

Marion & Polk Early Learning Hub Inc.

Strategic Framework (2015-2018)

Vision:

Every child is safe, healthy, and prepared to learn.
Every family is strong and resilient.
Early learning services are coordinated, effective and efficient.

Mission:

To convene, collaborate, and catalyze action in our hub region to better align services and resources for children and families.

Values

- We have a **unified focus on kids and families**.
- Our actions are **strategic and coordinated** action and designed for collective impact.
- We are **accountable for results and the stewardship of funds** entrusted to us. We are data driven in our approaches to drive toward the desired results.
- We value the diversity of our community. We are committed to building a system grounded in principles of **equity and diversity**. We champion the unique cultural needs of those traditionally underserved.
- Our work focuses on **strengthening Family Resilience**. We believe that the parent is the child's first and best teacher.

Our Region

The Hub Region includes Marion and Polk County geographic areas. Within the hub region, Salem Keizer is the largest, most densely populated area, however, the region includes many rural and remote areas. The hub region is served by multiple community organizations committed to meeting the needs of children and their families. Community resources include Relief Nursery, Healthy Families, and Early Head Start; Head Start through 3 separate organizations; Coordinated Care Organization that serves the hub region; Child Welfare Services, Community Based Organizations serving Families and Children; Fourteen School Districts and 95 Elementary Schools; Child Care Resource and Referral; Early Intervention/Early Childhood Special Education services

Governance

The Marion & Polk Early Learning Hub, Inc. is a non-profit organization that was formed as the backbone organization for the work. The policy direction setting and oversight is done by the twenty seven (27) member Board of Directors, which includes parent representatives. There are two Collective Action Teams designed to be stewards of the work, provide insight, and assist with the overall implementation of the initiatives in the strategic plan. The Parent Advisory Committee provides guidance to the approach of the work and take on projects as a committee.

Target Population

The total child population ages 0-5 of our hub region is 32,834. The at-risk population of children ages 0-6 in our hub region is: 24,732 which is 13.1% of the state at-risk child population.

Marion County has a child population (ages 0-19) that is 51.7% non-Hispanic White; 8.9% non-Hispanic, Non-white; and 29.5% Hispanic
Polk County has a child population (ages 0-19) that is 68.8% non-Hispanic White; 10% non-Hispanic, Non-white; and 21.3% Hispanic

Our Initiatives

Our hub region has adopted initiatives that are aligned with our metrics, build on the strengths of our community, and leverage resources to have an impact driving to the goals of aligned and coordinated services, children are entering school more ready to learn, and families are stable and attached.

	Desired Outcomes	Key Metric (Abbreviated)	ELH Objectives
<p>Goal 1: The early childhood system is aligned, coordinated, and family centered.</p>	<ul style="list-style-type: none"> • Common vision and agenda • Catalytic and transformative leadership • Aligned agendas, strategies and resources across sectors. • Data shared across sectors • Cross sector coordination of activities and family resource management • Services attentive and responsive to families • Equity focused and culturally responsive 	<ul style="list-style-type: none"> ○ Strategic plan is in place ○ Demonstrated active participation of leaders. ○ Declaration of Collaborations (DOC) are in place to share data about budgets, services provided and the number of children served within the hub coverage area. ○ Mechanisms in place to share funding and blend/braid resources. ○ Demonstrated meaningful engagement with children and families. ○ Engagement with culturally-specific Community Based Organizations. ○ Program participation data. ○ Administrative overhead below 15%. 	<p>1.1: Child and family services are aligned and coordinated.</p> <p>1.2: Performance is measured and data is used to learn, adjust, and innovate.</p>
<p>Goal 2: Children are supported to enter school ready to succeed.</p>	<ul style="list-style-type: none"> • Children enter Kindergarten with skills to support school success • Families supported as child’s first teacher • Aligned instructional practices and transitions between early learning and kindergarten. • Reduced disparities in outcomes for children of color and low-income families. 	<ul style="list-style-type: none"> ○ Shared activities among early learning providers, families, and K-3 partners. ○ Increase children on wait lists served by a Hub partner program. ○ Increase the 3, 4, and 5 star QRIS providers serving children served from “hot spots” areas. ○ Increase in who receive a developmental screen before the age of 3. ○ Increase children enrolled in kindergarten before start of school year. ○ Increase overall performance in Kindergarten Assessment and by demographic groups. ○ Decrease disparities for children of color and 	<p>2.1: Children experience quality early learning and literacy development</p> <p>2.2: Connections are built between families, early learning, and K-12 schools.</p>

low-income families.

- Increase children in third grade who are reading at grade-level by demographic group. Decrease in disparities in percentage third grade children of color and from low-income families who are reading at grade level.

**Goal 3:
Families are
healthy, stable,
and attached.**

- Positive physical and mental health with access to high quality health services.
- Families have confidence, knowledge and skills to support attached development of children.
- Families have adequate resources to meet their needs.
- Access to safe and affordable childcare that promotes positive development.

- Increase children in Employment Related Day Care (ERDC) in QRIS program.
- Increase children and families served by DHS who are receiving early learning, parent education or family support services.
- Increase children on OHP who make it to 6 or more well-child visits in their primary care home.

- 3.1: Families are connected to a health care “medical home”
- 3.2: Families and caregivers develop skills that support children.
- 3.3: Children are developmentally screened, referred, and supported.

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

ELH Objectives	ELH Strategies	ELH Key Initiative Focus
<p>1.1: Child and family services are aligned and coordinated.</p>	<p>1.1.1: Develop a cross-sector pathway for referrals and care coordination for children and families that builds upon and enhances existing referral systems.</p>	<ul style="list-style-type: none"> ● MPELH Governance – MPELH Board of Directors, Collective Action Teams, Parent Advisory Committee ● Asset and Community Needs Assessment Identify hub region assets and needs to better align collective focus on meeting goals and metrics ● Data Connect – connect child level early learning data with the K-12 data. <hr/> <p style="text-align: center;">New Initiatives 2016</p> <hr/> <ul style="list-style-type: none"> ● Community Messages – Develop key and consistent message platform for providers and for community at large around key early learning initiatives ● Early learning workforce development – create pathways for professional development to meet the educational needs of the early learning community ● Strong linkage with DHS – engaging and leveraging DHS programs to support early learning
	<p>1.1.2: Coordinate a cross sector family resource management system to empower and connect families to resources that lead to better outcomes for children's health, development and learning.</p>	
	<p>1.1.3: Develop a comprehensive children's budget to inform targeted investments that support shared goals, identify gaps, and offer community snapshot of investments. Analyze budget allocations committed to populations overrepresented in achievement gaps.</p>	
	<p>1.1.4: Advocate for the developmental needs of young children across sectors, mobilize broad-based support for early childhood services and cultivate a broad understanding of the importance of the first five years of life.</p>	
<p>1.2: Performance is measured and data is used to learn, adjust, and innovate.</p>	<p>1.2.1: Increase the rate of achieving outcomes by integrating continuous systems improvement processes to share data and information for informed decision making</p>	
	<p>1.2.2: Build capacity to encourage, develop and improve performance-based contract management.</p>	
	<p>1.2.3: Utilize performance data for continuous system improvement for populations overrepresented in academic achievement gaps.</p>	
	<p>1.2.4: Use data and performance data to create return on investment models or other compelling information to communicate the priorities of the first 5 years of life.</p>	

Goal 2 : Children are supported to enter school ready to succeed.

ELH Objectives	ELH Strategies	ELH Key Initiatives
2.1: Children experience quality early learning and literacy development	<p>2.1.1: Develop a community supply of 3-star, 4-star and 5-star quality rated early learning programs especially in Targeted Catchment Areas</p> <p>2.1.2: Build upon partnerships with local colleges & universities (including Regional Achievement Collaborative) and increase cross-sector partnership opportunities to strategically support relevant professional development for programs to achieve star rating.</p> <p>2.1.3: For families receiving child care subsidies through TANF and ERDC; advocate for parents equal access to quality and linguistically appropriate early learning programs in their vicinity.</p> <p>2.1.4: Using existing partnerships, provide consistent message about quality early learning and distribute through Hub (partner) channels</p>	<ul style="list-style-type: none"> ● Kindergarten Partnership and Innovation – leadership development, vertically aligned professional development and family engagement ● Parent Education and Parent Training – increased capacity and access to parent education in community ● Vroom – promotion of smart phone app designed to support parents in engaging with child and building brains ● Focus Family Child Care Networks – providing support to Spanish and English child care providers in obtaining QRIS rating
2.2: Connections are built between families, early learning, and K-12 schools.	<p>2.2.1: Develop, scale and connect community, school and family evidence-based approaches to language rich environments and promotion of literacy in first languages.</p> <p>2.2.2: Connect common learning standards and developmental milestones in professional development efforts for early childhood and appropriate school district professionals. Inform and improve existing instruction to incorporate milestones</p> <p>2.2.3: Engage parents, early learning, and childcare professionals on the importance of supporting a child's acquisition of primary language and culture in both home and childcare settings. Include information about how language and literacy milestones may be different for a dual language learner</p> <p>2.2.4: Engage parents, business, and community members with information on critical brain development and kindergarten readiness for children from 0-5 and the return on investment for early learning</p>	<hr/> <p>New Initiatives 2016</p> <hr/> <ul style="list-style-type: none"> ● Kindergarten Transition Programs – implementation of kindergarten transition programs and literacy programs in targeted community areas. Includes support of purchase of books for clinics serving high OHP population. ● Mixed Delivery PreK Preparation – community partnership to assess hub region in readiness level for 2016 Mixed Delivery PreK opportunities

Goal 3: Families are healthy, stable, and attached.

ELH Objectives	ELH Strategies	ELH Key Initiative Focus
3.1: Families are actively engaged with a health care provider.	3.1.1: Work with the health care sector and service providers to make sure every family has a medical home. 3.1.2: Build on the work of the home visiting/targeted case management services to improve care coordination across sectors. 3.1.3: Work with community leaders and points of contact that serve English language learners to connect families with health insurance and with a PCPCH for well child check-ups and developmental screening. 3.1.4: Provide service partners with materials in multiple languages to inform and connect families to available care.	<ul style="list-style-type: none"> • Family Support Services and Family Engagement – continued support for meeting the emergent needs of families in our hub region through partnership with community organizations • ASQ Developmental Screening – continued support of early learning providers entering developmental screens
3.2: Families and caregivers develop skills that support children.	3.2.1: Engage service providers in collaborative resource networks that serve as a safety net for at risk parents and caregivers 3.2.2: Engage parents (and caregivers) as partners and first teachers with and for their children, connecting them with learning opportunities for themselves and their children. 3.2.3: Train and support parent education and family support providers in delivering culturally and linguistically appropriate services across the region. 3.2.4: Develop a compelling messaging platform tailored to At-Risk families to link families with services in a comfortable way.	<hr/> <p>New Initiatives 2016</p> <hr/> <ul style="list-style-type: none"> • Connections with Health Care – strategic initiatives focused on prenatal care, nutrition, housing immunization or other areas that align early learning and health systems
3.3: Children are developmentally screened, referred, and supported.	3.3.1: Develop a cross-sector for early learning services and referrals for young children. 3.3.2: To avoid duplication of ASQ screening, provide access/support for data entry and data exchange into a universal data system 3.3.3: Using natural points of contact in communities, educate families including English language learning families about the importance of screening and assessment for infants, toddlers and children. 3.3.4: Work to remove identified barriers and mobilize the CCO network, home visitors, and child care and early learning providers towards standardized use of the ASQ and sharing screening information for all children.	<ul style="list-style-type: none"> • Waitlist and Referral Work – development of a broad cross-referral process