



NC DEPARTMENT OF
HEALTH AND
HUMAN SERVICES



PUBLIC SCHOOLS OF NORTH CAROLINA
State Board of Education | Department of Public Instruction

B-3 Interagency Council Meeting
NC Department of Insurance, Conference Room 240
325 N. Salisbury Street
Raleigh, NC 27603
August 13, 2018
9:00am-12:00pm

Council Members: Senator Chad Barefoot, Dr. Nancy Brown, Kevin Campbell, Representative Josh Dobson, Elisha W. Freeman, Susan L. Gates, Representative Craig Horn, Senator Michael Lee, Susan Perry-Manning, Dr. Sharon Ritchie, Dr. Pamela Shue, Cindy Watkins, Dr. Linda White, Tracy Zimmerman

Members in Attendance: Dr. Nancy Brown, Kevin Campbell, Representative Josh Dobson, Elisha W. Freeman, Susan L. Gates, Representative Craig Horn, Susan Perry-Manning, Dr. Sharon Ritchie, Dr. Pamela Shue, Cindy Watkins

Absent Members: Senator Chad Barefoot, Senator Michael Lee, Dr. Linda White, Tracy Zimmerman

Welcome, Approve Meeting Minutes, Review Council Charge, Review Agenda

- **Susan Perry-Manning, Deputy Secretary for Human Services, NC Department of Health and Human Services**
- **Dr. Pamela Shue, Associate Superintendent of Early Education, NC Department of Public Instruction**

Dr. Pam Shue convened the meeting at 9:03am and discussed the agenda.

Approval of minutes from May 9, 2018 meeting

Representative Craig Horn motioned to approve the minutes from the May 9th meeting; Dr. Sharon Ritchie seconded the motion; the motion was approved unanimously.

Approval of Council Vision and Goals

Dr. Shue revisited the Council charge--"The B-3 Interagency Council will establish a vision and accountability for a birth through grade three system of early education."

Ms. Susan Perry-Manning walked through the vision and goals of the Council to get feedback and approval.

Vision for approval: North Carolina's children and families will experience a seamless continuum of high-quality birth to third grade education that is easy to navigate and access, supports young children's optimal learning and development, engages and values families as their children's first and best teachers, and is guided by research-based, data-driven outcomes.

Mr. Kevin Campbell asked why establishing a vision statement is necessary because, as he understands it, the charge to the Council is determined by the legislation; therefore, there is no reason to establish a vision statement.

Ms. Perry-Manning stated that legislature stated that the Council should create a vision.

Dr. Nancy Brown stated that she interpreted the legislation similarly to Mr. Campbell as the vision being the Council's recommendations, not a vision statement.

Dr. Shue reiterated that legislators have stated that they are asking for a "Vision" in a sense of a system; she then posed the question to the Council of "What should the early childhood system look like?"

Ms. Gates stated that the Council shouldn't get too bogged down but establishing a vision statement can be useful for the process.

Ms. Cindy Watkins motioned to adopt the vision statement; Representative Dobson seconded the motion; the motion passed with majority votes with one abstention (Mr. Campbell abstained).

Ms. Perry-Manning discussed the proposed goals of the Council per the discussion of the Council at the last meeting, mapping the Council's goals onto the relevant overarching Pathways to Grade-Level Reading Measures goals.

Representative Craig Horn took issue with the goal language being presented as increasing percentages of children, as opposed to *every* child.

Ms. Gates agreed that having all children reach benchmarks is the ultimate goal, but the challenge is to present this goal while not appearing unrealistic. Ms. Gates suggested changing language by taking out percentage language.

Dr. Sharon Ritchie stated that the title is relevant pathways, which is inherently incremental, and perhaps the title should be changed as well.

Dr. Shue stated that she uses all-encompassing language when she speaks of children's literacy.

Ms. Perry-Manning stated that the language was Pathways language, and the Council can certainly adapt the language to take out percentage benchmarks.

Dr. Brown supported modifying the language by taking out the Pathways language; not limiting the goals to reading proficiency, but to also include math; and using "age-level" achievement as opposed to "grade-level".

Dr. Brown stated that the language of the goals is not reflecting the development of a *system* of children birth-8. She proposed adding a fifth goal to reflect system development.

Ms. Perry-Manning stated that these goals are reflecting the three "buckets" that the Council chose to prioritize, and Governance and Funding are not reflected in these goals.

Dr. Gates expressed concern that adding a fifth goal will muddy the waters.

Ms. Perry-Manning proposed adding the word "system" to the first goal. "Develop recommendations to facilitate ongoing collaboration and coordination between departments, division, and organizations, at both the state and local level, to best serve 0-8 children and their families". Dr. Brown suggested changing to "best serve to develop a system."

Mr. Campbell stated that it needs to be made clear that the goals are only pertaining to the three buckets the Council has prioritized.

Dr. Gates suggested adding language to reflect the multiple funding sources—federal, state and local.

Ms. Perry-Manning suggested that she and Dr. Shue revise Goal #1 and bring the language back to the Council.

Mr. Campbell reiterated that this is unnecessary because the goal should be to meet the legislative requirements.

Presentation on NC Early Childhood Action Plan

- **Dr. Mandy Cohen, Secretary, NC DHHS**

Dr. Mandy Cohen began her presentation by reiterating the administration's three main goals, 1) Opioid crisis, 2) Medicaid, and 3) Early Childhood Health and Education.

The focus of her presentation today is to discuss the proposed **Early Childhood Action Plan**.

Vision for NC's Children—All North Carolina children will get a healthy start and develop to their full potential in safe and nurturing families, schools and communities.

By 2025, all NC young children from 0-8 will be 1) healthy (infant mortality, healthy birth weight, preventive health services, food insecurity); 2) safe and nurtured (child abuse and neglect, time to permanency for children in foster care, social emotional well-being and resilience); and 3) learning and ready to succeed (early development, Kindergarten readiness, 3rd grade reading proficiency)

Early Development—by 2025, increase the percentage of children who demonstrate on track developmental skills.

Kindergarten Readiness—by 2025, increase the percentage of children who enter Kindergarten developmentally on track, according to the Kindergarten Entry Assessment.

3rd Grade Reading Proficiency—by 2025, increase the percentage of children achieving reading proficiency according to NC DPI Performance Data on 3rd grade reading EOGs and the 4th grade National Assessment of Education Progress.

Representative Horn commented that North Carolina is being looked at by other States as an example of bringing HHS and DPI together. He questioned where the data is that addresses improving the quality of early education teachers and student outcomes. What are the accountability measures; how do we know that we are moving the needle?

Dr. Cohen stated that his questions are making the case for the plan's call for aligned metrics.

Representative Horn stated that definitions of terms are key to make sure that everyone is on the same page. NCSL put out a study called "No Time to Lose" and set some benchmarks. He stated the importance of *action* to move forward.

Ms. Gates commented on a slide in the presentation that showed a drastic change in the EOG and NAEP scores with the drastic decrease in NAEP scores.

Ms. Gates also echoed Dr. Brown's suggestion of including children's early math skills.

Dr. Brown reiterated the importance of including math competencies.

Dr. Brown responded to an earlier comment from Representative Horn about teacher preparation and the data that shows it is effective. She maintained that the data does suggest that a degree is not always necessary, but the difficulty comes with identifying the necessary steps for effective teaching.

Presentation Childhood Matters: Minutes Count

- **Dr. Sharon Ritchie, Sr. Research Scientist, Frank Porter Graham Child Development Institute**

Dr. Ritchie began by stating that data provides an effective lens through which to view practice, drive professional development agenda and guide and monitor change and progress.

Good teachers are critical to children's success; if children do not receive the ideal 2-3 years of positive academic experience, the children's negative perceptions are difficult to change. There is a huge proportion of children do not receive 2-3 years of positive academic experience for emotional climate and instructional climate (estimated 85%). Talented teachers tend to be first and third grade teachers which prevents the ability for children to receive *consistent* positive teacher experiences.

Drop-out prevention needs to start early, and it is important to focus on those most at risk

Redefining School Readiness—Dr. Ritchie illustrated that once children move into elementary years, self-regulation becomes blocked and self-regulation cannot develop when adults regulate behavior

Dr. Brown reiterated this idea by stating that children encouraged to be curious are suddenly getting in trouble for that curiosity.

Dr. Ritchie stated that self-regulation and executive functioning needs to be part of the curriculum.

Representative Horn relayed a story to illustrate the importance of adapting to circumstance and taking initiative.

Dr. Ritchie stated that education environment shifts from pre-k to Kindergarten from a choice activity to whole group activity; understanding these transitions is key to produce smooth transitions for children.

Dr. Ritchie discussed the "Culture of Silence"—silence and compliance has become the culture in the school environment, while the oral language development has been identified as one of the premier instructional strategies. Teachers feel compelled to impart as much knowledge as possible, but, while the amount of information imparted is greatest when teachers lean heavily on didactic teaching, child retention is not.

Representative Horn stated that this presentation was full of important information and inquired if this information has been shared with the teachers. Dr. Ritchie stated that she has relayed the information to DPI, but not directly to the teachers in NC.

Ms. Perry-Manning asked the Council to consider the committee recommendations while listening to these presentations.

Presentation NC Preschool Pyramid Project

- **Dr. Vivian James, NC Preschool Exceptional Children 619 Coordinator, NC DPI**

Dr. James began her presentation by stating that teachers need to be equipped to handle challenging behaviors they face in the classroom, including at-risk children and children with disabilities.

Within the NC Preschool Pyramid Project, teachers are being taught evidence-based practices with fidelity; 1) differentiated core—high quality supportive environments nurturing and responsive relationships; 2) supplemental support—targeted social emotional supports; 3) intensive support—intensive interventions

Professional Development for Teachers trainer modules have been created on NC Foundations—Social-Emotional Foundations for Early Learning (SEFEL) Trainer Modules.

Preschool Pyramid Project: 1) provide high quality Tier I, Tier II and Tier III training and support LEA trainers 2) support LEA preschool implementation team with data for improvement; 3) train LEA coaches to do mindful practice coaching and measure teacher fidelity (TPOT-- teacher pyramid observation tool); 4) increase the percentage of teachers who hit fidelity on the TPOT; and 5) increase child outcomes in social-emotional development (measures of average improvement scores of TS GOLD social emotional scores of classrooms with participating teachers compared with general population of children)

Representative Horn asked whether this information has been shared with higher education schools of education. Dr. James indicated that they have been presenting at Consortiums and inviting them to trainings; however, she is certain that the information is getting to the community college level.

Dr. Shue reiterated the importance of this work in providing teachers the skills to create an effective learning environment.

Representative Horn reiterated the importance of merging of HHS and DPI and the importance of using data to drive decisions using these joint efforts

Break 11:00am-11:05am

Meeting reconvened 11:05am

Work Group Progress Reports

➤ **Data Driven Improvement and Outcomes: Ms. Susan Gates**

Ms. Gates reported the recommendations will be on an early childhood (0-8) information system that facilitates and encourages the sharing of data between and among early childhood service providers and programs, DPI, DHHS and other relevant state agencies, all of which could be correlated with other state data systems.

➤ **Transition and Continuity: Ms. Elisha Freeman**

Ms. Freeman reported that the focus of the workgroup includes addressing current legislation related to Pre-K kindergarten transitions, as well as grade-to-grade transitions for school age children through grade three. Additionally, the group will focus on making recommendations to increase effective family engagement across this age/grade span.

➤ **Teacher and Administrator Preparation and Effectiveness: Dr. Nancy Brown**

Dr. Brown reported that the workgroup has chosen to focus its efforts and prioritize building towards drafting recommendations for policies that provide guidance to educator preparation programs that bring in a child's social-emotional development and the role of families, consistency across licensure programs and consider communication between agencies as it impacts families.

Reflections, Next Steps, and Close

Ms. Perry-Manning addressed the handout in the packet titled "Work Group Next Steps"

Work Groups Charge:

1. Work groups will define how the system will behave differently to achieve our desired goals for their specific target area if we are successful.
2. Work groups will draft one to three policy recommendations that would serve to make these markers of success a reality

Considerations:

1. Consider the feasibility of recommendations, as well as how they contextualize within additional initiatives within DHHS and DPI and across the state
2. What is the current makeup of the members of the work group? Who is missing from the group who could provide critical insight and expertise to the charge noted above?

Representative Horn asked about whether there is a clear difference between teacher licensure and certification. He thinks that there should be a distinction.

Ms. Perry-Manning stated that his comment reinforces his earlier comment about the importance of defining terms when making recommendations.

Dr. Brown asked about the timeline for the recommendations for the Council.

Ms. Perry-Manning stated there is not a legislated timeline, but Dr. Shue and Ms. Perry-Manning both stressed that natural timelines need to be considered e.g., legislative session.

Dr. Shue stated that a drafted report will be sent out this week that will have a due date for edits.

A Doodle Poll will be sent out for next meeting.

Meeting adjourned 11:35pm