. Adapt the new mechanisms to achieve other goals at the intersection of health and learning on a statewide scale.

These steps seem to be driven towards good policy for improving our early childhood health services. However, the compact also seems to set a lot of requirements with little flexibility for the states. Steps 3 and 4 would likely require funding. One purpose of the

conference is for each state's team to develop strategies for coordinating postsecondary institutions, state and community agencies to address specific child health priorities through the early childhood education network in each state. The compact seems to "drive" all of the participating states' strategies without consideration for each state's needs, priorities and resources.