# Services Area Agreement Guidance

The Department of Children, Youth and Families (DCYF) requires ESIT Contractors to develop and submit Service Area Agreements, as necessary. The purpose of these agreements are to establish clear service area boundaries for recruitment and enrollment of eligible infants and toddlers and their families to ensure that no child and family goes unserved or to delineate service area coverage when there is more than one provider in an identified school district catchment area. Agreements must support policies and procedures for working collaboratively, reducing duplication of services, leveraging funding through efficient use of state, federal and local public and private resources and ensuring responsiveness to family need.

**1. The agreement must include:**

a. Specific areas for recruitment and enrollment of eligible infants and toddlers and their families for each party.
b. Process for referral of families between parties.
c. Plans for collaborating with service area providers to ensure efficient use of state and community resources for:
   (1) Ongoing communication.
   (2) Child Find, Outreach, and Referral Activities Developing community assessments.
   (3) Evaluation and Assessment
   (4) Family Resources Coordination
   (5) Transition responsibilities with school districts and other early childhood partners (e.g. Head Start, ECEAP, etc.),
   (6) Dispute resolution procedures for grievances and formal complaints among local agencies.
   (7) Collaboration with community providers, including CICC/ELC Councils.
   (8) Planning joint staff and parent training opportunities.

**2. Guidance for the development of the plan:**

a. Meet with your new provider partners and learn about the services they provide and their program's philosophy. Use this opportunity to begin building a relationship and collaborating on creating a purpose and scope statement. This statement describes how providers will work collaboratively with common goals of serving eligible infants and toddlers and their families within a shared service area. This could include a description of related services each program provides (such as FRC/ST/OT/PT/Special Instruction).

   (1) Describe how providers will collaborate on evaluating and assessing the needs and strengths of eligible infants and toddlers and their families within the service area(s) such as coordinating community assessment efforts.
   (2) Define enrollment and service area boundaries. This could include how many families a provider will enroll within defined geographical areas such as:
      (a) County lines: When both providers serve families in one county, they may divide the county geographically or by school districts.
      (b) School District Catchment Areas: Defining boundaries by school district catchment areas may be appropriate when providers are physically located in different catchment areas.
      (c) City Limits: When providers share a geographical area, but one is physically located within a city and the other physically located outside the city limits.
   (3) Discuss child find, outreach and referral. Some providers may coordinate services in one geographical area through a joint outreach and recruitment process to serve as many eligible infants and toddlers and their families possible between providers and to reduce duplication efforts. These efforts can include:
      (a) Shared outreach and recruitment materials.
      (b) One common application for multiple programs.

(c) Joint coordination with community partners.
(d) Collaboration in response to possible gaps in services.

(4) Develop a process for referring families between providers. Describe how providers will communicate and prioritize enrollment for families moving between service areas. Considerations include:
(e) Family choice.
(f) Transportation services.
(g) Days and hours of operation.
(h) Serving special populations (i.e. children who qualify under the McKinney/Vento Homeless Assistance Act, children who are receiving Child Protective Services or Family Assessment Response (FAR) services, etc.).
(i) Services a family is already receiving from another provider.

(5) Actively seek opportunities to work together with other community providers to reduce the impact on the providers' time and to best use provider staff resources. This could include:
(j) Participate in or conduct a joint CICC/ELC that provides information and guidance for all providers to collaborate on strengthening alignment efforts.

(6) Actively seek opportunities to conduct joint trainings to support staffing development, including:
(k) Planning events together.
(l) Inviting providers to in-house trainings.
(m) Sharing facility or costs.
(n) Sharing costs of hiring trainers.

(7) Plan for ongoing communication and problem resolution that promotes good communication, giving providers an opportunity to assess how collaboration is working. Discussion topics could include:
(o) Sharing professional development opportunities.
(p) Sharing information about recruitment practices and current enrollment data.
(q) Sharing community assessment data.
(r) Addressing concerns in a timely manner as issues arise.
(s) Making mutually agreed upon changes.