In February 2016, the Ministry of Education (MEDU) announced its vision for the transformation of child and family centres into a consolidated, integrated and cohesive system of services and supports for children from birth to 6 years of age, and their families to be known as Ontario Early Years Child and Family Centres (OEYCFC).

Niagara Region Children’s Services is designated by the Province of Ontario as the Consolidated Municipal Service Manager (CMSM) and as such, is responsible for service system planning and administration of the early learning and child care system in Niagara. Beginning in January 2018 this portfolio will expand to include the local management of OEYCFCs.

While all OEYCFCs will be guided by the OEYCFC Planning Guidelines for Service System Managers, a common identity and a new funding approach determined by the province, Niagara Region Children’s Services has been given the key responsibilities of:

- Conducting a local needs assessment and inventory of existing child and family programs and services;
- Engaging parents and caregivers to inform the planning and delivery of OEYCFC programs and services;
- Facilitating engagement with early years partners to inform service system planning; and
- Managing provincial funds and purchase of service agreements associated with the delivery of OEYCFC programs and services.

Over the last year Niagara Region Children’s Services has been working with the MEDU and local early years sector service providers who have provided valuable input, feedback and recommendations to inform the needs assessment. This has allowed Niagara Region Children’s Services to develop a local OEYCFC plan to prepare and support local service planning with the goal of improving service system integration and maximize available resources to build a high quality, seamless and accessible early years system for children and their families.

This document outlines the local needs assessment undertaken over the past year, the results of extensive community consultation, and finally the local initial OEYCFC plan that will inform the next phases as Niagara moves forward with the transformation of child and family centres.

Section One provides an overview of Niagara, with information describing socio-demographics and population projections and trends, unique populations, existing child and family centres, and a brief history of service system integration planning in Niagara. This information is intended to consolidate information and assist in identifying existing service gaps and duplication in communities.

Section Two describes the community engagement strategies used to collect data from a variety of stakeholders, as well as the pre-existing data accessed from multiple sources in order to inform the needs assessment.
Section Three provides a summary of the results from the community engagement strategies, and the various data sets accessed to begin to describe an OEYCFC system and the program and services the centres offer in Niagara.

Section Four outlines the processes and activities that will take place over the next five years as Niagara Region Children’s Services works in partnership with the early years community towards building a high quality, seamless and accessible early years system for children and their families.
My favourite thing to do at the centre is........ ride a bike
Demographic Changes and Population Trends

As Ontario’s eighth largest municipality, the Niagara region spans 1,854 sq. kilometres, with a total population of 447,888 (2016 Census). The Niagara region includes a mix of 12 distinct urban and rural municipalities, with three large urban centres St. Catharines, Niagara Falls, and Welland. In 2016, there were 20,775 children between the ages of 0-4 years living within the Niagara region, representing approximately 4.6% of the total population (2016 Census). Niagara region has been experiencing a steady decline in the live birth rate since 2004.

Niagara region is forecasted to experience a growth rate of approximately 16% between 2016 and 2041. It is expected that 60% of Niagara’s population growth, through to 2041 will be attributed to seniors aged 65 and up whereas for the same time period 7% of the growth will be attributed to youth under the age of 25.

Although the Niagara region is expected to experience lower than anticipated provincial growth, the growth that is occurring differs significantly across the region. It is expected that some municipalities will experience the greatest share of the population growth, more specifically, the areas of Grimsby and Lincoln in the west end of Niagara, and the city of Niagara Falls.

Additional data sources identified that:

- The number of children aged 0-4 in each municipality ranges from 320 in Wainfleet to 6020 in St. Catharines (2016 Census).
- Anywhere from 37% (Port Colborne) to 52% (West Lincoln) of families have children living at home (2011 Census).
- In 2016, the average monthly social assistance caseload was 17,509 cases representing approximately 4% of Niagara’s population, slightly higher than the province (3%). When broken down according to family compositions, of the total caseload, 26% were sole support parents, and 7% were couples with children.
- In 2016, approximately 824 child recipients of Ontario Works were living in temporary care arrangements, meaning children in financial need temporarily living with an adult who is not legally obligated to support the child.
- Niagara’s unemployment rate, when compared to that of Ontario, has been consistently higher and more varied over time. The annual average unemployment rate in Niagara for 2016 was 7.4% while the provincial average was 6.6%.
- The average annual income for a family with children is $89,671 (after tax) in Niagara, compared to $99,843 for the province (2011 Census).
- 17.2% of family households are single parent families; of which 80% are female led (2011 Census).

Unique populations

Francophone

The City of Welland and the City of Port Colborne are two municipalities within Niagara designated under the French Language Services Act, which ensures that provincial government services are offered in French.
Currently a francophone child and family centre is operating by a French language community health centre. This location is a community hub, with multiple services available on-site, located within or in close proximity to neighbourhoods with high number of French speaking residents in Welland. With a smaller overall population, and smaller percentage of French speaking residents, Port Colborne children and their families are served by French speaking staff at the child and family centre.

*Indigenous*

Indigenous peoples are Canada’s first and original populations, rich in diversity, culture, identities and language. The Niagara region is served by two Indigenous Friendship Centres, located in Fort Erie and Niagara-on-the-Lake.

Both Friendship Centres are currently undertaking work with Niagara Region Children’s Services, local Indigenous organizations and/or communities, and other relevant local planning partners to develop proposals under the Journey Together: Ontario’s Commitment to Reconciliation with Indigenous Peoples. This provincial initiative to expand access to culturally-relevant, Indigenous-led early years programs and services off-reserve, including child care and child and family programs, is in alignment with their respective Homeward Bound projects. Once operational the Homeward Bound projects will consist of wrap-around services to enable single, Indigenous mothers to obtain a college diploma and make a successful transition to sustainable employment, permanent housing and independent living for them and their children.

Currently an Indigenous child and family centre offering community based, culturally relevant programs and services for off-reserve Indigenous children from birth to 6 years of age is located within the Fort Erie Friendship Centre.

*Newcomer*

Niagara, or more specifically the Town of Fort Erie, is home to one of Canada’s largest land-border entry points for international immigrants, many of whom apply for refugee status. Many families with young children arriving at the border require a number of supports and services from community agencies, such as temporary shelter, long-term housing assistance, language training and other supports. However, for most, their stay in Niagara is of a short duration. Many of these families move to larger centres, such as Toronto, over time. According to the most recent Census data (2011) (2016 immigration information has not yet been released by Statistics Canada), 15.5% of the Niagara population were immigrants, but only 1.2% were new immigrants, having arrived within the last 5 years (2011 Census).
Existing Early Years Services in Niagara

Provincially Funded Child and Family Centres

Since the early 1990s, Niagara Region Children’s Services has managed the funding of the four Family Resource Programs (FRPs) in Niagara, on behalf of the province. These four FRPs deliver a range of supports and services to families and caregivers that, while aligned with Ontario Early Years Centres (OEYCs) and Parent and Family Literacy Centres (PFLCs), serve unique populations region-wide. The agencies operating a FRP are:

- Centre de santé communautaire Hamilton/Niagara serving the Francophone community
- Fort Erie Native Friendship Centre serving the Indigenous peoples
- Bethlehem Housing and Support Services providing transitional supportive housing and supports
- Early Childhood Community Development Centre, a professional resource centre for educators and caregivers

Niagara was a phase I community with Ontario Early Years Centres opening in April 2002. In Niagara, four lead agencies operate the four main locations with a number of satellite locations within schools, community centres and churches within each of the service areas. In total there are 21 OEYC locations across the Niagara region. Lead agencies include:

- Family and Children Services, serving the Welland, Pelham and Grimsby communities,
- Niagara Catholic District School Board, serving Niagara Falls and Niagara-on-the-Lake,
- Port Cares, serving the Fort Erie, Port Colborne, Wainfleet, West Lincoln, and Lincoln communities,
- YMCA of Niagara, serving St. Catharines and Thorold.

In 2009, the District School Board of Niagara acquired funding from the Ministry of Education to open and operate five Parenting and Family Literacy Centres (PFLCs). While the centres are universal in their approach to programming, the locations were selected based on schools demonstrating need for additional supports in child preparation for school. The PFLCs are located in the following schools:

- Connaught Public School in St. Catharines
- Lincoln Centennial Public School in St. Catharines
- Plymouth Public School in Welland
- Kate S. Durdan Public School in Niagara Falls
- Peace Bridge Public School in Fort Erie

These three types of child and family centres provide opportunities for all children to participate in play and inquiry-based programs, and support all parents and caregivers in their roles. As well, these child and family centres provide parents and caregivers with access to information about child development and specialized services as needed.
See Appendix A for a map with the locations of all provincially funded child and family centres in Niagara

Other Early Years Programs

In addition to the provincially funded child and family centres, there are a number of federally funded early years programs in communities across Niagara. Funded by the Public Health Agency of Canada, the Community Action Program for Children (CAPC) is a community-based children’s program that promotes the healthy development of young children from birth to 6 years.

CAPC projects support children and their families facing challenging life circumstances. The program also seeks to promote the creation of partnerships within communities and strengthen community capacity to increase support for vulnerable children and their families.

CAPC sites adapt their activities and supports to meet the needs of the participants they serve. Programming may include family resource centres, parenting classes and drop-in groups, parent/child groups, home visiting and more specialized programs.

Strive Niagara, a non-profit, social service organization providing quality licensed child care and supports to young parents and their children, operates CAPC programs in St. Catharines, Welland, and Niagara Falls.

The Niagara Regional Native Centre located in Niagara-on-the-Lake, also operates an off-reserve Indigenous CAPC program for families facing challenging life circumstance. The program aims to strengthen families, communities, support community development, and healing. This CAPC program will also assist organizations to design and deliver community based, culturally relevant programs to improve the physical, mental, emotional and spiritual well-being of off-reserve Aboriginal children 0-6 years.

Another program funded by the Public Health Agency of Canada, Aboriginal Head Star, offers programming designed and delivered by the local Indigenous peoples. The goal of the program is to nurture the healthy growth and development of Indigenous children by providing quality and holistic culturally relevant and individualized family support services. Locally the program is offered through the Fort Erie Native Friendship Centre for children between the ages of 3 and 5 years.

The local program offers a half day preschool and full day kindergarten program for Aboriginal children. The program prepares Aboriginal children for school by helping them meet their spiritual, emotional, intellectual and physical needs. The program focuses on health promotion, nutrition, parental involvement, Aboriginal culture and language, social support and school readiness/education.

See Appendix B for a map with the locations of federally funded early years programs in Niagara
Previous Planning for Service System Integration in Niagara

Since the provincial announcement of Best Start in 2005, several committees and groups have been established in Niagara, which subsequently produced work or undertook projects that have supported Niagara’s efforts towards service system integration. Whether the focus was on the planning for the implementation of Full Day Kindergarten, the development of local Hubs or child and family centres, the underlying goal has been to increase collaboration amongst service providers to serve young children and their families more effectively and with available resources.

In 2006, the Niagara Indigenous Children’s Planning Council (NICPC) (formerly the Niagara Aboriginal Children’s Planning Council) was formed. Their vision is “To nurture and guide Aboriginal children throughout their childhood so they know who they are, where they came from, and have a desire to learn”. Additionally, their specific objectives include:

- To identify, enhance and sustain a system of cultural-based services that support Niagara’s Indigenous children and families from pre-natal throughout their transition into school, and;
- To implement a language revitalization strategy that seeks to preserve language and provide access to community based language resources, to reintegrate language in the Indigenous community and to identify and prioritize the objectives of language education and support services as required.

The NICPC work and participation with other mainstream planning tables helps to ensure the cultural design for early years’ initiatives address the diversity and needs of Indigenous peoples in the Niagara region.

The Hub Committee, established in 2008, was an early adopter of the province’s vision to support the integrated planning process. Its members included the various types of family resource programs and the community partners operating OEYCs. Over the years, the Hub Development Committee made significant contributions on Niagara’s journey towards a more seamless service system by:

- Supporting the creation of a common vision;
- Establishing overarching service delivery standards, as well as ones for early learning and parenting programs, early identification, childcare and linkages to schools.

In 2009, shortly after the release of, “With our Best Future in Mind,” Niagara took the proactive stance of striking a local committee, the Best Start Child and Family Reference Group (BSCFCRG), with a purpose to develop a local service system framework which outlined the key principles of developing a BSCFC.

The BSCFCRG focused on ensuring a common understanding of any relevant provincial updates and local knowledge gathering through a Ministry of Education and Ministry of Children and Youth Services jointly funded Community Action Research project. This project laid the foundation for the strength and evidence-based nature of future recommendations, and helped to inform the Niagara Best Start Framework, outlining the local vision, values and guiding principles in developing child and family centres.
In 2013, the release of the *Ontario Early Years Policy Framework*, outlined the province’s renewed vision for Ontario’s early year programs and services. Subsequently, the expectation for local planning and implementation of Ontario Early Years Child and Family Centres (OEYCFC) was announced. This meant that the nearly ten years of collaboration to develop an integrated and seamless service system put Niagara in a very good position to take on this important challenge.

Throughout the years of service system integration planning, the Niagara Children’s Charter (2003) has been a foundational framework and continues to influence the planning and implementation of the Ontario Early Years Child and Family Centres. The NCC is based on the United Nations Convention on the Rights of the Child that was adopted in 1989. In 2003 all twelve municipalities unanimously endorsed the NCC. The NCC reaffirms Niagara’s commitment to being child focused, child friendly, family centred, and community oriented, respecting cultures and celebrating diversity.

The NCC was an important framework for the OEYCFC Steering Committee convened in April 2016 to help inform the community needs assessment and initial plan for Niagara’s OEYCFCs. Membership includes the local English and French school boards; a Native Friendship Centre, a Francophone community health centre; specialized community service agencies; OEYCFC service providers, Ministry of Education and Niagara Region Children’s Services. Over the past year the committee has provided valuable input, feedback and recommendations during the needs assessment leading to the development of Niagara’s initial plan.
Part II: Gathering Data to Inform our Local Needs Assessment

My favourite thing to do at the centre is........

Playing in the gym with my friend

Koa

Maddyn

Caroline

Mommy

Jack

Max
The following section describes the community engagement strategies used to collect data from a variety of stakeholders, as well as the pre-existing data accessed from multiple sources in order to inform the needs assessment. Throughout the needs assessment process, the OEYCFC Steering Committee provided feedback and input which enhanced the approaches taken to gather data.

The feedback sought throughout the needs assessment process focused on service needs, access, locations, times and programming to determine what parents and caregivers truly want and need to support them in their roles. Feedback sought from staff and community partners attempted to better understand program delivery; what is currently working and what opportunities exist for future OEYCFCs.

**Neighbourhood Mapping**

Since 2007 the Niagara region has utilized a methodology to understand community needs by identifying 74 community defined neighbourhoods. The breakdown into neighbourhoods provides the opportunity to recognize the heterogeneity across the region and understand varying needs across smaller areas of geography.

The Niagara Region purchases custom data from Statistics Canada at the neighbourhood level, and this provides the opportunity to analyze socio-economic, demographic, health and social data at a level of geography that allows for focused services and the measurement of service impacts achieved within the allocation of finite resources.

Outlined in Table 1, a variety of existing datasets were compiled and analysed for all neighbourhoods across Niagara for the needs assessment, providing additional insight as to the needs of families with young children. While the data outlined in Table 1 was compiled and analysed for all neighbourhoods, emphasis was placed on 20 neighbourhoods of interest. These neighbourhoods of interest were identified because of the high number of births, as well as the high vulnerability of children over four implementations of the Early Development Instrument (EDI).

The EDI is a questionnaire completed by kindergarten teachers in the second half of the school year that measures children’s ability to meet age-appropriate developmental expectations in five general domains. EDI data from 2005, 2008, 2011 and 2015 was analyzed to determine how many times, out of the four implementations of the EDI each neighbourhood had children with higher vulnerability on two or more EDI domains than the regional average for that year.

Each neighbourhood was given a score based on population and EDI vulnerability. Neighbourhoods with the highest number of live births in the past year were given a score of four, and those with a lower number of births, a score of one. The same occurred for EDI vulnerability, with neighbourhoods with higher than average vulnerability given a score of four, while neighbourhoods with higher vulnerability only one out of the four implementations were given a score of one. When both variables were considered, neighbourhoods with a total score
of 6, 7 or 8 were identified as neighbourhoods of interest. In this way, we were able to determine need based on both population and developmental wellbeing.

See Appendix C for a map with the neighbourhoods of interest.

### Table 1

<table>
<thead>
<tr>
<th>How Did We Assess Our Needs?</th>
<th>The geospatial mapping of the location of the following community services across Niagara’s 74 community defined neighbourhoods was completed using the online Niagara Neighbourhood Mapping Tool. <a href="https://maps.niagararegion.ca/Navigator/?viewer=npi">https://maps.niagararegion.ca/Navigator/?viewer=npi</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Geospatial Mapping</td>
<td>Location of community services:</td>
</tr>
<tr>
<td></td>
<td>• Employment search agencies</td>
</tr>
<tr>
<td></td>
<td>• Newcomer agencies</td>
</tr>
<tr>
<td></td>
<td>• SAEO offices</td>
</tr>
<tr>
<td></td>
<td>• Foodbanks</td>
</tr>
<tr>
<td></td>
<td>• Hostels</td>
</tr>
<tr>
<td></td>
<td>• Niagara Regional Housing</td>
</tr>
<tr>
<td></td>
<td>• Licensed child care centres</td>
</tr>
<tr>
<td></td>
<td>• Family Resource Centres</td>
</tr>
<tr>
<td></td>
<td>• Ontario Early Years Centres</td>
</tr>
<tr>
<td></td>
<td>• Parenting and Family Literacy Centres</td>
</tr>
<tr>
<td></td>
<td>• Libraries</td>
</tr>
<tr>
<td></td>
<td>• Community Health Centres</td>
</tr>
<tr>
<td></td>
<td>• Community centres</td>
</tr>
<tr>
<td></td>
<td>• Public transportation routes</td>
</tr>
<tr>
<td></td>
<td>Demographic information also available on the online mapping tool:</td>
</tr>
<tr>
<td></td>
<td>• Percentage sole support parents</td>
</tr>
<tr>
<td></td>
<td>• Percentage children age 0-12 years</td>
</tr>
<tr>
<td></td>
<td>• Immigration from 2006 to 2011</td>
</tr>
<tr>
<td></td>
<td>• Percentage of tenant occupied dwellings</td>
</tr>
<tr>
<td></td>
<td>• Average gross rent ($)</td>
</tr>
<tr>
<td></td>
<td>A number of indicators to measure poverty is also available on the online mapping tool. This information can be layered with demographics and the location of community services.</td>
</tr>
<tr>
<td></td>
<td>• Percentage of Low Income Measure (LIM)</td>
</tr>
<tr>
<td></td>
<td>• Household income under $20,000 after tax</td>
</tr>
<tr>
<td></td>
<td>• Working poor</td>
</tr>
<tr>
<td></td>
<td>• Tenants paying 30% or more on rent</td>
</tr>
<tr>
<td></td>
<td>• Percentage unemployed</td>
</tr>
<tr>
<td></td>
<td>• Percentage of population without secondary school diploma</td>
</tr>
</tbody>
</table>
How Did We Assess Our Needs?

The online mapping tool allows for multiple layers to be mapped simultaneously, providing a visual picture of neighbourhoods. This tool will be updated with 2016 Census data at the neighbourhood level and used in the next phases of the project.

Census data:
- Percentage of population self-identifying as Indigenous, by neighbourhood (2011)
- Percentage of population with French as mother-tongue, by neighbourhood (2011)

Better Outcomes Registry Network (BORN) – The number of live births in 2016 by neighbourhood was extracted from this dataset was used to help determine the neighbourhoods of interest. Live birth data provides the most accurate and up-to-date population information for infants and is readily available. While this data does not include the child population beyond newborns, when mapped it denotes hotspots where families with very young children reside and allows reasonable estimates on this population and its trajectory.

Early Development Instrument (EDI) – Results on the developmental domains from four years of implementation (2005, 2008, 2011, 2015) was used to help determine the neighbourhoods of interest.

Neighbourhoods of interest based on EDI vulnerability and population of children 0-6 years

Indigenous Friendship Centre data - Due to the recognized limitations of the Census data with regard to participation of Indigenous peoples, and in order to have a more accurate picture of the number of Indigenous peoples in Niagara, Niagara Region Children’s Services partnered with local Indigenous Friendship Centres to gather data on the location of community members who self-identify as Indigenous peoples in Niagara. This information will not only inform the future phases of the OEYCFC planning and implementation, but will also inform the needs assessments to support Journey Together proposals, and program planning such as outreach of Indigenous agencies and organizations.

Social Assistance and Employment Opportunities - Ontario Works caseload data was mapped to determine where there were the highest concentrations of families with children who are in receipt of social assistance.
How Did We Assess Our Needs?

Review of Local Data

A variety of existing datasets were analysed to gain additional insight as to the needs of families with young children.

- Public Health - Healthy Babies Healthy Children Screen (HBHC Screen) data which identifies the potential risk factors that exist for families upon the birth of their child. This screen is used to identify families with “potential risk” who are then referred for a more in-depth screening. The screen, completed by a licensed health care professional, consists of 36 items related to pregnancy, family, parenting and child development factors. Data for Niagara region was compiled to identify what, if any, emerging themes in the noted risk factors.

- Parent Knowledge Study (PKS) - completed in Niagara in 2014 was reviewed as another resource that had the potential to inform OEYCFC planning. The study goals were to identify the knowledge that parents of children aged 0-6 years possess in relation to their child’s growth and development, parents level of confidence in their knowledge, and where parents sought information on children’s growth and development. In order to build on existing information available at the local level, the PKS questions were created under each of the five developmental domains of the EDI.

- Long-term accommodation plans of local school boards - identifying schools where there is space available for use by community

- Areas of projected growth identified by Niagara Region Planning Department

- OEYC, FRP and PFLC participant data - three years of quarterly site utilization data was extracted for analysis

- Inventory of existing child and family centre programs and services

Community Engagement Strategies

In order to gather information to inform the needs assessment, four distinct stakeholders were identified; parents and caregivers, children, community partners, and the child and family centre staff. A variety of mediums were used to gather information from these different stakeholders, in order to glean their unique perspectives. Throughout the community engagement process, input from diverse stakeholders was presented to the Steering Committee to inform discussions and recommendations to move forward.

The Voice of Children

The staff from the child and family centres facilitated in a needs assessment “blitz week,” where they gathered the voices of children through various avenues, such as inviting children to draw pictures of what they would like to do at child and family centres. Mediums provided to express
their thoughts through art were large communal pieces of paper/fabric, while some chose to offer children an individual page. The various pieces of art were reviewed to identify themes. Other centres submitted pedagogical documentation to help identify children’s and parent’s thinking and interests for inclusion in the analysis.

*The Voice of Parents and Caregivers*

With parent and caregiver insights in mind, an online survey was created with input provided by the OEYCFC Steering Committee as to questions and ways to disseminate the survey. While the main intent of the survey was to collect feedback as per Ministry of Education expectations outlined in the OEYCFC Planning Guidelines, the online survey also presented the opportunity to gather additional input to inform the local planning as well as the development of a local outcome framework.

See Appendix D for a copy of the parent and caregiver survey.

The survey was available online in both official languages, with paper copies available for those without a stable internet connection, predominately in more rural communities. To help increase participation, weekly prizes and a grand prize were advertised as incentives. The use of traditional print based media (newspapers, posters, postcards) and non-traditional mediums (social media, websites, electronic sign ads) were used to advertise the online survey over the 6 week period in which the survey was available to complete. Advertisements were placed in local newspapers and banners on newspaper websites, as well reaching out to media outlets which resulted in a newspaper article. Posters and postcards were delivered to 92 licensed child care centres which offer infant and toddler care, and staff at the centres encouraged families to participate. Posters and/or electronic ads were displayed at OEYCs, PFLCs, FRPs, public libraries; arenas, sports complexes, recreation centres, community health centres, employment agencies, newcomer agencies, shopping centres, etc.

See Appendix E for a complete listing of the multiple agencies and organizations who helped to advertise the online survey.

The survey data was analyzed for Niagara Region overall, and also by neighbourhood, which was possible due to the fact that the survey asked respondents for their postal code. This allowed for identification of specific needs to inform future planning of potential customized services in certain neighbourhoods, while maintaining the confidentiality of the participants. During the “blitz week” staff at the centres also kept intentional record of what information parents and caregivers were seeking or requesting, and issues with which parents and caregivers expressed having difficulties. This included direct requests from parents for specific information on a topic or program, or a referral in the community. As well, through casual observation or conversation with participants at their centre, staff determined that participants could benefit from a specific program, service or feature of a centre.


Community Convener Helping to Lend a Voice to Parents and Caregivers

Niagara Region Children’s Services leveraged an opportunity to have a Community Convener as an additional resource to reach out and collect insights from parents and caregivers. During the six week period the parent and caregiver survey was in the field, the Community Convener attended local events and festivals to help promote the online survey. Afterwards the Community Convenor facilitated informal focus group sessions where parents and caregivers were already gathering. For instance the Community Convener reached out to community organizations, such as multicultural and newcomer centres in order to gather feedback from newcomer parents and caregivers during community kitchens where groups were gathering to cook a community meal and practice speaking English. The Community Convener position provided the opportunity to reach out and give a voice to groups that may not typically provide their feedback through traditional or mainstream approaches, such as teen parents, grandparents, and newcomers, and collect their insights on what they would like to see in an OEYCFC. The Community Convener also helped increase awareness regarding child and family centres for those not already attending by providing information regarding the numerous programs and supports available free of charge.

The Voice of Child and Family Centre Staff

In June 2017, Niagara Region Children’s Services hosted a half-day session for all child and family centre staff. The purpose of the facilitated session was multifold: to bring staff together for team building, as they had not previously held joint sessions or training; to gather feedback from the frontline professionals with regards to core services. Attendees were grouped and participated in hands-on, facilitated activities to help describe ways to ensure the delivery of high quality early years programs and services that align with the pedagogical approaches described in How Does Learning Happen: Ontario’s Pedagogy for Early Years.

The Voice of Community Partners

A survey was sent to community agencies who partnered with child and family centres within the last two years, to provide either universal or specialized services to families accessing the centres. The survey focused on delineating the ways in which centres were connected to service providers, the degree they were connected, as in partnering or co-delivering services, and from their perspective, what could be improved upon. The surveys were analyzed to determine the strength and breadth of the current level of service integration as well as opportunities for improvement.

See Appendix F for a copy of the community partners survey
Inventory of Existing Child and Family Centre Programs and Services

The child and family centre coordinators helped to create an inventory of child and family centre programs and services. The intent was to document and understand what types of programs and services were being offered in the various centres across Niagara, and to understand from a systems perspective, what the commonalities and differences were between sites. Programs and services were listed according to type, locations where program and service are offered, the primary objective of the program or service, whether any formal training is required to offer it, as well as strengths and barriers to offering each program and service. This exercise also gave insight to the types of training that may be needed moving forward with the transition to OEYCFCs.

After the programs and services inventories were submitted, a task group met to review and discuss core services in the OEYCFC context. The intent was to begin conversations about what types of programs and services parents and caregivers can come to expect as core services from OEYCFCs. This feedback will be considered along with that of parents and caregivers and community partners to inform the suite of core services available at OEYCFCs across Niagara.
My favourite thing to do at the centre is......

riding the cars
in the gym.
I love it.
The following section provides a summary of the results from the community engagement strategies focused on parent and caregivers, children, community partners, and staff of child and family, and the various data sets accessed to inform and assist in identifying existing service gaps and duplication in communities.

**Neighbourhood Mapping and Data Analysis**

In total the neighbourhood identification process yielded 19 neighbourhoods of interest. Of those 19 neighbourhoods 13 were noted as high priority neighbourhoods of interest (levels 6-8) due to the high number of births, as well as the high vulnerability of children over four implementations of the Early Development Instrument (EDI). There were six secondary priority neighbourhoods (level 5), based on 2016 birth rate and 2005-2015 EDI vulnerability data.

When analysed at the level of a local area municipality, four of the six neighbourhoods in Niagara Falls are in the high priority category, and six of the 19 neighbourhoods in St. Catharines are also in the high priority category. Other secondary priority neighbourhoods are located in Lincoln, West Lincoln, Welland, and Fort Erie, with one each respectively. There are two additional secondary priority neighbourhoods in Port Colborne. The map below shows the neighbourhoods of interest overlaid with the current OEYC, PFLC, and FRP sites.
Francophone Community

French is the mother tongue (the first language learned at home in childhood and still understood at the time of the census) of 3.4% of Niagara’s overall population, with nearly 1% of Niagara’s total population identifying French as the language spoken most often at home. In comparison, 10% of Welland’s total population denote French as their mother tongue, and 4% speak French most often at home. In one neighbourhood in Welland, French is the mother tongue of 22.3% of the population. In Port Colborne, just over 4% identified French as their mother tongue, while 1% speak French most often at home.
Indigenous Peoples in Niagara
Across Niagara region there are pockets of high concentrations of Indigenous peoples (8.1-15.0%) in a number of municipalities. At the neighbourhood level, there are 13 neighbourhoods with an Indigenous population of 5% or higher. A neighbourhood in Welland has the highest percentage (8.9%) (2011 Census).

Due to the recognized limitations of the Census data with regard to participation of Indigenous peoples, in order to have a more accurate picture of the number and of Indigenous peoples in Niagara, Niagara Region Children’s Services partnered with local Indigenous Friendship Centres to gather data on the location of community members who self-identify as Indigenous peoples in Niagara.
Early Development Instrument Results

The Early Development Instrument (EDI) is a population measure of developmental outcomes. Completed in the second half of the school year by teachers for all children attending kindergarten in publicly funded schools, the EDI results reflect the net effect of all early childhood experiences on children in five key domains: physical health and well-being, social competence; emotional maturity; language and cognitive development; and communication skills and general knowledge.

Each of the five domains is scored from 0 to 10; higher scores indicate stronger developmental skills. The scores are then categorized using “cut-points” to determine how well children are doing. The cut-point is the EDI score that distinguishes the children who scored in the bottom of the distribution. There is one cut-point that is of most interest, this is the developmentally vulnerable cut-point. The developmentally vulnerable cut-point represents the children scoring in the bottom ten percent. Children who score below this cut-point are said to be not on track in that area of their development.
Since the EDI has been implemented four times over the past 10 years in Niagara, results allow for the monitoring of children with regards to their development. The graphs below summarize the most recent results and compare to other years and to the province. In order to maintain comparability with the provincial averages, children who had identified special needs (diagnosis) were not included in this analysis. The star in each of the graphs denotes that the difference is statistically significant.

The two domains that are of the most concern are the Social Competence and Emotional Maturity domains. Both of these domains have been trending upwards over the four implementations of the EDI, and the percentage of children who are vulnerable is significantly higher than the province.

In 2015, the percentage of children scoring as developmentally vulnerable in the Social Competence domain increased significantly and is now higher than that of the province. When looking at a neighbourhood level, the percentage of children scoring as vulnerable in the Social Competence domain ranges from zero to 39 percent across Niagara neighbourhoods. When children fail to develop the social skills necessary for positive peer interaction by early elementary school has been linked to behaviour that leads to peer rejection.

See Appendix G for a map of Social Competence domain results by neighbourhood.
Since 2008, the percentage of children scoring low in the Emotional Maturity domain has increased steadily and significantly, and is also now higher than that of the province. At the neighbourhood level, the percentage of children scoring as vulnerable in the Emotional Maturity domain ranges from zero to 33% across Niagara. Kindergarten children who are not meeting developmental expectations in the area of emotional maturity means they have regular problems managing aggressive behaviour; usually are unable to show spontaneous helping behaviour towards other children; are inattentive, restless and distractible.

See Appendix H for a map of Emotional Maturity domain results by neighbourhood.

Children who score in the lowest 10% on two or more domains are at greater risk for developmental difficulties and may experience on-going social, emotional, behavioural and/or academic problems. Longitudinal research in British Columbia has shown that increasing numbers of vulnerabilities across the five EDI domains predicts an increasing probability of failure to achieve basic competencies by grade four.

The percentage of Niagara’s children scoring as developmentally vulnerable on two or more domains has increased steadily since 2008 and is now significantly higher than the provincial average.
Additional Datasets

A variety of existing datasets were analyzed to gain additional insight as to the needs of families with young children.

*Healthy Babies Healthy Children screen results*

The Healthy Babies Healthy Children (HBHC) screening process is intended to provide greater focus on risk identification for families who may benefit from HBHC home visiting services. The screen consists of 36 questions asked and each “yes” response is one point. Families identified with potential risk are then referred for more in-depth screening.

In 2016, 3,445 HBHC screens were completed with 2,162 (63%) being identified with potential risk, meaning a HBHC Screen score of two or more. Of the 2,162 HBHC Screens that were identified with risk, 1,590 (74%) In Depth Assessments were performed, while 549 (35% completion rate) were completed. Of that number, 270 received a High Risk rating. Table 1 lists the five most commonly reported risk factors from the HBHC screen reported in 2016 across Niagara.

**Table 1**
**Top 5 Commonly Reported Risk Factors (n=3445)**

<table>
<thead>
<tr>
<th>Rank</th>
<th>Question on HBHC Screen</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Complications during labour and delivery?</td>
<td>35.3%</td>
</tr>
<tr>
<td>2</td>
<td>Experienced a previous loss? (pregnancy or baby)</td>
<td>31.8%</td>
</tr>
<tr>
<td>3</td>
<td>Client or parenting partner has a history of depression, anxiety, or other mental illness?</td>
<td>23.9%</td>
</tr>
<tr>
<td>4</td>
<td>Maternal smoking of more than 100 cigarettes (5 packs) in her lifetime prior to pregnancy?</td>
<td>23.7%</td>
</tr>
<tr>
<td>5</td>
<td>Health conditions/medical complications during pregnancy that impact infant?</td>
<td>21.5%</td>
</tr>
</tbody>
</table>

The two top most commonly reported risk factors (related to labour and delivery) are well beyond the scope of programs and services of the OEYCFCS. However, the other three risk factors are of interest, given the findings from the parent and caregiver survey, where 56% of respondents wanted Public Health services such as pre/post-natal co-located with OEYCFCs. As well, parents and caregivers who completed the survey also requested targeted support programs for specific populations such as mothers suffering from Post-Partum Depression. Several also mentioned mental health/emotional support for both children and their parents. Lastly, there is great interest on the part of community partners to revive the wellness clinics...
hosted at centres across Niagara to provide supports for early identification, screening and surveillance for potential developmental delays in young children.

More in-depth information from the HBHC screen is also available at the local municipal level and can be accessed through Niagara Region Public Health for discussions regarding future planning of customized services.

**Summary of Community Engagement Results**

*Children’s Vision of an OEYCFC*

Through the creative artwork, dialogue with staff, and pedagogical documentation, children expressed their ideas and identified activities that they enjoy participating in at child and family centres. These ideas and activities were also viewed from the lens of the Early Development Instrument (EDI) domains, consistent with expectations around child development.

Using word clouds, which give prominence to words based on frequency, clouds were created by EDI domain. The larger text indicates that children expressed it more often when describing their drawings.

See Appendix I for word clouds based on children’s expressions of interests

The physical activities in which children expressed interest show a healthy balance between gross and fine motor skills development activities. The opportunity to play in a gymnasium was important to many of the children.

Many children favoured creative activities such as colouring, making crafts and painting. The importance of learning through play is evident in the word cloud related to social development. Being with friends, as well as being friendly, is important to the young children that participated. Puppets play a large role in their social play.

The data also displayed that children find value in multigenerational interaction, as they expressed interest in interacting with both infants and adults. The physical and social aspects of the centres seem to be most important to the children who participated in the collection of this information. Children enjoyed “circle time,” and expressed interest in activities that develop literacy and numeracy skills.

*Parents and Caregivers Vision of an OEYCFC*

Nearly 1000 parents and caregivers provided their valuable feedback and input on program features, programs and services, the physical attributes and accessibility of centres, helping to describe what an OEYCFC should look like in Niagara. The following is a summary of the key findings from the online parent and caregiver survey.

See Appendix J for the complete results from the parent and caregiver survey
Program Features

Parents and caregivers expect centres to be welcoming, family-friendly, inclusive, non-judgmental, safe places for children to play operated by qualified staff. They value that programs and services are available free of charge.

“An engaging alternate space for a child and parent to learn and grow. A spot where you do not need to spend money to participate in play-based activities or learning programs. A safe place for parents to ask questions and/or connect with other parents.”

The social opportunities that child and family centres provide, such as interacting with other children, developing relationships, and building social skills, appear to be the main priority for parents and caregivers. As one parent said, “I think socialization is the most important reason I brought my daughter out to these places”.

Providing children with opportunities to learn was important for parents and caregivers. Many made the connection between learning and playing, and recognized that centres can provide opportunities for children to engage in play-based learning. Many noted child development, with an emphasis on their desire for centres to help children prepare for school either directly or through the development of skills that will help them to be successful in school. The desire for their children to have structure was a strong theme, and parents and caregivers are looking for guidance from knowledgeable staff, and opportunities to provide their children with structure through group activities.

Parents and caregivers would like more availability of programs and a broader range of services for the whole family, including programs where their older/younger children are welcome to participate as well. Nearly 90% of parents and caregivers felt it was important to be able to bring children of various age groups to the programs, as having an older/younger child is a barrier for participating in programs for targeted age groups.

“I like that its parent and child oriented so we learn together…”

Several parents and caregivers made mention that mental health/emotional support for both children and parents would be helpful and valued. This would include supports ranging from family mindfulness programs to supports for postpartum depression. One parent said,

“I feel like staff deal with parent issues almost as much as the childcare aspects of the program. Providing staff with some training on how to handle these conversations in a professional manner would benefit both staff and families…”

For themselves, parents and caregivers would like centres to provide opportunities to meet other adults to socialize and develop friendships with other parents. Many noted that connecting with other parents helps them to “create a support system amongst fellow parents”. Parents and
caregivers are looking for spaces outside the home to bring their child(ren), for a “change of scenery”, especially those who noted they stay home with their children.

Many parents and caregivers explained their desire for centres to be a space where they feel connected to their community, to “feel part of something.” As one parent said, “A place to meet other moms and develop a sense of community with them. It takes a village to raise a child”.

Many parents and caregivers also expressed a strong desire for centres to be places that they can turn to for parenting supports, “a resource centre for parenting problems”, “where I feel I have the support when I need it”, with “nice, friendly, approachable and knowledgeable staff.” They want a place where there is access to knowledgeable, professional staff and service providers who are able to provide information and parent education; can discuss concerns with and ask questions of, and find a variety of resources to help with challenges. As one respondent stated,

“I think a general one stop shop where you can have your questions answered by qualified professionals in terms of development and things that you could be doing to promote development and health would be good.”

Programs and Services
When at the centres, parents and caregivers want to learn more about parenting skills, children’s learning and development, healthy eating, ideas for activities to do at home, strategies to encourage appropriate behaviour, mental health, and have professionals accessible to them to help them decipher between typical development milestones/challenges and cause for concern. One parent noted wanting help with “bonding with my daughter and learning about the changes that will occur during her different stages of life. Educating myself on how to help her develop at different stages.”

Respondents want a place where they can attend parent education workshops on various parenting topics, such as managing behaviour, sleep, breastfeeding, growth, health, and mental health. Some parents said they want opportunities to learn about things that will make them a “better parent.” Additional programs/service suggestions provided through feedback included:

- Parenting education such as information on learning disabilities, strengthening infant/parent bonds, and understanding/addressing challenging behaviour,
- Targeted support programs for specific populations; single mothers, mothers suffering from PPD, mothers of multiples, young fathers and grandparents with custody, and
- Some respondents indicated that they would like more programs or more spaces in programs, especially for infants.

Physical Attributes and Access to Centres/Services
Parents and caregivers (91%) felt that an open play space was crucial, as well as an outdoor space for children to play (77%) and ample parking for cars and bikes for families (77%).
When asked which services they would like co-located with child and family centres, parents and caregivers would like to see a number of other services co-located, such as recreation services (sports and arts) library services, Public Health services (nurse, pre/postnatal health, sexual health, vaccine clinics, parenting workshops), speech therapy, dental services, child care services, and special needs services “all in one place instead of having to go to difference places for different services.” As well, parents and caregivers would like to see more programs and supports for children with special needs within the centres and increased access to child development professionals.

Just over one quarter (28%) of parents/caregivers noted they wanted the child and family centres co-located with schools. Given the relatively low percentage who identified this further consideration will be needed, as considerable evidence demonstrates that minimizing transitions for young children and providing a single point of access for early childhood services benefits the whole family, considered by the Schools-First Policy encouraged by the Ministry of Education. As well, in Niagara, more than half of the licensed child care centres are located in schools, and 53% of parents and caregivers who responded to the survey noted they would like the OEYCFCs co-located with licensed child care centres. Schools play a valuable and important role as hubs for programs and services that benefit the broader community, which is further outlined in the Ministry of Education’s initiatives to support community hubs in schools.

Access for those with special needs was considered as important by 65% of parents and caregivers who completed the survey. As well, being in close proximity to the participant’s home was important to approximately two thirds of parents and caregivers (68%). When asked how far they felt was reasonable to travel to access a child and family centre, approximately 60% of parents and caregivers responded that they are willing to drive 15 minutes or more to attend an OEYCFC. Only approximately one quarter of parents/caregivers noted it was important for OEYCFCs to be on a bus route, however a robust municipal transit system is not available to many Niagara residents and reliance on personal vehicles is commonplace.

Parents and caregivers would like the hours of operation to better suit families including being opened longer hours, offering programs over the lunch hour that would not interfere with nap times, and increasing evening and weekend hours for those who work full time. Parents and caregivers also want access to the centres year round, as indicated by 87% of respondents.

Convener Gathered Information

As of August 28th 2017, the Community Convener facilitated 16 sessions attended by 68 parents and caregivers in nine municipalities. Of those that attended, 14 were newcomers, five were grandparents (of which two grandparents have custody of their grandchildren), four were teen parents, and 20 participants were identified as living in poverty.

Most newcomers identified they were not users of existing child and family centres even though many knew about them. Of the 68 participants only a small number were aware of child and family centres in their community.
Information continues to be collected through more informal focus group sessions facilitated by the Community Convenor in partnership with various community agencies and organizations across Niagara. This information will be used to inform programs and services ensuring they are inclusive, accessible and responsive to children, parents and caregivers with varying abilities, cultural, language, socio-economic, sexual orientation and religious backgrounds.

**Staff Vision of an OEYCFC**

When asked what their vision was of an OEYCFC, staff described a welcoming, family centered place that provides flexible hours of program delivery in a non-judgmental, inclusive environment where all are welcome.

It was deemed important that all staff be knowledgeable in their field, yet approachable and friendly, to build trusting relationships, to create a sense of connectedness within centers, specifically around relationships between families and staff, to best serve their communities.

In order to provide valued service and support to families, front line staff felt it essential to have a strong sense of teamwork and collaboration so that services are uniform and high quality across Niagara region.

Staff feel it imperative that all centers have connections to community partners for programming, referrals, and consistent messaging for parents and caregivers. The main purpose of centres is to support their communities with staff practice in alignment with the pedagogy of *How Does Learning Happen*, including the four pillars: belonging, engagement, well-being, and expression.

When asked how they could support the delivery of mandatory core services, the following themes emerged through discussions among staff:

- Foster relationships with families by being welcoming and engaging,
- Establish and maintain an open door for community partners delivering programs on site, and
- Give parents/caregivers a voice by engaging them using various tools to continually assess and gather feedback from the community. Be responsive to their needs.

Staff also identified gaps in service they believe require enhancements to meet core-service delivery expectations. One of the most common gaps was in the hours of operation. Staff felt the hours did not meet the needs of families. Many of the other gaps identified fit under a broader category of coordination, which illustrates the need for a service systems planning approach. These included:

- The lack of a centralized registration system to allow families to register only once,
- Community partner programs/supports are not available at all sites. Referrals are made to services at a distance from family’s home sites.
- Differences in availability of space and environment at sites poses challenges for offering consistent programs/services,
• Funding is not equitable across agencies operating child and family centres,
• Training opportunities, available equipment, and staff wages are not consistent across service providers operating child and family centres
• Not all staff are aware of services offered at other sites.

Through discussions related to gaps in coordination, staff identified issues with marketing:
• There is a need for a user-friendly, centralized website, which lists all child and family centres/programs for Niagara. There is currently no streamlined newsletter.
• Social media is not utilized to full capacity for marketing of programs, public relations and creating community connections,
• Key messages to parents are not always consistent,
• Sites need bigger and better signage,
• Information sessions offered at sites need more advertising to build public awareness, and
• There is no family recruiting strategy.

When asked, staff outlined strategies to build capacity to deliver high quality early years programs and services in Niagara that align with How Does Learning Happen? by:
• Providing all staff with training and professional development opportunities,
• Ensuring sufficient time for program planning and documentation,
• Engaging in reflective practice,
• Being flexible, adaptable and collaborative, and
• Engaging parents/caregivers and seeking their feedback and expertise in order to offer parent/caregiver-driven programs.

See Appendix K for the complete results from the staff facilitated session

Community Partner Vision for OEYCFCs
Based on the feedback provided by community partners, adult programming/parenting programs and information are just as important as programming for infants and children. Parenting workshops (for topics such as positive parenting, managing aggression, sleeping, and toilet learning) access to a Public Health Nurse, breastfeeding supports, child development supports, and Well Baby Clinics are the services community partners felt were essential to have on-site at OEYCFCs.

When asked about the key barriers to providing services at child and family centres, community partners cited low enrolment in programs. Reasons given for low enrolment include:
• The duplication of services across sites, more specifically similar services were offered in close proximity to one another.
• Time of day when programs are offered accommodate centre staff, however do not meet the needs of participants
• The limited hours of operation at certain sites is a barrier to offering services
Community partners noted the following opportunities:

- Child and family centres staff promote their services and encourage families to participate more often.
- Increase referrals to community partners on topics requiring specialized skill/knowledge.
- Increase communication with parents/caregivers to get feedback as to which topics would be most important to parents/caregivers.
- Improved communication and collaboration between community partners and child and family centres.
- Adapt programs to reflect the changing needs of the community being served.
- Ongoing evaluation of programs and services as well as continuous collaboration with community partners.

Community partners described child and family centre staff as supportive, knowledgeable, friendly and engaging. Staff were consistently noted as one of the strengths of child and family centres and most community partners valued their relationship with staff. As noted by one community partner;

“The staff members in each of these programs is one of their biggest strengths. They are welcoming, educational and caring which I believe is what keeps participants coming back”.

Community partners also noted that child and family centres provide a welcoming, inclusive environment, which is supportive of children and parents/caregivers in their role as a parent/caregiver, where families can be connected to other services. One community partner said of child and family centres:

“They understand the needs of the families they serve and are flexible to adapt programming to meet their community’s needs. They strive to deliver evidence-based practices”.

This invaluable information will help to inform future planning and implementation to ensure that OEYCFCs in Niagara reflect the view of children, parents/caregivers, and educators as capable, curious and rich in potential and experience. As well, moving forward there will need to be regular collection of feedback from children, parents and caregivers, community partners and educators to ensure that programs and services embrace and build on strengths, address identified gaps and meet their unique needs.

*Insights from the Parent Knowledge Survey (PKS)*
In 2014, over 1500 parents completed an online questionnaire distributed to gather data to identify the knowledge parents have of children’s growth and development, parent level of confidence in their knowledge, and where parents sought information.

The PKS was completed by parents from all 12 municipalities in the Niagara region; with most parents residing in Niagara Falls (18.6%), St. Catharines (30.6%), and Welland (14.6%). The majority of the parents who responded were mothers (89.0%); between the ages of 25 and 39 years old (79.8%); and had one or two children (75.3%). Eighteen percent of parents who completed the PKS noted a high school diploma as their highest level of education, while 36.2% had a college or other non-university certificate or diploma; and 28.5% had an undergraduate degree.

Even though 96.3% of parents who participated in the Parent Knowledge Study, agreed or strongly agreed with the statement “I am confident in the knowledge that I have of my child’s growth and development” the data gathered showed that parental knowledge of children’s growth and development diminished as children aged. More specifically parents were knowledgeable of the growth and development of children 0-6 months and 7-12 months, however this knowledge decreased with older age groupings of children (13-18 months, 19-36 months, 37-48 months, and 49-72 months).

Based on the results from the PKS, some of the parenting practices or concepts of child development that parents possess are not consistent with what best practices suggest. For example, 46% of parents believe an infant can manipulate parents in order to get something they want. One in five parents believe that bullying is a normal part growing up. Furthermore, 54% of parents who completed the questionnaire said they find it challenging to encourage appropriate behaviour and discourage inappropriate behaviour, suggesting they do not know what parenting strategies to use.

When looking to see if certain variables, such as parent age, level of education or socio-economic status had an impact on the respondents, in most cases no relationship was found. This would suggest there would be a universal benefit to key messages on child growth and development to parents, rather than a targeted approach, and that programming in Niagara must take on a strong parent education component with a focus of promoting current best practices in all aspects of caregiving.

See Appendix L for a summary of results from the Parent Knowledge Survey

Inventory of Existing Child and Family Centre Programs

The inventory of child and family centre programs and services was reviewed to assess the degree to which the OYCFCC mandatory core services are already being offered at existing child and family centres. Based on this preliminary assessment, there are some centres which will require additional support to help implement some additional components that were noted, more specifically:
• Pre and post-natal support programs  
• Responding to parent and caregiver concerns about development through conversation and observation supported by validated tools and resources  
• Information sharing about and facilitating connections with specialized community services

Locations and Hours of Operation of Existing Child and Family Centres

Since the OEYCFC Steering Committee convened in April 2016, existing service providers of OEYCs, PFLCs and FRPs were asked to maintain status quo with regards to the 31 locations currently operating, to allow for data to be gathered as part of the needs assessment. The following is a very high level summary regarding days and hours of operation based on the data provided.

There are a total of 21 locations open five days per week in Niagara, with a concentration of six locations in the City of St. Catharines, four in Niagara Falls, three in Welland and three in Fort Erie. It should be noted that of those locations some offer programming to a specific population. More specifically in Welland there is a French language program, one location is St. Catharines is targeted to those receiving transitional housing, and the Fort Erie Native Friendship Centre offers programming to Indigenous peoples.

The majority of programs (29) operate in the morning, with a concentration of eight locations in Niagara Falls, seven locations in St. Catharines, four in Welland and three in Fort Erie. When delving deeper into the hours of operation it was noted that 11 locations operate less than 5 mornings a week on varying days. Five locations operate one morning per week, six locations two mornings per week, and two locations operate three mornings per week.

Five locations across Niagara remain open in the evening, while two are located in Welland, again one is specific to the Francophone community. On Saturdays there are five locations open, with two of those located in Niagara Falls. Taking into consideration parent and caregiver feedback about locations being open during the lunch hour, there are seven locations open between noon and 1 pm. However, it should be noted that only one location is open all week during lunch, all the other programs noted specific days.

Utilization of Existing Child and Family Centres

The Ministry of Education data variables counting the number of parents/caregivers and children who registered with the centre, and the number of visits, were gathered for each of the existing locations, for each quarter of the 2012-2013, 2013-2014, and 2014-2015 fiscal years.

This information was also viewed within the context of the population of the community in which it is being served, proximity of other child and family centres, and the hours the centre is open.
My favourite thing to do at the centre is........ to paint colourful pictures.
This section outlines the implementation processes and activities that will take place over the next five years as Niagara Region Children’s Services works in partnership with the early years community and key stakeholders, building a high quality, seamless and accessible early years system for children and their families in Niagara.

Implementation will require a carefully planned transition process that engages all partners and minimizes service disruptions for children, parents and caregivers. While the Ministry expectation is for key features of OEYCFCs to be implemented by 2018, it is understood that comprehensive program implementation and best practice service integration will take time to meet both local and the provincial goals for OEYCFCs.

As such, Niagara’s plan for Ontario Early Years Child and Family Centres has three phases:
- Phase I is the transfer of responsibility and service continuity
- Phase II is system transformation, engagement and procurement
- Phase III is system evolution and continuous quality improvement

**Phase I Transfer of Responsibility and Service Continuity**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description and Expectation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish Advisory Committee</td>
<td>The OEYCFC Steering Committee was struck in April 2016, and has provided input and feedback during Phase I of the project, which focused on the completion of a needs assessment and development of the initial plan. Upon submission of the Niagara region needs assessment summary and initial plan to the Ministry of Education on September 29th, Phase I of the project will come to completion and the OEYCFC Steering Committee will sunset.</td>
</tr>
<tr>
<td></td>
<td>An OEYCFC Advisory Committee, with expanded membership from early years sector partners will provide input and feedback on the next phases of the service system integration of OEYCFCs.</td>
</tr>
<tr>
<td></td>
<td>Entering into the next two phases of the project, the Advisory Committee will be created to provide feedback to contribute to the planning and implementation discussions. The Advisory Committee will ensure the service system planning discussions are informed by a wide range of early years sector partners, with representation at the decision making level from the following organizations:</td>
</tr>
<tr>
<td></td>
<td>• English and French district school boards</td>
</tr>
<tr>
<td></td>
<td>• Public Health</td>
</tr>
<tr>
<td></td>
<td>• Specialized community service agency</td>
</tr>
<tr>
<td></td>
<td>• First Nations and Indigenous partner</td>
</tr>
<tr>
<td></td>
<td>• Francophone organization</td>
</tr>
<tr>
<td></td>
<td>• Licensed child care provider</td>
</tr>
<tr>
<td>Activity</td>
<td>Description and Expectation</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------------------</td>
</tr>
</tbody>
</table>
| • Post-secondary institution  
• OEYCFC service providers  
• Ministry of Education |
| Establish local budget allocations for service providers | 2018 will be a transition year as Niagara Region Children’s Services rolls out the plan and works towards system transformation while minimizing disruptions to service. Children’s Services will not exceed the total provincial funding allocation of $4.09 million, and funding amounts to existing service providers will be determined by considering existing allocations, cost of living increases and any impacts from minimum wage increases effective January 2018. This offers very minimal increases to prior funding allocations.  
It is anticipated that 2018 budget allocations will not change from 2017, with the exception of additional investments for identified priorities of French language and Indigenous programs. |
| Establish service agreements | Niagara Region Children’s Services has worked with Legal and Court Services to revise purchase of service agreements to include schedules outlining roles and responsibilities of agencies to operate an OEYCFC.  
As per Regional Council direction, Niagara Region Children’s Services will enter into temporary purchase of service agreements with agencies that have an existing purchase of service agreement with the provincial government to operate an Ontario Early Years Centre, Parenting and Family Literacy Centre, and agencies who have an existing purchase of service agreement with Niagara Region Children’s Services to operate a Family Resource Program.  
Effective January 2018, it is anticipated that there will continue to be nine community agencies who will act as service providers, operating 31 sites across Niagara region. |
| Develop a communications and engagement strategy | Phase I of the communications/engagement strategy focuses sharing information about the provincial vision for a high quality, seamless, and accessible early years system for children and their families, seeking stakeholder input into the formation of the local plan.  
Engagement strategy sought to: |
<table>
<thead>
<tr>
<th>Activity</th>
<th>Description and Expectation</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Ensure parents and caregivers, and children have avenues to provide meaningful and informed input into the implementation plan through:</td>
<td></td>
</tr>
<tr>
<td>o Creation of video series</td>
<td></td>
</tr>
<tr>
<td>o Parent and caregiver online survey</td>
<td></td>
</tr>
<tr>
<td>o Webpage content</td>
<td></td>
</tr>
<tr>
<td>o Community Convener moderated focus groups for hard to reach parents</td>
<td></td>
</tr>
<tr>
<td>o Infographic summary of plan</td>
<td></td>
</tr>
<tr>
<td>• Provide avenues for engagement and feedback from teams at FRPs, OEYCs, and PFLCs by:</td>
<td></td>
</tr>
<tr>
<td>o Niagara Region Children's Services Manager and/or Director attend staff meetings</td>
<td></td>
</tr>
<tr>
<td>o Facilitated staff session to gather feedback</td>
<td></td>
</tr>
<tr>
<td>o Infographic summary of plan</td>
<td></td>
</tr>
<tr>
<td>• Provide avenues for feedback from community partners through:</td>
<td></td>
</tr>
<tr>
<td>o Online survey to identified community partners to provide feedback.</td>
<td></td>
</tr>
<tr>
<td>o Membership of Advisory Committee made up of wide range of early years sector partners</td>
<td></td>
</tr>
<tr>
<td>o Infographic summary of plan</td>
<td></td>
</tr>
<tr>
<td>• Provide a project update and opportunity for dialogue to local and Regional politicians through:</td>
<td></td>
</tr>
<tr>
<td>o Public Health and Social Services Committee (PHSSC) reports providing updates and requesting any necessary approvals (i.e. procurement)</td>
<td></td>
</tr>
<tr>
<td>o Video presented at PHSSC</td>
<td></td>
</tr>
<tr>
<td>o Internal communications channels</td>
<td></td>
</tr>
<tr>
<td>o Infographic summary of plan</td>
<td></td>
</tr>
<tr>
<td>o Project management portal</td>
<td></td>
</tr>
</tbody>
</table>

Niagara Region Children’s Services will develop local outreach and engagement strategies across Niagara to increase local participation, aligned with the provincial branding strategy to be released in Fall 2017.

<p>| Establish policies and procedures | As outlined in the OEYCFC Funding Guidelines, Niagara Region Children’s Services must ensure appropriate policies and procedures are in place to ensure child and family centres are delivered in a way that promotes the health, safety and well-being of children and families being served. |</p>
<table>
<thead>
<tr>
<th>Activity</th>
<th>Description and Expectation</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Niagara Region Children’s Services will work with service providers to ensure the following policies and procedures are in place effective January 1, 2018:</td>
</tr>
<tr>
<td></td>
<td>• Vulnerable Sector Screens</td>
</tr>
<tr>
<td></td>
<td>• First Aid</td>
</tr>
<tr>
<td></td>
<td>• Emergency plans</td>
</tr>
<tr>
<td></td>
<td>• Sanitation and maintenance</td>
</tr>
<tr>
<td></td>
<td>• Workplace health and safety relating to staff</td>
</tr>
<tr>
<td></td>
<td>• Complaints and resolutions processes</td>
</tr>
<tr>
<td></td>
<td>• Reporting serious incidents to the CMSM</td>
</tr>
<tr>
<td></td>
<td>• Duty to report</td>
</tr>
<tr>
<td>Stepped approval to procurement</td>
<td>As per Regional Council approval of report COM 21-20017 Ontario Early Years Child and Family Centres, Niagara Region Children’s Services will enter into temporary purchase of service agreements, for a period of approximately 18 months, with local service providers that have an existing purchase of service agreement with the provincial government to operate an Ontario Early Years Centre, Parenting and Family Literacy Centre or Family Resource Program in order to maintain existing services during the transfer of responsibility. This period of time will allow Children’s Services to gain experience and knowledge for the systems management responsibilities of the OEYCFCs, and be better positioned to inform the procurement process as to service requirements and selection criteria during the Request for Proposals process.</td>
</tr>
<tr>
<td>Establish professional learning and development plan</td>
<td>As a means to ensure consistency regarding professional development opportunities, future professional development will be centralized and organized through the professional resource centre, Early Childhood Community Development Centre, effective January 1, 2018. An additional PD session will be hosted in 2017 to continue with team building and to: Provide an update on the status of the OEYCFC transformation currently underway in Niagara Enhance understanding of the common purpose and shared identity among Niagara’s OEYCFCs Provide an opportunity to think collectively about implementing and practicing pedagogical approaches described in How Does Learning Happen? Support reflective practice and collaborative inquiry</td>
</tr>
<tr>
<td>Activity</td>
<td>Description and Expectation</td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Develop of strategy for data Reporting</td>
<td>Niagara Region Children’s Services will report on Ministry determined data elements regarding delivery of OYEYCFCS, as outlined in the Funding Guidelines:</td>
</tr>
<tr>
<td></td>
<td><strong>Child and Family Centres – Service Data</strong></td>
</tr>
<tr>
<td></td>
<td>Number of child and family centre sites</td>
</tr>
<tr>
<td></td>
<td>Number of purchase of service agreements for child and family centres</td>
</tr>
<tr>
<td></td>
<td>Number of children served (to be tracked and reported to the CMSM by the OYEYCFCS service providers)</td>
</tr>
<tr>
<td></td>
<td>Number of visits made by children (to be tracked and reported to the CMSM by the OYEYCFCS service providers)</td>
</tr>
<tr>
<td></td>
<td>Number of parents/caregivers served (to be tracked and reported to the CMSM by the OYEYCFCS service providers)</td>
</tr>
<tr>
<td></td>
<td>Number of visits made by parents/caregivers (to be tracked and reported to the CMSM by the OYEYCFCS service providers)</td>
</tr>
<tr>
<td></td>
<td><strong>Mandatory Core Services and Customized Community Connections</strong></td>
</tr>
<tr>
<td></td>
<td>Number of FTE program staff</td>
</tr>
<tr>
<td></td>
<td>Number of FTE non-program staff</td>
</tr>
<tr>
<td></td>
<td>Number of FTE program staff who are RECEs</td>
</tr>
<tr>
<td></td>
<td>Number of FTE program staff receiving RECE exemptions</td>
</tr>
<tr>
<td></td>
<td>Number of service providers that have received an RECE exemption</td>
</tr>
<tr>
<td></td>
<td>Confirmation that all centres are compliant with planning guidelines and that programming aligns with HDLH</td>
</tr>
<tr>
<td></td>
<td>This information will be included in the schedule outlining roles and responsibilities within service agreements.</td>
</tr>
<tr>
<td></td>
<td>Creation of data dictionary outlining data elements, definition, frequency of reporting and process to report data as reference document for OYEYCFCS.</td>
</tr>
<tr>
<td>Ensure compliance with staffing requirements</td>
<td>As outlined in the Funding Guidelines, all child and family centres will be required to have at least one RECE included as a member of each qualified staff team.</td>
</tr>
<tr>
<td></td>
<td>Exemptions may be granted by Niagara Region Children’s Services should an agency be unable to recruit a RECE</td>
</tr>
<tr>
<td></td>
<td>Niagara Region Children’s Services will create an inventory of staffing qualifications at each existing child and family centre location operated by a service provider.</td>
</tr>
<tr>
<td>Establish locations and</td>
<td><strong>Centres</strong></td>
</tr>
<tr>
<td>Centres</td>
<td>Mapping and/or analysis of existing centre locations, days and hours of operation.</td>
</tr>
<tr>
<td>Activity</td>
<td>Description and Expectation</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>access to services</td>
<td>operation, analysis of usage, and location of complimentary federally funded early years programs, existing datasets, and community engagement data.</td>
</tr>
<tr>
<td></td>
<td>Creation of an inventory of existing centres lease/rental agreements.</td>
</tr>
<tr>
<td></td>
<td>Create plan based on data to enhance, relocate and/or reconfigure OEYCFC programs and services to meet community needs. Share plan with Advisory Committee for input, feedback and recommendations.</td>
</tr>
<tr>
<td>Virtual Services and Resources</td>
<td>Develop an inventory of existing online resources, information and other services (e.g. websites, social media, etc.) as alternative means to provide parents/caregivers services and information related to the suite of mandatory core services.</td>
</tr>
<tr>
<td>Local phone lines</td>
<td>Develop an inventory of existing phone based community information services (e.g. 211, HBHC Parent Talk Line)</td>
</tr>
<tr>
<td>Enhance French language services</td>
<td>The provision of French language services has been identified as a priority in Niagara. A portion of the additional funding ($122,434) will be used to enhance the offering of French language services.</td>
</tr>
<tr>
<td>Enhance Indigenous peoples programs and services</td>
<td>The provision of programs and services that reflect local Indigenous peoples has been identified as a priority in Niagara.</td>
</tr>
<tr>
<td></td>
<td>Niagara Region Children’s Services is working with local Friendship Centre to develop proposal to access funding through Journey Together: Ontario’s Commitment to Reconciliation with Indigenous Peoples to enhance culturally relevant, Indigenous-led early years programs and services off-reserve.</td>
</tr>
<tr>
<td>Establish Project Charter</td>
<td>Develop project charters for Phase I (up to January 2018) and Phase II (from January 2018 to December 2019). The project charters will outline governance, project purpose, critical success factors, items in and out of scope, high level milestones, budget, project risks and stakeholders</td>
</tr>
<tr>
<td></td>
<td>As part of the project charters create and implement of Gantt charts for detailed timelines for multiple activities.</td>
</tr>
<tr>
<td>Activity</td>
<td>Description and Expectation</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td></td>
<td>The project charters helps prepare Niagara Region as the CMSM to take lead responsibility as of January 2018, for the local service system planning, implementation, funding and management of the new child and family centres. Project charters uploaded to Project Management Portal, accessible by Regional Councillors.</td>
</tr>
</tbody>
</table>

**Phase II System Transformation, Engagement and Procurement**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description and expectation</th>
</tr>
</thead>
</table>
| Establish mandatory core services | Proposed set of core services will be presented to Advisory Committee for feedback and core services will be operationalized by successful agencies awarded OEYCFC through RFP process in 2019. Support implementation of these additional service components, identified through the needs assessment:  
- Pre and post-natal support programs  
- Responding to parent and caregiver concerns about development through conversation and observation supported by validated tools and resources (i.e. NDDS)  
- Information sharing about and facilitating connections with specialized community services  
- Build in ongoing feedback mechanism from children, parents/caregivers to support continuous quality improvement and ensure that OEYCFCs remain child and family centred, meet the unique needs of parents, caregivers and young children to support developmental health and general well-being  
- Strategies to increase early identification, screening and surveillance for potential developmental delays in young children |

| Phase II RFP/formal procurement process implementation | Throughout 2018, Children’s Services will monitor the service delivery and local impacts of changes associated with the transition of services. This time will allow Children’s Services to gain experience and knowledge for the systems management responsibilities of the OEYCFCs, and be better positioned to inform the procurement process as to service requirements and selection criteria.  
- In Q4 of 2018, Niagara Region Children’s Services will work with the Niagara Region Procurement team to draft the RFP.  
- A group made up of representation from early years community |
<table>
<thead>
<tr>
<th>Activity</th>
<th>Description and Expectation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish an ongoing communications and engagement strategy</td>
<td>Niagara Region Children’s Services will implement local outreach and engagement strategies across Niagara to increase awareness and local participation of OEYCFCs, aligned with the provincial branding strategy.</td>
</tr>
<tr>
<td></td>
<td>Niagara Region Communications Advisor will support the development of multi-phased communications strategies, to provide ongoing communication regarding the transitional planning and implementation phases to share with relevant partners and stakeholders within Niagara region.</td>
</tr>
<tr>
<td>Establish of local outcome framework</td>
<td>Upon release of provincial outcome framework intended to better understand and measure the impact of OEYCFC core services, Niagara Region children’s Services will give consideration in identifying additional programs outcomes in alignment with local priorities and needs.</td>
</tr>
</tbody>
</table>
| Establish locations and access to services                               | **Centres**  
Use plan to inform RFP process regarding locations  
Implement plan based on data to enhance, relocate and/or reconfigure OEYCFC programs and services to meet community needs.                                                                                           |
|                                                                         | **Virtual Services and Resources**  
Develop a plan to provide online resources, information and other services (e.g. websites, social media, etc.) as alternative means to provide parents/caregivers services and information related to the suite of mandatory core services.                                                                 |
|                                                                         | **Local phone lines**  
Develop a plan to provide information about OEYCFC programs and services, including information about child development, parenting supports and play and inquiry-based learning in existing phone based community services.                                                                 |
<table>
<thead>
<tr>
<th>Activity</th>
<th>Description and Expectation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish an ongoing professional learning and development plan</td>
<td>Professional development opportunities will be centralized and organized through the local professional resource centre, Early Childhood Community Development Centre. Service provider input, staff feedback and Ministry expectations regarding the pedagogical framework for child and family centres will inform quarterly PD sessions.</td>
</tr>
<tr>
<td>Establish local budget allocations for service providers</td>
<td>Niagara Region Children’s Services will develop a local allocation formula and transition budgets to ensure more equitable distribution among service providers.</td>
</tr>
<tr>
<td>Establish an ongoing data reporting and financial accountability process</td>
<td>Niagara Region Children’s Services will report expenditures by expense category set out in the Ministry of Education Business Practices and Funding Guidelines for Service System Managers. Ministry determined data elements regarding delivery of OEYCFCs, as outlined in the Funding Guidelines will be reported at year end. Niagara Region Children’s Services will develop a plan to confirm that all centres are compliant with Ministry Planning Guidelines and that programming aligns with How Does Learning Happen?: Ontario’s Pedagogy for the Early Years</td>
</tr>
<tr>
<td>Ensure compliance with staffing requirements</td>
<td>As outlined in the Funding Guidelines, all child and family centres are required to have at least one RECE included as a member of each qualified staff team. Exemptions may be granted by Niagara Region Children’s Services should an agency be unable to recruit a RECE. Exemptions will be reviewed annually and if needed, Niagara Region Children’s Services will support service providers with the development of strategies to meet staffing requirement (e.g. transition planning, recruitment, promotion of Early Childhood Education Qualifications Upgrade Program). Annual reporting on staffing exemptions will be provided to the Ministry of Education.</td>
</tr>
<tr>
<td>Activity</td>
<td>Description and Expectation</td>
</tr>
<tr>
<td>----------</td>
<td>-----------------------------</td>
</tr>
<tr>
<td>Establish project charter for Phase III</td>
<td>Niagara Region Children’s Services will create and implement a project charter for Phase III (January 2020 to December 2023). The project charter will outline governance, project purpose, critical success factors, items in and out of scope, high level milestones, budget, project risks and stakeholders. As part of the project charter, a Gantt chart for detailed timelines for multiple activities will be created.</td>
</tr>
</tbody>
</table>

**Phase III System Evolution and Continuous Quality Improvement**

<table>
<thead>
<tr>
<th>Activity</th>
<th>Description and Expectation</th>
</tr>
</thead>
</table>
| Ensure compliance with staffing requirements | As outlined in the Funding Guidelines, all child and family centres are required to have at least one RECE included as a member of each qualified staff team. 

Niagara Region Children’s Services will annually review the list of service providers who have been granted an exemption, and assess effectiveness of strategies to meet staffing requirements. 

If deemed necessary, Niagara Region Children’s Services will continue to grant exemptions to service provider unable to recruit a RECE. 

Ongoing monitoring of exemptions will continue and if needed, Niagara Region Children’s Services will support service providers with the development of strategies to meet staffing requirements (e.g. transition planning, recruitment, promotion of Early Childhood Education Qualifications Upgrade Program). 

Annual reporting on staffing exemptions will be provided to the Ministry of Education. |
| Implementation of an ongoing communications and engagement strategy | As per Ministry expectations, Niagara Region Children’s Services will continue to implement local outreach and engagement strategies across Niagara to increase awareness and local participation of OEYCFCs, aligned with the provincial branding strategy. 

Niagara Region Communications Advisor with support the development Phase III communications strategies, to provide ongoing communication regarding the transitional planning and implementation phases to share |
<table>
<thead>
<tr>
<th>Activity</th>
<th>Description and Expectation</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Establish locations and access to services</strong></td>
<td>Niagara Region Children’s Services will continue to implement plan based on data to enhance, relocate and/or reconfigure OEYCFC programs and services to meet community needs. <strong>Virtual Services and Resources</strong> Implement plan to provide online resources, information and other services (e.g. websites, social media, etc.) as alternative means to provide parents/caregivers services and information related to the suite of mandatory core services. <strong>Local phone lines</strong> Implement plan to provide information about OEYCFC programs and services, including information about child development, parenting supports and play and inquiry-based learning in existing phone based community information services (e.g. 211, HBHC Parent Talk Line)</td>
</tr>
<tr>
<td><strong>Develop customized services</strong></td>
<td>When Ministry core service expectations are consistently met by OEYCFCs, Niagara Region Children’s Services will investigate opportunities to offer other community resources within OEYCFCs (e.g. satellite food banks, toy lending libraries). Information from parents, caregivers, and children will inform customized services will be gathered through communications and engagement strategy.</td>
</tr>
<tr>
<td><strong>Ongoing implementation of professional learning and development plan</strong></td>
<td>Professional development opportunities will continue to be centralized and organized through the local professional resource centre, Early Childhood Community Development Centre. Service provider input, staff feedback and Ministry expectations regarding the pedagogical framework for child and family centres will inform quarterly PD sessions.</td>
</tr>
<tr>
<td><strong>Ongoing data reporting and financial</strong></td>
<td>Niagara Region Children’s Services will report expenditures by expense category set out in the Ministry of Education Business Practices and Funding Guidelines for Service System Managers.</td>
</tr>
<tr>
<td>Activity</td>
<td>Description and Expectation</td>
</tr>
<tr>
<td>--------------</td>
<td>-----------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>accountability</td>
<td>Ministry determined data elements regarding delivery of OEYCFCs, as outlined in the Funding Guidelines will be reported at year end.</td>
</tr>
<tr>
<td></td>
<td>Beginning in Q1 of year three, Niagara Region Children’s Services will implement a plan outlining monitoring, training, support and oversight strategies to ensure compliance with Ministry Planning Guidelines and programming alignment with How Does Learning Happen?: Ontario’s Pedagogy for the Early Years</td>
</tr>
</tbody>
</table>
My favourite thing to do at the centre is....... trace letters and play in the gym.
Appendix A

Current Child and Family Programs in Niagara Region
Appendix B

Federal Early Years Program sites in Niagara Region
Appendix C

Identified Neighbourhoods
Changes are coming to child and family centres in Ontario. In the Niagara region, we need your feedback to better understand which current services and supports are valued and which are needed by families with young children. Please complete this questionnaire to help us plan the local child and family centres.

Child and family centres provide programs for children and families where the parent/caregiver stays on site with the children. They are free programs where all are welcome. Some examples are Ontario Early Years Centres, Family Resource Programs and Parent & Family Literacy Centres.

### ABOUT YOU AND YOUR CHILD(REN)

What is your Postal Code?

1. 

   [ ] [ ] [ ] [ ] [ ] 

2. What is your relationship to the young child(ren) you care for?

   O Mother    O Home child care provider/nanny

   O Father    O Other family member

   O Grandparent    O Foster parent
3. What year(s) were the child(ren) that you care for born in?

Child # 1: 20___  Child # 4: 20___
Child # 2: 20___  Child # 5: 20___
Child # 3: 20___  Child # 6: 20___

4. Do your children who are aged 0-6 years regularly attend any of the following? Check all that apply.

- [ ] Nursery school
- [ ] Child care in someone else’s home
- [ ] Library program
- [ ] Child care in a child care centre
- [ ] Kindergarten
- [ ] Other: ______________________
- [ ] Child and Family Centres (ie: Ontario Early Years Centre, Parent and Family Literacy Centre, Family Resource Program)

5. a) Have you ever visited any of the following centres? Check all that apply.

<table>
<thead>
<tr>
<th>Centre</th>
<th>Yes, within the past month</th>
<th>Yes, within the past 12 months</th>
<th>Yes, more than one year ago</th>
<th>Yes, more than two years ago</th>
<th>No, never</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aboriginal Family Support Program (Fort Erie Native Friendship Centre)</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Bethlehem Early Learning Centres</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Coin des familles</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Ontario Early Years Centres</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Parent and Family Literacy Centres</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
5. b) If you have visited any of the above centres, what did you or your family value the most about the centre(s)?
   - O The way the centre was set-up / environment
   - O Relationship with staff
   - O Convenient hours
   - O Connecting with other parents / caregivers
   - O Broad range of programs
   - O Culturally relevant programming
   - O Other ________________________________

5. c) Have you experienced any barriers to attending or participating in the above programs? If so, check all that apply.
   - O I didn’t know the centres or programs existed
   - O I didn’t know the programs were free
   - O The hours don’t fit my schedule
   - O The centres are too far to walk from my home and I don’t have a car
   - O The centre isn’t easily accessible by bus
   - O I am not comfortable around other parents
   - O I am not comfortable around early child development professionals
   - O The services I want are not offered at the centres
   - O I am not interested in the programs or services offered by the centres
   - O My language needs are not met by the centres
   - O Programs and services are not reflective of my cultural values/needs
ABOUT SERVICES FOR YOU AND YOUR CHILD(REN)

6. What types of services would you find useful at the centres? Check all that apply.

- Health care services
- Recreation services
- Dental services
- Breastfeeding supports
- Blind/low vision services
- Infant hearing services
- Mental health services
- Parenting education
- Newcomer services
- Library
- English as a Second Language Classes
- Other

- Speech and language services
- Infant development services
- Nutritional support services
- Services to help access food, clothing or housing
- Literacy and numeracy support
- Parenting supports for LGBQT families
- Parenting supports for dads
- Services for children with special needs
- Programs/services for behavioural issues
- Occupational/physical therapy services

7. Which of the following services would you like to have available in the same location as a child and family centre? Check all that apply.

- Child Care
- School
- Recreation Centre (sports/arena, arts)
- Public Health services (nurse, pre/postnatal health, sexual health, vaccine clinic, Positive Parenting)
- Library
- Speech and language services
- Cultural Services (aimed at teaching cultural practices such as French or Indigenous)
8. At a child and family centre, what type of topics would you be interested in learning more about?

- Encouraging my child to eat healthy
- Children’s learning
- Food/preparing healthy meals
- Sleep habits
- Safety
- Recreation
- Being aware of what children should or could be doing at any given age
- Motivating my child to be physically active
- Encouraging appropriate behavior and discouraging inappropriate behavior
- Other ________________________

9. a) Please rate the importance of the following physical features of child and family centres on a scale from 1 to 5. 1 = not at all important to you 5 = very important

<table>
<thead>
<tr>
<th>Feature</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accessible for all (wheelchairs, walkers, etc)</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Located close to my home</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Located within a school</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Located close to other services</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Has an open play space</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Has an outdoor play space</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Has separate rooms for programs</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Has a kitchen/kitchenette</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Has stroller parking</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Has car/bicycle parking</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Is on the bus route</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>
9. b) Is there anything else missing from the list that is important to include?

10. a). Please rate the following program features of child and family centres on a scale from 1 to 5. 1= not at all important to you  5 = very important

<table>
<thead>
<tr>
<th>Feature</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualified staff or professionals</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Programs to develop connections with other parents</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>All my children would be welcome in one place</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Program is able to accommodate my child’s special needs</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Program is able to incorporate my cultural practices/teachings</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Free programs</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Drop-in programs</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Programs/activities other than drop-in program</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>Other services are available when I need them</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
<tr>
<td>(breastfeeding, speech and</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
<td>O</td>
</tr>
</tbody>
</table>

10 b). Is there anything else missing from the list that you feel is important to include?
ABOUT ACCESSING SERVICES

11. How far would you travel from your home to access services for your child?

- [ ] Walking distance from my home
- [ ] 5 minute drive from my home
- [ ] 10 minute drive from my home
- [ ] 15 minute drive from my home
- [ ] 20 minute drive from my home
- [ ] 25 minute drive from my home
- [ ] 30 minute drive or more from my home

12. When would you prefer to visit a child and family centre? Check all that apply.

- [ ] Monday
- [ ] Tuesday
- [ ] Wednesday
- [ ] Thursday
- [ ] Friday
- [ ] Saturday
- [ ] Sunday
- [ ] I can visit any day
- [ ] I can only visit on weekends
- [ ] Year round
- [ ] School year only
- [ ] Summer only

13. What time of day would work best for you and your children to visit a child and family centre? Check all that apply.

- [ ] Weekday mornings
- [ ] Weekday afternoons
- [ ] Weekday evenings
- [ ] Saturday mornings
- [ ] Saturday afternoons
- [ ] Sunday mornings
- [ ] Sunday afternoons
- [ ] My schedule is flexible, any of these times work for me
14. Are there any locations where you would not feel comfortable attending a child and family program? Please tell us:________________________________________________________

ABOUT YOUR GOALS

15. What do you hope to get out of child and family centres? What kind of benefits do you hope they would provide for you? For your child? Please tell us.

_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________
_____________________________________________________________________

Thank you for completing this questionnaire! Your input will be helpful to us in planning programs and services in Niagara Region.
Appendix E

List of Promotion Points for Parents Voice
Listing of the multiple agencies and organizations who helped to advertise the parent and caregiver survey.

Print media

St. Catharines Standard, Niagara Falls Review and Welland Tribune – six weeks of newspaper advertising and front page banners

French and English posters and postcards distributed to:

- Bethlehem Place (main and outreach sites)
- Canadian Mental Health Association Niagara Region
- Centre de sante communautaire Coin des familles (Francophone Family Resource Program)
- CERF Niagara – Francophone Employment Resource Centre
- Coalition for Persons with Disabilities
- College Boreal
- Community Care (food bank)
- Community Care of West Niagara (food bank)
- Community Outreach Program Erie (food bank)
- District School Board of Niagara Transition to Employment program
- Employment Help Centre
- Employment Solutions
- Folk Arts Multicultural Centre
- Fort Erie Native Friendship Centre
- Fort Erie Public Library
- Grimsby OEYC
- Hope Centre (food bank)
- L’ABC Communautaire
- Lincoln Public Library
- March of Dimes Canada
- Niagara Catholic District School Board (literacy services)
- Niagara College Academic Upgrading program
- Niagara Falls OEYC (main and satellite sites)
- Niagara Peninsula Aboriginal Area Management Board
- Niagara Region headquarters
- Niagara Regional Learning Centre
- Niagara Regional Native Centre – Apatisiwin program (employment)
- Niagara West Adult Learning Centre
- OEYC Erie Lincoln (main and satellite sites)
- OEYC Niagara Centre (main and satellite sites)
- Port Cares (food bank and Literacy and Basic Skills program)
- Project Share (food bank)
- Public libraries (main branch and satellites) in of the 12 Niagara region municipalities
- Service Canada
- Social Assistance and Employment Opportunities offices in Niagara
- Trillium College
• Village of Hope (food bank)
• Welland Public Library (main and satellite branches)
• West Lincoln Community Care (food bank)
• West Lincoln Public Library
• YMCA Employment & Newcomer Services
• YMCA Language Assessment (CLARS)
• YMCA OEYC St. Catharines (main and satellite sites)

French and English posters and postcards distributed to the following 76 licensed child care centres providing with infants and toddler aged children enrolled:

Fort Erie

1. ACW Child Care/ Early Learning- John Brant
2. Fort Erie Regional Child Care Centre
3. Top of the Ridge Day Care
4. Turtle Club Day Care
5. Under the Rainbow- Wakanioten Child Care

Grimsby

6. Grandview Community Daycare
7. Kidzome Preschool
8. Kidzome Preschool- Nelles
9. Lakeview Community Daycare Co-operative
10. The Chestnut Tree Preschool- Grimsby
11. Trail Ridge Montessori School
12. Trail Ridge Montessori Junior School

Lincoln

13. Beamsville Early Learning and Child Care Centre
14. Mini Retreat Childcare Inc.
15. The Chestnut Tree Preschool- Beamsville
16. The Day Care Centre

Niagara Falls

17. ACW Child Care- Niagara Community
18. ACW Child Care/ Early Learning- Princess Margaret
19. Branscombe Early Learning and Family Centre
20. Centre educatif les p’tigroux
21. Kids First Daycare
22. Kids First Child Care 5
23. La Boite a Soleil- La Marsh
24. La Petite etoile et club apres l’ecole
25. Pathways Academy and Early Learning Centre
26. Stamford Green Day Nursing
27. Valleyway Day Care Centre
28. Wee Care Day Care
29. YMCA Child Care- Kate S. Durdan/ Loretto
Pelham

30. ACW Child Care- Lookout Ridge
31. Fonthill Montessori Preschool
32. Maple Crest Early School
33. YMCA Child Care- Glynn A. Green

Port Colborne

34. ACW Child Care- First Friends
35. La Boîte a Soleil- St. Joseph
36. Port Colborne Regional Child Care Centre

St. Catharines

37. ABC Daycare Centre
38. ACW Childcare- Glenridge Hill
39. ACW Childcare- Tiny Travellers
40. ACW Childcare/ Early Learning- Connaught
41. Althorp Montessori School
42. Au Coin des petits- Centre Prescolaire
43. Beyond Montessori School
44. Brilliant Futures
45. Glendale Early Learning Childcare Centre
46. Grapeview Daycare Centre
47. Les Coccinelles Zelees
48. Nelephant Montessori Toddler Program
49. Parents Peace of Mind East
50. Parents Peace of Mind West
51. Power Glen Early Learning and Child Care Centre
52. Rosalind Blauer Centre for Child Care
53. St. Catharine’s Regional Child Care Centre
54. St. Thomas’ Day Care
55. Sven H. Dohnberg Centre
56. Way To Grow- St. Catharines
57. Western Hill Child Care Centre
58. Wheatley School of Montessori Education
59. YMCA Childcare- Grapeview
60. YMCA Childcare- Parnall
61. YMCA Childcare- Walker Family
62. Anna’s Daycare Centre
63. C. Sisters of the Sacred Heart’s Children’s Day Care
64. Thorold Community Services

Welland

65. ACW Childcare- Woodlawn
66. ACW Childcare/ Early Learning- Kids World
67. ACW Childcare/ Early Learning- Ross
68. Blessed Mother Theresa House  
69. La Boite a Soleil - Empress  
70. La Boite a Soleil - Fitch  
71. La Boite a Soleil - Nouvel Horizon  
72. Seven C’s Christian Childcare  
73. St. David’s Co-operative Nursery School  
74. Welland Parent Child Care Centre  
75. Welland Regional Child Care Centre  
76. YMCA Child Care- Father Fogarty  

**Digital media**

- Banners for St. Catharines Standard, Niagara Falls Review and Welland Tribune websites  
- Digital ads at YMCA branches throughout Niagara  
- Digital ads at Niagara Falls Community Health Centre  
- Digital ads at local shopping malls  

**Social media**

- Google network ads  
- Facebook promotional ads for survey  

**Community Partners**

- Emails sent out to Niagara Children’s Planning Council (87 contacts)  
- Emails out to Niagara Employment Network (280 contacts)
Appendix F

Community Partner Survey

Dear community partners,

In 2016, the provincial government announced changes to child and family centres in Ontario. On January 1, 2018, Ontario Early Years Centres (OEYC), Parent and Family Literacy Centres (PFLC), and Family Resource Programs (FRP) will all come under the same umbrella; Ontario Early Years Child and Family Centres (OEYCFC). The agencies currently operating an OEYC/PFLC/FRP in Niagara, along with Niagara Region Children’s Services, are working hard to ensure that the local planning for OEYCFCs includes the voices of parents/caregivers, children, staff, and community partners. As those working closely with children and families, and in some cases working closely with staff of OEYC/PFLCs and/or FRPs, we would like to ask for your valuable input.

Please complete this survey in order to help inform the needs assessment and planning process. Most of the questions are quite open-ended, as we want input as true to the voice of your agency as possible. Please feel free to include constructive criticism, as we share the same goals: improving programs and services for young children and their families.

The survey will be open until end of day Friday, June 30. Thank you!

1. Which organization/agency are you completing this survey on behalf of?
2. Is your organization/agency currently connected with OEYC, PFLC, and/or FRP? If so, in what capacity? Choose all that apply.

<table>
<thead>
<tr>
<th></th>
<th>OEYC</th>
<th>PFLC</th>
<th>FRP</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am not familiar with this program.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>I am familiar but my agency is not connected to this program.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>My agency makes referrals to this program.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>My agency provides direct services at a service location of this program (ex: Public health provides Well Baby Clinic at OEYC site).</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>Staff from my agency facilitate/co-facilitate services with staff from this program.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>My agency regularly engages with staff from this program in the planning of services and supports.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>I have a connection with at least a few staff at this agency with whom I am comfortable to just pick up the phone and call.</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>

3. If you indicated that your agency provides services directly, which services does your agency provide? Use the text boxes below to give as much detail as possible about the services provided to each.

<table>
<thead>
<tr>
<th></th>
<th>OEYC</th>
<th>PFLC</th>
<th>FRP</th>
</tr>
</thead>
<tbody>
<tr>
<td>Services provided to OEYC</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>Services provided to PFLC</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>Services provided to FRP</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>
4. If you indicated that you co-facilitate, which services do you co-facilitate? If you indicated that you engage in joint planning, what type of planning do you do together? Use the text boxes below to describe for each agency.

OEYC: Co-facilitation

PFLC: Co-facilitation

FRP: Co-facilitation

OEYC: Joint planning

PFLC: Joint planning

FRP: Joint planning

5. If you indicated that your organization/agency is currently connected with OEYCs/PFLCs/FRPs, please describe your experiences. Did you face or are you facing any challenges or barriers along the way?

OEYC

PFLC

FRP

6. If you stated that your agency is not connected to this program, why is this?

OEYC | PFLC | FRP
--- | --- | ---
Due to the focus/clientele of our agency or the type of service we provide, it does not make sense for us to be connected to this program.

We have faced barriers in becoming connected to this program.

We were connected in the past but those connections no longer exist.

7. Please tell us about the barriers indicated in question 6, if any.

8. Based on your observations of and interactions with families, are there any programs and services offered by your agency that you feel are essential to offer on-site at child and family centres?
9. In your opinion, what, if any, are the strengths of FRP/PFLC/OEYC programs?

10. In your opinion, is there anything FRP/PFLC/OEYC programs should focus on improving?
Appendix G

Social Competence Domain Map

2015 Early Development Instrument: Social Competence Domain
% Children Scoring Low in Niagara, by Neighbourhood

Data Source: 2015 Early Development Instrument, Niagara Region
Appendix H

Emotional Maturity Domain Map

2015 Early Development Instrument: Emotional Maturity Domain
% Children Scoring Low in Niagara, by Neighbourhood

Data Source: 2015 Early Development Instrument, Niagara Region
Appendix I

Children’s Expressions of Interest

Physical Health and Well-being

- Crafts
- Painting
- Gym
- Building
- Colouring
- Running
- Drawing
- Dancing
- Slide
- Making
- Artwork
- Balls
- Bikes
- Trains
- Markers
- Towers
- Outdoors
- Cutting
- Light-table
- Cars
- Playdough

Social Competence

- Playing house
- Playing with dolls
- Playing with babies
- Feeding the babies
- Singing with friends
- Being friendly
- Being with friends
- Talking to adults

Emotional Maturity

- Circle time
- Family
- Being friendly
- Time with mom
- Caring

Language and Cognitive Development

- Alphabet
- Puzzles
- Math
- Counting
- Matching
Appendix J

Results from the Parent and Caregiver Survey

About the parents and caregivers who responded

In total there were 1022 responses, and excluding those that do not reside in Niagara, there were 993 responses from parents and caregivers residing in the Niagara region which were included in analysis. Eighty-seven percent of respondents were mothers, while fathers and grandparents each made up 5% of responses, and home child care providers made up 2%. There were a small number of foster parents and other family members who participated as well.

More than half of respondents had two children (58%), while 13% had one child, 19% had 3 children, and 10% had four or more children. The distribution of responses across the region is what would have been expected based on the population of the region.

Where Parent/Caregiver Survey Respondents Reside

- St. Catharines
- Thorold
- Niagara Falls
- Niagara-on-the-Lake
- Pelham
- Welland
- Port Colborne
- Fort Erie

Age of respondents’ children
(number of children within age group)

- 6 mos or less: 129
- 7mos-1.5 yrs: 261
- 1.6 - 2.5 yrs: 326
- 2.6 - 3.5 yrs: 276
- 3.6 - 4.5 yrs: 263
- 4.6 - 5.5 yrs: 137
- 5.6 - 6.5 yrs: 148
- 6.6 - 6.9 yrs: 42
The survey represented 1582 children aged 6 and under, and 18 prenatal families. Respondents had 108 additional children that were 7 years of age or older, illustrating that almost 90% of respondents who had children aged 6 and under did not have other children that fall outside of the target age group for OEYCFCs.

Almost 64% said their children attended child and family centres. OEYCs had the highest percentage of children whom parents said attended, which as there are more OEYC sites across Niagara.

Respondents identified which features of OEYC/PFLC/FRP programs were important. Almost all felt that qualified staff or professionals were very important or important. Drop-in programs, free programs and being able to have all their children in one place was also very important or important to 87-89% of respondents. Drop-in programs were more important to 17% more respondents than programs outside of drop-in. While almost three quarters felt programs outside of drop-in were important, it is clear that the drop-in aspect of child and family programming is key to most.

127 respondents provided other suggestions as well. They mainly centred on logistics such as being open longer hours, offering programs over the lunch hour so as to not interfere with nap times, and increasing weekend hours for those who work full time. Respondents would really like to be able to bring children of various age groups to the programs, as having an older/younger child is a barrier for participating in programs for targeted age groups. Mental health/emotional support were proposed for both children and parents, from family mindfulness programs to supports for postpartum depression. One respondent said,

“I feel like staff deal with parent issues almost as much as the childcare aspects of the program. Providing staff with some training on how to handle these conversations in a professional manner would benefit both staff and families…”

Some suggested that consistency in programming, location and hours were important, as was advertising.
Survey respondents were asked about what they valued the most about the OEYC/PFLC/FRP program(s) that they attended. Three quarters valued the environment of the centre. Approximately 60% valued both the relationship with staff and the connections they make with other parents. 45% valued the convenient hours and 40% valued the broad range of programs offered. 9% of those who said they valued the culturally relevant programming attended the Fort Erie Native Friendship Centre. 3.4% who visited Bethlehem and 2.2% who visited Coin de Familles also valued the culturally relevant programming. 90 respondents gave examples of what else they valued outside of the options given. The main themes were:

- The social opportunities that OEYC/PFLC/FRPs provide. Ex: interacting with other children, developing relationships, and building social skills
- Child development, high quality learning experiences, and activities that encourage learning were valued by respondents, with an emphasis on school-readiness.
- Access to knowledgeable, professional staff and service providers who are able to provide information and parent education.

There were 434 respondents who did not indicate that there were any barriers to accessing OEYC/PFLC or FRPs. Of the 559 who did experience barriers, 46% said one of them was that they did not know the centres existed. Approximately the same percentage of respondents said...
the hours of operation did not fit their schedule. One quarter who experienced barriers did not know that the programs were free. 15% said the centres were too far to walk to and they didn’t have access to transportation, and 9% said the services they were looking for were not offered.

In terms of what respondents would find useful at the centres, about two thirds said recreation services and parenting education. Infant development services, nutritional support services, library and health care services would be useful to almost half of respondents. The services where less than 25% of respondents indicated they would be useful to have at OYEYFCs were services that target specific populations, such as fathers, newcomers, LGBQT families or those that need specific services such as occupational therapy or blind/low vision services. 50 respondents offered suggestions outside of the options listed on the survey. Respondents were looking for:

- parenting education such as information on learning disabilities, strengthening infant/parent bonds, and understanding/addressing challenging behaviour
- targeted support programs for specific populations; single mothers, mothers suffering from PPD, mothers of multiples, young fathers and grandparents with custody
- some respondents indicated that they would like more programs or more spaces in programs, especially for infants

% respondents who would find these services useful at OYEYFCs

<table>
<thead>
<tr>
<th>Service</th>
<th>% Useful</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recreation services</td>
<td>67</td>
</tr>
<tr>
<td>Parenting education</td>
<td>65</td>
</tr>
<tr>
<td>Infant development services</td>
<td>49</td>
</tr>
<tr>
<td>Nutritional support</td>
<td>47</td>
</tr>
<tr>
<td>Library</td>
<td>45</td>
</tr>
<tr>
<td>Health care services</td>
<td>44</td>
</tr>
<tr>
<td>Speech &amp; language services</td>
<td>40</td>
</tr>
<tr>
<td>Breastfeeding supports</td>
<td>38</td>
</tr>
<tr>
<td>Mental Health services</td>
<td>37</td>
</tr>
<tr>
<td>Literacy &amp; numeracy support</td>
<td>36</td>
</tr>
<tr>
<td>Services for behavioural issues</td>
<td>35</td>
</tr>
<tr>
<td>Dental services</td>
<td>34</td>
</tr>
<tr>
<td>Parenting supports for dads</td>
<td>23</td>
</tr>
<tr>
<td>Infant hearing services</td>
<td>22</td>
</tr>
<tr>
<td>Special needs services</td>
<td>22</td>
</tr>
<tr>
<td>Occupational/physical therapy</td>
<td>21</td>
</tr>
<tr>
<td>Help accessing food/clothes/housing</td>
<td>16</td>
</tr>
<tr>
<td>Newcomer supports</td>
<td>15</td>
</tr>
<tr>
<td>LGBQT parent supports</td>
<td>9</td>
</tr>
<tr>
<td>Blind/low vision</td>
<td>7</td>
</tr>
<tr>
<td>ESL</td>
<td>6</td>
</tr>
</tbody>
</table>
In regards to which services respondents would like co-located with OEYCFCs, 61% said they would like recreation services co-located, 56% said both library and Public Health services, and 53% would like OEYCFCs co-located with child care. Just over one quarter (28%) wanted the centres co-located with schools, 18% would like the sites co-located where cultural services are offered. When accessing the centres, respondents would be interested in learning more about:

- children’s learning (71% of respondents)
- encouraging children to eat healthy (61%)
- encouraging appropriate behaviour (59%)
- what children should/could be doing at various ages (58%)

Although 5% of respondents were fathers, 15% of respondents would like to learn more about fatherhood, showing that interest stretches beyond this specific population. Twenty-eight respondents gave additional suggestions for co-location, including services for children with special needs and mental health services.

When it comes to physical attributes of OEYCFCs, most survey respondents (91%) felt that an open play space was crucial. Having space outdoors for children to play and families to park cars and bikes was also important to three quarters of the respondents. Accessibility in terms of access for those with special needs as well as accessibility in terms of being in close proximity to the participant’s home was important to about two thirds of respondents (65% and 68% respectively). Only about one quarter, however, said that being on a bus route was important for OEYCFCs.
In contrast to the 68% who said they prefer services close to home, almost 60% of respondents are willing to drive 15 minutes or more to attend an OEYCFC. This is likely a reflection of the rural nature of a large portion of Niagara Region, and the impact it has on the concept of a commute. 35% of respondents would like the drive to be 10 minutes or less. Only 6% would prefer only that it be no further than walking distance.

Respondents were asked about locations where they would not feel comfortable attending OEYCFCs. Three main themes arose: low income areas, buildings with religious affiliations, and sites associated with Family and Children’s Services (FACS). “Downtown” areas were named as places respondents did not want to attend programs, and in some instances they were referred to as “inner city”, “rougher parts of town” or “low income areas”. Other respondents specifically stated that sites located within churches make them uncomfortable. One example is a non-inclusive religious message displayed close to the child and family centre which was insulting to OEYCFC Initial Plan for Niagara Region.
persons who identified as LGBQT. Some respondents felt that OEYCFCs should be separate from FACS or not co-located with FACS programs.

In terms of respondents' preferences for days and hours of operation, 369 or 41% of respondents who answered this question said they are able to attend any day. Of those who are not able to attend every day, 20% are able to attend Monday to Friday and half are able to attend at least three week days per week. 3% prefer weekends only.

24% of respondents said they are able to attend at any of the times offered. Including them with those who said weekday mornings are preferred, 68% of respondents said this time works well for their schedule. Saturday morning was also a desirable time. Weekday afternoons were equally as desirable as weekday evenings. Sundays were the least desirable time, though marginally. Those who prefer to access centres during the school year only and those who prefer the summer only were 6% and 5% respectively. It is clear that parents and caregivers prefer access to the centres year round, as 87% of respondents indicated this.

The final question on the survey asked “What do you hope to get out of child and family centres? What kind of benefits do you hope they would provide for you? For your child?” The answers in many cases were just as much about the parent as they were about the child, highlighting the necessity that centres focus on the whole family. As one parent said, “I like that it’s parent and child oriented so we learn together…”

The opportunity to interact at OEYCFCs with other children (especially those of similar ages), staff and other adults is something that almost all respondents wanted for their children. The development of social skills such as sharing, independence, playing with others, being respectful, accepting various cultures, taking turns, making friends/forming relationships and learning how to interact with others is very important to survey respondents. Based on the responses, social skills appear to be the main priority for parents/caregivers of children in this age group. As one parent said, “I think socialization is the most important reason I brought my daughter out to these places”. Providing children with opportunities to learn is also important for respondents. Many parents made the connection between learning and playing, and recognized that the centres provide opportunities for children to engage in play-based learning. Many talked about child development, with an emphasis on their desire for centres to help children prepare for school either directly or through the development of skills that will help them to be successful in school.

For themselves, parents/caregivers would like centres to provide opportunities to meet other adults, socialize and develop friendships with other parents. Many noted that connecting with other parents helps them to “create a support system amongst fellow parents”. Parents are looking for spaces outside the home to bring their child, for a “change of scenery”. This was especially noted by parents who stay at home with their children.
Many parents/caregivers also expressed a strong desire for centres to be places that they can turn to for parenting supports, “a resource centre for parenting problems”, “where I feel I have the support when I need it”, with “nice, friendly, approachable and knowledgeable staff”. They want a place where there are experienced, expert staff that they can discuss concerns with and ask questions of, and find a variety of resources to help with challenges. As one respondent stated, “I think a general one stop shop where you can have your questions answered by qualified professionals in terms of development and things that you could be doing to promote development and health would be good”. Respondents also want a place where they can attend parent education workshops on various parenting topics, with managing behaviour, sleep, breastfeeding, growth, health and mental health. Some parents said they want opportunities to learn about things that will make them a “better parent”. Respondents want to learn more parenting skills, learn about child development, gain ideas to motivate them to do activities at home, and have professionals accessible to them to help them decipher between typical development and cause for concern. One parent said she wants centres to help with “bonding with my daughter and learning about the changes that will occur during her different stages of life. Educating myself on how to help her develop at different stages.”

Respondents expect centres to be welcoming, family-friendly, inclusive, non-judgmental, and they value the fact that the services are free. Many respondents referred to their desire for centres to be their connection to their community; spaces to build and feel connected to their community, to “feel part of something”. As one respondent said “a place to meet other moms and develop a sense of community with them. It takes a village to raise a child”.

Respondents noted that centres are safe places for children to play, which was very important to them. The desire for their children to have structure was a strong theme within responses, and parents/caregivers are looking for guidance and opportunities to provide their children with structure through group activities. Some respondents noted that having speech therapy, dental services, special needs services would be ideal; “all in one place instead of having to go to difference places for different services”.

Parents/caregivers would like hours of operation to better suit families with working parents, including evening and weekend hours. Some expressed that their local centres are not open during the summer and they would like the continuity of programming year round. They would like to see more programs and supports for children with special needs within the centres and increased access to child development professionals. Some would like more availability and a broader range of services for the whole family, including programs where their older/younger children are welcome to participate as well.

One parent summarized:

“An engaging alternate space for a child and parent to learn and grow . A spot where you don’t need to spend money to participate in play-based activities or learning programs. A safe place for parents to ask questions and/or connect with other parents.”
Appendix K

Results from Staff Facilitated Session

The groups were asked to create an imaginary family, keeping in mind changing demographics. Using the materials, they were to create an ideal safety net of services and supports based on engaging parents and caregivers, supporting early learning and development, and making connections for families. Following this exercise, groups presented and commented on their thoughts and ideas, stimulating very valuable conversations.

Group 1
Clothespin is the family, consisting of a grandparent who has custody of 2 children

Literally connected by flexible connections; all the families will connect

Community services and supports come together to support all families

Strong structure but flexible in nature

Inclusive play environment

Strengthening healthy development

4 pillars of HDLH are the base

Pipe cleaners represent different families, red yarn represents services supporting them all

Group 2
Family consists of a single mom, an infant and two young children

Welcoming and approachable staff

Positive relationship building

Fun, exciting place for children and their families to be

Broad range of activities

Trusting relationships

Knowledgeable, welcoming and qualified staff - Infant based programming
**Group 3**
Family: grandparents with children
- Dreamcatcher design to catch
- Non-judgmental
- Inclusive space
- Connected to community partners (income, employment services, etc.)
- Strings represent connection to families and community partners

**Group 4**
Family: father with adopted 3 year old, living with grandmother
- Services (e.g. hours) are extended for parent accessibility
- Outside services are connected (felt) to support families
- Core services
  - RECEs
  - Dad group
- No gaps, all inclusive
  - “Revolving door,” always welcomed
Group 5
Family- mom, dad, 2 children, one with autism
Clothespins represent services that offer assistance
Pipe cleaners represent diverse and talented staff
Connects with diverse group of people in varying demographics
Base made of the 4 pillars → HDLH
Flexible hours of delivery

Outreach to community to provide referrals

Diverse, talented, engaging, unique staff particularly skilled in engaging with families regardless of demographics

Evidence based programming
Common experience that connects across locations
Staff are what holds up the program
Mix of different skill sets, qualified and dedicated professionals

Group 6
Family- grandparents, 3 year old, infant
Interconnect everything
Services PH & SSN
Services are interdependent
Clothespins represent pillars of HDLH
Group 7

Family- two moms, 2 year old girl
Base is 4 pillars of HDLH
Fits with medicine wheel
Stronger foundation
Welcoming environment
Child care
Core services

Support for life instances

Newcomer and cultural support

Group 8

Family: grandmother, same sex partner, 1 year old, adopted 4 year old
Educator and parent and community
Community partners
Working in conjunction to support family
1. What did the Safety net exercise suggest about our common OEYCFC purpose and shared identity?

**Group 1**
- Common understanding of end goals
- Agreed upon the Family First and tiered approach
- More alike than we may have thought with regards to goals
- We all agreed with the importance of connectedness within families/services/staff as a commune

**Group 2**
- Everyone mentioned family at the center
- Everyone mentioned how all core services and programs are interconnected and important
- Staff being knowledgeable yet approachable and genuine and friendly and not judgmental
- All get variety of participants i.e. Grandparent custody/adopted/single parent/children with disabilities
- Rely on Public Health and outside services (referrals)

**Group 3**
- So many pieces are required to make us successful, it is important to network as a team
- We are already aspiring for a common goal with common partners
- Consistent messaging will better inform families

**Group 4**
- Open-door concept
- All on the same page regarding common services
- Acceptable
- Shared passion to work with children and families
- Holistic approach
- Diversity of participants and staff
- Referral system- connection to community partners
- Foundation pieces from HDLH
- “One-stop-shop”
- Inclusion
- Flexible hours

**Group 5**
- There to support families (may vary from site to site, but main purpose to support)
- Caring and welcoming environment- non judgmental
- Programming depends on knowledgeable, competent and friendly staff (lifelong learners)
- Relationship building (active listeners, building trust, building empathy)
- Through relationship building can direct them to support services required
Group 6
- We are all on the same page, recognize needs and community partner, importance of our programs
- Staff are well informed - purposes, needs, support of families and program
- Practice elements of HDLH
- Strive to promote quality of programs

Group 7
- Provide services for families regardless of dynamics
- Follow the four foundations - belonging, engagement, well-being, and expression
- Offering support to families regardless of socioeconomic background
- Having knowledgeable staff with varying backgrounds, cultural diversity, knowing what's happening in the community

Group 8
- We all have the core services and beliefs to support diverse families in our area
- Need for ongoing PD and ED about various community partners
- Working together we better see the bigger picture... uniqueness throughout all of our programs

2. How can we each support the delivery of mandatory core services (e.g. engaging parents/caregivers, supporting early learning and development and making connections for families)?

Group 1
- Providing staff with training to be able to guide and help the family's needs
- Relationship building
- Honoring and respecting family diversity and their complex needs and interests (parents and children)
- Recognizing specialized skill set of staff
- Better connections between Public Health and us

Group 2
- Professional development weekly/monthly
- Location - visible
- Informative and consistent website
- Accessible to all
- Catchy name, Family and Child Centers
- Supporting families with ESL
- Based on needs in the community
- Family feedback
Group 3
- Simple - not too many steps; easy for families to access
- Accessible - not just one place; can be found in many environments/buildings is important
- Staff: inclusive and welcoming; continuum of service
- Encourages relationships with each other
- Collaborative approach (i.e. no we are not open in the summer but XYZ is)

Group 4
- First point of contact for families
- Educated staff in a variety of disciplines
- Support families and children
- Welcoming/engaging centers → environment welcoming too
- Give parents a voice - allow them opportunities to express their needs/concerns
- Mentors → ex. Emergent literacy consultant model for staff and parents/caregivers, best practices for literacy and numeracy
- Open door for partners, shared focus of what is best for families
- Support staff with training

Group 5
- Offering programs that reflect interests of families/children - encouraging to attend to participate
- Encouraging the use of tools (parent survey) to help us provide services they require and we may offer
- Creating an action plan based on requests; expression, sense of belonging, feel like they have a voice
- Putting out invitations and provocations for learning to engage families/children and support learning and development

Group 6
- Strengths of staff and shared experience
- Recognize the needs of our families within our community and strive to support those needs
- Recognize core principles
- Allowing time to welcome parents in the morning to discuss how their child/children are doing also setting aside a few moments at pickup to share positive interactions with their child may have had during the day with other children or the educator. Need to float staff to be able to have true time needed for this. When you are alone in a classroom, it is hard to do.
- Teachers asking questions to engage families to feel welcome in our program
- Do parent/teacher interviews in the evening to be able to spend time with each family
Group 7
- Offering workshops through Public Health Department on topics involving parenting skills
- Warm hand off for services needed
- Building relationship with families
- Fostering positive relationships with community partners
- Providing support and training for all staff
- Assessing and being responsive to community needs
- Forward thinking

Group 8
- Offer more personalized support-liaison
- More flexibility regarding accessibility/creating relationships
- Opportunity to debrief/time for reflection and documentation

3. Are there any gaps, or a need to enhance, core services?

Group 1
- Geographically placed centers- are we supporting even the most rural places or new housing growth
- Hours/flexibility
- Transportation challenges
- Staffing (inadequate numbers)
- More resources for aboriginal/indigenous and Francophone families- lack of integration
- One website for all services- user friendly
- Marketing/community connections (social media)

Group 2
- Transportation bus route
- Hours of operation
- Location not accessible
- Outside supports should be offered at all locations
- Not all staff is knowledgeable
- Community not always aware they exist or know where they are
- Drop-in parents stay or not stay (licensed or not)
- Healthy snacks provided at all centers not just some of them
- Centralized registration

Group 3
- How will making out centers more common better serve our families?
- Streamline a newsletter format
- Gap- locations and environment differ, so it is challenging to offer some programs
- Hours (flexible)
- Funding to be more consistent in equipment, program, training, staff wages
- Be open to explore opportunities
Group 4
- Main database in which all registrations for ALL OEYCFC’s are kept so that families don’t need to register everywhere they go
- Better understanding of workshops/resources/hours offered at different programs
- Nutritious snacks available
- Better website- user friendly
- Social media
- Consistent staff training in evidence based programs
- Consistent key messages for parents
- Acknowledge staff needs
- Connect with families when they have new babies
- Better promotion/ public relations/ media
- More funds for additional staff at sites- equity of funds

Group 5
- Possible waitlist
- Request of services that require extra staff (childcare)
- A lot of gaps fall on space, physical limitation, transportation
- Bigger/better signage
- Buildings
- Public broadcasting and information sessions need more awareness

Group 6
- All core services are available, but only on a rotating basis between locations due to staffing and funding
- Referrals are made to ensure families can access programs, but not always at their neighborhood site

Group 7
- Warm hand off
- More flexible hours, more consistency in hours
- Educating staff on community resources
- Centralized registration in Niagara, electronic portal
- Times in how to support families
- Wait list

Group 8
- Consistency- public awareness
- Easy accessibility
- More one on one individual guidance
- Bringing more community resources into our centers (or allowing staff to bring families and introduce them to other community supports)
- Creating stronger relationships with families
- Recruiting families → not waiting for them to come to use
- *PARENT CO-ORDINATOR
- *MENTAL HEALTH/DEBRIEFING
4. How can we build capacity to deliver high quality early years programs and services that align with the pedagogical approaches described in How Does Learning Happen?

Group 1
- Train staff to do things like Triple P etc. so we can do it
- Joint meetings with all staff to discuss what works/what doesn’t- peer reflection to keep consistency throughout
- Staff training specific to OEYCFC, not childcare
- Extra time for program reflection and planning, documentation, revamping physical space- funding
- Consistent information/message sharing for parents
- One centralized database for family info

Group 2
- All staff have consistency in training to keep professional development across the OEYCFC centers
- Connecting with families with all their needs
- Being reflective
- Being adaptable
- Professional learners, learning, growing, having programming build in daily, (some structure)
- All doing/learning something together

Group 3
- Staffing is KEY, comes from within
- Define best practices that should be used (accurate info), evidence based
- Pedagogical documentation as a way to make learning visible (value or open forms of discussion)
- Reflective practice (time and PD)
- Funding- camera
- Knowledge of services- fall on whose shoulder? Management to be on committees to filter information out

Group 4
- Professional development continuously- more HUB trainings
- Pedagogical documentation- educators and parents sharing children’s strengths and interests
- Consistent image of child and family
- Welcoming and engaged environment
- Educator, family, environment all collectively working together
- Key is “building relationships”
- Communicating to parents about what HDLH is
- Cultural sensitivity training and resources
Group 5
- Staff training and reflective practice model
- Staff recognition to keep staff retention
- Being noticed and confidence building
- Utilizing the expertise of families (ownership of the center ex. Parent who plays guitar)
- Parent driven type of programs (find out needs, cultural, practical supports)
- Community involvement (library and services provided)
- Creating home environments that encourage expression

Group 6
- To continue professional development to further staff growth and understanding of pedagogical approaches and “How Does Learning Happen”
- Continue to support each other as we grow to become stronger in our programs
- Mentoring and visits other programs to see how each program differs and similar in the pedagogical approaches

Group 7
- Each foundation is evident in each center
- Increase funding
- Updated data collection, software, consistent at all OYEYC
- Parent engagement/feedback
- Continued flexibility in parent education
- Openness to collaborate

Group 8
- Continuity of care
- PAY EQUITY
- BENEFITS
- Reflection: allowing for individual developmental pace/ to support scaffolding of learning

Many staff members realized through dialogue that despite their separate existing systems and organizations, there are very common goals and aspirations for centres. As the staff members worked together, they were able to identify the bigger picture, see through the uniqueness of each of their programs, share a passion of working with children and families, and have significant impact on their communities through the services offered. All members agreed on the importance of the connectedness that exists within centres, specifically between families, services, and staff. Many commented that many pieces are required to provide valued service and support to families, so it is critical for front-line employees to have a strong sense of teamwork and collaboration, so that services are uniform and high quality across the region. It was agreed upon that it is critical for all staff to be knowledgeable in their field yet approachable and friendly to best serve their communities. It is critical that all centers have consistent messaging to parents and caregivers in order to keep families better informed. Although execution of services may vary from site to site, the main purpose is to support and finds its foundation in the four pillars of How Does Learning Happen; belonging, engagement, well-being, and expression.
Appendix L

Niagara Parent Knowledge Study Summary

FINDINGS

From the analysis of the survey responses, the research team was able to identify some key messages that appear to be significant for parents to understand at the varied developmental levels of childhood. A brief summary of these key messages is indicated below.

What are the key messages that need to be communicated to families over the ECD period?

0-6 months:

- Picking up a child every time they cry will not spoil them.
- It is possible to recognize poor mental health during infancy.
- Infants cry most often when they are 6 to 8 weeks.
- A child’s first dental visit should be soon after their first tooth or by age of 1 year.

7-12 months:

- An infant does not know how to influence (manipulate) parents to get what they want.
- For the first few months your child picks up on the rhythms of language as they hear you speak, so you need not worry about the content.
- At this time you should be introducing your child to solid foods. It’s important to cut them up into small bite size pieces, and watching your child while they eat it.
- You should never put a soother, bottle nipple, or child’s utensils in your own mouth for any reason.
- It is possible to recognize poor mental health during infancy.
- A child’s first dental visit should be soon after their first tooth, or by the age of one year.

13-18 months:

- Children can learn a lot from living in a bilingual home. However, it is best to talk, read and sing in one language at a time.
- Your child typically needs between 12 to 14 hours of sleep.
- Fruit juice is not a good way for children to get their vitamins.
- Young children require a balanced diet with lots of opportunities to sample from a variety of foods. Each meal should at least include a food from at least three food groups.
- A child’s first dental visit should be soon after their first tooth or by age of 1 year.
- The 18 month well-baby visit is a longer, more in-depth and important visit with your child’s doctor or health care provider.
- An appropriate age to expect my child to play with other children is generally around 18 months.
- When your child cries comfort them, your child needs their feelings respected. This is how your child is communicating with you.
- Hitting and biting is common behavior because they often lack the language skills to express their emotions.
• Playtime is an important part of how to talk, play games, socialize and make friends.

19-36 months
• From 2 to 3 years, most children will use short sentences, listen to stories and answer simple questions, and have conversations with family members.
• Children and babies learn best through play. Excessive screen leaves less time for active creative play.
• While there is no set age to move a child into a toddler bed, it is recommended to wait until they are closer to 3 years of age.
• If the first try at potty/toilet training doesn’t work, take a break, it might be because your child isn’t ready. If your child is not ready, don’t be disappointed or upset.
• It could take several months or years for your child to stay dry during naps or all night. Your child can continue to wear a diaper at night, but encourage them to use the potty if they have to in the night.
• Young children do not need to be involved in organized sports (like playing on hockey, soccer or baseball team) from a very young age to develop their muscles and coordination.
• Many 2 year olds aren’t developmentally ready to share and are just learning about possessions, so their favourite words are mine and no. We cannot expect them to share all of the time or even most of the time with other children because sharing is a learned activity and mastering it takes some time.
• Temper tantrums are a common part of development, and are a child’s way of showing anger and frustration. During a tantrum parents should not try to argue or “talk sense” to the child. Keep the child from getting hurt, harming others or breaking things.
• At this age, a child is starting to test limits as they explore their independence. Parents need to speak to their children about where they are going, what to expect when they get there, and the expectations of the child’s behavior.

37-48 months
• When a child does not want to eat what has been offered at mealtime, parents need to respect their child’s decision not to eat. Even if a child decides not to eat, a skipped meal every once in a while is not a concern as long as your child is growing normally.
• Young children do not need to be involved in organized sports (like playing on hockey, soccer or baseball team) from a very young age to develop their muscles and coordination.
• Praise your child when you see them playing well with their friends.
• Three year olds understand what feelings are, even if they’re not able to talk about them like adults do. They are aware of how their actions can affect others (e.g., teasing) but children sometimes need help getting out these feelings and emotions.
• Parents need to help children use their words when they are upset. Encouraging appropriate behaviour increases the chance of that behaviour happening again.

49-72 months

OEYCFCC Initial Plan for Niagara Region
• Educational TV shows and videos do not make children smarter.
• A 5 year old should be able to use all speech sounds correctly in words with the exception of ‘th’ and ‘r’.
• For children to be at their best, they require routine. A consistent bedtime routine helps children settle down and drift off to sleep. Children typically sleep between 10-12 hours each night.
• Most often, an eating problem is related to behaviours, the power struggle between parents and children. The best way to help your child learn to like vegetables is to offer different vegetables at meals and snacks without pressure. Pressuring, rewarding or bribing children to eat vegetables will make them like vegetables less.
• Children do not need to participate in organized sports, like playing on a hockey, soccer, or baseball team to get the full benefits of physical activity.
• Praise your child when you see them playing well with their friends.
• Parents need to praise children to encourage them to continue to behave well. When children are doing something a parent likes, it is important to give them encouragement and attention. This will increase the likelihood of the desirable behaviour happening again.
• A 4 year old is able to comfort someone who is upset. One of the most important tasks of parenthood is helping children learn to deal with emotions.
• When children are fighting, parents should wait to see if they can work it out on their own. If the situation is getting worse, then the parent should step in and talk to them about sharing and fairness.
• By 4 years of age, a child can understand three part directions and longer sentences (e.g., “Put your toys away, please go wash your hands and then sit at the table for lunch”).

What are the best ways to communicate these messages with families?

Based on the literature review, there are several mediums that are currently being used to communicate with parents, including Twitter, websites, health care professionals, and print resources. There are several enabling and disabling factors that are associated with each other these communication mediums. (For more details please see the document Innovation Fund Project Literature Review)

Diagram A depicts the Just in Time Communication Model, showing a variety of sources parents identified through the questionnaire as to where they seek information on child growth and development at different stage.
Parents seek information on child growth and development from a variety of sources at different stages of early development.

<table>
<thead>
<tr>
<th>0-6 months</th>
<th>7-12 months</th>
<th>13-18 months</th>
<th>19-36 months</th>
<th>37-48 months</th>
<th>49-72 months</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niagara Region Public Health Parent Talkline</td>
<td>Niagara Region Public Health Parent Talkline</td>
<td>Niagara Region Public Health Parent Talkline</td>
<td>Niagara Region Public Health programs</td>
<td>Licensed child care providers</td>
<td>Licensed child care providers</td>
</tr>
<tr>
<td>Mom and baby fitness programs</td>
<td>Mom and baby fitness programs</td>
<td>Mom and baby fitness programs</td>
<td>Licensed child care providers</td>
<td>Activity programs</td>
<td>Activity programs</td>
</tr>
<tr>
<td>Parent groups</td>
<td>Parent groups</td>
<td>Parent groups</td>
<td>Activity programs</td>
<td>Recreation programs</td>
<td>Recreation programs</td>
</tr>
<tr>
<td>Niagara Region Public Health programs</td>
<td>Niagara Region Public Health programs</td>
<td>Niagara Region Public Health programs</td>
<td>Recreation programs (YMCA, Boys &amp; Girls Club)</td>
<td>Niagara Region Public Health programs</td>
<td>Specialized services (Infant &amp; child development, speech services, etc.)</td>
</tr>
<tr>
<td>Licensed child care providers</td>
<td>Specialized services (Infant &amp; child development, speech services, etc.)</td>
<td></td>
<td>Specialized services (Infant &amp; child development, speech services, etc.)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Parents most frequently seek information from the internet, health and well-being providers, family and friends, and printed materials during all stages of early development.