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Subcommittee Communication and Engagement

Primary Question	Sub Question	DATA SOURCE
Are families and providers aware of available supports or services?		Survey parents and FFN through QRIS & KHS (potentially in the future-2023) State evaluation of the ARP funds, work with them to evaluate the impact such as community at large Another data place is the needs assessment and strategic plan focus groups for child maltreatment prevention
Are families utilizing supports and services?	How many children are enrolled in early childhood programs and services? Need to identify a specific list of program and services.	
Are providers utilizing supports?	How many providers are enrolled in early childhood programs and services? Need to identify a specific list of program and services.	
How are the websites being utilized and which websites should we be tracking?	What are the main websites that need to be connected?	Nevadachildcare.org website (cabinet and urban league) which will also be the strong start service center virtually ECAC websites

Subcommittee Policy and Finance

Primary Question	Sub Question	DATA SOURCE
What policies, regulations, system changes need to occur to support a comprehensive early childhood system?		
How much money is needed to support this comprehensive early childhood system?		
How do we get the money needed to support all of this?		Fiscal mapping project projected to be done by 2025

Subcommittee Systems Alignment

Primary Question	Sub Question	DATA SOURCE
What does coordination and alignment mean?	Where do policies and procedures conflict across agencies that limit access?	
	Where can applications be combined to reduce duplication of efforts?	
	Where are these agencies connecting? Where do we have aligned goals and policies?	Systems/Gap Network Analysis
What efforts currently support our EC system?	How are these supports funded?	
	What data do these services collect?	
	Can we tie service utilization to one or more supports with better outcomes?	

Subcommittee Leadership

Primary Question	Sub Question	DATA SOURCE
How do you measure what a coordinated system looks like? How many of those pieces are under coordinated leadership structure?		
How many decision makers are supportive of a revised structure? What are the key stakeholders that are needed to move this work forward?		Work under Guinn Center
Is the ECAC representative of all the early childhood areas that are being identified through the systems alignment group?		
How consistently are parents involved in the ECAC subcommittees and leadership?		

Subcommittee Data and Evaluation

Primary Question	Sub Question	DATA SOURCE

Systems Level Questions (NV SAGA)

Primary Question	Sub Question	DATA SOURCE
What is the process for building the capacity of ECS champions and leaders?	Is the pathway to leadership formal or informal? Is it equitable and accessible? Are DEIJ observed in leadership & decision-making at the state level? Which leaders have significant influence within the system? What dynamics currently exist related to your partnership with these leaders? Are there opportunities to engage others with existing leadership and decision-making power?	
Are there opportunities for families to participate as leaders in state decision-making?	Are families there to provide input and/or are they involved in the co-creation of policies and practices?	
Has an assessment of ECCS project leadership capacity been completed?	What are the strengths and opportunities with regard to current ECCS project leadership?	
Are there existing data systems that may be used to strengthen statewide systems of care?	Are they currently shared, and if so, by whom? What opportunities/forums exist to share data or information? What do these data systems capture? What data are commonly captured across systems? How are these data currently used to inform state ECS?	
Is there sufficient community or county-level data about service availability and access?	What formal coordination and communication structures are in place between communities and state-level ECS (e.g. regular meetings, data-sharing, community representation on advisory councils, etc.)?	
Within the state-level government, where do engaged partners sit?	What are the governance structures? Are there clear and coordinated partnership and communication pathways	

	across entities? Where are there silos?	
What state-level, tribal, or local efforts are in place to develop the early childhood workforce?	How is the early childhood workforce defined under these efforts? How are these efforts connected and is there duplication? Is it inclusive of professional addressing mental and behavioral health needs of children and their caregivers? Is it inclusive of and/or prioritize professionals with community context expertise?	
Is lived experience as a recipient of services or supports considered an asset or credential?	What efforts are made to ensure that the workforce includes representatives with cultural and linguistic backgrounds similar to the populations being served? Are these efforts effective?	
What current state-level strategic plans are in place?	What are their goals and priorities? How does the work of ECCS align with these plans and the partners engaged in them?	
To what extent are specific ECCS priorities integrated into these plans currently?	What existing state-level plans would be most feasible and have the highest value to integrate specific ECCS priorities?	
What ECS advisory bodies currently exist?	What are their goals and priorities? How are they aligned with the ECCS Advisory Council structure? How are families and/or community members engaged? Who is missing from the ECCS Advisory Council? Are there state-local pathways for coordination? Is there representation from systems outside of ECS (e.g., housing, employment, transportation, etc.)? Is there representation from tribal health or other child-serving systems?	

<p>Has a network analysis of engaged partners been completed?</p>	<p>If not, does your current ECCS team and/or partners have the capacity and expertise necessary to conduct a network analysis? Who are the most connected or most influential partners? Where are opportunities to build further partnerships, particularly outside of state-level government?</p>	
<p>What models for health integration and practice transformation are currently being implemented or piloted (e.g., behavioral health integration, early literacy promotion, delivery of group-care)?</p>	<p>Do they include a focus on P-3 populations, particularly comprehensive screening (e.g., developmental milestones, social-emotional development, social determinants of health, ACEs, maternal depression, autism, etc.) and effective connection to resources? What is their reach and do they reach underserved communities? Is there potential for statewide spread? Who are the decision-makers and collaborators leading these initiatives, and what is your ECCS initiative's current connection to them? Have these models been effective and culturally responsive for the populations in your state you are trying to reach?</p>	
<p>Are there broad statewide efforts such as Medicaid/CHIP reform, value-based payment initiatives, or other health transformation efforts underway?</p>	<p>If so, to what extent is early childhood included as a priority?</p>	
<p>What types of providers are currently engaged in ECS efforts?</p>	<p>Are there provider champions advancing practice transformation and/or prioritizing ECS in the state? What other types of providers are engaged or disengaged? Where is there significant coordination or supportive data around connection of the health</p>	

	sector and systems of services (e.g., home visiting, WIC, TANF/economic supports, early intervention, quality child care, etc.)?	
What coordinated intake and referral system (CIRS) efforts currently exist?	Are they statewide, regional, provider/system, or population specific? Who oversees the CIRS efforts (e.g., local advisory group, government entity, or nonprofit entity)? What is the reach of the CIRS (i.e., what percentage of eligible families are touched by the CIRS)? Are inequities or disparities in the families engaged in the CIRS observed?	
What current efforts are underway to change state-level policies to improve services and resources for P-3 populations?	Are these efforts reflected in any strategic planning? Who is providing leadership for these efforts? How are they advanced by engaged partners? How are these and other policy initiatives tracked? What state policies, statutes, or regulations are in place that are specifically addressing ECS?	
Has any fiscal mapping been completed for efforts relevant to ECCS?	If not, how may fiscal mapping be completed? Who are the key decision-makers/collaborators as it relates to ECS financing? Where are opportunities for alignment across major federal or state funding streams (e.g., MCH, child care and early education, child welfare, poverty relief, etc.)? How do current priorities align with American Rescue Plan Act (ARPA) funding, and how might these priorities be supported by ARPA funds?	
What is the current strength of ECCS' partnership with Medicaid?	Where are opportunities for coordination and alignment? Are there efforts to address inequities between the populations who are uninsured or insured under Medicaid and	

	commercially insured populations? Are there efforts to address inequities within the P-3 population receiving Medicaid benefits? What data are available from Medicaid and how might it be used?	
What structures and processes are in place to support family leaders?	Is the pathway to leadership formal or informal? In what settings or ways are families involved in ECS efforts? Are efforts made to ensure that family leaders are representative of the population being served by the system? Are family leaders compensated for their time? If so, how? Are these methods sufficient for the level of engagement expected? What relevant state, tribal, and/or community efforts to involve families in decision-making could be leveraged by ECCS to advance priorities?	
To what extent do state systems strengthen community-level ECS through funding, resources, and policy solutions?		
Across ECS, how do current policies drive or impede equity progress?	Have sector-specific or cross-sector bodies established equity goals that drive state-level efforts? If so, do they mention P-3 populations specifically? How are inequities in population needs and access to services identified and addressed? What inequities relevant to ECS are currently observed (e.g., service delivery, coordination with tribal systems, ECS workforce representation, etc.)? Are there any specific communities or sub-populations within your state who are consistently underserved or disengaged?	

Research Question 1: What is the Return on Investment for Nevada Early Childhood Education Programs?

Rationale and Purpose: The rationale is to conduct a longitudinal study to investigate the return on investment for Nevada Early Childhood Education (ECE) programs. Literature presents a potential return on investment of 17:1 provided we invest in early education (specifically for disadvantaged children; develop cognitive skills, social abilities, and healthy behaviors in ECE, and sustain early development with effective education through adulthood to gain a more capable and productive workforce (Heckman, 2015). Conducting this type of research will allow us to collect data points early in a child's life, intervene with specific stabilizers proven to mitigate barriers, and track the sustainability of effective education through adulthood, building a more capable and productive workforce, strengthening Nevada's economy.

Research Question 2: Can we predict student achievement on Nevada Criterion Referenced Tests (CRT) and the National Assessment of Educational Progress (NAEP) based on equitable access to quality P-3 programs?

Rationale and Purpose: The rationale and purpose is to develop a regression model to predict academic achievement based on various variables related to equitable access to quality P-3 programs? Data may include: program type and duration; quality ratings of P-3 programs/schools (QRIS & NSPF); highly qualified teachers and leaders; student demographics; staff-child ratios; public education spending per child; enriched and stimulating environments; rich and robust pedagogy; valuable teacher-child interactions; teacher and leader quality; entrance age and duration of compulsory education; high levels of student engagement; supporting and sustaining transition work; family engagement; and access to support services such as health care.

Research Questions 3: What components of P-3 are effective in eliminating achievement gaps and sustaining growth? What instructional approaches, curriculum, assessment practices, family engagement, and transition practices are occurring in P-3 classrooms?

- *Which classrooms are taught by highly qualified teachers with education and experience in P-3 and ECE?*
- *Which classrooms are led by highly qualified leaders with education and experience in P-3 and ECE*

Which students have access to quality programs, educators, and leaders? Rationale and Purpose:

The rationale and purpose is to conduct a study to delineate effective P-3 instructional approaches, curriculum, assessment practices, family engagement, and transition practices are occurring in P-3 classrooms to increase student engagement and achievement across the span of the early learning years. Such practices are expected to eliminate achievement gaps and sustain growth as indicated on early learning assessments and culminate into positive student outcomes on a trajectory P-20 pathway toward success. Research suggests students with equitable access to highly qualified and experienced P-3 teachers and leaders are more likely to sustain gains made in the early learning years. Evidence of best practices in P-3 is expected to translate into increased student engagement, achievement, and growth on statewide assessments and the

Nevada State Performance Framework. Data analysis would support the identification of sites, schools, and districts of “best communities of practices” for inclusion in the expansion of a quality P-3 statewide model that is exemplified at the national level.

Consideration of addressing the identified research questions, the Council is recommended to request appropriate stakeholders to determine existing and forthcoming data necessary to conduct the research. Several key area should be explored: What data exists or is needed to address the research questions? What needs to happen to address the research questions (think MOUs for cross-agency collaboration)? If data elements don't exist, recommendations to add elements for reporting/tracking and research practices

1. Cross-agency collaborations
 - a. Health care data exists within human health and services, need links to NDE and SLDS
 - b. Establish MOUs for cross-agency collaboration and shared data
2. Expand access to high quality child care, prek, and full-day kindergarten (Loewenberg, et. al., 2015)
3. Expand multiple domain assessment data from state and prek-development grant funded Prek (Loewenberg, et. al, 2015)
4. Expand Kindergarten Entry Assessment (KEA) data across FDK in the SLDS (ECS, 2014; CEELO, 2014)
5. Universal developmentally appropriate assessment data across 1, 2, 3
6. Registration – beginning at age 4 – families required to register children who are age 4 by September 30 to register their child with the Homeschool if they are not enrolled in public and/or private prek option. Public and private prek report enrollment data.
 - a. Need unique identifier (universal student ids assigned at onset of registration - age 4 by Sept. 30)
 - b. Explore whether health care professionals assist? As part of 4 yr. well-child check-ups and immunizations

Data available to school leaders and teachers by a specific date in the year prior to entry in the kindergarten year

QRIS

- Tracking coaching activates at the center in order to evaluation their relationship to the ERS and overall star rating.
- Deeper examination of the measurement of quality, the definition of quality, and how to really demonstrate the impact of early childhood education.