

Meeting Notes for the North Carolina Early Childhood Advisory Council

Friday, September 7, 2018

1:00 – 4:00 pm

NC Department of Transportation Board Room, Raleigh, NC

The following members were present:

Mandy Cohen, Karen McKnight, Anna Carter, Susan Perry-Manning, Susan Butler-Staub, Velva Jenkins, Kristin Walker, Cindy Watkins, Bernadette Rodgers, Banu Valladares, Terry David, Ray Spain, Eric Hart, John Pruette (for Pam Shue), Janet Singerman, Kelly Maxwell, Stephanie Fanjul, Meka Sales, Laura Gerald, Doré LaForett, Kathy Higgins, Jerry Croan, Rebecca Planchard (for Betsey Tilson)

The following members participated by phone:

Michelle Winstead, Lisa Chapman

Secretary Mandy Cohen, Chair, convened the meeting, read the Conflict of Interest reminder and asked the Council to review the May meeting notes. The May notes were approved. She then overviewed the agenda. Kristen Guillory overviewed Governor Cooper's Executive Order No. 49 which calls for the development of an action plan to improve early childhood outcomes.

Secretary Cohen then began a presentation to update the Council members on current initiatives of the NC Department of Health and Human Services that are important to the Early Childhood Action Plan. The top DHHS priorities are: transforming Medicaid, addressing the opioid crisis, and improving early childhood health, safety and education. In addressing the opioid crisis, the action plan launched June 2017 - DHHS gathered feedback, implemented measurable goals, and chose focus areas (e.g. oversupply of prescription opioids). Also focusing on data transparency – data on progress displayed on website. Work remains: opioid deaths continue to rise; pregnant mothers are struggling and this is affecting newborns. In Medicaid transformation, most children on Medicaid/CHIP will transition into managed care in November 2019. DHHS is working to align Medicaid transformation to early childhood goals and on integrating physical and mental health. Also focused on addressing social determinants of health/healthy opportunities (e.g. housing, food, transportation). Screening questions to be used to ask patients about housing,

employment, food insecurity, etc. and a resource platform under development will connect the health system to community partners (e.g. food banks, homeless shelters) towards the goal of better integrating health and social support systems.

Susan Perry-Manning continued the presentation by updating on NC's child welfare/social services transformation, which is required legislatively to improve quality and consistency of services because NC failed federal child welfare metrics. A Social Services Regional Supervision and Collaboration Working Group was formed and made preliminary recommendations for how counties think about regionalizing service delivery. In July, DHHS entered into an agreement with 98 out of 100 counties asking them to adhere to certain performance measures. This month, an independent assessor advised on reform plans. By November, DHHS must respond and provide its own recommendations. Independent assessor (Center for the Support of Families) report found: inconsistent service delivery across the state; children not always adequately protected from harm; most counties are significantly understaffed; and State must provide better oversight and support for the county. Recommendations to the State include: close cross-county salary inequity and understaffing, close the health care coverage gap, focus more on prevention services (e.g. prevent children from entering foster care upfront), and create a centralized hotline for abuse/neglect complaints.

Anna Carter continued the presentation by providing an update on NC's early learning programs. Challenges include: early childhood programs only serving between 5 and 44 percent of eligible children (e.g. Head Start only serves 28 percent of eligible children; NC Pre-K only 44 percent); over 50,000 children aged 0-12 are on the current child care subsidy waiting list; federal early learning funding has increased for FY2018-2019, but state dollars decreased and, therefore, funding is essentially the same; and early childhood teacher salaries are too low.

Geoff Coltrane then provided an update on the Governor's Commission on Access to a Sound Basic Education. This Commission was appointed as part of a partnership with the plaintiffs in the Leandro lawsuit working to provide joint recommendations to help settle the case by identifying what the State needs to do to meet its constitutional obligation to ensure access to a sound basic education for all children. Core tenets include: an effective teacher in every classroom; an effective principal in every school; and sufficient resources to meet every

student's needs. There are five work groups, one of which is focused on early childhood education and should align with work of the ECAC.

Susan Perry-Manning provided an update on the Birth through Third Grade (B-3) Interagency Council appointed by the General Assembly. Key goals are to align systems and to share data across birth through 3rd grade. This group recently provided feedback to the Early Childhood Action Plan.

Rebecca Planchard then provided an overview of the Early Childhood Action Plan. An initial working draft was shared in July 2018 and a more detailed draft for public review is due November 1, per the Governor's Executive Order. The ECAP framework includes: 1) guiding principles; 2) vision; 3) 2025 goals and metrics; 4) actions and commitments; and 5) tracking our progress. The 3 major goal areas are: healthy, safe and nurtured, and learning and ready to succeed. She overviewed some of the metrics under each goal, including decreasing statewide infant mortality, decreasing share of infants born at a low birth weight, increasing annual percentage of young children enrolled in Medicaid receiving well child visits, decreasing children statewide with food insecurity, decreasing the rate of children who are victims of maltreatment, decreasing time to permanency for children in foster care, increasing share of children with on-track developmental skills and increasing reading proficiency. She pointed out one measure – social and emotional well-being and resilience – that does not have a good data source yet to measure this outcome. The next step is a series of meetings of content work groups to finalize language for 2025 goals and prioritize metrics and strategies for each goal and content area.

The ECAC members then divided into three small groups to discuss the draft Action Plan in each goal area with these guiding questions: 1) what feedback do you have on the language on the goals in your section; and 2) what metrics should be prioritized under each goal?

Small groups reported back to the full committee:

“Healthy” group:

- Ensure focus on equity by race in addressing infant mortality

- Clarify the metric on preventive health services (number of well child visits)
- Include prevention metrics, such as participation in home visiting
- Food insecurity: look at food swamps (where there is a lot of fast-food available) in addition to food deserts
- Child abuse and neglect: look at metrics in an evidence-based home visit program

“Safe and nurtured” group:

- Work on disaggregating data in a way that can be managed, especially with regards to foster care metric
- Need to make sure families are receiving interventions that are helpful
- Talked about incorporating housing security
- Issue of race: how to disaggregate data in a way that speaks to the impact of race in these metrics
 - Metrics of smoking and drinking were included but we know that when controlled for those factors, African American women still face higher infant mortality
- Need to have positive metrics and things that policy can change to move away from the deficit-based model

“Learning and ready to succeed” group:

- Early childhood programs prepare students for success but then they can move into low performing schools. What is the condition of schools? Are they “ready” to serve children?
- Certain children are looked at by their deficits. When you receive a label, you can be looked at as “less than.” How do we address equity in this?
- Chronic absenteeism and its connection to academic performance. Implicit bias comes into play. Strong statistics about child literacy and absenteeism. Many families are not proficient, so they need additional resources to help their children.
- Discussion about screening children and aggregating data in a negative way – need to get away from that.

Secretary Cohen thanked the small groups for providing great feedback and asked all members to spend more time reviewing the draft Action Plan and offering additional specific feedback over

the next few weeks (submitting comments back by email by the end of September). She said to think about the long-term and where we should be in 10 years.

During discussion, ECAC members also made the following suggestions/recommendations:

- Kindergarten Health Assessment provides good data but it should be digitized so the state can aggregate and examine it by subgroup and region.
- Improve the coordination between early education programs and schools. Also support the transition to school for children who are not in formal early care programs.
- More child care subsidies. Increased reimbursement levels for programs.
- Many child care programs are not conducting developmental and behavioral screenings – how to make sure that children are receiving screening regardless of their setting? How to support programs to provide screenings?
- NC has done a good job with developmental screenings. The problem is that there are not enough services for children after the screening unless there is a severe delay.
- There are a lot of policy possibilities, but we must have the funding.
- Managed care companies must be enlisted to work on our early childhood goals.
- Home visiting is an important metric.
- Consider creating reimbursement bonuses that reward programs for outcomes. Use as incentives for common goals, like adopting screening and assessment tools.
- Bilingual learners might show a deficit in assessments, but they are learning two languages, which is a strength.
- Make sure we are not pushing academics down into child care.

Secretary Cohen thanked the members for productive dialogue and feedback. Meeting adjourned at 4pm.