

RHODE ISLAND EARLY LEARNING COUNCIL

September 20, 2017

9:00 a.m. - 12:00 p.m.

Save the Bay

EARLY LEARNING RI

Meeting Agenda

Welcome, Opening Remarks, and Meeting Overview
Highlights: Learning from RTT-ELC
Policy & Program Updates <ul style="list-style-type: none">• DCYF: Child Care Licensing• DOH: Overdose Prevention & Treatment Task Force and Safe Sleep
RI Children's Cabinet Cross-Departmental Plan to Advance the Governor's 3rd Grade Reading Goal
RI Reads: The Campaign for 3rd Grade Reading
Policy & Program Updates <ul style="list-style-type: none">• DCYF: Getting to Kindergarten Initiative (Kellogg grant)• EOHHS/RIDE: Young Children with Developmental Delays and Disabilities
Public Comment
Next Steps

Highlights from June Meeting

Lessons Learned from Race to the Top – Early Learning Challenge

Note: items listed were suggested by one or more people at the June 2017 meeting. Consensus and prioritization was not established.

RTT-ELC Governance/Communication

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Successes

- Utilized the Early Learning Council in RTTT-ELC efforts.
- Improved communication through the development of a governance structure comprised of a regular group of all key partners meeting to discuss topics such as alignment issues, etc.

Challenges

- Ending of regular meetings and key alignment strategies for governance issues.
- Not funding the Sustainability Plan and not discussing it further.

Priority for Future

- Maintaining momentum through the return of an active governance structure that regularly promotes alignment and dialogue among agencies, thereby ensuring real participation by all agencies and stakeholders.

RTT-ELC: Improving Program Quality

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Successes

- Establishment of incentive payments that recognized and rewarded program quality and had an impact on higher quality learning environments.
- Alignment among the DCYF, BrightStars, CECE standards and the continued use of that strong alignment.
- Increased participation and ratings in BrightStars.
- Increased collaboration and coordination among agencies.
- Completion of the BrightStars evaluation study.

Challenges

- No establishment of tiered quality incentive payments for CCAP.
- Sustainability, particularly with respect to incentive payments for maintaining quality with increased costs.
- No focus on school age and a lack of coordination across that system.
- Minimal focus on family child care.
- Misalignment possibly caused by the new DCYF regulations.
- Over support (financially/technical assistance) for four and five star programs with not enough resources for lower rated programs to raise rating and quality.

RTT-ELC: Improving Program Quality

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Priorities for Future

- Establishing tiered quality incentive payments/reimbursements through calculating the true cost of quality for programs participating in CCAP.
- Creating incentives for public schools to enroll in BrightStars.
- Putting money behind people and programs by offering quality dollars for programs and program staff to improve their education.
- Evaluating making BrightStars ratings based on an average as opposed to being determined by the lowest score in any category.
- Continuing collaboration among agencies.
- Making additional money available to assist programs in improving and maintaining quality.

RTT-ELC: Strong Early Learning Workforce

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Successes

- Creation of supports for administrators, including professional development, technical assistance, the Center for Early Learning Professionals, the professional development approval system, and the RIC and CCRI programs, which all address the needs of students working in the field.
- Development of Workforce Knowledge and Competencies (WKC), including embedding the EI/ECSE competencies within the WKC, and all of the other alignment work.

Challenges

- Increasing accessibility for non-English speakers and offering college courses in Spanish.
- Addressing the critical challenge of generalized ECE staff with special concern about the qualifications and readiness of lead teachers.

RTT-ELC: Strong Early Learning Workforce

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Priorities for Future

- Ensuring financial accessibility for higher education.
- Continue the TEACH program for AA and BA candidates as well as for students pursuing 12 credit/ advanced course work and degrees.
- Aligning reimbursement rates with higher education requirements.
- Increasing compensation of the workforce
- Increasing collaboration among all state institutions of higher education, specifically articulation.
- Creating additional professional development for infants/toddlers.

RTT-ELC: Improving Outcomes for Children

Successes

- Increasing number and accessibility for RIELDS professional development offerings.
- Inclusion of Child Outreach data system in KIDSNET.
- Inclusion of infant/toddler standards in RIELDS.
- Development of the EI/ECSE joint child outcomes policy.

Challenges

- Utilizing screening results to improve access to services.

Priorities for Future

- Improving the utilization of RIELDS in EI programs.
- Increasing the focus on applying professional development to practice in the classroom to improve child outcomes.
- Engaging more pediatricians so they are promoting/advocating for early literacy to their young patients and their families (Reach Out and Read).
- Improving the percentages of screening, referrals and other supports for children.
- Increasing access to required RIELDS trainings.
- Improving understanding of formative assessment and using it effectively.

RTT-ELC: Measuring Outcomes & Progress

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Successes

- ❑ Developing successful ECEDS Program Search.
- ❑ Improved sharing of data across agencies.

Challenges

- ❑ Unavailability of data on child enrollment by age and program (CCAP, Head Start, State Pre-K, Early Intervention, home visiting, public school, etc.).
- ❑ Unclear ownership for ECEDS.
- ❑ Implementation of too many requirements for programs at too quick a pace.
- ❑ Delayed implementation of the KEP pilot and ECEDS.
- ❑ Unsuccessful implementation of the universal application.
- ❑ Unable to follow an individual child's experiences.

RTT-ELC: Measuring Outcomes & Progress

Priorities for Future

- ❑ Establishing a focus on Kindergarten entry, transition and assessment.
- ❑ Collecting data on child enrollment across sectors for measuring gaps in access.
- ❑ Developing full functionality and utilization of ECEDS across state agencies, including funding and maintenance.
- ❑ Finishing the implementation of the KEP.
- ❑ Measuring reading skills when children enter Kindergarten and assess the effectiveness of the programs in which they participated.

Policy & Program Updates

DCYF: Child Care Licensing

DOH: Safe Sleep

New DCYF Regulations

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- Child Care Centers & School Age Programs
- Went into effect September 18, 2017
- Revision process and public feedback
- APA & Guidance Document
- 3-day intensive review
- Key indicator monitoring
- Staggered implementation of additional background check requirements

Next Steps

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- Continue to collect public feedback
- Plan info sessions based on FAQs
- Implement weighted caseloads, differential monitoring
- Start formal revisions on Family Child Care Home regulations

Reducing Infant Sleep-Related Deaths In Rhode Island

Rhode ELC

9-20-17

Ailis Clyne MD, MPH
RI Department of Health

SUID Definition



Sudden Unexpected Infant Death:

- Death of an infant less than 1 year of age
- Occurs suddenly and unexpectedly
- Cause of death is not immediately obvious
before investigation

Sleep-Related Death

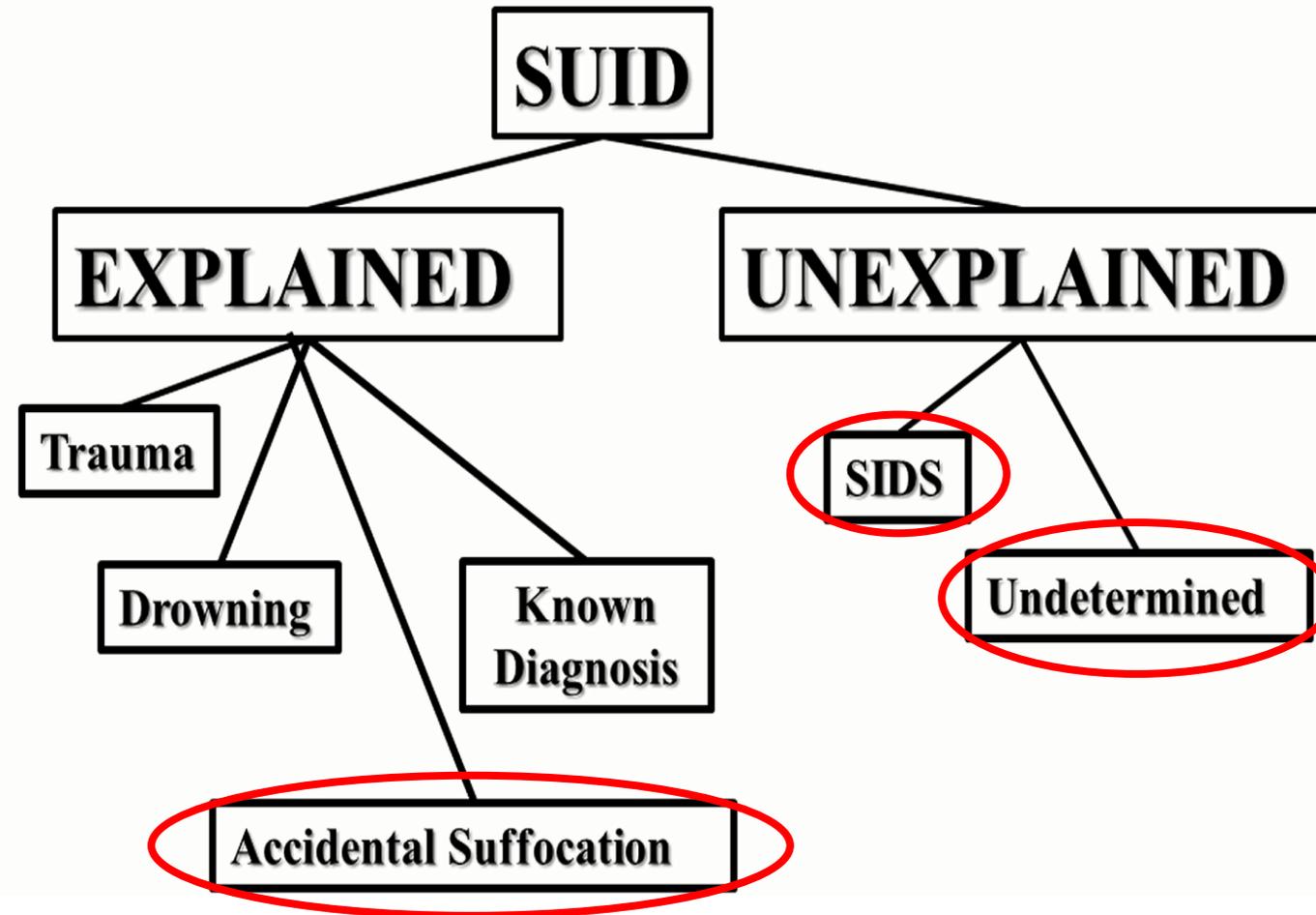


SUID that occurs

- During sleep
- Or in the sleep environment



SUID Definition



* Sleep Related

RI Infant Sleep-Related Deaths 2012-2016*



- 36 Sleep-Related infant deaths in RI during these five years
- The majority of deaths occurred in white, non-Hispanic infants
- About 2/3 (23) occurred in the city of Providence
- 24 infants were co-sleeping (sharing a sleep surface with another person) at the time of the injury. Most of these were on a bed and a few on other surfaces like a couch or recliner
- There were blankets in the sleep area of 18 of the deaths
- A suitable infant sleep item (crib, bassinette, play yard) was present in 2/3 (23) of the cases

Safe Sleep Recommendations American Academy of Pediatrics 2016



- ✓ Back to sleep for every sleep → reduces SIDS risk
- ✓ Use a firm sleep surface → reduces suffocation risk
- ✓ Breastfeeding is recommended → reduces SIDS risk
- ✓ Room sharing with the infant on a separate sleep surface is recommended → reduces suffocation risk
- ✓ Keep soft objects and loose bedding away from the infant's sleep area → reduces suffocation risk
- ✓ Consider offering a pacifier at naptime and bedtime → reduces SIDS risk

Safe Sleep Recommendations American Academy of Pediatrics 2016



- ✓ Avoid smoke exposure during pregnancy and after birth
- ✓ Avoid alcohol and illicit drug use during pregnancy and after birth
- ✓ Avoid overheating
- ✓ Pregnant women should obtain regular prenatal care
- ✓ Infants should be immunized in accordance with the AAP and CDC recommendations

Safe Sleep Recommendations American Academy of Pediatrics 2016



- ✓ Do not use cardiorespiratory monitors as a strategy to reduce the risk of SIDS
- ✓ Avoid use of commercial devices that are inconsistent with safe sleep recommendations
- ✓ Supervised, awake tummy time is recommended to facilitate development
- ✓ There is not evidence to recommend swaddling as a strategy to reduce the risk of SIDS



What Does a Safe Sleep Environment Look Like?



Firm mattress
Tight crib sheet

No bumpers
No blankets,
pillows, toys

Smoke-free air



Nothing
covering
baby's head

Back
position

One piece
sleeper
No blanket

Baby alone
Not sleeping
in adult bed

Safe Sleep Work Group



- Interagency staff: RIDOH, DCYF
- Meeting regularly since April 2017
- Communications planning for multiple audiences that is culturally and linguistic appropriate
- Draft work plan with objectives and indicators

Safe Sleep Work Plan Objectives



- Safe sleep training curricula, communications plan, and educational materials
- Safe sleep training for professionals: healthcare, child welfare, childcare, first responders, community programs
- Safe sleep training for DCYF resource families
- Assist RI birth hospitals in achieving National Safe Sleep Hospital Certification Program
- Establish a mechanism for emergency crib / bassinette distribution

Safe Sleep Work Plan

Objectives



- Partner with community leaders and community organizations in promoting safe sleep recommendations
- Engage RI elected officials in supporting safe sleep recommendations and policies
- Utilize the structure of the Children's Cabinet to ensure member state agencies are engaged in supporting safe sleep recommendations
- Refine data collection processes for tracking RI infant SUID and sleep-related deaths

RI Children's Cabinet

Cross-Departmental Plan to Advance the Governor's 3rd Grade Reading Goal

Children's Cabinet Third Grade Reading Plan

Governor Raimondo's Third Grade Reading Action Plan focuses on four specific and complementary strategies aimed at doubling RI's third grade reading level by 2025:

- **School Readiness:** Ensure all children are ready to learn in school
- **School Success:** Provide all children with high-quality literacy instruction in and out of school
- **Safety Net Services:** Effectively serve young children at high-risk with state-wide screening, referral and response system
- **Community Engagement:** Engage family and community members with a campaign to prepare their children for success in school

Children's Cabinet focus for Fiscal Year 2018

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- Establishing regular communication and collaboration between the main owners of the plan:
 - ▣ Department of Children, Youth & Families (DCYF)
 - ▣ Department of Health Services (DHS)
 - ▣ Rhode Island Department of Education (RIDE)
 - ▣ Rhode Island Department of Health (RIDOH)
- Identifying and successfully carrying out actions toward the four main strategies of the action plan
- Assess progress and identify gaps for funding opportunities

Creating Academic Partnerships

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- In order to evaluate the Children's Cabinet work, we are creating academic partnerships to identify evidence-based and high impact strategies:
 - ▣ Investing in Knowledge – Hassenfeld Birth Cohort Study (Brown University)
 - ▣ Investing in Policy – Rhode Island Innovation Policy Lab (Brown University)
 - ▣ Investing in Practice – Population Studies and Training Center (Brown University)
 - ▣ Investing in Data – RI Kids Count and DataSpark (University of Rhode Island)

Launching a statewide campaign

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- Coordinating with the RI Reads campaign, we aim to reach all families and adults who work with young children with tips on the importance of talking, reading and listening with children. To date we have:
 - ▣ Distributed flyers out to parents during a Back-to-school event
 - ▣ Aired RI Reads PSA on WPRI during the month of September
 - ▣ Shared tips on social media (#rireads)



RI Reads: Campaign for 3rd Grade Reading

United Way of Rhode Island

Rhode Island KIDS COUNT

National Campaign: 3rd Grade Reading Success Matters

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THIRD-GRADE READING
SUCCESS MATTERS



<https://www.youtube.com/watch?v=9FbSxbUF7M4>

3rd Grade Reading

Third-Grade Students Meeting Expectations in PARCC ELA/Literacy, by Student Subgroups, Rhode Island, 2015-2017

Subgroup	2015	2016	2017	Change Since 2015
Males	33%	34%	35%	+2%
Females	43%	45%	45%	+2%
English Language Learners	8%	13%	13%	+5%
Students With Disabilities	10%	10%	10%	--
Students Without Disabilities	42%	44%	44%	+2%
Low-Income Students	21%	25%	25%	+4%
Higher-Income Students	53%	56%	56%	+3%
Native American	17%	16%	15%	-2%
Hispanic	18%	24%	24%	+6%
Black	22%	26%	26%	+4%
White	48%	49%	49%	+1%
Asian	47%	49%	49%	+2%
All Students	37%	40%	40%	+3%

Source: Rhode Island Department of Education, *Partnership for Assessment of Readiness for College and Careers (PARCC)*, 2015-2017.

Rhode Island Reads: Campaign for 3rd Grade Reading

Campaign Goals

- Double the number of 3rd graders reading on grade level by 2025.
- Raise awareness about the importance of reading on grade level in 3rd grade as a key predictor of educational success and its importance for individual success and our state's economic future.
- Develop a statewide birth through 3rd grade policy and legislative agenda to advance key components of the Campaign, including **improving school readiness, reducing summer learning loss, reducing chronic absence, and ensuring high-quality literacy instruction in the early years.**
- Set targets and measure the state's progress in meeting these goals.

2017 Advocacy Agenda

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School Readiness

- Head Start
- State Pre-K
- Tiered quality rates for Child Care Assistance Program
- Evidence-Based Family Home Visiting

Summer Learning

- State support for summer learning
- 21st Century Community Learning Centers
- Tiered quality rates for Child Care Assistance Program

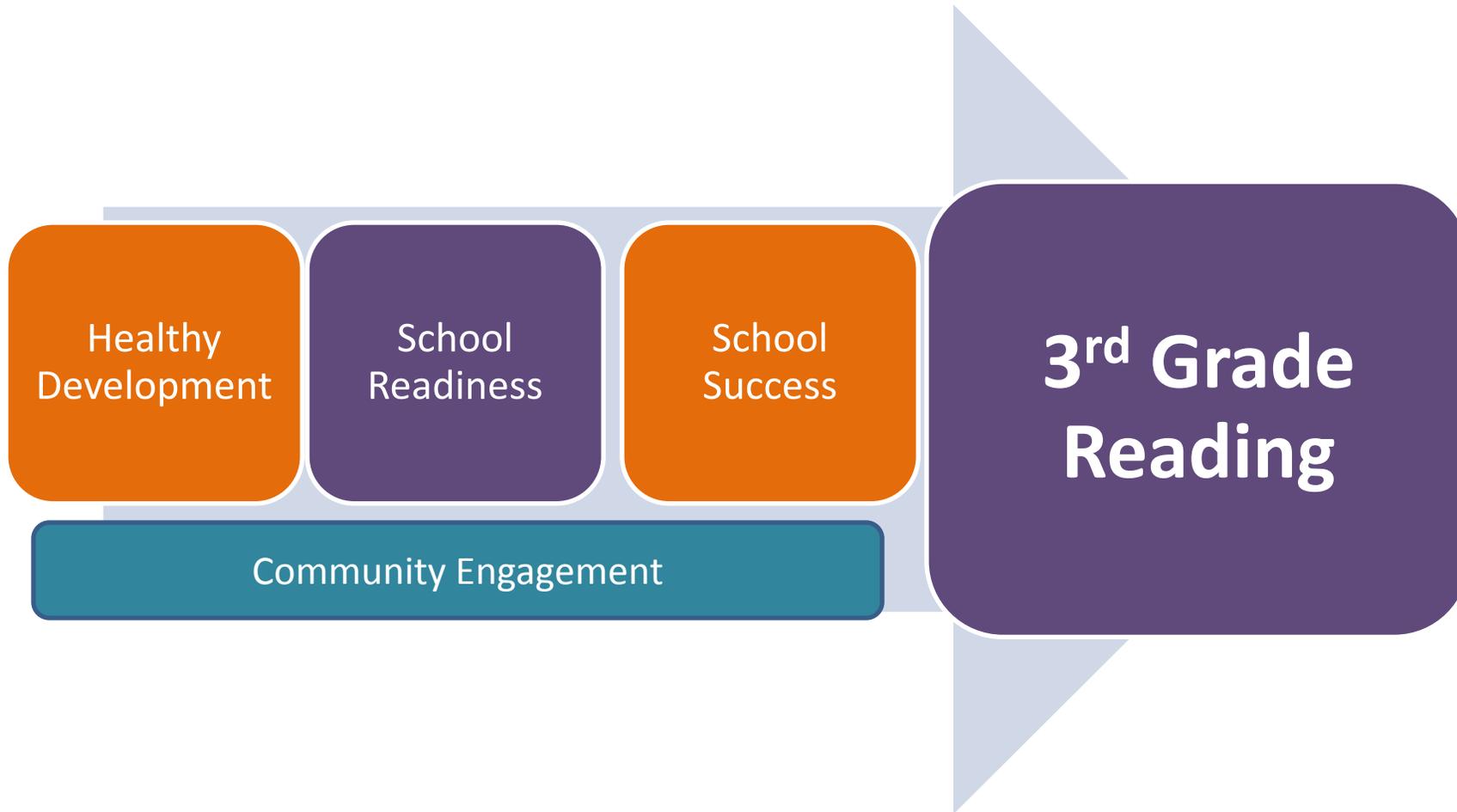
Chronic Absence

- Encourage adoption of evidence-based practices by schools

Learning to Read

- Kindergarten Entry Profile
- Sustain evidence-based programs for English Language Learners

Key Levers to Advance 3rd Grade Reading



Draft Data Dashboard: Healthy Development

- ❑ % of children with health insurance (U.S. Census)
- ❑ % of children < 3 who received routine developmental screening (RlteCare)
- ❑ % of children 3 – K entry who received routine developmental screening (Child Outreach/KIDSNET)
- ❑ % of maltreated children < 3 who are referred to Early Intervention or First Connections (DCYF)
- ❑ % of children entering K with a history of lead poisoning (DOH)
- ❑ % of eligible K-3 children participating in school breakfast, school supper, and summer meal programs (RIDE)
- ❑ % of eligible women and children receiving WIC (DOH)
- ❑ % of children on Medicaid who received a dental service in previous SFY (EOHHS)
- ❑ % of children < 6 living in poverty (U.S. Census)

Draft Data Dashboard: School Readiness

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- Number of families enrolled in evidence-based family home visiting programs (DOH)
- % of CCAP providers with high-quality ratings in BrightStars (4 or 5 stars) DHS
- % of children in CCAP who are enrolled in programs with high-quality BrightStars ratings (4 or 5 stars) DHS
- % of low-income four-year-olds enrolled in State Pre-K or Head Start
- % of children enrolled in Early Intervention and Early Childhood Special Education

Draft Data Dashboard: School Success

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- % of school districts implementing high-quality kindergarten transition practices and the Kindergarten Entry Profile
- % of certified ELL teachers in grades K-3
- % of K-3 students in ELL who are making progress
- Number of children in K-3 participating in public library summer reading programs
- Number of children in grades PK-3 participating in 21st Century Community Learning Center summer programs
- % of K-3 students who were chronically absent
- % or number of K-3 students who received out-of-school suspension

Rhode Island Reads: Campaign for 3rd Grade Reading

You can support the Campaign by:

- ❑ Signing on as a partner @ www.rireads.org
- ❑ Attending Partner meeting later this Fall
- ❑ Raising awareness about the importance of early language development and reading on grade level by 3rd grade. Tip Sheets @ www.rireads.org
- ❑ Supporting early learning and 3rd grade reading initiatives in your own community.
- ❑ Advocating for legislative and budget initiatives at the state and local level that advance key components of the Campaign.

Policy & Program Updates

DCYF: Getting to Kindergarten (Kellogg Grant)

EOHHS/RIDE: Children with Developmental Delays and Disabilities

Rhode Island-Getting to Kindergarten

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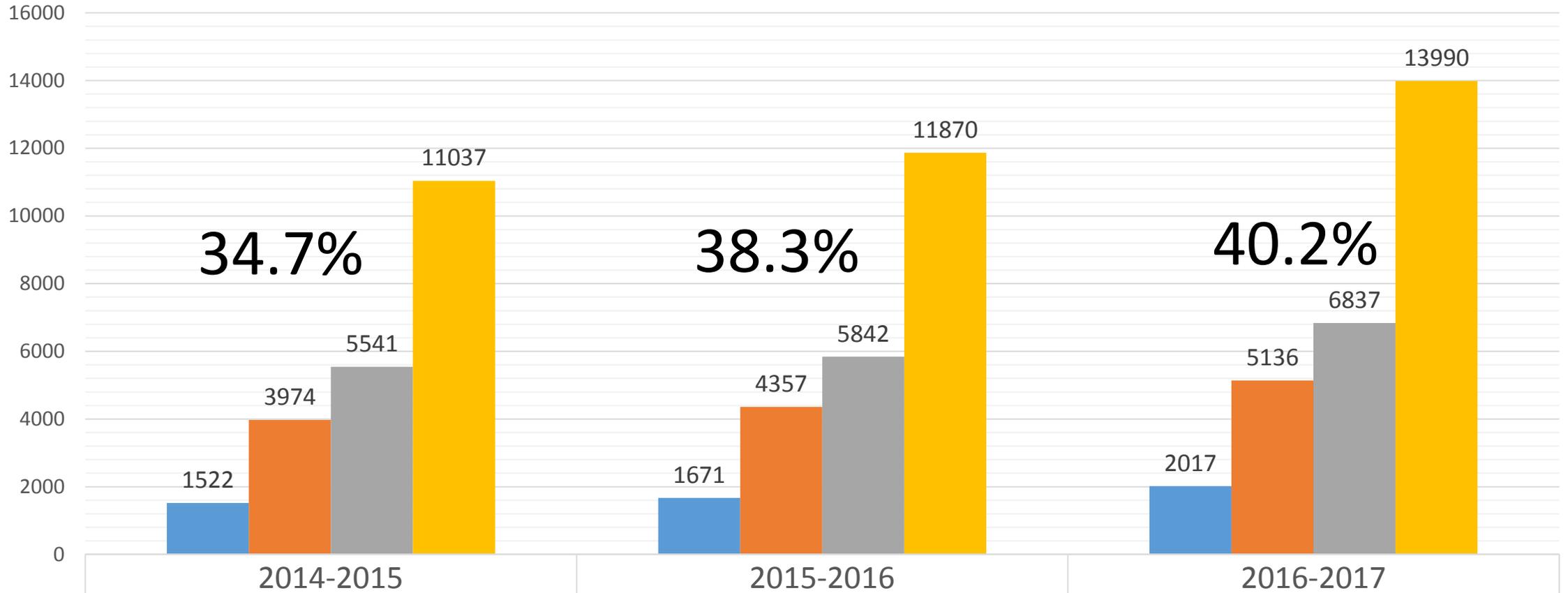
- Rhode Island GTK is a 3-year, \$415,000 grant awarded to RI DCYF from W.K. Kellogg Foundation to increase focus on the well-being of young children in the child welfare system.
- Goals Include:
 - Increase access to developmental screening and supportive services.
 - Increase access to High Quality Early Care for children in foster care.
 - Provide training to child welfare staff and early childhood providers who serve children and families.

Child Outreach Screening Update



Rhode Island Child Outreach Screening Rates

■ K-3 ■ K-2 ■ K-1 ■ Total 3-5



■ K-3	1522	1671	2017
■ K-2	3974	4357	5136
■ K-1	5541	5842	6837
■ Total 3-5	11037	11870	13990



Child Outreach Referrals to Special Education 16-17

Number of children referred to special education by CO	1,931
Percentage of children referred to special education by CO	13.8 %



Child Outreach Referral Outcomes



Determined by team **not to require evaluation** 16.57 %

Incomplete eligibility process- **parental absence** 11.86 %

Incomplete eligibility process- **parental refusal** 13.21 %

Moved prior to eligibility .67 %

Determined **eligible** for special education 31.02 %

Determined **ineligible** for special education 9.99 %

Eligibility **not yet determined** 16.68 %



Public Comment

2017 Council Calendar

All 2017 Early Learning Council Meeting are
at Save the Bay

- December 13, 2017, 9:00 a.m. to 12:00 p.m.