

Early Learning Multnomah Strategic Plan Summary

Plan Years: 2015-2018

Updated 11/30/15

Early Learning Multnomah: Goals & Strategies

Our Vision: Every child in Multnomah County is prepared to succeed in school and life, regardless of race, ethnicity, or class.

Our Mission: Eliminate racial and social disparities in kindergarten readiness and create opportunities for success by implementing environmental level changes that align programs, systems and funding in early childhood with a focus on children living in poverty and all children of color.

Our Priority Population: All 0-6 children of color (including immigrants and refugees) and all children in poverty.

1. The early childhood system is aligned, coordinated and family-centered

- A. Activate leadership from all five sectors to eliminate barriers for children and families in the priority population
- B. Expand and deepen Parent Accountability Council (PAC) reach to parent leadership councils throughout the county and ensure that PAC Guiding Principles are operationalized in ELM investments and strategies
- C. Support Home Visiting Community of Practice's Referral Coordination Work Group to improve priority population's access to culturally-responsive, family-centered home visiting services

2. Children are supported to enter school ready to succeed

- A. Leverage infrastructure at SUN Community Schools to expand and deepen the focus on P-3 alignment at these schools in a way that drives family engagement, is parent-centered, and provides opportunities for parents to use the skills they have as leaders and experts in their children's lives
- B. Collaborate with early learning providers, culturally-specific organizations and school districts to ensure that children in priority population have access to quality pre-K experiences
- C. Increase capacity to address developmental delays and disabilities by coordinating with regional hubs, CCOs, and other community-based organizations to align work; increase rates of developmental screening; and improve the referral and follow-up process by medical and early learning providers
- D. Sustain Community Education Worker (CEW) program to connect families of priority population with services to improve child development and family stability

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3. Families are healthy, stable and attached

- A. Leverage existing support for Parent Child Development Services to promote healthy child development, positive parenting and school readiness
- B. Improve efficiency of connections to services for families with newborns via collaboration with Healthy Families Oregon and Health Department
- C. Identify and implement strategies that improve and increase DHS families' access to early learning, parent education and/or family support services

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Appendix A

State-Defined Outcomes that the Strategic Plan will address:

The early childhood system is aligned, coordinated and family-centered
1. Children arrive at Kindergarten with the social-emotional, language and cognitive skills that will support their success in school
2. Families are supported as their child's first and most important teachers
3. Early care and education programs and providers are equipped to promote positive child development
4. Children and families experience aligned instructional practices and seamless transitions from early learning programs to kindergarten
5. Disparities in outcomes for children of color and from low-income families are reduced
Children are supported to enter school ready to succeed
1. Children arrive at Kindergarten with the social-emotional, language and cognitive skills that will support their success in school
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5. Disparities in outcomes for children of color and from low-income families are reduced
Families are healthy, stable and attached
1. Families have positive physical and mental health, supported by access to high-quality health services
2. Parents and families have the confidence, knowledge and skills to support healthy attachment and the positive development of the children in their care
3. Families have adequate resources to meet their needs, such as housing and transportation, and supports to strengthen their resilience to stress
4. Working families have access to safe and affordable child care that promotes positive child development

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Appendix B

State-Defined Short-Term Indicators (1-2 years) that the Strategic Plan will address:

The early childhood system is aligned, coordinated and family-centered
(1-1. A) Hub has a strategic plan in place that details the role of all five sectors (business, EL, health, K-12, education and human services) in achieving shared outcomes for children and families
(1-1.B) Hub has active participation of leaders from all five sectors within their governance structure
(1-1. C) MOUs/DOCs are in place with partners from all five sectors and specify shared outcomes and activities
(1-1.D) MOUs/DOCs specify that each sector partner will share data regarding budgets, services provided, and the number of children served within their hub coverage area
(1-2.A) Demonstrated meaningful engagement with children and families from all communities served by the hub
(1-3.A) Demonstrated engagement with culturally-specific community-based organizations as partners in delivery of services to children and families
(1-4.A) Program participation data demonstrates increase in services to children and families from identified priority populations
(1-5.A) Hub demonstrates that their operating administrative overhead is below 15% annually
Children are supported to enter school ready to succeed
(2-1.A) The hub has demonstrated shared activities among early learning providers, families, and K-3 partners
(2-2. A) Increase the number of children from EHS, HS, OPK, Relief Nurseries, Health Families Oregon and/or other waiting lists served by hub partner program
(2-3. A) Increase in number of 3, 4, and 5-star providers serving children from "hot spots" and an increase in the number of children served in hot spots and communities of color
(2-4. A) Increase in percent of children who receive a developmental screen before age 3
(2-5.A) Increase in percentage of children enrolled in kindergarten before start of school year
Families are healthy, stable and attached
(3-1.A) Increase in percentage of children in ERDC in a 3, 4, or 5-star QRIS program
(3-2.A) Increase in number of children and families served by DHS (e.g., through TANF, or child welfare) who are receiving early learning, parent ed, or family support services
(3-3.A) Increase in percentage of children on OHP who make it to 6 or more well-child visits by 15 months of age)