

# NC Pathways to Grade-Level Reading Stakeholder Meeting November 13, 2015

## Meeting Report



On November 13, 2015, we came together to discuss North Carolina's Pathways to Grade-Level Reading. The meeting was co-convened by the North Carolina Early Childhood Foundation, NC Child, The North Carolina Partnership for Children, Inc., and excellence (an initiative of BEST NC).

Attendees represented government agencies, nonprofit organizations, the private sector, foundations, research institutions and members of the General Assembly. Your expertise spanned health, family support, early learning environments, K-12, policy and a broad array of disciplines. In short, the brainpower in the room was awe-inspiring! (*Appendix A lists attendees.*)

Together, we:

- Celebrated North Carolina's early learning accomplishments.
- Discussed where we are now, looking at disaggregated data on fourth grade reading proficiency from the National Assessment of Educational Progress (NAEP).
- Reviewed why reading is a cumulative process that develops from birth and is rooted in early brain development.
- Discussed the concept of identifying shared measures of success as a means to align policy, funding and strategies and make large-scale progress for young children.
- Began to define what success looks like based on Lisbeth Schorr's research, including:

- Health and Development
- Supported and Supportive Families and Communities
- High Quality Early Care and Education
- Effective Teaching and Learning in K-3 Classrooms
- Identified principles to guide the work of a Data Action Team.
- Launched an ongoing effort to drive North Carolina’s whole-child, birth-to-eight pathways to grade-level reading success by third grade.

This report shares the results from the survey leading up to November 13<sup>th</sup> and the discussions that took place during the meeting.

### **Pre-Meeting Survey**

#### **What one word best describes your vision for birth-to-eight early care and learning in North Carolina?**

Aligned	Equity	More	Resourced
Ambitious	Excellence	NFP	Seamless
Attachment	Exceptional	No-brainer	Social
Bold	High-quality	Opportunity	Stellar
Collaborative	Holistic	Optimistic	Successful
Comprehensive	Imperative	Priority	Systems
Continuum	Inclusive	Progressive	Universal
Coordinated	Innovative	Prosperity	Well-being
Cumulative	Integrated	Quality	
Early literacy	Intervention	Readiness	
Effective	Investment	Reading	

#### **What are you most proud of about North Carolina’s early childhood accomplishments - both historically and more recently?**

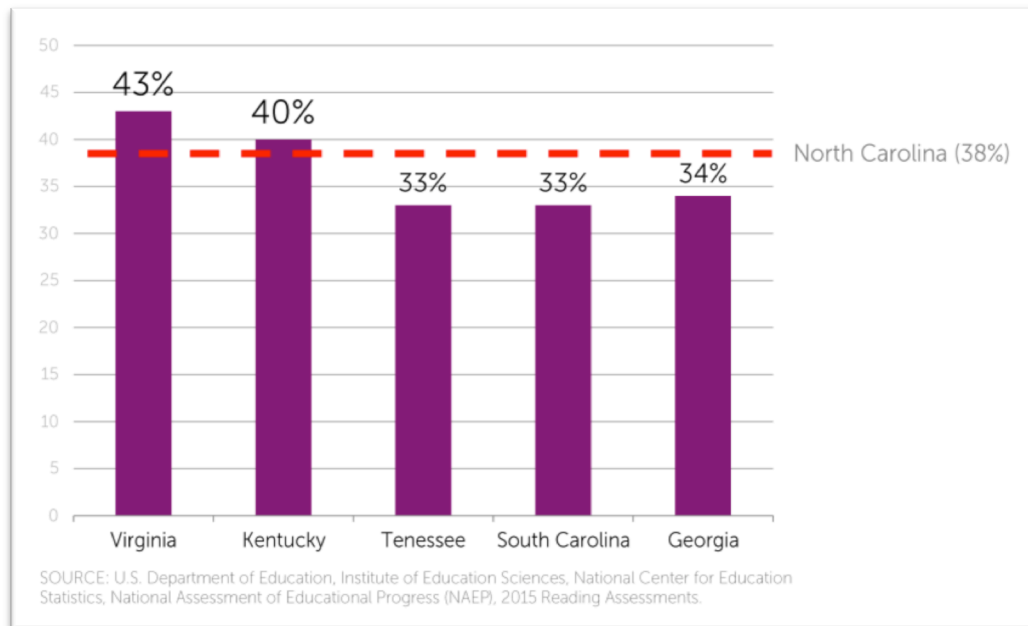
- A history of valuing both education and collaboration.
- Abecedarian Study, More at 4, TEACH WAGES
- Best and brightest minds and research
- Broad access to early education.
- Building a high-quality Pre-K program on a public-private foundation and the interest and ability of diverse organizations and funding streams to come together to support children.
- Commitment to quality care for the most at-risk children.
- Commitment to quality preschool experiences.
- Communities engaged around early childhood care and education.
- Community Care of North Carolina and ABCD (Assuring Better Child Health & Development and Reach Out & Read).
- Continued innovation and collaboration, even in times when funding isn't as readily available
- Data-driven early childhood policy strategies.
- Development and dissemination of NC Foundation for Early Learning and Development and Ready for School, Ready for Life in Guilford County.
- First state to move to full-day kindergarten.
- I am proud of the positive change brought about by the NC Partnership for Children and that each community is recognized as the expert for that particular community’s citizens.
- Improvement in number of daycares meeting level 4 and 5.
- Improvements in quality early childhood education programs, including support for child care programs and providers and NC Pre-K.
- K-3 Formative Assessment Process, incorporating KEA

- Making great strides to increase professionalism of child care providers
- Movement toward understanding developmental science.
- National leader in creation of Smart Start. More than 1/3 of survey respondents said Smart Start!
- NC has been an education leader in our nation. Our current investment in home visiting services is encouraging, but we have many more opportunities to make our children a priority in our state.
- NC has been strategic and effective in continuously improving the quality of ECE systems, services and supports on behalf of young children and their families.
- NC Pre-K one of only four states to meet NIEER's quality benchmarks, NC Pre-K's EESLPD framework to support effective teaching practices through the BK licensure process; RttT ELC grant to further system developments, address gaps and links to K-3 (KEA assessment)
- NC QRIS is a national model.
- North Carolina is a national leader and role model for other states in the field of early childhood development. The recent legislative focus and support around literacy and formative assessments in grades K-3 will improve student achievement.
- North Carolina's early childhood has consistently been ranked near the top of the nation in terms of quality.
- Offering full-day kindergarten and the star-rating system.
- One of the best Pre-K programs in the nation - now we need to grow it so more families can access it
- Our high standards and being a leader in the field.
- Our strong network of community-based Smart Start agencies to focus comprehensively on young children and their families; QRIS and Rated License early adopter; NC Prek - let's make it universal!
- Race to the Top grant.
- Recognition that mental health care is needed to ensure healthy development (including educational success).
- Reduction of child mortality rate; (historic) national rankings for early childhood education.
- Research-based, statewide, significant public dollar investment, quality of staff & volunteers.
- Star rating emphasis has significantly increased the quality of care for a broad range of our kids.
- State Pre-K program (in its original form as More At Four); QRIS
- The diverse and collaborative network of advocates working together to insure all children 0-8 have access to the support needed to be successfully reading by the end of grade 3.
- The educational attainments of our workforce.
- The focus on quality.
- The focus on supporting and improving the early learning workforce.
- The NC Pre-K Program has been in existence for 15 years now and has continued to maintain a consistently good level of quality and outcomes for children.
- The persistent drive to create a network of supports and linked efforts to create a web of support for early educators, families and their young children and our state.
- The reach and access - there is still a long way to go but NC is ahead of many states.
- Work connected with the ACEs (Adverse Childhood Experiences) study.

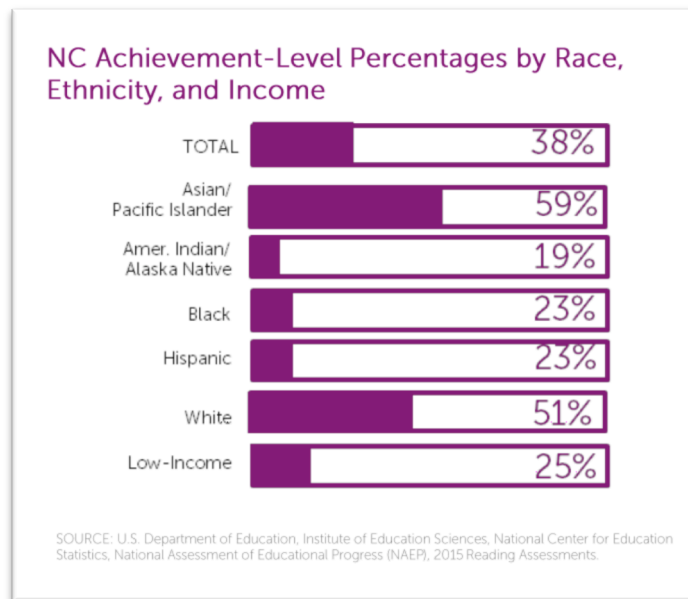
### **Where are we now?**

Only 38 percent of North Carolina fourth graders and 25 percent of those from economically disadvantaged families scored at or above reading proficiency on the National Assessment of Educational Progress (NAEP) in 2015.

*How do we compare to our neighbors?*



*Where are the gaps?*



There was discussion at the meeting about the decision to use “at or above proficiency” instead of “at or above basic.” We will present this question to the Literacy Development Data Action Team.

This presentation is online at [http://buildthefoundation.org/wp-content/uploads/2015/11/2014\\_Laila-Bell-ECF-Stakeholder-Summit.pdf](http://buildthefoundation.org/wp-content/uploads/2015/11/2014_Laila-Bell-ECF-Stakeholder-Summit.pdf).

### **Why birth through eight?**

Dr. Kathleen (Kate) Gallagher, a scientist at Frank Porter Graham Child Development Institute at UNC Chapel Hill and Clinical Associate Professor in the School of Education, provided a keynote address.

She emphasized that literacy:

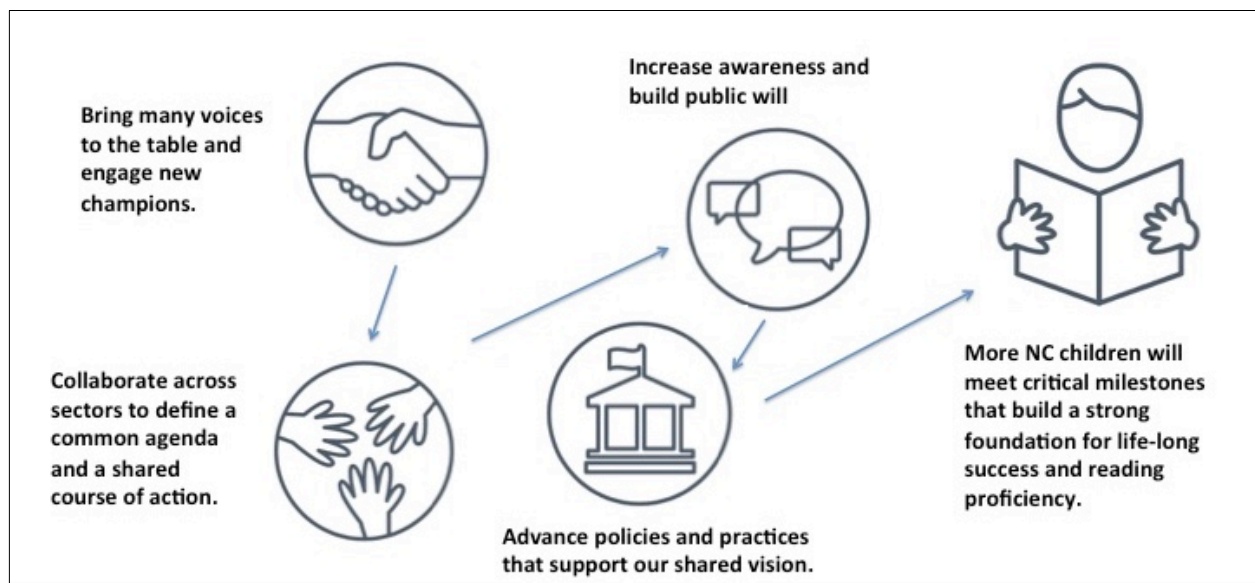
- Begins at birth,
- Is a manifestation of healthy development, and
- Is supported by rapid brain development.

She described what a “reader” looked like at different ages and discussed what children and families need to build a strong foundation for learning – health care and nutrition, safety, healthy relationships and high quality programs.

*This presentation is available online at [http://buildthefoundation.org/wp-content/uploads/2015/11/NCECF\\_disseminate.pptx.pdf](http://buildthefoundation.org/wp-content/uploads/2015/11/NCECF_disseminate.pptx.pdf).*

### **Where are we going?**

The underlying theory of change is illustrated below.



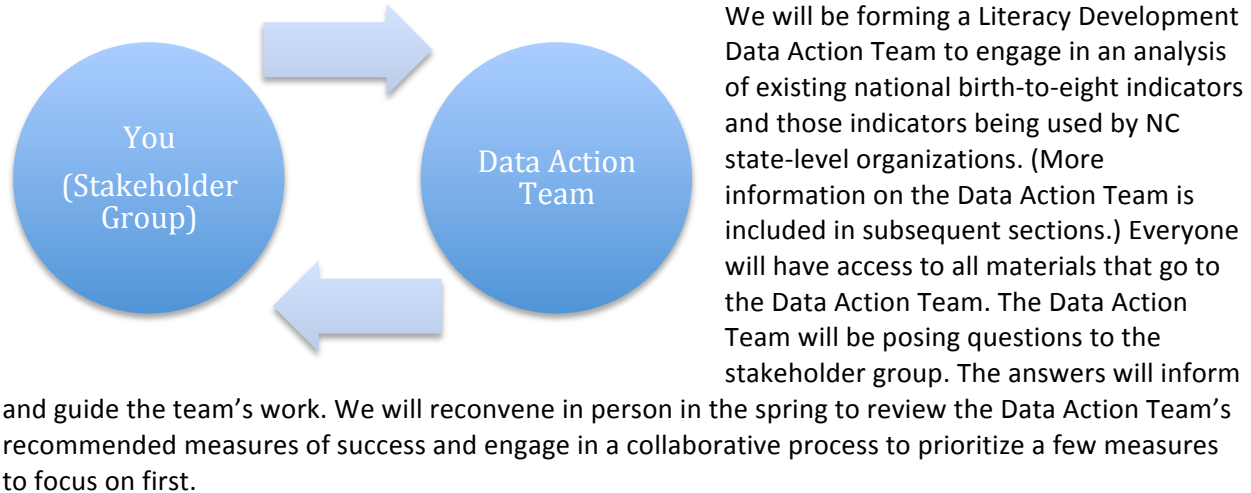
While the picture is linear, many of these things happen simultaneously. Furthermore, several organizations are engaged in different aspects of these strategies. The work before us is to figure out how to align efforts more broadly – across the domains that support literacy development (health, family, quality learning environments) - so that they have even greater impact.

Driving our role in this effort is the foundational belief that together we can realize greater outcomes for young children than any of us can produce on our own. Our first step is to define North Carolina’s Pathways to Grade-Level Reading.

- What are the whole-child, birth-to-eight measures of success that put children on a pathway to grade-level reading?

- What measures should NC prioritize based on our strengths and challenges?
- What measures might we align strategies around to drive greater progress?

*It's a feedback loop.*



*Then what?*

We are in this for the long haul. Once the priorities are identified, we hope that you will lead and participate in action teams for each one. Our role is to be the facilitator – to support the process that allows this work to happen. Next steps include:

- Disaggregating the data for each priority measure of success.
- Understanding the needs of those who shape children's early environments.
- Identifying immediate ways to support alignment and progress on the measures of success.
- Developing a results-based action plan.
- Promoting best practice and policy to advance the measures of success.
- Measuring progress.

*This presentation is available online at <http://buildthefoundation.org/wp-content/uploads/2015/11/Nov-13-PPT-FINAL.pdf>.*

### **What does success look like?**

Attendees worked at their tables to consider this question: Imagine it's 2025 and we've made significant progress in each of the goal areas:

- Health and development on track, starting at birth;
- Supported and supportive families and communities;
- High quality early care and education;
- Effective teaching and learning in K-3 classrooms

What did we accomplish for children birth-through-8 and their families?

Below we list outcomes that emerged for each goal. We intentionally limited the list to outcomes. Responses that spoke more to strategy will be used to inform future work. We framed outcomes as aspirational and led each with "all children." And, we combined recommendations that were similar.

These outcomes will inform the work of the Data Action Team -- conducting a landscape survey of existing national birth-to-eight indicators and those indicators being used by NC state-level

organizations. The goal of the review will be to select a limited number of measures of success that best suit NC's context based on our state's strengths and needs.

All babies are born at a healthy gestational age and birth weight.	Health
All children have a medical home.	Health
All children are immunized.	Health
All children are in a healthy weight range.	Health
All children are on track developmentally.	Health
All children have a dental home.	Health
All children have access to early intervention as needed.	Health
All children have access to health care, including mental health care.	Health
All children have good oral health.	Health
All children have regular well-child visits.	Health
All children with chronic health conditions have access to needed services to control their conditions.	Health
All adults of child-bearing age have access to contraception.	Health
All family members have access to healthy foods.	Health
All infants, toddlers, and children have access to screening and services for mental health and developmental disabilities/delays.	Health
All mothers have the supports available to breastfeed if desired.	Health
All parents have access to needed health, substance use disorder, and domestic violence services.	Health
All children have safe, stable, nurturing relationships with families/parents/caregivers and other adults.	Family
All children have toxic-free products and environments.	Family
All communities are safe and prioritize children.	Family
All families are food secure.	Family
All families are resilient and have the necessary knowledge, skills and resources to support children's healthy development.	Family
All families earn a living wage.	Family
All families have access to home visiting, family support and parenting education programs.	Family
All families have access to paid sick, maternity and paternity leave.	Family
All families have access to stable, safe, affordable housing and transportation.	Family
All children are prepared to succeed in school.	Early Ed
All children have access to affordable, high quality early education beginning at birth.	Early Ed
All children attend school regularly.	Early Ed/K-3
All children attend schools that are culturally competent and responsive.	Early Ed/K-3

All children attend schools that are prepared to meet the needs of each child.	Early Ed/K-3
All children attend schools that are safe.	Early Ed/K-3
All children attend trauma-informed schools.	Early Ed/K-3
All children benefit from an aligned birth-to-eight system.	Early Ed/K-3
All children have access to literacy rich environments.	Early Ed/K-3
All children have access to safe opportunities for play and physical activity.	Early Ed/K-3
All children have effective transitions.	Early Ed/K-3
All children have high quality teachers.	Early Ed/K-3
All children have teachers that use developmentally appropriate practices.	Early Ed/K-3
All children receive needed comprehensive/whole child interventions to support their learning.	Early Ed/K-3
All families are actively engaged in their children's learning.	Early Ed/K-3
All teachers are well compensated and supported.	Early Ed/K-3
All children attend schools with strong, effective leaders.	K-3
All children have access to extended learning opportunities to meet their individualized needs.	K-3
All children have access to high quality, high performing schools.	K-3
All children have access to needed support staff (school nurses, counselors, etc).	K-3
All children have ongoing developmentally appropriate, whole child assessments.	K-3

*Appendix B includes all responses verbatim.*

### **Guiding Principles for the Work**

The next exercise focused on identifying principles to guide our collective work. As a starting point, we shared three principles identified by the NC Early Childhood Foundation, NC Child, The North Carolina Partnership for Children, Inc., and excellenCe (BEST NC).

- We will be data- and research-driven.
- We are committed to acknowledging and eliminating systemic inequities and racial, ethnic and socioeconomic disparities in early childhood experiences, opportunities and outcomes.
- We will focus on the whole child in the context of his or her family and community.

These principles have been revised and expanded based on the input from the meeting.

- We will be data- and research-driven, and informed by developmental science.
- We are committed to acknowledging and eliminating systemic inequities and racial, ethnic, socioeconomic, and ability disparities in early childhood experiences, opportunities and outcomes.
- We will focus on the whole child, birth through age eight, in the context of his or her family and community, using a multi-dimensional systems lens.
- We will be transparent, collaborative and accountable to one another.



- We will be informed by and hold ourselves accountable to families and communities.
- We will have a strengths-based approach, highlighting protective factors and preventative solutions and be guided by compassion.
- We will work to ensure that each child has the opportunity to fulfill his or her potential.
- We will prioritize solutions that are actionable and sustainable, and we will have high expectations of what is achievable.
- We will be results-oriented, embracing innovation and seeing change as opportunity.

*Appendix C includes all responses verbatim.*

### **Data Action Team**

The role of the Data Action Team is to identify and recommend – in collaboration with the stakeholder group - a set of population-level measures of success that impact third grade reading success. These measures will be whole-child, begin at birth, and align with the goals in Lisbeth Schorr's *Pathway to Children Ready for School and Succeeding at Third Grade*.

The Data Action Team will engage in a landscape survey of existing national birth-to-eight indicators, indicators being used by NC state-level organizations and the recommended outcomes from the stakeholder group (shared in the previous section). The goal of the review will be to select a limited number of measures of success that best suit NC's context based on our state's strengths and needs.

The stakeholder group will be kept abreast of the Data Action Team's work, and their feedback will be solicited on a regular basis as the Data Action Team moves through the process of selecting the measures of success.

Attendees reviewed and edited a draft job description describing the work and qualifications of members of the Data Action Team. *The revised Data Action Team job description is included as Appendix D.*

The original draft of the job description is available online at [http://buildthefoundation.org/wp-content/uploads/2015/11/CopyofNCELDDDataActionTeamDescription\\_11\\_3.pdf](http://buildthefoundation.org/wp-content/uploads/2015/11/CopyofNCELDDDataActionTeamDescription_11_3.pdf).

Attendees also were asked to recommend people and organizations to serve on the Data Action Team. Recommendations included representatives from sectors outlined in the table below. The Data Action Team will not be large enough to include all of the recommendations below. However, we will work to invite people from the groups identified to participate in the stakeholder group and help move the work forward.

<b>Education</b>	<b>Health</b>	<b>Data</b>	<b>Diversity</b>	<b>Other</b>
<ul style="list-style-type: none"> <li>• Dropout prevention experts</li> <li>• Testing experts</li> <li>• Elementary school leadership</li> <li>• K-12 educators</li> <li>• School Board</li> </ul>	<ul style="list-style-type: none"> <li>• Primary care physicians</li> <li>• Obstetricians</li> <li>• Early intervention professionals</li> <li>• Public health officials</li> <li>• Mental health</li> </ul>	<ul style="list-style-type: none"> <li>• Statisticians</li> <li>• Applied analytics experts</li> <li>• Early childhood evaluators</li> <li>• Health data liaisons-professionals</li> <li>• IT professionals</li> <li>• Researchers and/or</li> </ul>	<ul style="list-style-type: none"> <li>• Historically black colleges/universities staff</li> <li>• Homeless advocates</li> <li>• Migrant population advocates</li> </ul>	<ul style="list-style-type: none"> <li>• Local boards and county commissioners</li> <li>• Business leaders</li> <li>• Legislative research</li> </ul>

<ul style="list-style-type: none"> <li>members</li> <li>• ESL teachers</li> <li>• Public education experts</li> <li>• Teacher prep professionals</li> <li>• Teachers</li> <li>• Family childcare providers</li> </ul>	<ul style="list-style-type: none"> <li>professionals</li> <li>• County Dept. of Health and Human Services staff</li> </ul>	<ul style="list-style-type: none"> <li>data industry professionals with expertise in data collection, analysis, integration</li> <li>• ROI/case for investment experts who can connect data/outcomes to investments</li> </ul>	<ul style="list-style-type: none"> <li>• Tribal installations</li> <li>• People of color</li> <li>• NAACP</li> <li>• Rural representation</li> <li>• Statewide representation with emphasis on counties with less resources</li> </ul>	<ul style="list-style-type: none"> <li>staff with expertise in human services</li> <li>• Fiscal policy expert</li> <li>• Criminal Justice Centers</li> <li>• Journalists</li> <li>• Marketers</li> <li>• Six Sigma Certified</li> <li>• Project-Management Professionals</li> <li>• Parents/family member</li> <li>• Faith-based community organizations</li> <li>• Clergy</li> </ul>
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**How do you imagine having these common measures of success could add value to your work?**

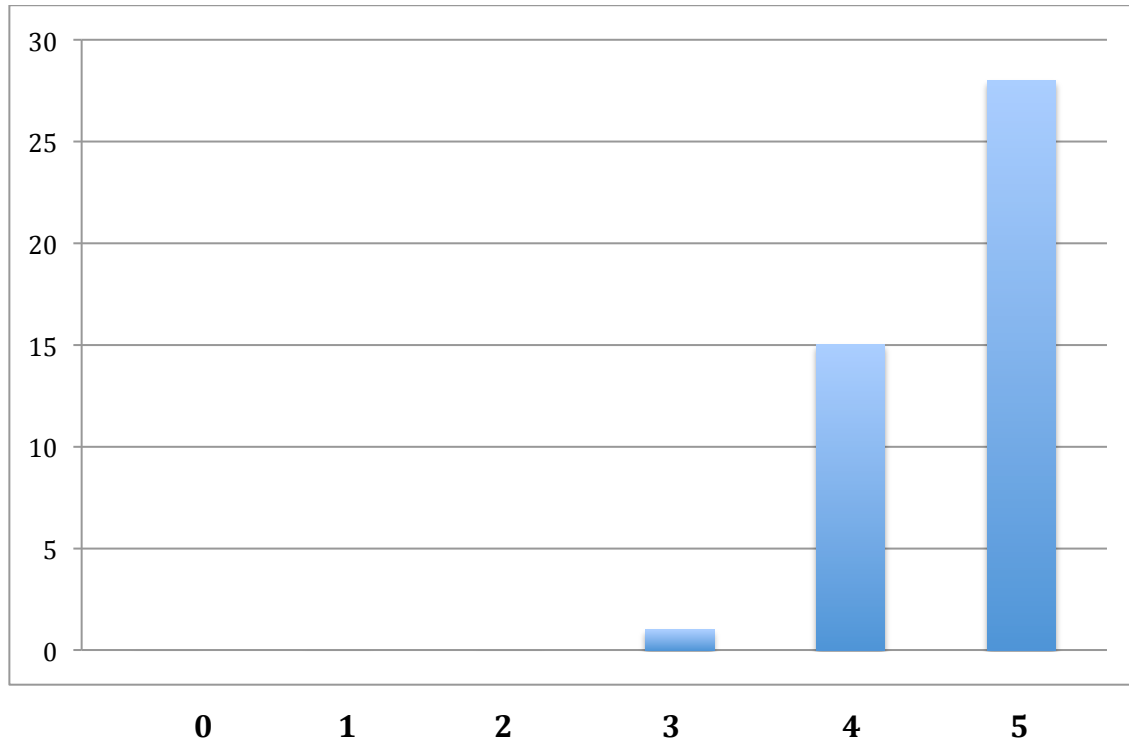
Attendees interviewed one another to answer this question. The following key themes emerged.

- Provide focus.
- Allow for more effective advocacy.
- Guide program development.
- Increase access to services.
- Demonstrate value of early childhood development.
- Reinforce that literacy is complex and requires whole-child focus.

*Appendix E includes verbatim responses.*

## **Evaluation**

Please rank today's experience from 0-5, with "0" being "not worth my time" to "5" being "well worth my time."



### **What were the most helpful aspects of the session to you?**

- Networking/getting perspective from others/collaborating:
- Presenters. Kate and Laila
- Presenting framework, goals
- Facilitation/running on time
- Small group discussions
- Data Action Team section
- Opportunity for input from attendees
- Guiding principles

### **What suggestions do you have to improve the process used today or the facilitation?**

- Break up groups more/more discussion across groups
- Larger facility
- "Successes" activity long, unsupported by data

**What is the most important thing that must happen for this work to provide value to you and /or your organization?**

- Actionable/realistic/real measures and a way to support them/sustainable/follow through/comprehensive state plan
- Continued communications with stakeholders/transparency/all voices heard/ask for input
- Need leadership buy-in (GA, department leaders, public)

## Appendix A

The following people attended the event on November 13<sup>th</sup>.

Mandy Ableidinger  
Independent Consultant

Pattie Allen  
Downeast Partnership for Children

Jessica Aylor  
Triangle Community Foundation

Anita Barker  
United Way of North Carolina

Laila Bell  
NC Child

Colleen Bridger  
Orange County Health Department

JB Buxton  
Education Innovations Group

Morgan Camu  
Independent Consultant

Anna Carter  
Child Care Services Association

Karla Casteen  
NC Department of Public  
Instruction

Diane Cherry  
Institute of Emerging Issues

Carolyn Cobb  
Early Learning Challenge Grant

John Coggin  
PNC

Veronica Creech  
First Book

Steven Day  
UNC School of Social Work

Deborah Day  
NC Division of Social Services

Cathy Dobbins  
UNC-TV

Marian Earls  
Community Care of North Carolina  
NC Early Childhood Foundation  
Board

Matt Ellinwood  
North Carolina Justice Center

Stephanie Fanjul  
Expert

Lisa Finaldi  
NC Early Childhood Foundation

Kathleen Gallagher  
FPG Child Development Institute

Khari Garvin  
NC Head Start-State Collaboration  
Office

Susan Gates  
SAS

Patti Gillenwater  
Elinvar  
NC Early Childhood Foundation  
Board

Heather Graham  
Education First  
NC Early Childhood Foundation  
Board

Jenny Grant  
PNC

Carrie Gray  
Wells Fargo

Matt Gross  
The North Carolina Partnership for  
Children, Inc.

Elizabeth Grovenstein  
The Hunt Institute

Kristen Guillory  
NC Race to the Top-Early Learning  
Challenge Grant

Kendall Hageman  
Institute of Emerging Issues

Eva Hansen  
Partnership for Children of  
Cumberland County

Pamela Hines  
UNC-TV

Sharon Hirsch  
Prevent Child Abuse NC

Elizabeth Hudgins  
NC Pediatric Society

Michelle Hughes  
NC Child

Charles Ivey  
Partnership for Children of Wayne  
County

Stephen Jackson  
NC Department of Public  
Instruction

Tara James  
BEST-NC

Jennifer Johnson  
Division of Child Development and  
Early Education

Catherine Joyner  
Division of Public Health

Kevin Kelley  
Division of Social Services

Julie Kowal  
BEST NC

Debra Lanham  
Downeast Partnership for Children

Holly Love  
Reading Connections

Laura Machlin  
UNC Department of Psychology and  
Neuroscience

Julia Mason  
NC Business Committee for  
Education

Easter Maynard  
ChildTrust Foundation  
NC Early Childhood Foundation  
Board

Kim McCombs-Thornton  
The North Carolina Partnership for  
Children, Inc.

Maureen McKeon  
Prevent Child Abuse NC

Carolyn Merrifield  
Reach Out and Read

Beth Messersmith  
MomsRising

Representative Graig Meyer  
North Carolina General Assembly

Bruce Mildwurf  
NC School Boards Association

Bill Millett  
Scope View Strategic Advantage

Deborah Nelson  
Independent Consultant

Kristin O'Connor  
Division of Social Services

Heather Pane Seifert  
Center for Child and Family Health

Ellen Peisner-Feinberg  
FPG Child Development Institute

Donna Phillips  
Wayne County Library

Karen Ponder  
Ponder Early Childhood, Inc.

Keith Poston  
Public School Forum of NC

Adam Pridemore  
North Carolina Association of  
School Administrators

John Pruette  
Department of Public Instruction

Robin Pulver  
Orange County Partnership for  
Young Children

Sarah Reives-Freeman  
NC Central University

Libby Richards  
Triangle Community Foundation

Michelle Ries  
NC Institute of Medicine

Michele Rivest  
NC Child Care Coalition

Katie Rosanbalm  
Center for Child and Family Policy,  
Duke University

Nina Sazer O'Donnell  
NSO ASSOCIATES

Harold Sellars  
NC Early Childhood Foundation  
Board

Barbara Sill  
NC Infant Mental Health  
Association

Janet Singerman  
Child Care Resources Inc.

Adam Sotak  
NC Child

Terry Stoops  
John Locke Foundation

Senator Terry VanDuyn  
NC General Assembly

Lindsay Wagner  
AJ Fletcher Foundation

Cindy Watkins  
The North Carolina Partnership for  
Children, Inc.

Cindy Wheeler  
NC DHHS Division of Child  
Development & Early Education

Donna White  
The North Carolina Partnership for  
Children, Inc.

Laurie Williamson  
United Way of the Greater Triangle

Henrietta Zalkind  
Downeast Partnership for Children

Tracy Zimmerman  
NC Early Childhood Foundation

Adam Zolotar  
NC Institute of Medicine

## Appendix B

### What does success look like?

Imagine it's 2025 and we've made significant progress in each of the goal areas:

- Health and development on track, starting at birth;
- Supported and supportive families and communities;
- High quality early care and education;
- Effective teaching and learning in K-3 classrooms

What did we accomplish for children birth-through-8 and their families?

### Goal: Health and Development on Track, Starting at Birth

- Birth weight and gestational age (disparity)
- Breastfeeding - initiation and duration
- More kids on track developmentally (2)
- Earlier appropriate developmental services
- Parent mental health/substance abuse (3)
- Early childhood mental health
- Food security - healthy weight
- Parents (and preconception) need access to healthcare – contraception (2)
- Immunizations
- Oral health (decay, sealant, access, varnish, oral health literacy)
- Asthma control measure (like ED use or absenteeism)
- All children have access to excellent health and mental health care
- All primary care physicians who take care of kids are good listeners, trained/use
- Physical, mental, social health
- Who is missing today: obs; women of childbearing age; pediatricians
- Social determinants of health (broad - mental health too)
- Focus on family strengths and ability to elicit
- Build into care systematically - routinely, standard of care
- All families have access to coordinated, well funded health services with multiple points of entry
- Families have a full understanding of what health means AND knows how to enter the system
- All children have a medical home - link to many many key assessments and services (2)
- System folks are educated/aware of social determinants of health AND resources AND their own wellbeing (healthcare providers, teachers, any child care provider)
- Every child 0-5 and their parents should have a discussion about literacy and receive a book at the well child visit - Reach Out and Read
- Mental health - care is covered, on par with physical health coverage; destigmatize
- All professionals and families will understand the science of ADD/ADHD to eliminate the overdiagnosis and identify effective intervention when accurately diagnosed
- Growing the early childhood mental health workforce
- Fewer children expelled/suspended from preschool/childcare/school - understanding development
- Fewer absences from school - health related
- All children up to date on vaccines
- All children have access to dental home starting at age 1
- Recognize children are in families; providers aware and trained to ask about parent's health, background, social determinants of health
- Policies support mental health integration into primary care - including family support services; rather than carve outs; issue of payment we need to consider (possible policy work here)
- Review and integrate best practices into all levels of care (potential policies)

- Attendance at/usage of health care well child visits following guidelines from American Academy of Pediatrics
- Increasing access to early intervention
- Closing the dental gap
- Getting toxic chemicals out of kid's products
- Medicaid expansion to cover patients

#### **Goal: High Quality Early Care and Education**

- All pregnant mothers know importance of frequent positive parent-child interactions
- All early childhood educators and administrators are professionally educated and compensated (BA or BK) (5)
- All disadvantaged children have \$ access to high quality early education (afford it) \*all infants and toddlers (2)
- Universal access to quality early learning programs and pre-K (4)
- Resilient families supporting/have knowledge, skills and resources to support the children's healthy development (2)
- All low-income (high-risk) families have access to home visiting and family support programs (2)
- Literacy rich environments exist in all early education programs (and in QRIS)
- Warm, positive, supportive teacher-child interactions exist in all early education programs (and in QRIS)
- All children are ready for school (ready readers) (4)
- All schools are ready (power at K)
- All teachers are learners about their own learning and children's learning (2)
- Alignment birth - 08
- Relationship based programs (adult/children, family)
- Access (slots, transport, time/hrs.)
- Continuity of caregivers (low turnover) (2)
- Functional/formative/ongoing assessment (2)
- High quality environment indoor/outdoor (facilities, materials, etc.) (2)
- Access to community resources
- Inclusive/culturally diverse (2)
- Providers are supported in building their own self-reg skills and positive mental health

#### **Goal: Supported and Supportive Families and Communities**

- Paid family leave, sick days - preg. worker accommodations (2)
- Living wages - EITC, SNAP, WIC (2)
- Food security
- Stable, affordable housing
- Civic engagement
- Prison reform (pipeline)
- School attendance
- Transportation
- Gun policies and safe communities (2)
- ACE's screening and mitigation
- Strengthening families (protective factors)
- Safe places to play
- Libraries, museums
- Good roads
- Parents are equal, respected partners in designing systems affecting them
- Addressing needs of immigrants
- All parents have access to resources and institutions when needed - I&R system
- Leadership supports and opportunities for parents/families (2)



- All families and caregivers have access - 5 protective factors are operating in community
- Quality relationships between ECE and school teachers
- Normalizing parent support
- All citizens aware of importance of early development (2)
- All citizens aware of key role of families
- All families have affordable, safe housing
- All primary caregivers are in an excellent position to begin literacy from being linked with resources
- All families have access to high-quality child care in order to obtain employment and/or education/job training
- All families hear about the importance of early literacy from multiple sources and building blocks such as socio-emotional development
- All children have safe, nurturing relationships with families/parents/caregivers and other adults
- All families have access to parenting education, parent support groups, home visiting (not just at risk families)
- All parents have access to paid paternity/maternity leave
- All children are free of child abuse and neglect; trauma; and toxic stress (3)
- All family members have access to healthy foods (2)
- All community and political leaders understand the role of family support\* in educating children and achieving on-grade literacy. (\*physical, social, and emotional well-being)
- All families have time to spend together
- All infants, toddlers, and children have access to screening and services for mental health and developmental disabilities/delays

#### **Goal: Effective Teaching and Learning in K-3 Classrooms**

- All teachers have effective improvement/evaluation to support dev./professional dev. (2)
- All schools have strong/effective leadership (3)
- All classrooms have enough adult professionals to support learning (teachers, mental health etc.) (2)
- All children have ongoing developmentally appropriate assessment
- All children have effective transitions
- All staff are trained in trauma effects and trauma-informed practices (esp for discipline)
- All teachers use developmentally appropriate/researched based practices (2)
- All students are healthy and have dev. app. social skills
- All rising 4th graders are ready to read textbooks
- All children attend school regularly
- All children receive needed comprehensive/whole child interventions to support their learning
- All school personnel are culturally competent/responsive
- Not just a teacher BUT a READING teacher
- Access to high quality professional development
- Understanding of developmentally appropriate - curriculum of soft skills (WHOLE CHILD)
- Formative assessment that informs teaching as opposed to testing/accountability
- What defines a "Rock Star" teacher
- Support structure in the school system - ECOSYSTEM of adults
- Increased parent engagement
- Longer school year (38 weeks) - eliminates workdays but pays teachers 12 months
- All children have a WHOLE CHILD report card (includes social/emotional)
- Build in ROI as an intro and an outcome
- Reducing achievement gap for children entering kindergarten
- More \$ - private and public sector investments
- Reduce special ed. placements
- Strengthening well being of families (nontraditional methods)
- Arguments about fade out go away

- ECE is not viewed as a liberal issue
- More rigorous involvement of business
- More collaboration with media
- Workforce development begins at birth
- Further develop B-8 system - strengthen; continuum; better alignment
- Longevity of HQ teachers
- All early learning centers at 4 or 5 star
- All children have scores which puts them on a pathway to college and career success
- Have class sizes that support individualized care, attention, and high-quality instruction
- Have access to extended learning opportunities to meet their individualized needs
- All teachers are connected - to support instructional alignment
- Educators are appropriately compensated and supported
- Equitable and adequate access to school nurses and counselors
- All children have access to high quality, high performing schools
- All children have access to opp for play and physical activity (2)
- All children attend schools that are safe, engaging and effective
- Parents and teachers meet and collaborate to support students educational success
- No child in K-3 loses access to instructional time due to behavioral challenges

## **Appendix C**

### **What are our guiding principles?**

We grouped responses by themes.

#### **Simple, Actionable, Feasible, Sustainable**

- Keep it simple
- Action-able (smart goals)
- Focus on what is feasible - political, resources, speed of change
- It's sustainable

#### **Focus on child development and multi-disciplinary aspect**

- We are using third grade reading as a proxy measure and a key indicator for healthy child development and independent learners
- Use a developmental perspective

#### **Involve families and make the work understandable**

- Incorporate and be informed by family voice
- Be accountable to families
- Family-centered focus, not just child
  - Designing things around families
  - Including families in process and valuing their voice
  - Meeting people where they are - families and constituents
- Parent and provider (stakeholders) voices heard (driving the work)
- Acknowledge the role and right of parents
- Family-centered
  - Families at the table
  - Strength-based
- Communicate in plain English, avoid jargon
- Use clear, simple language. No acronyms
- Work is easily understood by all: parents, legislators, members of affected communities, educators (school boards)
- Use a bottom-up approach

#### **Be Collaborative**

- Be collaborative
- Commitment to collaborative processes
- Collaborative
  - Aligned
  - Work cross-sector vs in silos
  - Collective impact
- Integrated - one cohesive effort. Synergistic
- Use a collective impact model - believe that by working together we can achieve outcomes for kids

#### **Have diverse perspectives in the room**

- More diversity (perspective) at the table

- Engagement with diverse voices and stakeholders
- Engage all stakeholders
- Diverse stakeholder representation, including community members

#### **Include all children**

- Emphasize all children
- Recognize there are children not in childcare.

#### **Recognize importance of local knowledge and differences**

- Acknowledge value of local
- Honors flexibility for partners, communities and local schools

#### **Be accountable, transparent**

- Accountable and transparent
- Everything will be open and shared - transparent and inclusive
- Accountable - Results-oriented. The right measures are key.

#### **Strengths-based approach**

- Work from a strengths-based approach and communicate it
- High expectations for students and for what is achievable
- Protective factors are key
  - Safe, stable nurturing relationships and environments
  - Promotion and prevention mindset rather than reactive

#### **Don't fear change**

- No sacred cows
- Acknowledge the fear and don't let it paralyze progress
- Don't worry about placing blame - focus on problems
- Embrace innovation - no fear of change

#### **Educate and inform the broader public**

- Educating and informing is key to success
- Develop a variety of messages for specific audiences

#### **Systemic, trauma-informed approach**

- Approaches should be trauma-informed
- It's systemic

#### **Be compassionate**

- Elevate and be guided by compassion

## Appendix D

### NC Early Literacy Development Data Action Team Description and Scope of Work

The North Carolina Early Childhood Foundation, NC Child, The North Carolina Partnership for Children, Inc., and BEST NC are leading an effort to define whole-child, birth-through-eight measures of success that put all NC children on a pathway to grade-level reading by the end of third grade. The process is the first step in aligning state policy and action around this critical goal.

#### Measures of Success

A Data Action Team of early childhood researchers and experts will identify and recommend a set of population-level outcome measures that impact third grade reading success. These measures will be whole-child, beginning at birth, and align with the goals in Lisbeth Schorr's *Pathway to Children Ready for School and Succeeding at Third Grade*, including:

- Health and Development on Track, Starting at Birth
- Supported and Supportive Families and Communities
- High Quality Early Care and Education
- Effective Teaching and Learning in K-3 Classrooms

The Data Action Team will engage in a landscape survey of existing national birth-to-eight indicators and those indicators being used by NC state-level organizations. The goal of the review will be to select a limited number of measures of success that best suit NC's context based on our state's strengths and needs. In addition, our partner NC Child will assess data needs to help create a data development agenda for measures that we do not currently collect.

Before the Data Action Team begins meeting, a large group of multi-disciplinary stakeholders from across the state will be convened to outline results and guiding principles for the work. That stakeholder group will be kept abreast of the Data Action Team's work, and their feedback will be solicited on a regular basis as the Data Action Team moves through the process of selecting the measures of success.

Once the Data Action Team has its recommendations, NCECF, NC Child, The North Carolina Partnership for Children, Inc., and BEST NC will re-convene the larger stakeholder group of state public, business, philanthropic and nonprofit leaders for a one-day summit, during which stakeholders will engage in a collaborative process to review, prioritize and endorse the measures of success.

#### Data Action Team Member Characteristics

The Data Action Team should be a nonpartisan group of early childhood researchers and experts that will have credibility with advocates, policymakers and funders. Overarching characteristics for Action Team members include:

- A commitment to being data- and research-driven
- An ability to look at early literacy development through a multi-dimensional systems lens and an understanding of how early literacy is impacted by a child's developmental trajectory, within the context of his or her family and community.
- An understanding of the impact of adverse childhood experiences (ACEs) in child development and developing reading proficiency

- A commitment to acknowledging and eliminating systemic inequities and racial, ethnic and socioeconomic disparities in early childhood experiences, opportunities and outcomes
- An eagerness to think outside the box of what the state currently does and imagine the possibilities
- A commitment to action, and to finding a good – even if imperfect – starting place for the work.

The Data Action Team should comprise no more than 15 representatives from the following stakeholder.

*Note: early childhood refers to birth through age 8.*

- Academic researchers and data experts who deeply understand the data around children’s early development and literacy and who conceive of the work to move the needle on early literacy as a multi-dimensional, multi-systemic effort. These leaders will be asked to help the group conceptualize the connections among the many domains of child well-being and how outcomes in those areas impact early literacy, as well as think outside the box of the current data collection to what the ideal set of indicators might look like.
- Early childhood experts and advocates outside of state government who think on a systems-level, understand the multi-dimensional aspect of child development and early literacy development, know North Carolina’s early childhood history, and are eager to build on that knowledge to move the state forward. These leaders will be asked to help the group get a feel for what is possible in NC around data collection on these issues, what has been tried before, and why prior attempts at setting up new data systems or tracking new indicators were or were not successful.
- Early childhood experts inside state government agencies who understand the big picture and are committed to “getting to yes.” These leaders will be asked to help the group better understand the constraints and limitations the state struggles with and play an inside role in carrying the work forward beyond the planning phase and into implementation.
- Early childhood direct service providers who are also able to look at the work to improve early literacy through a systems lens. These leaders will be asked to share their nuts-and-bolts experience working with children and families with the group and translate that experience into relevant advice on the most appropriate indicators to track to get a full picture of what drives early literacy.
- Families with young children who will use their experiences as customers of the system to help identify gaps in data collection, suggest new data points, and contextualize existing data. These leaders will be asked to help data team members understand the challenges, inequities, and barriers facing families, the benefits they receive as customers of early childhood programs, and recommended improvements to the overall system.

### **Data Action Team Member Responsibilities**

Data Action Team members will be asked to commit to:

- At least four Data Action Team meetings and one statewide Summit between January and May;
- Reviewing materials and making recommendations between and during Data Action Team meetings; and
- Participation on Data Action Team workgroups if/as needed.

## Appendix E

### How do you imagine having these common measures of success could add value to your work?

Identifying information has been removed.

- Our community has high crime rate, low county index for health measures. Low 3rd grade proficiency - highest unemployment rate in state - these measures will give families hope & brighter future for their children.
- Grant programs to assist students read on grade level by end of Grade 3. Being able to follow specific indicators would be helpful. Some of the nonprofit they serve would benefit from information.
- Help become more focused. Collective goal that can be collaborated on together and clearly articulated. Organizationally having the link between something concrete (like 3rd grade reading levels and the importance of family support.)
- Better articulate importance & interconnectivity & value between Early years & 3rd grade reading. More successfully advocate for investments. Ultimately a higher quality employee pool.
- Gives more specification to measures around top two goals. Using data collected to bolster recommendations by task forces. Helps target efforts & future work - where to put resources next
- Is useful CDC requirement for shared measures. Builds in early work on Kindergarten shared measures/indicators for school readiness
- Guides how to approach work, how to focus efforts, communities, align work w/partners, support their work
- Child Maltreatment prevention work - can help to bring additional focus & attention  
can support a larger statewide movement to promotion position relates w/ the programs fund  
not sure on how to make these connections
- Well-Being. Not sure yet how to make that connection that is supported and sustainable
- Defining measures for which no data currently exists could be beneficial if it drives collection of data about things we really value. We're starting to understand that the first two goal areas are so foundational, but we haven't adequately measured it because it's hard. The holistic focus of this meeting helps to reiterate how complex the work is - there is no silver bullet.
- Strategic application of measures of success to move policymakers to investment
- Data driven kids count drive policy agenda legislative movement in positive direction
- Discovered that learning is not just up to the children, but only happens with teachers were learners also. That's when you get the "Rock Star" teachers.
- NC used to be the shining star of early ed., fallen a bit. Ton of potential for intentionally addressing early literacy. 3rd grade is seen as a "doomsday" an no clear early starting strategy. Developing a strategy that is tiered in levels of differentiated support that start at birth.
- When educators have access to all supplies needed, teaching & learning improves.
- Increase access to services for low income families that in turn helps kids be academically successful.
- Could help allocate resources as initiatives are implemented to improve teaching in K-3.
- Aligned to research and work already doing. Translating theory into interventions & do they work?  
Value -> access to other people who are interest in this. What is the active ingredient in the project? More than raising awareness.
- This could be the initiative that shows a state which used to lead in education is getting back on track.  
This would signal to national funders that this state is worth investing in. Create good ED PR for the state.
- Starting at birth is the root cause of success or failure & measures will find solutions for fixing broken link.  
Help prioritize types of initiatives the org. develops.
- We will be able to articulate our value to funders, corp., foundation, legislature, individual donors. We will invest in prevention as a necessity instead of a luxury
- Public librarians are really interested in citizens taking part in the democratic process. This is only possible if you can read. If families receive the support they need, it will lead to a more informed, engaged citizenry.

- If we are truly successful, families would be able to nurture their children which would substantially reduce child abuse and neglect.
- As a guide to day-to-day elementary school administration, recognize factors outside school that impact student success.
- Help inform vision - both for Pre-K and the kids coming into Pre-K and beyond. Increase collaborative efforts strength current obj. relating to sys improvement around healthy social emotional behavior, health outcomes, esp. relating to suspension/expulsion. Inform agency resp. to federal regulations .
- With a shared set of success measures, the artificial boundaries separating child-serving entities would diminish or disappear. Uncovers hidden problems in early childhood wellbeing. For example, disparities are clarified ranking relative to other states more visible.
- Interested in training work force so that sustainable practices/quality practices sustained well & get outcomes want trauma informed piece - important get education & training into community.
- Could more easily assess impact of new policies & programs with consistent, readily available indicators across the state. Easier time getting funding with authority to assess work/programs. Would have an easier time scaling up effective interventions/programs. Could more easily monitor implementation efforts by ensuring scale up cites have similar outcomes.
- Data facilitates state-wide planning/approach. Data facilitate/drive implementation
- I see our role as getting education and dialog going in community and reinforce each others' messages and increase impact.
- Opportunities to have more primary care physicians involved. Opportunity to pull in MH. Strengthen ABCD with maternal depression screening, how do you include all of health and development w/all that you do, and integrate ROR.
- Common strategy & vision for their organization (working across local statewide agencies). Across their organizations to other organizations alignment around a vision, acknowledge role they play with others.
- What's effective & What's not. Assists w/ gaining resources. Promotes collaboration. Helps to tell the "stories" better - stronger messaging for specific audiences. Strengthens the opportunity to highlight local
- Understanding the needs of the region her foundation serves to better inform donors. Have a shared vision/plan of action with other funders to jointly fund priorities of shared interest.
- Help with planning, evaluation, collaborating, aligning with community & statewide agencies, fund development plans & strategies, and communication plans and strategies. Communicate thru media to gain stability - if no progress than change your strategies.
- The more metrics that are available to backup/support the policy arguments, the better.
- Having data to illustrate and support early learning policy will help with advocating.
- More informed and engaged work force & client-base. More business support early childhood as a core philanthropic focus.
- Measures would help every child succeed. Kids coming in behind are at risk for themselves failing, also entire community at-risk for failing.
- These measures of success could drive the agenda and action items coming out of the 2017 Forum.
- Universal, high quality early education will ultimately provide our society with economic success and political stability
- Test the indicators How parents/teachers/policy makers, business to see if they are understandable and move people to action and investment in change the K-3 environment.
- The data needs to support practice changes. Use stories for people who don't like numbers.