Early Childhood Advisory Council

September 7, 2018

Overview

- **Welcome**

- **Executive Order**

- **NC Early Childhood Landscape Updates**

- **Early Childhood Action Plan Overview**

- **Early Childhood Action Plan Feedback & Brainstorm**

- **Close Out**

Executive Order

Kristen Guillory, Policy Advisor, Office of the Governor

Healthy

NC Landscape Updates

Mandy Cohen, MD, Secretary, NC DHHS

DHHS Top Priorities

Transforming Medicaid

Addressing the Opioid Crisis

Improving Early Childhood Health, Safety, and Education

North Carolina Opioid Action Plan- launched June 2017

1. Reduce oversupply of prescription opioids
2. Reduce diversion of prescription drugs and flow of illicit drugs
3. Increase community awareness and prevention
4. Make naloxone widely available and link overdose survivors to care
5. Expand treatment and recovery oriented systems of care
6. Create a coordinated infrastructure
7. Measure our impact and revise strategies based on results

Opioid Action Plan: Work to Date

- New legislation to **limit opioid scripts and dosage; NARCAN without a Rx**

- **Changes to Medicaid coverage policy** for alternative pain control options

- Purchase of nearly **40,000 naloxone kits**

- Projected to **treat an additional 5,000 people** through CURES grant dollars and new state funds in FY 2017-18

- Convened **Payer's Council**

- **Collected & disposed of 89.2 million pills** through Operation Medicine Drop since 2010

- Launched first **Law Enforcement Assisted Diversion (LEAD) program** in the Southeast and have expanded to 4 programs statewide

- **Track and report opioid data** regularly with goal of reducing number of unintentional opioid-related deaths by 20%

Medicaid Transformation

- Vast majority of 1.2M children on Medicaid/CHIP will transition into managed care beginning Nov. 1, 2019.

- Major change for Medicaid beneficiaries, DHHS, counties, physician practices, Local Health Depts., more.

- RFP for managed care companies was released in August:
  - Physical and behavioral health integration
  - Aligned quality strategy
  - New advanced medical home program
  - Move to value-based payments
  - Healthy Opportunities investments

Healthy Opportunities

Hot Spot Map
- Interactive map of healthy opportunity indicators

Screening Questions
- Statewide standardized screening questions
- September 4, 2018: launched field testing in 21 clinics

Resource Platform
- Connect patients to community resources
- Resource Database & Referral Platform to track outcomes
- Rollout in fall 2018

Regional Pilots
- Test non-medical interventions to improve health and reduce costs
- Up to $800 Million through 1115 Waiver (In CMS negotiations)
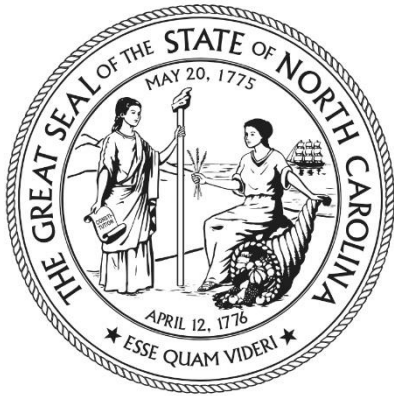
Safe and Nurtured
NC Landscape Updates

Susan Perry-Manning, Principal Deputy Secretary, NC DHHS

Child Welfare and Social Services Transformation

- In 2017, the NC General Assembly enacted Family-Child Protection and Accountability Act/Rylan's Law

- Requires major reform of child welfare and social services system to improve quality and consistency of services provided in all 100 counties

- Provisions focus on:
  - Support
  - Accountability
  - Transparency
  - Outcomes

- Bill driven by state performance on federal child welfare review and other performance concerns

Key Reform Activities and Benchmarks

- By April 2018 - Social Services Regional Supervision and Collaboration Working Group makes recommendations for regional support and collaboration
  - Final report due February 2019

- By July 1, 2018 - Agreement between DHHS/Counties outlining key performance measures and responsibilities

- By September 1, 2018 - Independent assessor, Center for the Support of Families (CSF) to develop preliminary and final reform plans for social services and child welfare
  - Final report due February 2019

- By November 15, 2018 – DHHS provides its response and recommendations to General Assembly
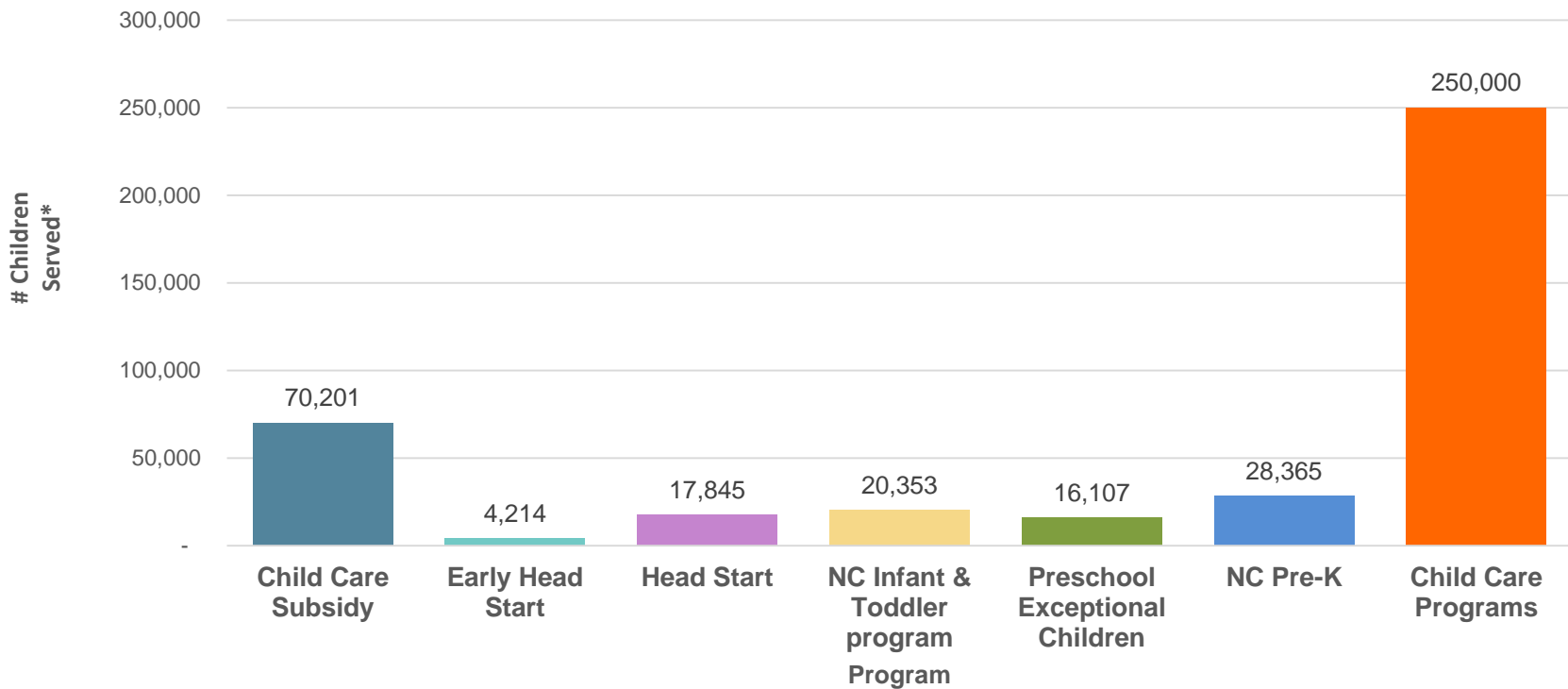
CSF Findings and Recommendations

- The CSF reports finds:
  - Inconsistent services delivered across counties
  - Children are not always adequately protected
  - Many counties are understaffed
  - DHHS needs to reorganize to provide better support and oversight

- Recommendations:
  - State should invest in addressing cross-county salary inequity and understaffing as well as in state level support and regional support offices
  - State should close the health care coverage gap
  - State should focus on more prevention services
  - State should create a centralized hotline for suspected reports of abuse and neglect

Learning and Ready to Succeed

NC Landscape Updates

Anna Carter, Director, Division of Child Development and Early Education, NC DHHS

Number of Children Served in NC's Publicly Funded Early Learning Programs

 # Children Served*

| Program	# Children Served
Child Care Subsidy	70,201
Early Head Start	4,214
Head Start	17,845
NC Infant & Toddler program Program	20,353
Preschool Exceptional Children	16,107
NC Pre-K	28,365
Child Care Programs	250,000

*There are duplication among counts, as a child may receive multiple sources of funding

Percent of Eligible NC Children Served in Early Childhood Programs*

Child Care Subsidy
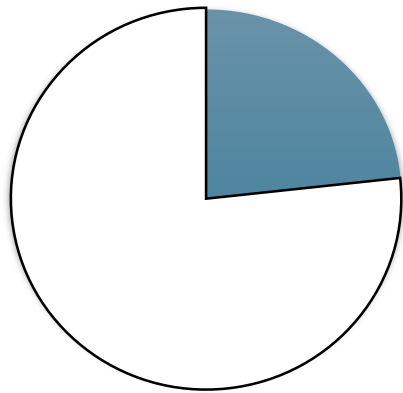
Early Head Start

Head Start

NC Pre-K

Serving **23%** of Eligible Children
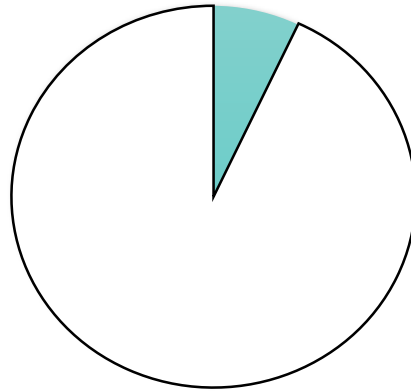
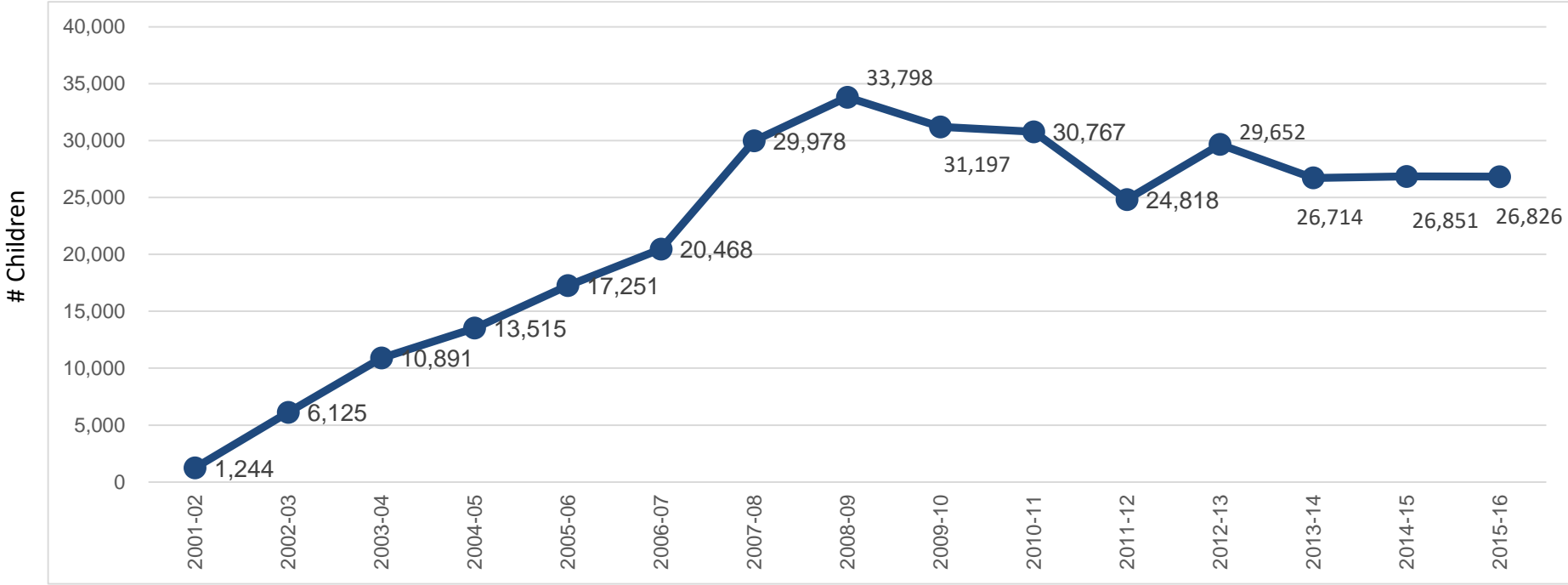Serving **5%** of Eligible Children
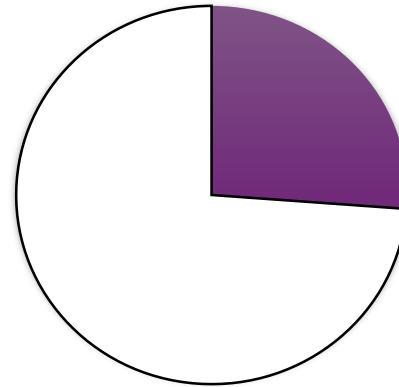
Serving **28%** of Eligible Children
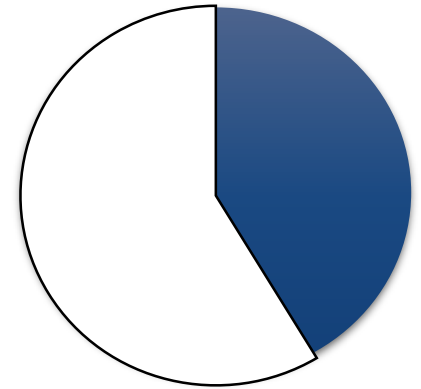
Serving **44%** of Eligible Children

*Percentages shared for programs with available data for total eligible population

More at Four/NC Pre-K Children Served Over Time

Current Child Care Subsidy Wait List
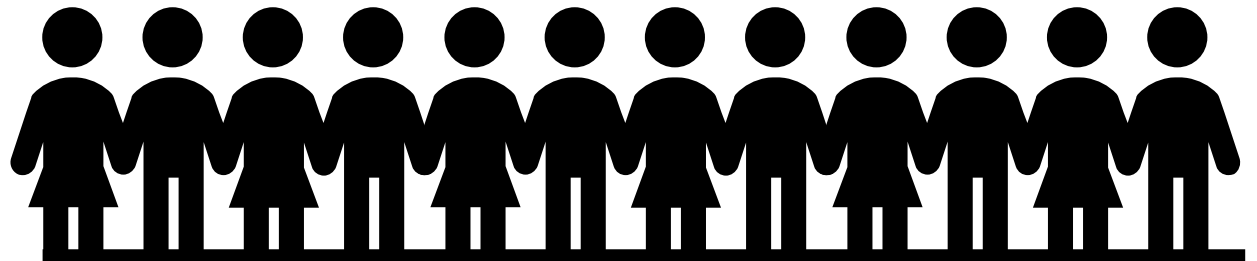
As of June 2018, over 50,000 children and their families qualify, but are on the waitlist, for child care subsidy.

NC Early Childhood Program Quality

- **Five-star rating system based on:**
  - ○ Training and education credentials of workforce
  - ○ Program standards

- **Programs that meet the minimum licensing requirements are issued at least one star**

- **Child care programs that voluntarily meet higher standards may earn two to five stars**

NC Early Learning Quality

- NC was one of the first in the country to implement a QRIS
  - Last updated in 2005

- 70% of centers are 4 or 5 Stars
  - State law requires all children receiving child care subsidy to attend 3,4 or 5 star programs

- Budget provision related to recommendations for a separate infant/toddler rated license

- Child Care Commission proposal to create "unrated license"

- Need to review our system based on current knowledge about what children need

Public Early Learning Funding

State funding for birth-through-five and K-12 education make up the smallest and largest proportions of the budget, respectively

39.14%	21.4%	17.69%	11.66%	4.62%	2.40%	1.99%	1.10%
K-12 Education	Health & Human Services	Higher Education	Justice & Public Safety	Other	Natural & Economic Resources	General Government	Early Childhood Education

Federal and State Early Learning Funding

Federal and State Early Learning Funding chart

- $180,000,000
- $160,000,000
- $140,000,000
- $120,000,000
- $100,000,000
- $80,000,000
- $60,000,000
- $40,000,000
- $20,000,000
- $-

Smart Start
- State Appropriations: $146,000,000
- Federal Funds: $7,000,000

NC Pre-K (Before New Budget Allocations)
- NC Lottery: $78,000,000
- State Appropriations: $69,500,000
- Federal Funds: $8,900,000

NC Pre-K (After New Budget Allocations)
- NC Lottery: $78,000,000
- State Appropriations: $19,500,000
- Federal Funds: $58,900,000

Legend: ■ Federal Funds ■ State Appropriations ■ NC Lottery

- New budget allocations reflect the passage of Senate Bill 99, the FY 2018 – 2019 budget

Challenge: Average Lead Teacher 10 Month Salaries

Child Care Programs
(Includes Pre-K and non-Pre-K teachers)

$19,175/school-year
[No Benefits]

Less than $11/hour

Private Site
(Pre-K only)

$28,895/school-year
[No Benefits]

Less than $17/hour

Public School
(Pre-K only)

$35,000/school-year
[+ Benefits]

Less than $22/hour
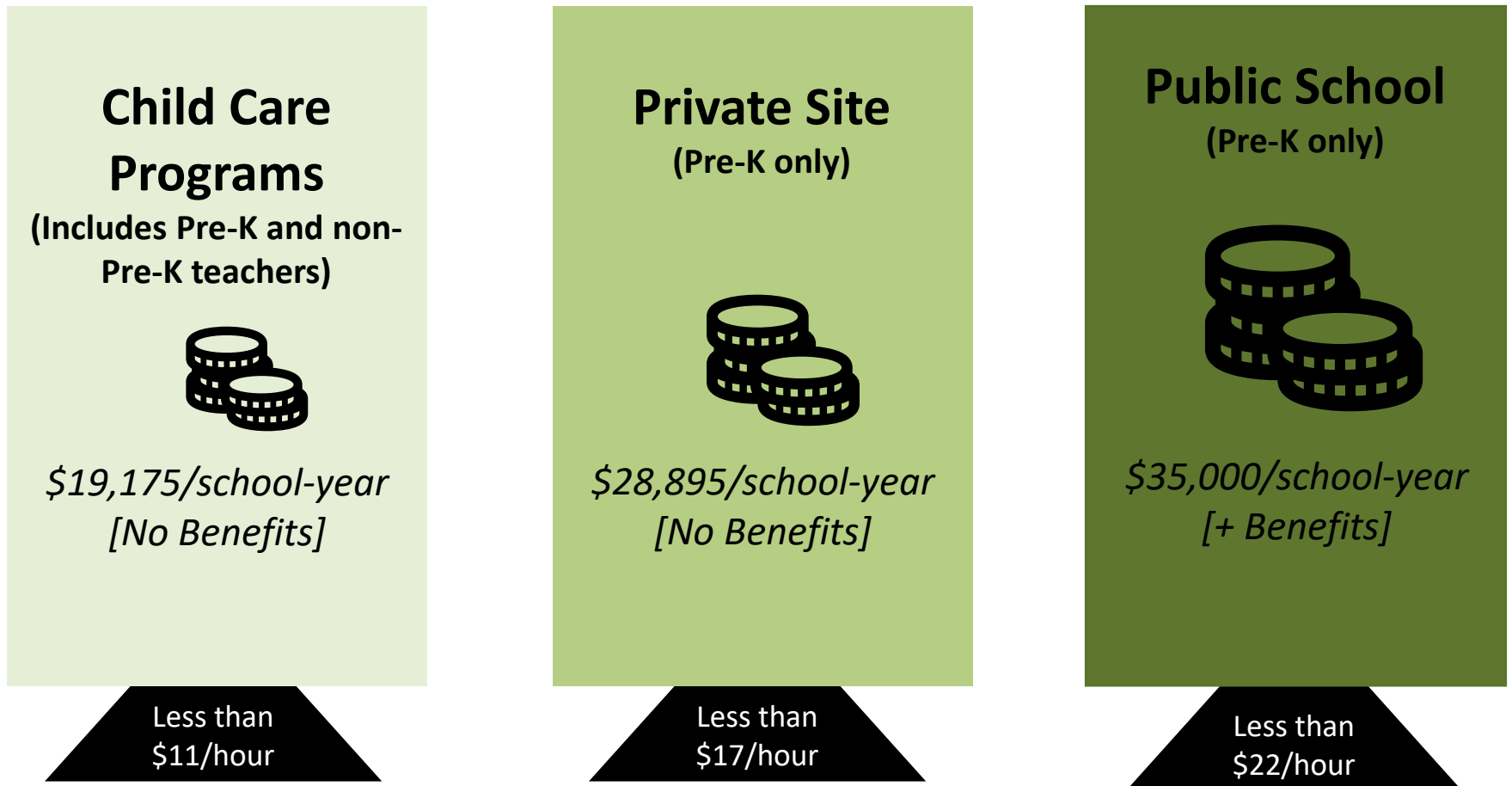
Source: 2015 NC Workforce Study conducted by CCSA

Other Councils & Commissions

- **Commission on Access to a Sound, Basic Education: Geoff Coltrane, Senior Education Advisor, Governor's Office**

- **B – 3 Interagency Council: Susan Perry-Manning, DHHS**

Birth through Third Grade (B-3)
INTERAGENCY COUNCIL

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

PUBLIC SCHOOLS OF NORTH CAROLINA
State Board of Education | Department of Public Instruction

Establish a vision and accountability for a birth through grade three system of early education

| Data Driven Improvement and Outcomes | Transitions and Continuity | Teacher and Administrator Preparation and Effectiveness |

Early Childhood Action Plan

Early Childhood Advisory Council

Susan Perry Manning
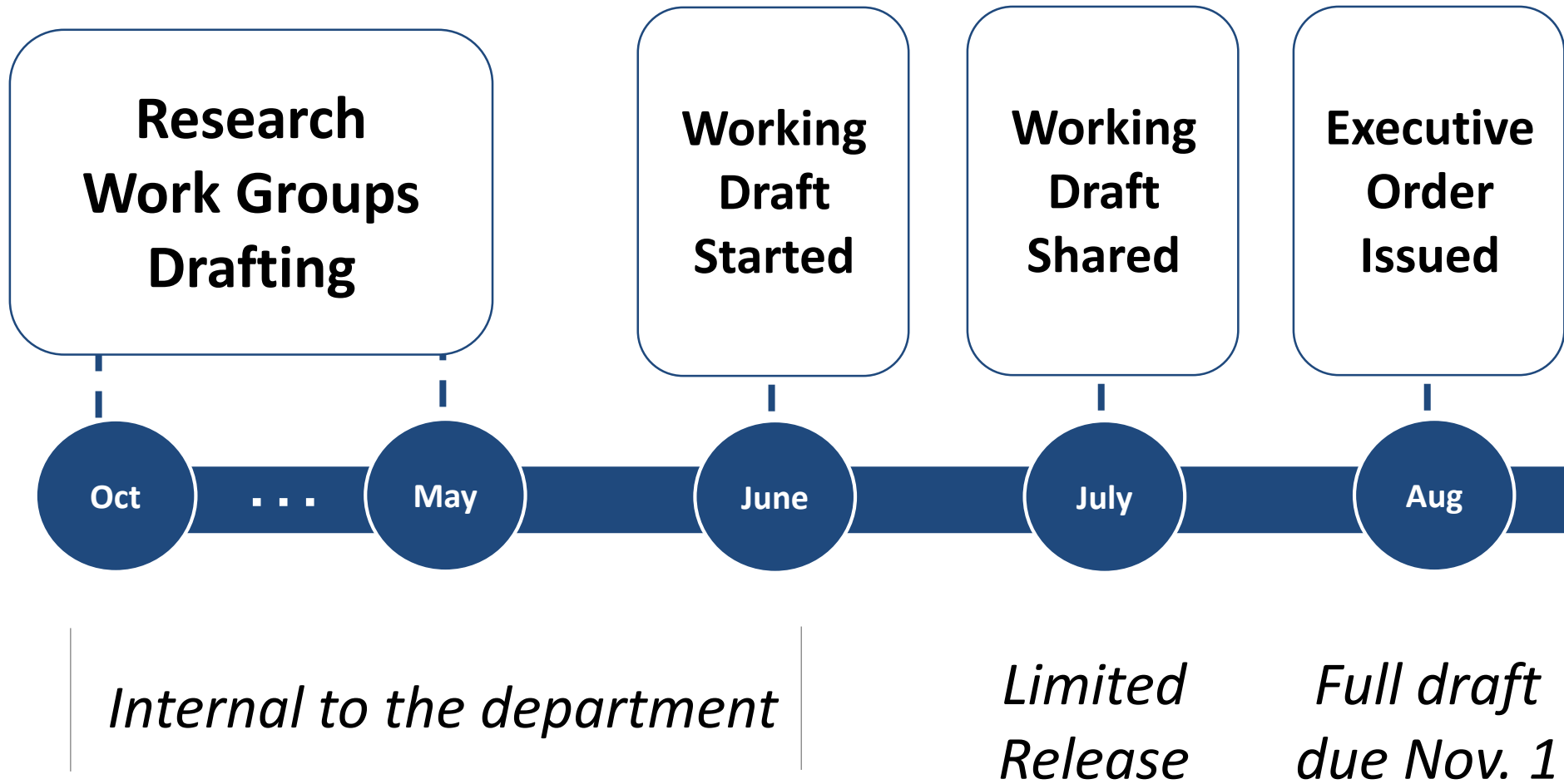Principal Deputy Secretary

Rebecca Planchard
Senior Early Childhood Policy Advisor
NC Department of Health and Human Services

September 7, 2018

How We Got Here: 2017 - 2018

Research Work Groups Drafting

Working Draft Started

Working Draft Shared

Executive Order Issued

Oct ... May June July Aug

Internal to the department

Limited Release

Full draft due Nov. 1

Our Vision for NC's Children

All North Carolina children will get a healthy start and develop to their full potential in safe and nurturing families, schools and communities.

Early Childhood Action Plan Framework

Progress — Public tracking toward our goals

Actions and Commitments — How we reach our goals

2025 Goals and Metrics — Targeted 2025 goals and annual benchmarks

Vision — What we want to be true for NC kids

Guiding Principles — How we approach creating the plan

By 2025, all North Carolina young children from birth to age eight will be:

1) **Healthy:** Children are healthy at birth and thrive in environments that support their optimal health and well-being

2) **Safe and Nurtured**: Children grow confident, resilient and independent in safe, stable and nurturing families, schools and communities

3) **Learning and Ready to Succeed:** Children experience the conditions they need to build strong brain architecture and school readiness skills that support their success in school and life

Healthy

Children are healthy at birth and thrive in environments that support their optimal health and well-being

Healthy | 2025 GOALS

INFANT MORTALITY

HEALTHY BIRTH WEIGHT

PREVENTIVE HEALTH SERVICES

FOOD INSECURITY

INFANT MORTALITY

By 2025, decrease the statewide infant mortality rate from 7.2 to 5.9 deaths per 1,000 live births

Infant Mortality for priority populations: Black or African-American (non-Hispanic), American Indian (non-Hispanic), Women in Perinatal Health Region V

Percent of adults with health insurance, facilitating access to pre-conception and inter-conception care

Percent of pregnant women who receive on time prenatal care

Percent of pregnant women who smoke

Percent of pregnant women who drink alcohol

*In Data Development

HEALTHY BIRTH WEIGHT

By 2025, decrease the percentage of North Carolina infants born at a low birth weight from 9.2% to 8.2%

Children born at low birth weight for priority populations: Black or African-American (non-Hispanic), American Indian (non-Hispanic), Women in Perinatal Health Region V

Percent of adults with health insurance, facilitating access to pre-conception and inter-conception care

Percent of pregnant women who receive on time prenatal care

Percent of pregnant women who smoke

Percent of pregnant women who drink alcohol

*In Data Development

PREVENTIVE HEALTH SERVICES

By 2025, increase the annual percentage of North Carolina's young children enrolled in Medicaid who receive regular well-child visits

- For children ages 0 – 15 months, increase from 61.9% to 68.7%.
- For children ages 3 – 6 years, increase from 69.3% to 78.5%.

Percent of children with health insurance

Rate of children with untreated tooth decay

Percent of children ages 19 – 35 months who are fully immunized

Percent of parents reporting that they have a regular place to take their children for medical care

Percentage of mothers engaging in any breastfeeding when child is 6 months of age

*In Data Development

FOOD INSECURITY

By 2025, decrease the percentage of children living across North Carolina in food insecure homes from 20.9% to 17.5%

Percent of eligible families enrolled in WIC

Percent of eligible families enrolled in SNAP

Rate of enrollment in Free and Reduced Lunch

Percent of families living in areas designated as food deserts

Percent of families with regular access to healthy foods

*In Data Development

Safe and Nurtured

Children grow confident, resilient and independent in safe, stable, and nurturing families, schools and communities

Safe and Nurtured| 2025 GOALS

CHILD ABUSE AND NEGLECT

TIME TO PERMANENCY FOR CHILDREN IN FOSTER CARE

SOCIAL EMOTIONAL WELL-BEING AND RESILIENCE

*In Data Development

CHILD ABUSE AND NEGLECT

By 2025, decrease the rate of children in North Carolina who are victims of maltreatment
- For children ages 0 – 3, reduce from 20.12 to 18.11 per 1,000 children
- For children ages 0 – 5, reduce from 18.23 to 16.41 per 1,000 children

Rate of births to mothers with at least a 12th grade education

Percent of working families with access to the Family Medical Leave Act

Percent of working families with access to Paid Family Leave

Rate of mothers screened for depression at well-child visits

Among mothers who positively identified with depression: percent referred to and receive services for depression*

*In Data Development

TIME TO PERMANENCY FOR CHILDREN IN FOSTER CARE

By 2025, decrease by 10% the number of days it takes for children in the foster care system to be either reunified with their family, placed under guardianship, another adult is given custody, or the child is placed into adoption

Percent of working families with access to the Family Medical Leave Act

Percent of working families with access to Paid Family Leave

Availability and utilization of reunification funds and services

Frequency rates of case reviews, permanency/court hearings and child and family team meetings

Frequency rates of face-to-face visitation between birth parents and their children in foster care

*In Data Development

SOCIAL EMOTIONAL WELL-BEING AND RESILIENCE

By 2025, increase measures of social and emotional well-being and resilience of young children by _____%*

Rate of families engaged in evidence-based family resilience support programs*

Rate of children screened for social-emotional development support

Among children who identify positively for social-emotional development needs, rate of children who are referred to and receive services*

*In Data Development

Learning and Ready to Succeed

Children experience the conditions they need to build strong brain architecture and school readiness skills that support their success in school and life

Learning and Ready to Succeed| 2025 GOALS

EARLY DEVELOPMENT

KINDERGARTEN READINESS

3RD GRADE READING PROFICIENCY

Learning and Ready to Succeed|

EARLY DEVELOPMENT

By 2025, increase the percentage of children across North Carolina who demonstrate on track developmental skills.*

Children who demonstrate on-track language skills at 24, 36, and 48 months*

Children screened for developmental delay at well-child visits

Children with a developmental delay, who are referred to and receive services*

Parents who regularly read with their children

Number of books in a family home

*In Data Development

KINDERGARTEN READINESS

By 2025, increase the percentage of children across North Carolina who enter kindergarten developmentally on track, according to the Kindergarten Entry Assessment.*

Children under age 6 who are in licensed, high quality centers and homes

Eligible children under age 6 receiving child care subsidy

Early childhood teachers with post-secondary early childhood education

Early childhood administrators and principals with post-secondary early childhood education

Teachers working with priority populations who receive targeted training

*In Data Development

Learning and Ready to Succeed| 2025 GOALS + METRICS

3RD GRADE READING PROFICIENCY

By 2025, increase the percentage of children achieving reading proficiency across the state from 58% to 64% according to NC DPI Performance Data on third grade reading EOGs, and from 39% to 43% according to the fourth grade National Assessment of Education Progress.
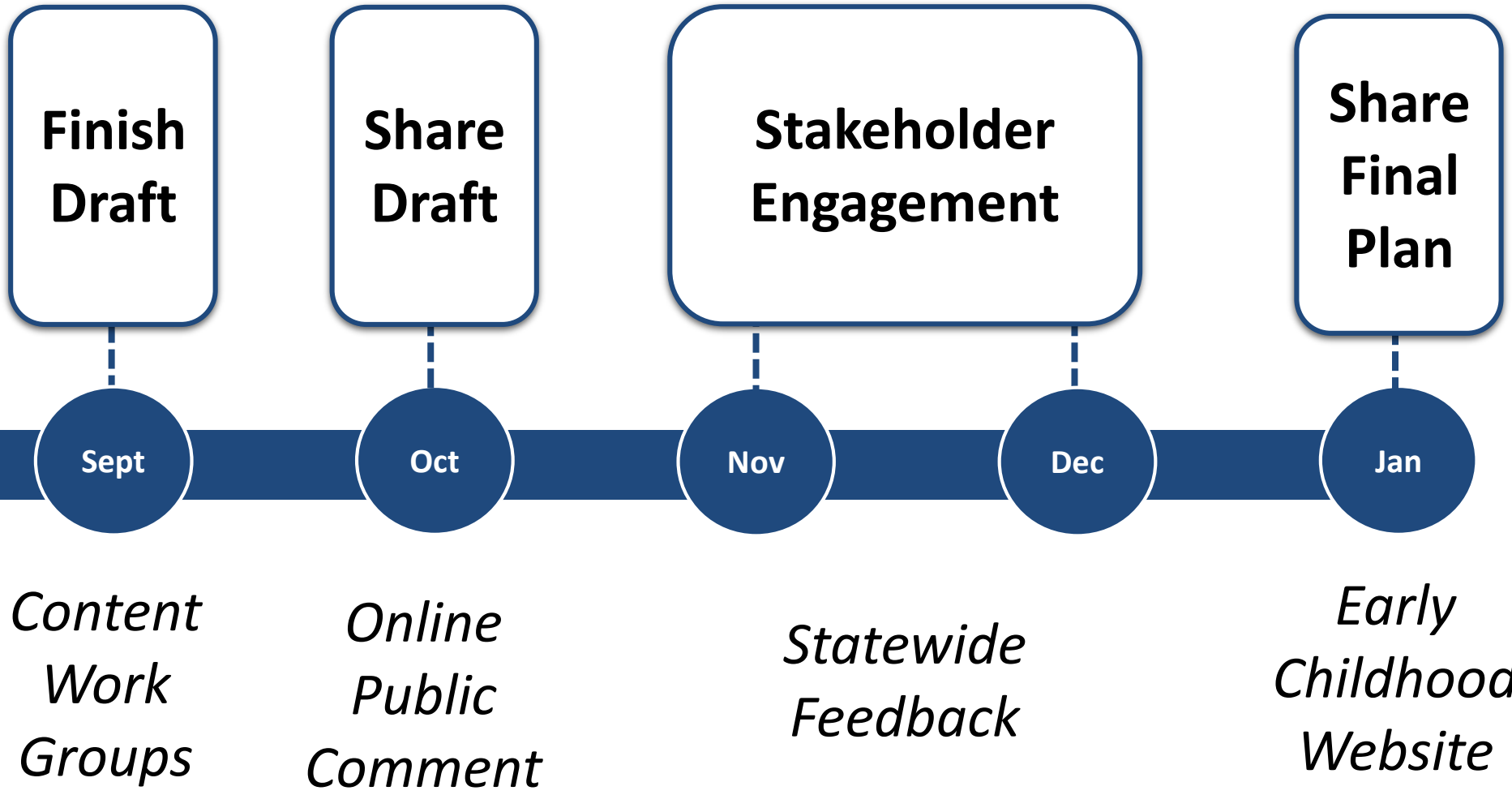
Reading proficiency for priority populations: Black or African-American (non-Hispanic), American Indian (non-Hispanic), Hispanic

Kindergarten students reading or exhibiting pre-literacy behaviors at or above grade level

1st grade students reading at or above grade level by the end of the year

2nd grade students reading at or above grade level by the end of the year

Where we're headed next: 2018 - 2019

Finish Draft

Share Draft

Stakeholder Engagement

Share Final Plan

Sept — Oct — Nov — Dec — Jan

Content Work Groups

Online Public Comment

Statewide Feedback

Early Childhood Website

Content Work Groups

- **Three work groups: Healthy, Safe & Nurtured, Learning & Ready to Succeed**

- **10 – 15 individuals, internal to DHHS and external**

- **Each group's charge:**

    1. **Finalize the language for the 2025 goals**

    2. **Prioritize 3 – 5 metrics for each goal**

    3. **Identify 5 – 10 strategies/actions in each content area**

Turn & Talk: Small Group Reflections

- **Divide into three groups: Healthy, Safe & Nurtured, Learning & Ready to Succeed**

- **Discuss the following:**
  1. **What feedback do you have on the language of the goals in your section?**
  2. **What metrics should be prioritized under each goal?**

Policy Priorities

Group Dialogue: Brainstorm preliminary policy recommendations under Healthy, Safe & Nurtured, Learning & Ready to Succeed

Example

- **Content area: Safe & Nurtured**

- **Policy Area: Paid Family Leave**

- **Policy Recommendation: Guaranteed paid family leave should be offered to all state employees through the passing of a new law through the State Legislature.**

Early Childhood Action Plan Next Steps

- **Join a content work group**
  - Commit to regular meetings and/or phone calls over the month of September and into October
  - Email ECAP@dhhs.nc.gov with which group you would like to join

- **Provide feedback on the working draft, other stakeholders to engage with, or anything else on your mind about the Action Plan any time**
  - Email ECAP@dhhs.nc.gov

Questions?