



Early Learning Division | 700 Summer St NE, Suite 350, Salem, OR 97301

Phone: 503-947-1400 | Fax: 503-947-1955

Measuring Success Committee Meeting Agenda

DATE: WEDNESDAY, APRIL 3RD, 1:00-3:00PM
LOCATION: EARLY LEARNING DIVISION, 700 SUMMER ST NE
(VETERAN AFFAIRS BLDG), 3RD FLOOR WILLAMETTE ROOM

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Meeting Goals:

- DETERMINE IF MEASURE LIBRARY ADEQUATELY COVERS ALL DOMAINS
- DETERMINE IF MEASURE LIBRARY ADEQUATELY COVERS ALL SECTORS
- DETERMINE IF MEASURES ARE CURRENTLY LISTED ON THE APPROPRIATE *RAISE UP OREGON* OBJECTIVES
- DISCUSS PROCESS FOR ENGAGING PARTNERS IN EQUITY REVIEW OF MEASURES LIBRARY

Meeting Agenda:

I. Welcome and Introductions	1:00 – 1:10
II. Update:	1:10 – 1:40
a. Review of last meeting	
b. Updates from last meeting’s follow-up questions	
c. Discussion of EC workforce measures	
III. Small Group Activity	1:40 – 2:10
a. Group 1: Does measure library adequately cover all domains?	
b. Group 2: Does measure library adequately cover all sectors?	
c. Group 3: Are measures listed under the appropriate objective?	
IV. Full group reports and discussion	2:10 – 2:40
V. Discussion of equity review of measure library	2:40 – 3:00



Early Learning Council

Measuring Success Committee Report: March, 2019

Committee Charge:

Advise the Early Learning Council on the issues, challenges, successes and priorities related to measuring the success of the early learning system and ensuring equitable outcomes for all children, including but not limited to the Early Learning Hubs

Committee Membership:

Kristi Collins, Colleen Reuland, Bobbie Weber, Holly Mar Conte, Debbie Jones, Dorothy Spence, Emily Berry, Beth Green, Sara Kleinschmidt, Shannon Lipscomb, Bill Baney, Bess Day.

Report:

The Measuring Success Committee of the Early Learning Council met on March 6, from 1 – 3, at the Early Learning Division. The Committee first heard staff updates regarding questions from the previous meeting.

- Housing and Community Services: the agency reported that it does collect data on *severe rent burden for families with young children*. They would be happy to share the data in the future.
- EI/ECSE: when choosing among the domains of Knowledge & Skills, Social-Emotional Skills, and Meeting Own Needs, the recommendation is to use *Social-Emotional Skills* with or without Knowledge & Skills as social-emotional functioning is a key area of focus within and outside EI/ECSE. However, some concern was expressed that the measure misses many children with social-emotional needs as it is limited to more severe issues addressed within EI/ECSE. Another option is to add or replace the EI/ECSE measure with a population-based measure on *the receipt of behavioral services*. Staff will follow up with OPIP/OHA regarding this measure.
- Regarding the *developmental screening* measure, it was clarified that the current measure in the library is *developmental screening within the first 36 months*, which is currently being reported by OHA, while *developmental screening with follow up* is a potential future measure that could replace, or be added along with, the current measure.
- Staff also mentioned that the current PRAMS-2 survey (for mothers of 2-year-olds) conducted by the CDC and OHA's Maternal & Child Health division will become the "PRAMS-3" (for mothers of 3-year-olds) in 2020, though the survey will have a different name (TBD). An opportunity exists for a small number of staff and committee members to work on revising the questions to make them more relevant to early learning.

The Committee then continued the process of working through each of the library measures and having a deeper discussion. The following summarizes the key discussion points and decisions for measures that were addressed.



Exclusive breastfeeding in the first 6 months: the Committee discussed what the key important factor was regarding breastfeeding: exclusivity, longevity, or both. Exclusivity was questioned as some mothers take time to develop milk. The recommended length of time for breastfeeding wasn't immediately known, and staff will follow up.

(Follow-up Note: *The American Academy of Pediatrics recommends that infants be exclusively breastfed for about the first 6 months with continued breastfeeding along with introducing appropriate complementary foods for 1 year or longer. WHO also recommends exclusive breastfeeding up to 6 months of age with continued breastfeeding along with appropriate complementary foods up to 2 years of age or longer.*)

Frequency of reading to children: The Committee discussed whether the measure should pertain to just reading with children, or if it should include interactions such as singing songs, telling stories, and other practices. Members indicated that including other culturally-appropriate interactions would be more consistent with the state's equity perspective. It was suggested that an additional item be added to the future "PRAMS-3" if possible, or that the current item be revised.

The Committee also discussed whether the item should read "you or someone in your household" like the PRAMS-2, which would miss experiences of children raised in two homes but include people like nannies, or "you or a family member" like the NSCH survey. It was generally considered that "you or a family member" or "you or another parent" is preferred if the item can be revised for the future PRAMS.

Tobacco/alcohol use: The issue of social desirability was discussed. Concern was raised regarding the validity of the measures. Regarding smoking, is the key factor reducing smoking during pregnancy or reducing the child's exposure to second-hand smoke? The committee decided both questions are important and to include both in the library at this point. Staff will revisit the smoking items on the PRAMS-2 and report back. It was noted that vital records may have smoking during pregnancy data. It was also mentioned that the measure didn't seem to fit under Objective 4 of the strategic plan (promotion of a child's physical and social-emotional health) if the measure is just about how much the mother smokes.

Regarding maternal alcohol use after the child's birth, the Committee decided that determining an appropriate or acceptable amount and type of alcohol to consume is a difficult social determination with limited known relevance to a child's early development. Therefore, the measure was deleted from the library.

Maternal depression: The discussion centered around the specific items used to assess depression. The Committee was not able to determine if the current PRAMS-2 measure was an existing depression screener. It was suggested that the PRAMS revision consider the wording used by MICHV.

Maternal or family stress: Both *maternal stress* on the PRAMS-2 and *family stress* on the NSCH are measured through a list of stressful life events. *Maternal stress*, however, focuses on mothers' stressful/traumatic events, while the *family stress* measure concerns a child's traumatic events. With respect to policy, maternal stress was mentioned as being more actionable. The Committee decided to keep both measures at this time, and staff will research whether one or both scales are standardized and research based.



Social support: The social support scales on the PRAMS-2 and NSCH were compared. The PRAMS-2 measure is more in line with how early learning approaches the concept. The Committee requested additional information on the research basis for the scale.

Workforce development: The Committee agreed that a teacher's Step level and type of degree are important to measure. However, questions remained about the type of degree to consider (i.e., any BA vs. ECE-related BA) and the appropriate step levels to include (Step 7 and/or 9?). The type of position is important as well, but measures typically include teacher and head teacher. The discussion will continue.

Well-child visits: Well-child visits can be measured at a variety of ages. Existing measures include visits in the first 15 months of life, as well as for 3-6 year-olds. The Committee decided to keep both age ranges in the library.

Preventive dental visits: The Committee was unclear whether this was an existing or future measure. Staff will follow up with OHA.

Immunization rates: The Committee discussed the appropriate time periods to measure immunization rates. One common measure that has existed is "fully immunized by age 2." In addition, fully immunized at kindergarten entry was considered important to know. Both measures will be included in the library.

Family sense of hope: This is a DHS measure in self-sufficiency. It was mentioned that this is a proposed key performance metric within DHS, but not sure when it will be ready. Staff will follow-up with DHS.

Living wage: The Committee questioned whether the employment agency calculates a living wage. It was discussed how with minimum wage changes and differences, regional cost of living, etc., make this very difficult to calculate. No decision was made.

Timely health assessments for children in foster care: Some members suggested this measure was too specific, while other suggested it was an important sub-group. It was noted that very few measures related to child welfare are currently included. The decision was made to keep it in the library at this point.

Supportive neighborhood: This may be an ACS measure. The committee determined that the relative importance of a supportive neighborhood to early learning is not established, and given the other measures, it should be deleted from the library.

Residential mobility: The Committee was unclear as to the importance of residential mobility on early learning, and will consider additional information in the future.

Finally, it was noted that the strategic plan objective for effective transitions/connections for infants still did not have any measures. The Committee will revisit home visiting and Family Connects data.

Having completed its review of the library measures, the Committee discussed next steps. It was noted that several measures still needed follow-up work. Members and staff will continue providing updates at future meetings. Staff suggested that the next meeting consider the current library measures against the principles for long- and medium-term indicators, as well as look at the measures from a variety of



perspectives to ensure the set as a whole is a multi-sector, developmentally appropriate set of measures with a strong relation to the early learning system's strategic plan.

Upcoming Key Decisions:

- Finalize long-term and intermediate outcomes measures

Staffed by:

David Mandell, Tom George, Sue Parrish

Follow-up Notes

- follow up with OPIP/OHA (Colleen) regarding behavior health measure -- DAVID
- staff will revisit the smoking items on the PRAMS-2 and report back. -- TOM
- staff will research whether one or both scales are standardized and are research based (both for stress and social support) – TOM
- *Preventive dental visits*: Follow up with Sara K – TOM
- *Family sense of hope*: Kathryn will follow up with DHS – TOM
- get Adams paper on residential mobility – BOBBIE
- Kristi will follow-up regarding family connects data --TOM



MEASURING SUCCESS COMMITTEE: MEASURES LIBRARY --DRAFT--	Physical, Perceptual & Motor Develop.	Social- emotional Well- being	Approaches to Learning	Cognitive, Literacy, & Language Develop.	Birth Mother /Caregiver Health	Healthy Relation- ships	Safe & Stable Families
Adequate birthweight	x				x		
# of children in SPARK-rated programs			x				
# of SPARK-rated ECE programs ?							
% of children free of abuse & neglect							x
% of children with access to child care slot			x				xx
% of infants and toddlers in EI services who showed gains in S-E skills		xx	x				
% of preschoolers in ECSE services who showed gains in S-E skills		xx	xx				
% with BA or Step 10 (workforce)			xx				
Adequate prenatal care					xx		
Children in foster care get timely health assessment	xx		x				
Continuity of care in ERDC		x	x				x
Developmental screenings (% screened by 36 months)	x			x			
Diversity of workforce		x	x			x	
Exclusive breast feeding first 6 months	xx						
Family's sense of hope							xx
Food (in)security							xx
Frequency of reading to children				xx			
Home Visiting measure: Engagement							xx
Immunization rate	x						
Kindergarten attendance				x	x		
Living wage							x
Maternal depression		x			xx	xx	
Maternal mortality rate					xx	xx	
Maternal social support					x	x	
OKA Approaches to Learning: Interpersonal Skills & Self-Regulation			x				
OKA Math, Letter Names, & Letter Sounds				x			
Parenting Ed measure: Engagement (70%+ attendance)						xx	
Parenting Ed measure: Parenting Skills Ladder (pre/post)					x	xx	
Parenting stress					xx	xx	x
Preventive dental exams	xxx						
Rate of preterm births	x				x		
Residential mobility							xxx
Severe rent burden for families w/ young children							xxx
Smoking while pregnant or 2nd-hand smoke	xxx				x		
Third-grade reading				xxx			
Turnover rate of workforce		x				x	
Well-child visits	xxx	x					
Well-women visits					xxx		
Young children in poverty (under 6)							xxx

MEASURING SUCCESS COMMITTEE: MEASURES LIBRARY --DRAFT--	Early Care & Education	K – 12 (includes EI/ECSE)	Health	Human Services	Housing & Community Services
Adequate birthweight					
# of children in SPARK-rated programs					
# of SPARK-rated ECE programs					
% of children free of abuse & neglect					
% of children with access to child care slot					
% of infants and toddlers in EI services who showed gains in S-E skills					
% of preschoolers in ECSE services who showed gains in S-E skills					
% with BA or Step 10 (workforce)					
Adequate prenatal care					
Children in foster care get timely health assessment					
Continuity of care in ERDC					
Developmental screenings (% screened by 36 months)					
Diversity of workforce					
Exclusive breast feeding first 6 months					
Family's sense of hope					
Food (in)security					
Frequency of reading to children					
Home Visiting measure: Engagement					
Immunization rate					
Kindergarten attendance					
Living wage					
Maternal depression					
Maternal mortality rate					
Maternal social support					
OKA Approaches to Learning: Interpersonal Skills & Self-Regulation					
OKA Math, Letter Names, & Letter Sounds					
Parenting Ed measure: Engagement (70%+ attendance)					
Parenting Ed measure: Parenting Skills Ladder (pre/post)					
Parenting stress					
Preventive dental exams					
Rate of preterm births					
Residential mobility					
Severe rent burden for families w/ young children					
Smoking while pregnant or 2nd-hand smoke					
Third-grade reading					
Turnover rate of workforce					
Well-child visits					
Well-women visits					
Young children in poverty (under 6)					

SYSTEM GOAL 1: CHILDREN ARRIVE READY FOR KINDERGARTEN	
Long-term System Measures	NOTES:
Adequate birthweight	
Frequency of reading to children	
OKA Approaches to Learning: Interpersonal Skills & Self-Regulation	
OKA Math, Letter Names, & Letter Sounds	
Kindergarten attendance (90% + of days attended)	
Third-grade reading (% proficient)	
Intermediary Measures	
Objective 1: Families are supported and engaged as their child's first teachers.	
Home Visiting measure(s): Engagement	
Parenting Ed measure: Engagement (70%+ attendance)	
Parenting Ed measure: Parenting Skills Ladder (pre/post)	
Objective 2: Families have access to high-quality affordable early care and education.	
% of children with access to child care slot	
# of SPARK-rated programs	
# of children in SPARK-rated programs	
Continuity of care in ERDC	
Objective 3: A high-quality, well compensated, culturally responsive, and diverse early care and education workforce is in place.	
Turnover rate	
% with BA or Step 10	
Diversity of workforce	
Objective 4: Early childhood physical and social-emotional health promotion and prevention is increased.	
Well-child visits	
Preventive dental exams	
Exclusive breast feeding first 6 months	
Immunization rate	
Objective 5: Young children with social-emotional, developmental, and health care needs are identified early and supported.	
Developmental screenings (% screened by 36 months)	
% of infants and toddlers in EI services showed gains in S-E skills	
% of preschoolers in ECSE services showed gains in S-E skills	
Objective 6: Children and families experience supportive transitions and continuity of services across early care and education and K-12.	

SYSTEM GOAL 2: HEALTHY, STABLE, & ATTACHED FAMILIES	
Long-term System Measures	NOTES:
Maternal mortality rate	
Maternal depression	
% of children free of abuse & neglect	
Food (in)security	
Intermediary Measures	
Objective 7: Parents and caregivers have equitable access to supports for their physical and social-emotional health.	
Adequate prenatal care	
Rate of preterm births	
Well-women visits	
Smoking while pregnant or 2nd-hand smoke	
Maternal social support	
Parenting stress	
Family's sense of hope	
Objective 8. All families with infants have opportunities for connection	
Objective 9: Families with young children who are experiencing adversity have access to coordinated and comprehensive services.	
Young children in poverty (under 6)	
Severe rent burden for families w/ young children	
children in foster care get timely health assessment	
Living wage	
% of families earning a living wage	
Residential mobility	