Discussion Draft for September ELC Meeting

Goals, Objectives and Strategies Component of the Early Learning Council Strategic Plan

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ELC Engagement Approach to Develop the Plan

The Early Learning Council embarked on a strategic planning process to advance the development of Oregon's early learning system for children ages prenatal to five and their families. The plan represents what the Council considers the most strategic for making progress over the next five years (2019-2024) toward the vision embodied by these three system goals: (1) Children are raised in healthy, stable & attached families; (2) Children arrive ready for kindergarten; and (3) the Early Learning System is aligned, coordinated, and family-centered. The early learning system incorporates the coordination and alignment across key sectors, including Early Care and Education, Health, K-12, Human Services, Housing, and Community Services.

The Early Learning Council committed to a series of meetings and engagement sessions from January to September 2018 to host stakeholders from each of the key sectors. Using the Equity Lens and the Council's guiding principles, each sector meeting was constructed to maximize the number of perspectives included in the information-gathering stage of the strategic planning process. Invitations were sent to partners and providers representing children and families furthest from opportunity with a focus on engaging diverse voices throughout the state. While not all partners were able to participate in meetings, their input continued to be solicited throughout this process as the Council created strategies that promote equity throughout the strategic plan.

A summary of the meetings and engagement sessions includes:

- Six Early Learning Council meetings that included presentations from state agency and division leadership, program administrators, Early Learning Hubs and other regional entities, providers, and families from the following sectors: Human Services, Early Care and Education, K-12, Health, Public Health, Housing, and Community Supports.
- Two additional parent engagement sessions held at the Oregon Head Start Association conference and at the Washington Early Learning Hub.
- 16 sessions held with each of the Early Learning Hub Governance Boards across the state.
- All four committees of the Early Learning Council provided input: Best Beginnings, Equity Implementation, Child Care and Education, and Measuring Success.

Overall, more than 100 people provided input during these engagement sessions. Council members engaged with stakeholders, asked questions, and listened for:

- Parents and providers experiences with services during the early childhood years;
- Each sector's key goals and priorities for children prenatal to five and their families;
- Strengths and barriers for reaching those goals and priorities; and
- Opportunities for shared interests and work across sectors related to the three systems goals.

Early Learning Council members also listened for what would be most strategic for the next five years in order to advance an early learning system that has the capacity to support the development and well-being of children prenatal to age five nested in their families and communities across Oregon.

During stakeholder sessions Council members debriefed what they learned and captured their ideas regarding what could be the most strategic in advancing the Oregon early learning system. These initial

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debriefs were through Council discussion and were then organized into themes. The following list summarizes the themes:

1. Access to Early Care and Education
2. Affordability of Early Care and Education
3. Building a Systems Approach
4. Child Development Outcomes
5. Community Context
6. Connecting with Business
7. Cultural Responsiveness & Equity
8. Data
9. Family-Centered Systems
10. Financing & Leveraging Resources
11. Geographic Specific Needs
12. Inclusion
13. Quality of Settings
14. Role of Early Learning Council
15. Standards/Regulations Alignment
16. State-Community Connections
17. Supply of Early Care and Education Settings
18. Supporting Families
19. Trauma-Informed Care
20. Workforce

Cross cutting issues that were identified to be addressed across and throughout the strategic plan include: equity and address geographic context/specific needs across Oregon. To start the process of developing a strategic plan, the themes developed by the Early Learning Council were reviewed and organized by the three system goals. Some themes have content that fell into more than one goal.

Children arrive ready for kindergarten	Children are raised in healthy, stable & attached families	The Early Learning System is aligned, coordinated, and family-centered
Equity and Cultural Responsiveness	Equity and Cultural Responsiveness	Equity and Cultural Responsiveness
Geographic Specific Needs	Geographic Specific Needs	Geographic Specific Needs
	Family-Centered Systems	Family-Centered Systems
Workforce		Workforce
	Trauma-Informed Care	Trauma-Informed Care
Access to ECE Affordability of ECE Child Development Outcomes Inclusion Quality of Settings Supply of ECE Settings	Community Context Supporting Families	Building a Systems Approach Connecting with Business Data Financing & Leveraging Resources Role of Early Learning Council Standards/Regulations Alignment State-Community Connections

To develop the strategic plan for each of the system goals, the Council's themes along with information submitted by state agencies, regional entities, providers, and parents were reviewed to determine how to transition the content into specific objectives and strategies.

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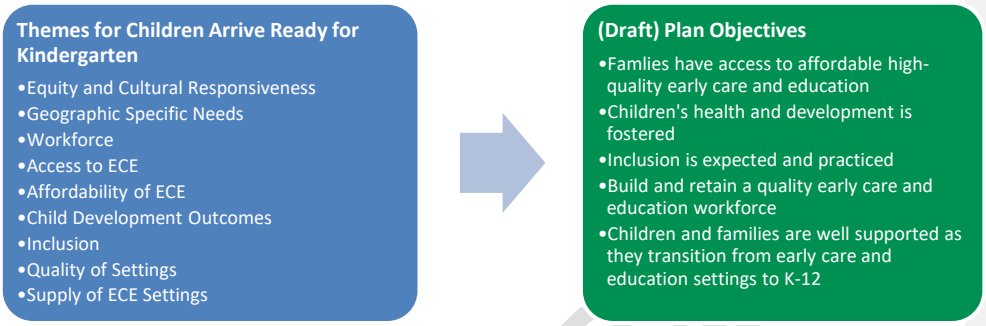
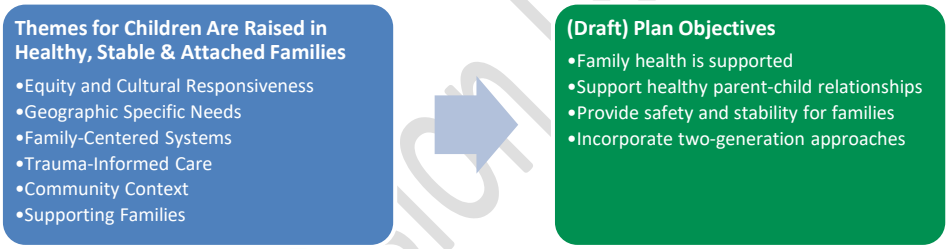
The following charts demonstrate how the themes were transitioned to objectives for the strategic plan:

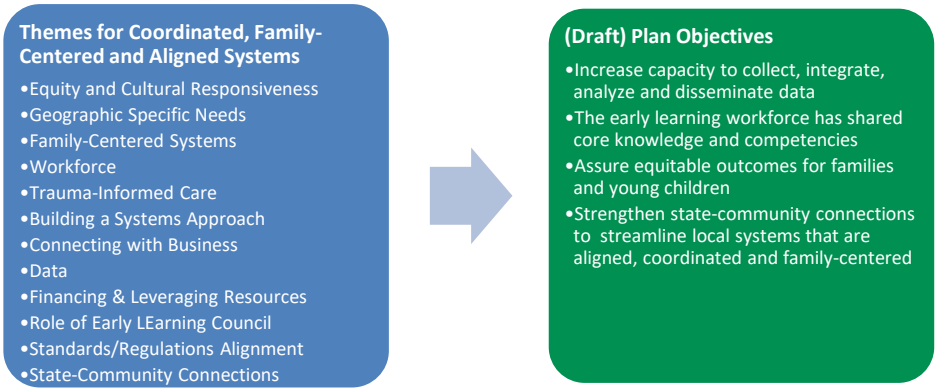
SYSTEM GOAL 1: Children arrive ready for kindergarten



SYSTEM GOAL 2: Children are raised in healthy, stable and attached families



SYSTEM GOAL 3: The Early Learning System is aligned, coordinated and family-centered.



Placeholder for input received September-November during the drafting of the strategic plan will be summarized here.

Note: The 👶 is used to denote strategies that are specific to infants and toddlers. Strategies are designed to benefit infants, toddlers and preschoolers in general.

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SYSTEM GOAL 1: CHILDREN ARRIVE READY FOR KINDERGARTEN

Objective 1: Families have access to affordable high-quality early care and education

Children who attend high-quality early care and education (ECE), i.e., infant toddler care and preschool, are more likely to enter kindergarten ready to succeed and to thrive through their school career and into adulthood. This is especially true for children furthest from opportunity, who tend to participate in ECE programs less often than their peers. Achieving a supply of accessible, high-quality ECE takes sound policy, resources, and the engagement of families. Oregon has made a number of improvements and investments in this system. However, in order to ensure that more children benefit from participation in high-quality ECE, we must first ensure the early learning system includes a strong foundation (i.e., child care licensing), supports and finances programs to progress toward higher quality practices, and ensures communities have resources to scale in a way that supports the different needs of families and children.

Commented [1]: Create a complementary data box here.

Strategy 1. Ensure children are healthy and safe in child care.

- Improve child care licensing standards and support to implement standards, including risk-assessed rules, strengthening technical assistance and monitoring.
- Coordinate investigations into serious violations in child care at the state and local level.
- Identify and address gaps in current licensing authority, including who is subject to licensing.

Strategy 2. Build the supply of ECE programs.

- Improve the state's licensing program and Spark to support pathways to licensure for informal settings and new programs, including business education.
- Significantly increase the number of programs, across ECE settings, that are highly rated in Spark, serve infants, toddlers and preschoolers, and children the furthest from opportunity.
- Use Early Learning Hubs to create community capacity to assess existing supply and expand supply that meets the community's linguistic and cultural context by using housing, K-12, and human services programs and public-private partnerships to improve and provide new ECE facilities.
- Enable integration of Early Intervention and Early Childhood Special Education with other funding streams so that children are served in inclusive ECE settings.
- Create shared service networks within communities to better scale infant and toddler care.

Strategy 3. Increase access to high-quality ECE.

- Create, scale and sustain a state-wide high-quality infant and toddler child care program (i.e. Baby Promise for Infant Toddler care) with a focus on children furthest from opportunity.
- Expand preschool programs (i.e. Oregon Pre-K Program, Preschool Promise, Early Childhood Special Education) to serve more children, especially those furthest from opportunity.
- Integrate quality into child care assistance (e.g., ERDC, TANF child care, and contracted child care slots) by improving payments so that they meet the cost of providing quality by highly rated Spark providers, and incentivize parents to use these quality opportunities.
- Ensure ECE programs meet the cultural, linguistic, and scheduling needs of families.
- Ensure subsidy policy results in continuity of care for infants and toddlers.

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- Secure paid family leave to ensure all babies have care in first weeks of life.
- Define quality across ECE settings (i.e. SPARK, Preschool Promise), incorporating cultural and linguistic considerations, and use these definitions in program standards and implementation.
- Ensure that resources that incorporate the cultural and linguistic needs of families are incorporated in provider recruitment and support as well as through training and technical assistance.
- Ensure that the scheduling needs of families are incorporated into all quality ECE programs (e.g. Oregon Pre-K Program, Preschool Promise, EI/ECSE, SPARK).

Strategy 4. Engage families through ECE programs.

- Ensure communities have resources to support family choice in selecting high-quality care that meets their needs.
- Provide clear expectations and supports across ECE settings to implement authentic, two-way family engagement.
- Foster partnerships between ECE programs and community organizations to offer culturally- and linguistically-relevant supports to families.

Objective 2: Children's health and development is fostered

Children rapidly grow in the first five years of life. Their development is a dynamic process that is fostered within nurturing relationships and interactions with parents and caregivers. The important skills gained during this period become the foundation for all development that follows, including physical, perceptual and motor development, social-emotional well-being, approaches to learning, and cognitive, language, and literacy development. Oregon is a leader in providing health care coverage for children. However, it is estimated that 40% of Oregon's children, birth through kindergarten entry, will face socioeconomic, physical, or relational risk factors that could compromise their healthy development, school readiness, and future academic success. In addition, 52% of children ages 6-9 in Oregon have tooth decay. Tooth decay is one of the most prevalent chronic conditions of childhood and can lead to having problems with eating, speaking, playing, and learning. In 2013, Oregon ranked last out of 50 states regarding children having at least one preventive dental visit during the year. The focus of the work for the next five years will be on improving the quality of health care, increasing access to oral health, and expanding the capacity to support young children's health and development overall.

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Strategy 1. Ensure quality health care for children prenatal to age five.

- Improve access to culturally and linguistically responsive health care by improving patient-center primary care homes for all young children, strengthening the early childhood focus of Coordinating Care Organizations, and reducing families' financial burden when using health care.
- Improve access to health care for all children in Oregon through Cover All Kids.
- Advance Oregon's Coordinated Care Model, including the integration of physical, behavioral and oral health for young children.
- Incentivize high quality and evidence-based care such as through value-based purchasing.
- Ensure that the early childhood voice is heard on CCO's governing boards through representation of Early Learning Hubs.

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Strategy 2. Increase the capacity to support young children and their families when they experience trauma or experience other social-emotional concerns.

- Increase the health system's focus on social emotional health and connection to resources for children at risk for developmental delays.
- Increase access to a spectrum of evidence-based, culturally responsive behavioral health services and providers who can serve eligible children from birth through age five (i.e. Parent Child Interaction Therapy), and ensure a focus on children whose families are affected by Substance Use Disorder.
- Provide culturally responsive mental health consultation within early care and education settings to increase their capacity to address the health and development of young children.

Strategy 3. Increase services to support early childhood oral health.

- Increase access to preventive and treatment services for young children, by ensuring oral health integration into primary care, and coordinated access to preventive and treatment services.
- Advance provider trainings such as First Tooth and Maternity Teeth for Two.
- Continued integration of oral health services in early care and education settings.

Strategy 4: Attend to health prevention and health promotion for early childhood.

- Continue to implement nutrition, physical activity, environmental health, injury prevention and safety policy and services for all children.
- Develop a shared cross-sector approach to support health consultation across ECE settings.
- Develop a shared cross-sector approach for promoting safe sleep across ECE settings, and for families.
- Develop a shared cross-sector approach to tackle environmental toxins across ECE settings.

Objective 3: Inclusion is expected and practiced

All children deserve the opportunity to develop to their full potential. For children with special needs, this means assuring accessibility, providing additional targeted supports and access to the same full range of early care and education settings as their typically developing peers. Because programs and providers often lack the training and resources to support children with special needs or who do or are perceived to have behavioral challenges, children can be excluded from early care and education settings. Research also demonstrates that earlier developmental delays are detected, the more readily they can be remediated. Building local community-based systems that ensure early learning detection and a family-friendly process of referral to the supports that best address the needs of the individual child and family is essential to achieving that end. Once children are identified, there also need for services to be available to adequately address those needs. Low levels of funding and narrow eligibility requirements mean that children either receive too little supports or are not able to access early intervention/early childhood special education services at all.

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Strategy 1. Ensure ECE settings support all children.

- Grow existing training, technical assistance and supports to early care and education programs and identify gaps in current system of professional development for providers so that they can meet the needs of all children in inclusive early care and education settings.

Strategy 2. Provide pathways from screening to services.

- Identify gaps in current community-based referral systems from screening to services and create pathways that address those gaps so that children's developmental needs are addressed and that families receive timely and useful information.

Strategy 3. Ensure adequate funding of Early Intervention/Early Childhood Special Education services.

- Increase funding so that that Early Intervention/Early Childhood Special Education services are at an adequate level to support the positive development of children with special needs as defined by the 2010 report to the Oregon Legislature.

Strategy 4. Eligibility for Early Intervention/Early Childhood Special Education.

- Review the criteria used to determine whether a child is eligible for EI/ECSE services and make and implement recommendations around the appropriate eligibility thresholds to ensure that all children needing these services are able to access them.

Strategy 5. Reduce expulsions.

- Develop state policies, guidance and technical assistance and training to reduce expulsions and suspensions, and to eliminate disparities in expulsions and suspensions, for children across ECE settings.

Objective 4: Build and retain a quality early care and education workforce

Responsive caregiver-child relationships serve as the foundation for brain development in the earliest years of life. The early care and education (ECE) workforce serve this critical role for children in child care and preschool programs, and are the single most important ingredient toward high-quality care. Yet, Oregon's early childhood educators make between $25,000 and $35,000 annually. The state has made some progress by requiring compensation parity for educators in its Preschool Promise program, but this is the only program with compensation standards for educators. In addition, we know that professional compensation is a necessary, insufficient condition: educators also need ongoing professional learning supports and positive, supportive work environments in order to implement best practice. As we seek to improve the conditions for the ECE workforce, we must ensure that we maintain and build upon the racial/ethnic and linguistic diversity of the current field and honor the often decades of work that our current educators have contributed toward making the lives of Oregon's youngest children better.

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Strategy 1. Increase understanding of the importance of ECE educators.

- Articulate a statewide vision for a linguistic and culturally diverse ECE workforce in partnership with early childhood educators.
- In collaboration with Early Learning Hubs and other partners, create understanding of the role and impact of early childhood educators among policymakers and the public.

Strategy 2. Improve professional learning opportunities for the ECE workforce.

- Implement a competency-based professional learning system that is culturally and linguistically relevant for educators.
- Ensure communities have data needed to design and evaluate effectiveness of professional learning.
- Increase the relevance and effectiveness of professional learning through job-embedded supports.
- Create better two-way communication between the full diversity of the ECE workforce and policymakers.
- Create competencies and professional learning opportunities that speak to the unique role of infant and toddler educators.

Strategy 3. Build pathways to credentials and degrees.

- Partner with higher education institutions to ensure degree programs meet the needs of the current workforce, equitably addressing cultural, language and learning needs, and curriculum addresses the P-5 continuum.
- Improve connectedness between credentials, trainings, and degrees.
- Build upon existing scholarship programs to support more educators to attain AA and BA degrees in early childhood.
- Expand opportunities for ECE preparation in high school that can be leveraged in higher education.

Strategy 4. Compensate early childhood educators as professionals.

- Create educator compensation mandates to align with kindergarten educator compensation across all publicly-funded ECE programs (i.e. Oregon Pre-K Program, Preschool Promise, ERDC child care, TANF child care, contracted slots, SPARK).
- Fund and implement educator compensation mandates.

Strategy 5. Improve ECE professional supports.

- Create competencies and professional learning supports for program leadership.
- Ensure ECE program standards address program structures associated with better retention and quality of a culturally and linguistically diverse workforce.
- Collect and use data to improve professional supports (e.g., paid planning time, paid professional development time, compensation, benefits).

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Objective 5: Children and families are well supported as they transition from early care and education settings into K-12 systems

Supporting successful transitions from early care and education (ECE) into K-12 systems is critical for ensuring that all children, particularly children furthest from opportunity, are able to enter kindergarten ready to succeed and experience a strong start in school. Oregon has made meaningful strides to support kindergarten transitions over last several years, particularly in relation to the implementation of summertime transition camps and parenting education programs. However, there remains significant work to be done to strengthen and align local practices related to culturally responsive, developmentally appropriate practices in settings in which child learn and grow. The Oregon Kindergarten Assessment continues to be an under-utilized resource for helping policymakers and local early learning and K-12 practitioners gain a deeper understanding of the types of experiences that children have before they arrive at school. Kindergarten transitions, which related to both specific programs and the prenatal-grade 3 systems as a whole, continue to be treated as discrete programs, rather than a holistic set of practices that support seamless alignment between early learning and K-3 for children, families, and professionals. Furthermore, when Oregon rolled out funding for full day kindergarten in 2015, the State provided limited guidance or support to school districts on how to effectively scale up effective practices for full day kindergarten classrooms.

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Strategy 1: Establish shared professional culture between ECE and K-3.

- Implement P-3 Professional Learning Teams (PLT's), consisting of both early learning and K-3 educators, with participation in shared statewide and regional professional development activities on the part of both early learning and K-3 educators, including elementary school principals and ECE directors.
- Support school districts to align curriculum, instructional and assessment practices across the P-3 continuum with a focus on developmentally appropriate and culturally responsive practice.

Strategy 2: Scale and expand effective P-3 practice for supporting children's social-emotional learning (SEL).

- Scale and expand the work of Early Learning Hubs and local communities through the Early Learning Kindergarten Readiness Partnership & Innovation program (KPI) and local funding sources, to supporting SEL across the P-3 continuum.

Strategy 3: Build capacity to engage families as key partners in children's learning and development.

- Develop a P-12 family engagement policy framework and implementation strategy, which will highlight promising practices, identify opportunities for training and provide targeted technical assistance to support local communities—through Early Learning Hubs, providers of early learning services, school districts, and elementary schools-- to deepen and improve their practice in relation to systemic and culturally responsive family engagement.
- Leverage ODE's Division 22 Assurance of Compliance to ensure that effective, culturally responsive family engagement practices are taking place at the local level.

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Strategy 4: Provide guidance and support to school districts on effective practices for full day kindergarten.

- Through collaboration between ELD and ODE, work directly with school districts to provide on-the-ground coaching and technical supports to strengthen developmentally appropriate and culturally responsive practices in full-day kindergarten classrooms.

Strategy 5: Improve processes and supports for the Oregon Kindergarten Assessment (KA).

- Update the KA to include culturally appropriate and language/literacy measures for children whose home language is not English and who are dual language learner, starting with Spanish.
- Improve the communications and data analysis/interpretation tools for the KA that are provided to the field, as the current tools are insufficient to fully support regional and local decision-making informed by KA data.
- Through ODE's Assessment Unit, provide sufficient support to school districts to ensure that the assessment is administered properly and in ways that are developmentally appropriate, and that policymakers, Early Learning Hubs, providers of early learning services, school districts, and elementary schools have access to timely, accessible, and actionable KA data.

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SYSTEM GOAL 2: CHILDREN ARE RAISED IN HEALTHY, STABLE AND ATTACHED FAMILIES

Objective 1: Family health is supported

Children's healthy development depends to a large extent on the health and well-being of their parents and caregivers. Oregon has had recent successes in improving access to preconception, reproductive and timely prenatal care services but disparities in access continue to persist. In addition, one in seven women suffer from postpartum depression, and adoptive parents have similar rates as birth parents. Optimizing parental mental health can break the transgenerational impact of maternal depression, and can help to improve social emotional development, secure attachments, and kindergarten readiness among children. There is also an increasing concern about the impacts of adverse childhood experiences (ACES). 46% of Oregon adults have experienced two or more ACES and 22% have experienced four or more. ACES are often a root cause of many social, emotional, physical and cognitive impairments in childhood, and persist into adulthood with increased rates of chronic diseases, mental illness, disability, and premature mortality. Supporting parents' health and mental health means they are able to provide nurturing relationships and the important parent-child interactions needed for children's health, growth and development, which could lead to improved outcomes, reduced health costs over time, and improved health equity. In addition, covering parents' health care helps create financial stability for the family and increases children's participation in preventative health care.

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Strategy 1: Reduce disparities in reproductive health and healthy births.

- Reduce maternal and child health mortality and disparities through the Collaboration for Improvement and Innovation Networks.
- Increase access to traditional health workers (i.e., doulas) and home visiting services.
- Address the needs of women impacted by substance use disorder, such as through integrated prenatal care and SUD treatment, as well as infants affected by neonatal abstinence syndrome.

Strategy 2: Advance family health.

- Improve access to culturally and linguistically responsive health care for parents and caregivers of young children and reduce families' financial burden of healthcare costs.
- Improve access to healthcare for everyone in Oregon (i.e., such as the example of the Reproductive Health Equity Act).
- Advance Oregon's Coordinated Care Model, including the integration of physical, behavioral and oral health.

Strategy 3. Ensure multi-generational (or "2-gen") approaches to health.

- Ensure a continuum of care for children and their caregivers when families are affected by mental health conditions and substance use disorders.
- Address the cross-generational transmission of trauma by identifying and addressing adverse childhood experiences.
- Provide supports to increase family resiliency.

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Strategy 4: Address the social determinants of health and equity.

- Build stronger partnerships across public and private sectors, aligning outcomes, and creating incentives to invest in strategies that address social determinants of health

Objective 2: Support Healthy Parent-Child Relationships

The warm, supportive relationship between a caregiver and child is the most important ingredient for positive child development, and the bond formed between parent and child during the first few months of a child's life provide its foundation. Parents want the best for their children. Parenting is challenging regardless of socio-economic circumstances, and difficulties in parenting can be exacerbated by lack of economic resources or opportunity. Economic necessity often forces parents to return to work shortly after the birth or adoption of child when critical bonds and attachments are being developed. Oregon has a strong array of community-based family supports that offer non-stigmatizing parenting and two-generational focused supports. However, their reach is too limited: Oregon currently has space in its parenting education programs to reach 3% of families and only 15% of currently eligible families have access to its evidence-based home visiting programs. Culturally-specific community-based organization have some of the strongest and most trusting relationships with parents, but often lack access to the public resources needed to fully serve their communities.

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Strategy 1: Establish an Equity Fund.

- Create an Equity Fund to support community-based cultural-specific organization to extend their reach in providing cultural-specific parenting and early learning supports in their communities.

Strategy 2: Expand parenting education.

- Expand availability and access to community-based parenting education by building off of the philanthropic investment in the Oregon Parenting Education Collaborative (OPEC).

Strategy 3: Scale home visiting.

- Expand access to Oregon's current array of evidenced-based targeted home visiting programs so that more families have access to these supports.

Strategy 4: Provide paid family leave for families.

- Provide a minimum of eighteen-weeks of Paid Family Leave to all families with a new child to support the development of bonding and attachment during this critical window.

Objective 3: Provide safety and stability for families.

Housing, food, and employment instability often creates an environment of desperation and household turmoil that adversely affects the life trajectory of our youngest children. In 2017, Oregon had the second highest rate of homelessness among people in households with children in the United States. 31% of all renter household families with children under age five spend more than half of their incomes

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on rent and are considered severely housing cost-burdened. These factors coupled with the high cost of child care are placing families in a complex, insurmountable situation that they are unable to traverse alone. Working with families to increase individualized, relational strategies, Oregon has the opportunity to address what has been increasingly compounded for families over time and put an end to this cycle of inequity.

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Strategy 1. Self-Sufficiency is incentivized.

- Create a cohesive, unified approach to disbursement of funding to vulnerable families that includes person-centered case management, wrap-around services and navigation supports to scaffold healthy, safe, and stable home environments. DHS, OHCS and ELD must work collaboratively on this approach.

Strategy 2. Strengthen early learning opportunities for children experiencing homelessness.

- Develop innovative child care networks, connected to affordable housing complexes, focused on equipping early learning providers to deliver relational, trauma informed care so children and their families can leave shelters, exit homelessness, and enter safe and healthy homes, with quality enriched early learning opportunities as their foundation.
- Prioritize housing subsidy and child care to single parents and families with children prenatally to 12 months of age that are experiencing literal homelessness.

Strategy 3. Co-locate housing and ECE.

- Facilitate the opening of high quality family child care and child care centers within affordable housing units and housing developments, through intentional facility design built to specifications that support quality child care environments and include funding for start-up costs and/or other operational incentives.

Strategy 4. Provide preventive parenting support services to reduce family engagement in the child welfare system.

- Building off of the federal Family First legislation, increase access to evidence-based early learning programs such as Relief Nurseries, Early Head Start, parenting education and home visiting programs proven to reduce abuse and neglect for families at imminent risk of entering into the child welfare system.
- Strengthen collaboration between Early Learning Hubs and DHS field offices to increase access to community supports for families at risk for entering into the child welfare system and to develop community-based child abuse and maltreatment prevention strategies.

Strategy 5. Address children with complex needs.

- Integrate a wrap-around service model with multi-disciplinary teams using a unified, collaborative, individualized plan for our youngest children identified as at-risk for removal or already removed from their home due to abuse/neglect, eligible for EI/ECSE, have a mental

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health diagnosis, or are involved in two or more systems. Systems and team members would come from but not limited to culturally specific organizations, health, mental health, child welfare, early intervention/early childhood special education, home visiting, and early care and education providers.

- Implement cross system alignment activities and joint home visits a relationship based infant toddler mental health and equity approach, connecting home visitors, mental health professionals and early learning professionals directly with the family.

Strategy 6. Blend addiction, mental health and parenting supports for families.

- Expand accessible and culturally responsive systems that support family unity while addressing parent co-occurring mental health, addiction, and positive parenting strategies.

Objective 4: Incorporate Two-Generation Approaches

Two-generational supports that focus on the needs of the children and the adults in their lives in order to build strength, resiliency and hope have proven to be important strategies for building strong families and put children on a trajectory towards success in their adult lives. Policies and practices need to be in place to ensure that services and programs primarily focused on adults, such as self-sufficiency programs like TANF, recognize the needs of the children in their lives. Similarly services and programs focused primarily on children provide connections to supports for their parents. This two-generational approach is particularly important for child assistance programs that have a direct impact both on child development and parent's ability to work. This approach also needs to guide the development of Oregon's systems for referring families to services. Families often lack a non-stigmatizing and accessible connection point to the supports that are available, and that looks at the needs of all members of the family.

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Strategy 1: Strengthen Child Care Assistance programs.

- Create a unified policy making mechanism for child care assistance programs, including ERDC, TANF child care and contracted child care assistance, to ensure that programs both meet the needs of working families by providing assistance that adequately covers the cost of quality care and provides access to a broad range of providers and provides strong developmental experiences for the children of families receiving assistance

Strategy 2: Link participation in DHS self-sufficiency programs with high quality early learning programs.

- Ensure, through a combination of referral protocols, waitlist prioritizations, and incentives (such as the Spark bonus for ERDC providers) that children of families enrolled in DHS Self-Sufficiency programs, such as TANF, have access to high-quality ECE programs, such as Early Head Start, Head Start, Preschool Promise and Spark rated program.

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Strategy 3: Create a universal family touch point.

- Build, in partnership with local communities, Early Learning Hubs, CCO's and public health agencies, a system to deliver home visits for all families with newborn children that provides parenting information and that helps families with deeper needs connect to additional services.

Strategy 4: Ensure family friendly referrals.

- Working across agencies and with community partners, such as 211 and Early Learning Hubs, develop shared principles for building community level family friendly, respectful and easy to navigate referral system so that families can easily access services and supports.

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SYSTEM GOAL 3: THE EARLY LEARNING SYSTEM IS ALIGNED, COORDINATED, AND FAMILY-CENTERED

Objective 1: Increase capacity to collect, integrate, analyze and disseminate data.

Oregon is committed to using data-based decision-making to drive positive outcomes for children pre-natal to five and their families. This commitment to data-based decision-making is also a strong part of its commitment to equity as Oregon uses disaggregated to assess impacts on children historically farthest from opportunity. In order to live up to this commitment, Oregon needs to increase its capacity to collect, integrate, analyze and disseminate data across the early learning system and at the state, local and programmatic levels. The state needs to increase its capacity to collect accurate and meaningful data from early care and education programs and share the data back with programs in ways that support on-going quality improvement. As the state's ability to collect solid data from early care and education programs improves, data from these programs needs to be integrated into longitudinal data systems and with data from other systems, so that the impacts of investment and strategies can be accurately assessed. The state also needs to increase the Early Learning Hubs access to data from across all sectors and invest in their capacity to use this data, so that local communities are empowered to make the most effective decisions about how to direct local resources.

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Strategy 1: Create and use an early learning system dashboard.

- Create and regularly monitor an Early Learning System Dashboard that fosters collective impact and shared cross-sector, cross-agency accountability for population level outcomes for children prenatal to five and their families.
- Specifically incorporate data on children of color and children from families historically farthest from opportunity.

Strategy 2: Strengthen data-driven community planning.

- Increases access to state and local data, as well as resources, to improve hub capacity to use data in its planning to ensure the highest needs are met and that the greatest impact for children and families is achieved.
- Specifically incorporate data on children of color and children from families historically farthest from opportunity.

Strategy 3: Integrate early learning data across sectors and longitudinally in order to be able to determine impacts of early childhood investment and identify the most effective strategies for supporting positive outcomes for children and their families.

- Specifically incorporate data on children of color and children from families historically farthest from opportunity.

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Strategy 4: Build state and program capacity to collect, monitor and analyze data from early care and education programs to support quality improvements in the delivery of early care and education services and programs for children pre-natal to five and their families.

- Specifically incorporate data on children of color and children from families historically farthest from opportunity.

Objective 2: The early learning workforce has shared core knowledge and competencies.

Despite working in different settings, the early learning (EL) workforce – consisting of health, human services, K-12, and the early care and education sector – serves young children and their families largely toward the same end: ensuring children's health and development is on track. This also requires some common knowledge and skills, as well as partnerships with one another. In order to support families and children in a consistent way, key areas of shared knowledge and competency must be identified and supported in a way that is shared across the entire system.

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Strategy 1. Promote shared core knowledge across the family- and child-serving early learning workforce.

- Create and implement opportunities for shared professional learning across sectors in key areas of need – trauma-informed practices and family-centered referral pathways – across all sectors
- Analyze existing core knowledge and competency frameworks or standards across disciplines for the family- and child-serving workforce to identify commonalities and gaps across sectors
- Address gaps in core knowledge through professional learning, including creating shared, cross-sector professional learning

Strategy 2. Improve cross-sector recruitment and retention.

- Through the Children's Cabinet, require state agencies to report on the diversity of race/ethnicity and language of front-line staff within each sector.
- Analyze data across the early learning workforce to determine common strengths and shared challenges regarding diversity, compensation, turnover, qualifications and professional learning pathways in each sector.
- Use data analysis to create and implement a plan based on the common strengths and shared challenges.

Objective 3: Assure equitable outcomes for families and their young children.

Oregon has demonstrated a commitment to establishing equitable outcomes for children and their families in the state. With the adoption of the Oregon Equity Lens in 2011, Oregon identified the need to improve their collection mechanisms for identifying and collecting data for children and families that are the most vulnerable and underserved in the state and directed more funding to meeting the needs of these families. This work highlighted the need to ensure that families are provided with access to high-quality education, health, housing, and the social services needed to ensure that they could reap the full benefits of an aligned and coordinated system of support. This includes increasing opportunities

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for continuous feedback between state systems and families. However, the disparate access to these combined services for families of color, Dual language learners' families, low-income families, and other families historically farthest from opportunity highlights systemic gaps of services that must be interrupted so that Oregon can service all families.

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Strategy 1: Create ongoing, bi-directional community engagement with families and community stakeholders.

- Build and connect with preexisting regional parent and community stakeholder groups to create venues to seek feedback and input on current and future work of the system.
- Incorporate culturally responsive community engagement practices to engage communities furthest from opportunities that have not yet been engaged.
- Create a parent compensation model for their cost of attendance to these meetings so that parents and their families can attend for zero out of pocket cost.
- Ensure all community engagement activities meet the cultural, linguistic, and scheduling needs of families.

Strategy 2: Align and expand funding opportunities for culturally specific organizations.

- Develop an early learning system funding policies and practices that includes culturally specific organizations, including infrastructure support and scaling or seeding additional promising programs.

Strategy 3: Equitably distribute resources.

- Create a stakeholder workgroup to review annually all funding and services entering into the early leaning system through the Oregon Equity Lens. Use the findings to enhance or shift funding priorities to ensure that exponential progress is made toward supporting children and families historically farthest from opportunity.

Objective 4: Strengthen state-community connections to create streamlined local systems that are aligned, coordinated, and family-centered.

Oregon has programs and resources addressing the different needs of families across the state. However, many do not work together. Vulnerable families who have been historically underserved may become overwhelmed in understanding what they qualify for and accessing those supports successfully. Early Learning Hubs' unique role, in partnership with the other sectors, is to build coherent local systems where families can easily connect with needed supports and services. Each sector has local structures to support the delivery of specific services and programs. However, the Early Learning Hubs are a significant vehicle for how the sectors can come together and have shared impact in improving outcomes for children, families and communities. Over the next five years, the focus of this work is to advance the three system goals at the local level and ensure a shared vision and expectation for improving the outcomes of young children and their families through developing, strengthening and streamlining local systems and developing feedback loops between the state and communities to

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improve service delivery, address gaps, and tailor resources to the different needs of communities across Oregon.

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Strategy 1: Further develop the local system.

- Ensure all sectors are committed to the role of the Early Learning Hubs as the infrastructure of local efforts needed for building the state early learning system and making progress toward the three system goals.
- Require all sectors be represented on the Early Learning Hub Governing Boards to ensure shared goals, policy and programming are invested in and implementation is coordinated across a region.
- Strengthen the Hub role in providing community needs assessments that meet the requirements of each sector, as well supports coordinated and aligned community planning and shared problem solving.

Strategy 2: Develop shared metrics and engage in shared state-local data informed action.

- Improve how the state sectors provide data to local communities, using shared metrics developed by Measuring for Success.
- Bring state and community leaders together to better understand data in order to track the well-being of children and families in communities, guide a process of continuous quality improvement, and facilitate collaboration across sectors and partners.

Strategy 3: Engage in continuous quality improvement within the Early Learning Hubs.

- Develop a continuous quality improvement process that Early Learning Hubs and their partners can use to identify ongoing learning, improve local system development, and to identify and adapt to emerging shifts in community trends over time.
- Create ongoing feedback loops between the state sectors and communities to improve understanding of policy, foster collaboration around shared goals, and address barriers to implementation in order to make progress toward the three systems goals.

Strategy 4: Ensure family voice in systems design and implementation.

- Increase authentic input of family voice in the design and implementation of state policy and programming.
- Work with Early Learning Hubs and their partners in developing local systems that welcome all families and support their access to programs and services.
- Develop centralized local system to coordinate eligibility of services across sectors.
- Increase the capacity of the Early Learning Hubs to facilitate culturally responsive family engagement activities across their communities.
- Ensure children and families have access to culturally responsive family support services.

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Glossary

The following glossary was originally published by the Oregon Child Care Research Partnership, Corvallis, Oregon, August, 2016 and updated by the Early Learning Division, September, 2018. This glossary presents a list of terminology and definitions used to discuss state support, regulation, and involvement in early care and education services in the State of Oregon. Interspersed with Oregon-specific terms are terms both used within Oregon and nationally, which can also be found on ***Research Connections*** Child Care and Early Education Glossary.

Early Learning Terms	Definition
211info	
40-40-20 Goal	Approved by the Oregon Legislature in 2011, the "40-40-20 Goal" is for 40% of adult Oregonians to hold a bachelor's or advanced degree, 40% to have an associate's degree or a meaning postsecondary certificate, and all Oregonians to hold a high school diploma or equivalent by the year 2025.
Accessibility	Refers to the availability of child care when and where a family needs it. **See related: Child Care Access; Child Care Availability.**
Accommodation	Refers to adjustments or adaptations made in standards and assessment tools to allow children with **Special Needs** or **English-Language Learners** to demonstrate their knowledge and skills. Accommodations help provide children with equal access to education by meeting the child's individual learning needs and capabilities For example, a test could be adapted for a child with attention issues by granting extra time or could be administered to a non-English speaker in the child's native language. Accommodation addresses how the child is expected to learn and demonstrate learning, not what a child is expected to learn. **Compare with: Modification.**
Adverse Childhood Experiences (ACE)	Refers to potentially traumatic events that can have a negative, lasting effect on an individual's health and well-being. Adverse childhood experiences can include physical, emotional, or sexual abuse to the death or incarceration of a parent or guardian.
Affordability	The degree to which the price of child care is a reasonable or feasible family expense. States maintain different definitions of "affordable" child care, taking various factors into consideration, such as family income, child care **Market Rates**, and **Subsidy** acceptance, among others.
Ages and Stages Questionnaire (ASQ)	A tool which pinpoints developmental progress in children between the ages of one month to 5 ½ years. This screener assesses the extent to which children have met developmental milestones. The Early Learning Council adopted ASQ as a preferred tool for screening.

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Approaches to Learning	Refers to the ways in which children learn, including children's openness and curiosity to tasks and challenges, task persistence, imagination, attentiveness, and cognitive learning style.
At Risk	A term used to describe children who are considered to have a higher probability of non-optimal **Child Development** and learning. **See related: Risk Factors.**
Attachment	The emotional and psychological bond between a child and adult, typically a parent or caregiver, that contributes to the child's sense of security and safety. It is believed that secure attachment leads to psychological well-being and Resilience throughout the child's lifetime and is considered a key predictor of positive **Child Development** and learning.
Career Pathway	A progression of educational qualifications, **Credentials** and training that build upon one another and enable early childhood practitioners to advance in their careers. Career pathways can be flexible, with multiple entry and exit points, to allow the **Workforce**, made up of diverse learners and non-traditional students, to acquire the necessary career-related skills and knowledge. Career pathways allow individuals to move along or within a **Career Ladder/Lattice**.
Center Based Child Care	Child care provided in nonresidential group settings, such as within public or private schools, churches, preschools, day care centers, or nursery schools. **See related: Community Cased Child Care/Community Based Organization (CBO); Certified Center**
Certified Center (CC)	Child Care Center – A facility licensed to provide child care for a specific number of children depending on the number and qualification of staff and physical setting. A center is usually not in a home setting. See Oregon Child Care regulatory categories. **See related: Center Based Child Care**
Certified Family Child Care (CF)	Certified Family Child Care Home – A facility that is certified to provide care for up to 16 children in a single family home, preferably in the provider's own home. There are specific requirements that must be met and maintained to become certified.
Chief Education Office	The Chief Education Office works to build and coordinate a seamless system of education that meeting the diverse learning needs of Oregonians from birth through college and career. **See related: 40-40-20 Goal**
Child Care Access	Refers to the ability for families to find quality **Child Care Arrangements** that satisfy their preferences, with reasonable effort and at an affordable price. **See related: Child Care Availability.**
Child Care Assistance	Any public or private financial assistance intended to lower the cost of child care for families. **See related: Child Care Subsidy.**
Child Care Availability	Any public or private financial assistance intended to lower the cost of child care for families. **See related: Child Care Subsidy.**
Child Care Desert	A geographical area where there is an inadequate supply of high **Quality**, affordable, and accessible child care options.

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Child Care Provider	An organization or individual that provides early care and education services.
Child Care Resource & Referral (CCR&R)	Local and statewide entities, usually funded by **CCDF**, that provide a range of services to the community, such as guidance and referrals to parents seeking child care; professional development and trainings for early childhood professionals; as well as parenting and other educational resources for families. Some CCR&R agencies also administer child care **Subsidies**. **See related: 211info**
Child Care Slots	The number of openings that a child care setting has available as dictated by its **Licensed Capacity**. Child care slots may be filled or unfilled.
Child Care Subsidy	A type of **Child Care Assistance** primarily funded by the federal **CCDF** program. **See related: Employment Related Day Care (ERDC).**
Child Care & Development Block Grant (CCDBG)	The source of discretionary funding for the **Child Care and Development Fund (CCDF)**. The CCDBG was originally enacted under the Omnibus Budget Reconciliation Act of 1990. In 2014, Congress reauthorized the CCDBG for the first time since 1996, and included new laws and requirements related to the quality and availability of CCDF funded child care programs and related activities.
Child Care and Development Fund (CCDF)	A federally funded program that provides block grants to states to subsidize the child care expenses of working parents/families so they can participate in educational or training opportunities. Each state creates its own **CCDF Plan** that is approved and administered by the **Office of Child Care (OCC)** at the U.S. Department of Health and Human Services (HHS). The CCDF also funds activities intended to improve the overall **Quality** and supply of child care for families, such as by providing **Technical Assistance** and promoting coordination among early learning and **After-School Programs**.
Child Care & Development Fund Plan (CCDF State Plan)	A plan developed by a designated CCDF child care agency in each state, territory, or tribe that serves as an application for **CCDBG** funds. Plans provide a description of, and assurances about, the grantee's child care programs and services available to eligible families. States must promote public involvement in their CCDF Plan's development/review process and submit their plan to the Department of Health and Human Services (HHS) for review and approval every three years.
Child Development	The process by which children acquire skills in the areas of social, emotional, intellectual, speech and language, and physical development, including fine and gross motor skills. Developmental stages describe the expected, sequential order of gaining skills and competencies that children typically acquire. **See related: Developmental Milestones; Approaches to Learning.**
Child Development Associate (CDA) Credential	A widely earned **Credential** administered by the Council for Professional Recognition.

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Child Protective Services (CPS)	An official public agency within the **Department of Human Services** responsible for receiving and investigating reports of suspected child abuse or neglect and for ensuring that prevention and intervention services are provided.
Coaching	A relationship-based process led by an expert with specialized knowledge and adult learning **Competencies** that is designed to build capacity for or enhance specific professional dispositions, skills and behaviors. Coaching is typically offered to teaching and administrative staff, either by in-house or outside coaches, and focuses on goal-setting and achievement. **See related: Consultation; Technical Assistance.**
Collective Impact	A commitment to a common agenda for solving a complex social problem by a group of actors from different sectors. A collective impact model provides a foundation for the work of Oregon's Early Learning Hubs.
Communities of Color	Four communities are traditionally recognized as being of color – Native American, African American, Asian and Latino. Additional groups that have been impacted by racism in a given community can be added.
Community-Based Child Care/Community-Based Organization (CBO)	A nonprofit organization that provides educational or related services to children and families within their local community. CBOs that provide child care may be associated with faith-based organizations or other nonprofit organizations. CBOs are subject to section 501(c)(3) of the Internal Revenue Code. **See related: Center-based Child Care.**
Competencies [refers to Workforce Knowledge or Core Competencies]	Refers to the range of knowledge and observable skills that early childhood practitioners need to provide effective services to children and families. Competencies, sometimes referred to as "core competencies," are typically linked with states' early learning guidelines and provide a framework for **Professional Development** at various career stages.
Comprehensive Services	An array of coordinated services that meet the holistic needs of children and families enrolled in a given program, from health and developmental screenings to family literacy trainings and parent education.
Consultation	A collaborative, problem-solving process between an external consultant with specific expertise and adult learning **Competencies** and an individual or group. Consultation typically facilitates the assessment and resolution of an issue-specific concern, a program-/organizational-, staff-, or child-/family-related issue, or addresses a specific topic. **See related: Coaching; Technical Assistance.**
Continuity of Care	Refers to the provision of care to children by consistent caregivers in consistent environments over a period of time to ensure stable and nurturing environments. Research shows that maintaining continuity and limiting transitions in a child's first few years of life

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	promotes the type of deep human connections that young children need for optimal early brain development, emotional regulation, and learning.
Copayment (Co-Pay)	Payment for part of a subsidized service that is the responsibility of parents/family members. The copayment amount may take a family's financial circumstances into consideration.
Core Body of Knowledge	The Core Body of Knowledge for Oregon's Childhood Care and Education Profession is the basis for training and education essential for on-going professional development in the childhood care and education profession; a foundation for both the Oregon Registry and the Oregon Registry Trainer Program. It embodies what professionals should know and be able to do to effectively care for and educate Oregon's young children, ages 0-8, with special consideration for children 9-12 years old. Ten core knowledge categories make up the Core Body of Knowledge. Three sets of knowledge constitute a progression of increased depth and breadth of knowledge within each core knowledge category.
Cost of Care	The Core Body of Knowledge for Oregon's Childhood Care and Education Profession is the basis for training and education essential for on-going professional development in the childhood care and education profession; a foundation for both the Oregon Registry and the Oregon Registry Trainer Program. It embodies what professionals should know and be able to do to effectively care for and educate Oregon's young children, ages 0-8, with special consideration for children 9-12 years old. Ten core knowledge categories make up the Core Body of Knowledge. Three sets of knowledge constitute a progression of increased depth and breadth of knowledge within each core knowledge category.
Cultural Competence	A term that describes what happens when special knowledge about individuals and groups of people is incorporated into standards, policies, and practices. Cultural competence fosters an appreciation of families and their unique backgrounds and has been shown to increase the quality and effectiveness of services to children.
Curriculum	A written plan that includes goals for children's development and learning; the experiences through which they will achieve the goals; what staff and parents should do to help children achieve the goals; and the materials needed to support the implementation of the curriculum.
Department of Human Services (DHS)	DHS is Oregon's principal agency for helping Oregonians achieve wellbeing and independence through opportunities that protect, respect choice and preserve dignity, especially for those who are least able to help themselves. DHS manages ERDC, Oregon's major child care subsidy program.

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In Oregon cultural competence is considered essential to providing services to children and families. It refers to a set of congruent behaviors, attitudes, and policies that come together in a system, agency or among professionals and enable that system, agency or those professions to work effectively in cross-cultural situations and actively seek ways to grow these skills.

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Developmental Screening and Assessment	The practice of systematically measuring a child's development across multiple domains and looking for signs of developmental delays. Screening and assessment tools are typically administered by professionals in healthcare, community, or school settings with children and families and can consist of formal questionnaires or checklists that ask targeted questions about a child's development.
Developmentally Appropriate	Practices, behaviors, activities and settings that are adapted to match the age, characteristics and developmental progress of a specific group of children. Developmentally Appropriate Practice (DAP) in early learning settings reflects knowledge of **Child Development** and an understanding of the unique personality, learning style and family background of each child.
Distance Learning	A mode of education and instruction in which teachers and students are not physically present with each other and communicate remotely. Distance education typically takes place online, where teachers and students interact by way of email, video or other means of communication.
Dual Language Learners (DLL)	Refers to children under the age of five who have at least one parent or guardian that speaks a language other than English at home and who are mastering their native language while learning English simultaneously. **See related: English Language Learners (ELL); Limited English Speaking/Limited English Proficiency (LEP); Bilingual.**
Early Childhood Mental Health Consultation	A strategic intervention geared towards building the capacity of early childhood staff, programs, families, and systems to prevent, identify, treat, and reduce the impact of mental health problems among children from birth to age six. In a child-focused consultation, the consultant may facilitate the development of an individualized plan for the child; In a classroom-focused consultation, the consultant may work with the teacher/caregiver to increase the level of Social-Emotional support for all the children in the class through observations, modeling, and sharing of resources and information; In a program-focused consultation, the consultant may help administrators address policies and procedures that benefit all children and adults in the program.
Early Childhood Special Education (ECSE)	Specialized instruction that is provided by trained early childhood **Special Education** professionals to young children with disabilities in various early childhood settings such as **Preschool**, child care, **Prekindergarten** and **Head Start**, among others. ECSE is mandated by the federal **Part B of the IDEA**.
Early Head Start	A federally funded program that serves low-income pregnant women and families with infants and toddlers to support optimal child development while helping parents/families move toward economic independence. EHS programs generally offer the following core services: (1) high **Quality** early education in and out of the home; (2) family support services, home visits and parent education; (3) comprehensive health and mental health services,

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	including services for pregnant and postpartum women; (4) nutrition; (5) child care, and, (6) ongoing support for parents through case management and peer support. Programs have a broad range of flexibility in how they provide these services.
Early Intervention	Services that are designed to address the developmental needs of infants and toddlers with disabilities, ages birth to three years, and their families. Early intervention services are generally administered by qualified personnel and require the development of an **Individualized Family Service Plan (IFSP)**. Early intervention is authorized by the federal **Individuals with Disabilities Education Act (IDEA), Part C.**
Early Learning Council (ELC)	In 2011 the Oregon Legislature created the ELC to provide policy direction and oversee Oregon's early learning system. Council members are appointed by the Governor and provide policy guidance to the Early Learning Division.
Early Learning and Development Guidelines/Standards	A set of expectations, guidelines that describe what all children from birth until kindergarten entry should know and be able to do as well as their disposition toward learning. These standards/guidelines must be developmentally, linguistically, and culturally appropriate and cover all Developmental Domains.
Early Learning Division (ELD)	In 2013 the Oregon Legislature created the Early Learning Division within the Oregon Departed of Education to oversee the early learning system including policies and programs that support stable and attached families and school readiness. The Division is overseen by the Early Learning Council.
Early Learning Hubs	The 2013 Legislature authorized creation of 16 regional and community –based Early Learning Hubs to make support more available, accessible, and effective for children and families, particularly those who are historically underserved. Hubs bring together the following sectors in order to improve outcomes for young children and their families: early education, k-12, health, human services, and business.
Early Literacy	Refers to what children know about and are able to do as it relates to communication, language, reading, and writing before they can actually read and write. Children's experiences with conversation, books, print and stories (oral and written) all contribute to their early literacy skills.
Early Math/Numeracy	Refers to the foundations of mathematical reasoning that are acquired in early childhood, typically by way of number counting, measuring, sorting, noticing patterns and adding and subtracting numbers.
Employment-Related Day Care (ERDC)	Oregon's major form of financial assistance for child care for low-income families is funded by a combination of federal **Child Care and Development Fund** and Oregon General Fund dollars. The program is managed by **DHS**.

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English Language Learner (ELL)	Refers to a child who is learning English and comes from a home or environment where the primary language is not English. ELLs are generally proficient in their own language but are usually unable to read, write, speak or understand English at a level comparable to their English proficient peers and native English speakers. **See related: Dual Language Learners (DLL); Limited English Speaking/Limited English Proficiency (LEP); Bilingual.**
Equity Lens	Oregon's **Chief Education Office** (formerly, the Oregon Education and Investment Board) adopted and works to ensure that its Equity Lens guides education policy. The Lens articulates a set of beliefs, a "lens" intended to "clearly articulate the shared goals we have for our state, the intentional investments we will make to reach our goals of an equitable educational system, and to create clear accountability structures to ensure that we are actively making progress and correcting where there is not progress. This lens was created to propel the educational system into action to shift policies, procedures, and practices in order to move our committee to an equitable system into actively pursuing an equitable system."
Evidence-Based Practice	A practice, regimen or service that is grounded in evidence and can demonstrate that it improves outcomes. Elements of evidence-based practice are standardized, replicable and effective within a given setting and for a particular group of participants. **See related: Best Practices.**
Family (Parent Engagement)	Refers to an interactive process of relationship-building between early childhood professionals and families that is mutual, respectful, and responsive to the family's language and culture. Engagement in the early years prepares families to support their children's learning throughout their school years and support parent/family-child relationships that are key to healthy **Child Development**, **School Readiness**, and well-being. **See related: Parent/Family Involvement**.
Focused Child Care Networks	Community-based programs that offer a menu of ongoing services and supports to affiliated **licensed child care** providers. Network services typically include some combination of visits to providers' homes to offer **Technical Assistance (TA)**, **Coaching** or **Consultation**, training workshops and peer networking opportunities. Networks may help new providers with **Licensing** assistance, **CACFP** applications or acquiring start-up equipment; They may help more experienced providers with specific supports for improving their practice, obtaining **Professional Development (PD)**, or attaining national **Accreditation**. Family Child Care Networks are primary funded through **CCDF**.
Family, Friend and Neighbor (FFN) Care	Child care provided by relatives, friends, and neighbors in the child's own home or in another home, often in unregulated settings. **See related: Informal Child Care.**

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Head Start	A federal program that provides comprehensive early childhood education, health, nutrition, and parent involvement services to low-income families. The program is designed to foster stable family relationships, enhance children's physical and emotional well-being and support children's cognitive skills so they are ready to succeed in school. Federal grants are awarded to local public or private agencies, referred to as "grantees" to provide Head Start services. Head Start began in 1965 and is administered by the Administration for Children and Families (ACF) of the U.S. Department of Health and Human Services (HHS). **See related: Oregon PreKindergarten**
Head Start Early Learning Outcomes Framework 2015 (ELOF)	Represents the continuum of early learning for infants, toddlers, and preschoolers. It is based in a comprehensive body of research on what children should know and be able to do. In 2011 the Oregon Legislature established an earlier version of ELOF as the set of standards for early learning. Oregon is currently aligning the ELOF with the Common Core State Standards.
Home Language	The primary language that a child speaks at home. **See related: Native Language.**
Home Visiting Programs	Programs that aim to improve child outcomes by helping high-risk parents who are pregnant or have young children to enhance their parenting skills. Most home visiting programs match trained professionals and/or paraprofessionals with families to provide a variety of services in families' home settings. Examples of home visiting services can include health check-ups, developmental screenings, referrals, parenting advice, and guidance with navigating community services.
Inclusion	The principle of enabling all children, regardless of their diverse backgrounds or abilities, to participate actively in natural settings within their learning environments and larger communities.
Individualized Family Services Plan (IFSP)	A written plan that outlines the special services children ages birth through two years and their families will receive if found eligible for early intervention services. The plan is mandated by the federal **Individuals with Disabilities Education Act (IDEA), Part C**. **See related: Early Intervention.**
Infant Toddler Mental Health (ITMH)	Defined as the healthy social and emotional development of young children, birth to three years of age. ITMH builds on responsive relationships with primary caregivers (parents, family, child care) that build healthy attachment and foundations for life.
Kindergarten Assessment (KA)	Assessment developed by Oregon and aligned with the state's early learning and development standards to assess what children know and are able to do as they enter kindergarten.
Kindergarten Transition	Refers to a process or milestone in which a child moves from a **Preschool** setting to kindergarten.
Licensed Exempt Child Care	Legally operated child care that is exempt from regulatory requirements set forth by the state or the local licensing agency. To

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	receive subsides, license/legally exempt child care must comply with requirements of the **Subsidy** system (e.g., mandatory criminal background checks, healthy and safety inspections, etc.).
Licensed Child Care	Child care programs operated in homes or in facilities that fall within the regulatory system of a state or community and comply with those regulations. Licensing requirements vary based on license type.
Licensing or Regulatory Requirements	Refers to requirements that providers must meet to legally operate child care services in a state or locality, including registration requirements established under state, local, or Tribal law.
Market Rate	The typical listed price for child care in a given geographic area. Market rates will vary due to factors such as location, types of care setting, hours of operation, ages of children they serve, and other features of the providers, such as their educational background. **See related: Cost of Care.**
Mentoring	A form of **Professional Development** characterized by an ongoing relationship between a novice and an experienced teacher or provider to deliver personalized instruction and feedback. Mentoring is intended to increase an individual's personal or professional capacity, resulting in greater professional effectiveness. **See related: Coaching, Consultation.**
Migrant and Seasonal Head Start Programs	A **Head Start** program that serves families who are engaged in agricultural work and who have changed their residence from one geographical location to another in the preceding two-year period.
Monitoring	The process used to enforce child care providers' compliance with licensing rules and regulations. States use "differential monitoring" as a regulatory method for determining the frequency or depth of monitoring based on an assessment of the child care facility's compliance history and other quality indicators.
Office of Child Care	A public office located within the Early Learning Division responsible for child care licensing, compliance, background checks and monitoring.
Oregon Administrative Rules (OARs)	The legislative rules of the state of Oregon that govern health and safety standards, including individual or programs that work with children birth through twelve years.
Oregon Department of Education (ODE)	ODE is responsible for implementing the state's public education policies. The department is overseen by the Governor acting as State Superintendent of Public Instruction with an appointed Deputy Superintendent acting as chief administrator.
Oregon Health Authority (OHA)	OHA is the state agency at the forefront of working to improve the lifelong health of Oregonians through partnerships, prevention and access to quality, affordable health care. It includes most of the state's health and prevention programs such as Public Health, Oregon Health Plan, and Healthy Kids, as well as public-private partnerships.
Oregon PreKindergarten and Early Head Start	Oregon Head Start Pre-K (OHSPK) and Early Head Start (EHS) are comprehensive high quality early childhood development programs

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	offering integrated services. OHSPK and EHS programs receive funding from the Federal Office of Head Start, the **Oregon Department of Education**, or both. All OHSPK programs follow the same guidelines for providing services.
Oregon Registry	Oregon's 12-step Career Lattice program is for individuals working in Early Learning Division-regulated facilities (centers and family) and individuals volunteering to have their training and education evaluated for an Oregon Registry Step.
Oregon Registry Online (ORO)	A statewide database that stores all training and education submitted by individuals working in **ELD**-regulated facilities and individuals volunteering to have their training and education evaluated for **Oregon Registry** Steps. Administered by **OCCD**, ORO allows for data exchange with the ELD, **DHS**, the Central Coordination of Child Care Resource and Referral at The Research Institute and local child care resource and referral programs. ORO also features an online training clearinghouse and provides individuals online access to their own training and education accounts.
Parent Choice	Refers to families' ability to access **Child Care Arrangements** of their choosing. The term is often used to refer to the **CCDF** stipulation that parents receiving **Subsidies** should be able to use all legal forms of care, even if a form of child care would be otherwise unregulated by the state.
Parenting Education	Instruction or information directed toward parents and families to increase effective parenting skills.
Preschool	Programs that provide early education and care to children before they enter kindergarten, typically from ages 2.5-5 years. Preschools may be publicly or privately operated and may receive public funds.
Preschool Promise	A high-quality state preschool program serving 3- and 4- year old children living in families at or below 200% of the Federal Poverty Line. It was created by the 2015 Oregon Legislature with a commitment to supporting all of Oregon's young children and families with a focus on equity and expanding opportunities to underserved populations. The program is administered by **Early Learning Hubs** throughout the state, bringing together early learning programs operated by Head Start, K-12, licensed child care and community-based organizations in a **Mixed-Delivery** model.
Professional Development (PD)	Refers to a continuum of learning and support activities designed to prepare individuals for work with, and on behalf of, young children and their families, as well as ongoing experiences to enhance this work. Professional development encompasses education, training, and **Technical Assistance (TA)**, which leads to improvements in the knowledge, skills, practices, and dispositions of early education professionals.
Quality	The characteristics of learning environments that promote the physical, social, emotional and cognitive development of young children. High quality programs typically exceed state regulatory

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	requirements, utilizing **Developmentally Appropriate** curricula and prioritizing adequate teacher and administrative qualifications, ongoing **Professional Development**, and **Family Engagement** strategies, among others qualities.
Quality Rating and Improvement System (QRIS)	A system using progressively tiered program standards to evaluate, communicate, and to support continuous improvement of an Early Learning and Development Programs. **See related: Spark**.
Registered Family (RF) Child Care	Registered Family Child Care Home means the residence of the provider, who has a current Family Child Care Registration at that address and who provides care in the family living quarters.
Resilience	Refers to children's ability to cope and develop in positive ways when faced with setbacks, hardships or adversity. Resilience in children can be fostered at the individual, family and community level. **See related: ACE.**
Retention (Staff)	Refers to the ability of programs to retain their employees over time. Staff retention is a well-documented problem in early childhood programs that affects program quality
Risk Factors	Refers to circumstances that increase a child's susceptibility to a wide range of negative outcomes and experiences. Risk factors for low school readiness may include parental/family characteristics such as low socioeconomic status and education, children's characteristics, such as whether the child has **Special Needs**, or community conditions and experiences, such as whether the child has access to high **Quality** early care and education.
Social-Emotional Development	Refers to the development process whereby children learn to identify and understand their own feelings, accurately read and comprehend emotional states in others, manage and express strong emotions in constructive manners, regulate their behavior, develop empathy for others, and establish and maintain relationships.
Spark	Spark, formerly known as **Oregon's Quality Rating and Improvement System** or QRIS, is a statewide program that raises the quality of child care across the state. Spark recognizes, rewards and builds on what early childhood care and education professionals are already doing well.
Special Needs	A term used to describe a child with an identified learning disability or physical or mental health condition requiring **Special Education** services, or other specialized services and supports. **See related: Early Intervention (EI), IEP; IFSP; Special Needs.**
Subsidized Child Care	Child care that is at least partially funded by public or charitable resources to decrease the cost to families.
Subsidy	Private or public assistance that reduces the cost of child care for families.
Supply Building	Efforts to increase the quantity of child care programs in a particular local area.

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Technical Assistance (TA)	The provision of targeted and customized supports by a professional(s) with subject matter expertise and adult learning knowledge and competencies. In an early education setting, TA is typically provided to teaching and administrative staff to improve the quality of services and supports they provide to children and families. **See related: Coaching; Mentoring; Consultation; Professional Development.**
Trauma Informed Care	Refers to an approach used in working with children exposed to traumatic events or conditions. Children exposed to trauma may display heightened aggression, poor social skills and impulsivity; and may struggle academically or engage in risk-taking or other challenging behaviors. Service providers and family members that are trained in TIC learn effective ways to interact with these children, such as by helping them cope with traumatic "triggers," supporting their emotion regulation skills, maintaining predictable routines, and using effective behavior management strategies. See related: Adverse Childhood Experiences (ACE); Toxic Stress.
Two-Generation Programs	Programs that provide comprehensive services for both parents/families and children in order to simultaneously promote healthy **child development** and economic self-sufficiency. In two generation programs, services such as job training, parent education and housing assistance are provided along with early education programs. **See related: Dual Generation Strategies.**
Underserved Students	As noted in the Equity subcommittee report underserved populations are defined as, Students/populations whom systems have placed at risk because of their race, ethnicity, income status, English proficiency, gender, sexual orientation, differently abled and geographic location. Many students are not served well in our education system because of the conscious and unconscious bias, stereotyping, and racism that is embedded within our current inequitable education system.
Workforce	The broad range of individuals engaged in the care and education of young children. Members of the early childhood workforce may include teaching, caregiving and administrative staff, as well as consultants, learning specialists, and others that provide training and **Technical Assistance** to programs.
Wrap-Around Services	A team of providers collaborate to improve the lives of the children and families they serve by creating, enhancing, and accessing a coordinated and comprehensive system of supports. Supports might include formal services and interventions, such as enrichment and academic supports outside of regular child care programming, community and health services like doctor visits, and interpersonal assistance such as family counseling.

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