



## Nevada Early Childhood Advisory Council

### NEVADA EARLY CHILDHOOD ADVISORY COUNCIL (ECAC)

DATA & EVALUATION SUBCOMMITTEE

**PUBLIC MEETING**

**SEPTEMBER 21, 2023**

**1:00 PM**

*“Nevada’s children will be safe, healthy, and thriving during the first eight years of life, and the system will support children and families in achieving their full potential.”*

**Meeting Location:**

This meeting was held via zoom videoconference.

### MINUTES SUMMARY

#### 1. Welcome, Call to Order, and Roll Call

*Marty Elquist and Karissa Loper Machado, Subcommittee Co-Chairs*

- Marty Elquist called the meeting to order at 1:06 PM.
- Members in Attendance:
  - Amanda Haboush Deloye, Executive Director, Nevada Institute for Children’s Research & Policy
  - Ashley Dines, Parent Leadership Coordinator (South), The Children’s Cabinet
  - Justin White, Founding Partner, Data Insight Partners
  - Karissa Loper Machado, Manager, Nevada Division of Welfare and Supportive Services, Child Care and Development Fund
  - Marty Elquist, Department Director, The Children’s Cabinet
  - Matthew Hoffman, Education Programs Professional, Nevada Department of Education, Office of Early Learning and Development
- Members Not in Attendance:
  - Anna Marie Binder, Parent Representative
  - Elvira Weintraub, Provider Representative
  - Jon-Thomas Chaplin, Former Contractor Nevada Department of Education, Office of Early Learning and Development
  - Latisha Brown, Child Care Licensing Manager, Nevada Division of Public and Behavioral Health
- Public in Attendance:
  - Anna Villatoro, Early Childhood Comprehensive Systems Program Specialist, The Children's Cabine
  - Byron Dondoyano, Data Coordinator, Nevada Department of Education, Office of Early Learning and Development
  - Denise Tanata, Early Childhood Comprehensive Systems Consultant, The Children's Cabinet
  - Edith Farmer, Child Care Licensing Supervisor, Nevada Division of Public and Behavioral Health



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- Elyse Monroy-Marsala, Government Affairs Manager, Belz & Case Government Affairs
- Jamelle Nance, Director of Strong Start Initiatives, Children's Advocacy Alliance of Nevada
- Jamie Mendez, Early Childhood Workforce Specialist, Nevada Department of Education, Office of Early Learning and Development
- Jeffrey Duncan, Agency Manager, Nevada Department of Health & Human Services, Aging and Disability Services
- John Giammona Wilber, ECAC Administrative Assistant, Nevada Department of Education, Office of Early Learning and Development
- Kyle Patrick Apilado, Clinical Research Associate, Nevada Cancer Research Foundation
- Lindsey Wood-Lopez, Mental Health Counselor, State of Nevada Health & Human Resources
- Mary Regan, Child Care Resource & Referral Manager, Las Vegas Urban League
- Rosa Tamayo, Parent Leadership Coordinator (North), The Children's Cabinet
- Sabrina Jones, ECAC Systems Specialist, Nevada Department of Education, Office of Early Learning and Development
- Tiffany Olivias, Early Childhood Comprehensive Systems Manager 2, The Children's Cabinet

### 2. Public Comment #1

- Ashley Dines invited ECAC members and partners to participate in the ECAC Family Engagement Mentorship program. She explained that the purpose of the program was to assist in supporting authentic engagement of parent and family leaders at the table with the Nevada ECAC. She provided the link to the application (<https://forms.office.com/pages/responsepage.aspx?id=NF-6ed86Z0ujGUhSdpCnx-9Daew01ZKmatUE6MHHVFUMUROVTFKMDRMWUpFTzMxN1RQSDFKSEI2MC4u>) and invited questions to be directed to herself (Adines@ChildrensCabinet.org) or Rosa Tamayo (Rtamayo@ChildrensCabinet.org.)

### 3. Review and Approve Minutes from July 20, 2023

*(Discussion, For Possible Action)*

*Marty Elquist, Co-Chair*

- Karissa Loper Machado motioned to approve the minutes as presented.
- Justin White seconded the motion.
- All members voted in favor of the motion; none opposed.
- The motion carried.

### 4. Discuss KPIs in regard to Nevada's Children being Safe, Healthy, and Thriving

Committee will discuss KPIs for "Safe, Healthy, and Thriving" as it pertains to the Research Questions and Data Points draft.

*(Discussion, For Possible Action)*

*Marty Elquist, Co-Chair*

- Marty Elquist commented that last month's conversation regarding KPIs concluded by acknowledging that the NEKC Data Book already covered a lot of the material in question.
- Jamelle Nance shared the data book and explained that she would be reiterating some of the data points captured under Kids Count. She added that the project was spearheaded by deputy director, Dr. Tara Reigns.
- Jamelle Nance explained that the document looked at four primary areas to assess the overall well-being of Nevada's children: economic well-being, education, health, and family and community context.
- Jamelle Nance explained that that data set defined poverty as an income of below \$27,000 for a family of two adults and two children. She said that the number would be further tailored to realities facing Nevada families.



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- Jamelle Nance continued that the number of families where no parent had a full-time job were collected and that the number indicated need for childcare.
- Jamelle Nance reiterated that the present Kids Count data was meant to “hone in” on childcare.
- Jamelle Nance highlighted a portion of the Kids Count data which indicated the amount of young children not in school. She added that the Strong start Initiative was really trying to pull in children not connected to early childhood programs who may be experiencing homelessness.
- Jamelle Nance continued by explaining that the other indicators captured were geared towards older children. She suggested potentially retailoring the data to be more relevant towards young children, if that was the primary information that the subcommittee needed captured.
- Jamelle Nance mentioned that the health portion of the data set also captured the percentage of low birth-weight babies which was used as a major indicator of access and equity in infant health services.
- Jamelle Nance highlighted that the data set also captured children without health insurance. She commented that this point would be especially important in the context of Medicaid expansion opportunities.
- Jamelle Nance highlighted the “percentage of children and single parent families” as a potential important data point for ECAC purposes.
- Jamelle Nance reiterated that this report captured a lot of indicators but should be tailored to specific age groups. She added that Nevada-specific data was also available to compare against nationwide indicators.
- Marty Elquist agreed and highlighted that obesity rates of children and teens age 10-17 were captured. She asked if indicators regarding childhood obesity were also being collected.
- Amanda Haboush Deloye answered yes; she explained that this data was captured in the kindergarten health survey. She added that obesity data was also captured specifically for low-income kids who were part of the Wik program.
- Marty Elquist asked if the research questions document presented in the July meeting could be presented again, as it was not with the present meeting materials on the ECAC website.
- John Giammona Wilber answered that all remediated materials should be allowed so long as they were made available to the public within 24 hours of being presented.
- Denise Tanata confirmed that, so long as material was made available to the public, they should be allowed to be presented.
- Karissa Loper Machado commented that the research questions being discussed were included with the meeting materials. She asked if those research questions would be referenced.
- Marty Elquist screenshared the research questions document.
- Karissa Loper Machado highlighted the “Outcomes” section of the document. She clarified that the wording of the outcomes had been discussed previously. She requested that the subcommittee decide whether the document should act as guide to which data should be gathered/ continued to be gathered.
- Karissa Loper Machado reiterated that the data that the subcommittee was gathering should be geared towards the ECAC’s mission of ensuring a safe, healthy and thriving early childhood environment.
- Marty Elquist thanked Karissa Loper Machado and mentioned that she was comparing the Kids Count google sheet and the research questions document.
- Marty Elquist pinpointed that underneath health outcomes, the research questions document listed chronic disease and mortality rates (maternal and infant.) She asked the subcommittee for thoughts about including health insurance statistics with health outcomes as well.
- Karissa Loper Machado agreed that health insurance coverage among the 0 through 8 age group in question was a relevant factor. She added that the subcommittee might want to know the Medicaid and general insurance rates for women of child bearing age. She added that the child insured rate from birth should also be collected.
- Karissa Loper Machado commented that early childhood vaccination rates could also be used as an indicator of child health status.



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- Denise Tanata suggested distinguishing between health outcomes and factors that impact health outcomes. She suggested further dividing health outcomes by sub factors of impact indicators.
- Karissa Loper Machado suggested adding infectious disease to the chronic disease indicator piece.
- Marty Elquist agreed that infectious disease rates should be counted alongside chronic disease rates.
- Amanda Haboush Deloye agreed with the addition of infectious disease rates as an indicator.
- Marty Elquist suggested using the current outcomes list as a starting point with the understanding that it would be a living, dynamic document that could be updated.
- Matthew Hoffman voiced agreement with the suggestion, noting that finalizing an abrupt decision of every factor to be included in the outcome list would be overwhelming.
- Marty Elquist agreed and commented that the feeling of overwhelmingness could be stifling and, “if we try to be perfect we’ll never move on.”
- Karissa Loper Machado requested a motion to approve the outcomes for the definition of safe, healthy, and thriving children and families.
- Marty Elquist responded that she would entertain the motion.
- Karissa Loper Machado motioned for the subcommittee to approve the nine bulleted outcomes (with the addition of infectious diseases) as key performance indicators for ensuring safe, healthy, and thriving children and families.
- Ashley Dines seconded the motion.
- All members voted in favor of the motion; none opposed.
- The motion carried.
- Marty Elquist explained that, regarding the early childhood systems piece of the mission statement, members had identified program service areas to track. She requested that members review the data points suggested for:
  - Early Learning Child Care
  - Home Visiting
  - Early Intervention Special Education
  - Nutrition Food Assistance
  - Parental Engagement
  - Prenatal Postpartum Care
  - Children’s Health Care
  - Mental and Behavioral Health
  - Economic Social Support
- Denise Tanata requested changing the language of “birthing centers” to “group prenatal care” under the third bullet of Prenatal Postpartum Care
- Marty Elquist asked if using “birthing centers/ group prenatal care” would be acceptable language.
- Karissa Loper Machado commented that she could ask the maternal child health group for their input on preferred language if needed, but that the “birthing centers/ group prenatal care” language should cover everything.
- Marty Elquist suggested adding the “birthing centers/ group prenatal care” language for entertaining a motion for approval with the understanding that it could be changed later if a need was identified.
- Denise Tanata suggested adding the (PN3-E) evidence based strategy designation to the line item in question as well.
- Marty Elquist reiterated that the (PN3-E) designation should be added alongside the new language.
- Amanda Haboush Deloye commented that group prenatal care was, “a model, so birthing center should have that model”
- Jamelle Nance commented that her organization captured the amount of children receiving well checks and how many were attending their well check appointments. She suggested adding these indicators to the Children’s Health Care piece.
- Karissa Loper Machado agreed; she added that well visit checks were an important indicator of children’s health status. She suggested adding the indicator of percentage of children attending their well check visits.



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- Amanda Haboush Deloye asked for clarification as to whether the indicator would refer to EPSDT or all children and well visits.
- Karissa Loper Machado suggested capturing both indicators.
- Amanda Haboush Deloye clarified that a place to access the data would be more important as data from EPSDT was already easier to capture.
- Marty Elquist commented that the subcommittee would lean on Amanda Haboush Deloye and Karissa Loper Machado for the proper language in editing this indicator.
- Karissa Loper Machado commented that she would be sending proper language along to John Giammona Wilber for editing. She added that she'd research a readily available source for data on children's well visit appointments and attendance.
- Amanda Haboush Deloye requested that Kyle Patrick Apilado check the data dictionary for the piece in question.
- Marty Elquist added that the next item on the agenda would concern comparing the definition of "healthy, thriving, and safe," the research questions document, and the data dictionary for gap analysis.
- Sabrina Jones requested that the information Karissa Loper Machado would be sharing with John Giammona Wilber also be sent to her.
- Marty Elquist commented that she wasn't sure if the (PN3-E) designation had been updated to include mental or behavioral health.
- Denise Tanata clarified that while the designation had been updated to include early intervention services, there was no specific mention of mental or behavioral health.
- Marty Elquist recommended a standing agenda item to review (PN3-E) designation updates and consider adding them to any applicable sections on the research questions document.
- Marty Elquist asked the subcommittee for any remaining comment or conversation regarding mental/ behavioral health or economic social support.
- Jamelle Nance asked if the subcommittee would consider adding children experiencing homelessness to any of the program service areas in question.
- Denise Tanata clarified that the program service areas in question included reference to the vulnerable populations definition which does include housing insecurity. She added that if the want was to make the reference more explicate, a housing insecurity item could be added under economic social support.
- Marty Elquist reminded those present that each of the data points referenced would ideally be disaggregated by the vulnerable and underserved community definition. She clarified that the recommendation put forward was to have a separate data point that would be the percentage of the general population experiencing homelessness.
- Amanda Haboush Deloye added that housing stability was one of the indicators of thriving children/ families.
- Marty Elquist agreed that the housing insecurity piece was covered under indicators of thriving children/ families. She asked the subcommittee if this was where the piece should remain.
- Matthew Hoffman agreed that the housing insecurity piece was covered under indicators of thriving children/ families.
- Marty Elquist asked for clarification on how housing stability is defined in the "data world."
- Amanda Haboush Deloye answered that while she did not have a definition at the ready, she would provide one shortly.
- Jamelle Nance asked if the subcommittee would consider the ratio between household income and household expenses. She suggested that a ration above 30% could constitute housing insecurity.
- Marty Elquist asked Jamelle Nance for clarification on if she was referring to housing stability.
- Jamelle Nance answered yes.
- Marty Elquist requested an agenda item for next month's meeting to clarify the meaning of housing stability and how that would be measured.
- Karissa Loper Machado commented that the National Institutes of Health's measure of housing instability included homelessness, multiple moves, and doubling up with family and friends/ not paying rent, as reported in their "2 year survey." She suggested the National Institutes of Health as a source for housing instability information.



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- Marty Elquist clarified that next month's agenda item would include Amanda Haboush Deloye explaining the housing instability data NICRP was collecting and comparing it to the data from the National Institutes of Health.
- Karissa Loper Machado agreed with adding the suggested agenda item.
- Amanda Haboush Deloye commented that the Clark County Children's Mental Health Consortium team just met with Medicaid from their EPSDT to better track if children were even receiving their well visits. She added that this work was aimed towards better communicating with parents if and when their children were actually receiving a screening.
- Marty Elquist commented that a developmental screen could encompass both physical development and mental health. She added that the research questions document didn't list developmental screenings under either category.
- Marty Elquist asked if a physical developmental screener should be added under the children's health piece and if a mental health screener should be added under the mental and behavioral health piece.
- Marty Elquist clarified that although a well check would be added under children's health care, a well check would not ensure receipt of a developmental screening.
- Amanda Haboush Deloye answered that it was unclear if the two could actually be divided using the current data. She suggested that new data points could potentially verify receipt of a developmental screening but that the current kindergarten health survey relied on parent report.
- Amanda Haboush Deloye reiterated that any piece the subcommittee would be adding should have means of verification.
- Marty Elquist added that previous conversations had centered around which data points the subcommittee felt were important enough to keep. She asked if a developmental screener piece would really indicate if children's health care was trending in the right direction.
- Amanda Haboush Deloye answered that she though physical and mental health developmental screeners were important enough to add.
- Denise Tanata voiced agreement for adding the screenings. She added that there was a typo under the first bullet of Mental/ Behavioral Health: "depressing" should be changed to "depression."
- Marty Elquist commented that the addition should be the number/percentage of children receiving a developmental screening by type and by each factor in the vulnerable population definition, including race and ethnicity. She clarified that that should be put under children's health care, and that an item using the same language regarding mental health screenings should be added under mental behavioral health. She asked if "mental health screen" should be changed to "social emotional screen."
- Amanda Haboush Deloye answered that the language would depend on where the screenings happened. She added that she though it should be called a mental behavioral health screener and that "social emotional" represented one way of doing the screener.
- Marty Elquist suggested using the language "the number of children receiving a mental health/ social emotional screener by type and each factor in the vulnerable population definition including race and ethnicity."
- Amanda Haboush Deloye agreed with the language presented.
- Marty Elquist asked if there was any further discussion regarding data points in each sector area.
- Marty Elquist recommended that since language had been updated on a few spots of the research questions document, that a vote on the updates be added as an agenda item to the next meeting agenda.
- Marty Elquist asked the subcommittee if they'd care to "start fresh" next meeting with the research questions data points updated to compare to the data dictionary. She clarified that the next meeting would encompass solidifying the housing stability definition and then comparing the research questions data points to the data dictionary.
- Amanda Haboush Deloye voiced agreement for "starting fresh" next meeting.
- Karissa Loper Machado agreed. She added that she'd be researching outcome measures and research questions in title 5 maternal child health block grant.
- Justin White commented that preliminary some gap analysis between the research questions document and the data dictionary could be beneficial to have ready for next meeting.



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- Marty Elquist answered that Justin’s suggestion would be very helpful. She asked if Justin White and Kyle Patrick Apilado could complete that analysis on the “healthy, safe, and thriving” outcome questions as well as the early learning piece.
- Amanda Haboush Deloye commented that the intention was to use the indicators discussed as priorities in gap analysis with the data dictionary.
- Marty Elquist asked for clarification on if Amanda Haboush Deloye would be going through the data points and research questions and highlighting the corresponding parts of the data dictionary, and if this were the same action Justin White was suggesting.
- Justin White answered, “directionally...yes.”
- Amanda Haboush Deloye offered to meet with Justin White to clarify the action item.
- Justin White asked if the idea was to use the data dictionary to indicate outcomes or to use outcomes to point towards the data dictionary. He added that he’d be happy to meet to clarify, and that the confusion is what inspired him to suggest a preliminary gap analysis with only one of two of the discussed outcomes.
- Marty Elquist thanked Justin White for his offer to complete the action item. She asked if he’d be comfortable leading a gap analysis agenda item during next month’s meeting.
- Justin White answered yes.

### 5. Discuss Agenda Items for Next Meeting, October 19, 2023, 1-3pm

*(Discussion, For Possible Action)*

*Marty Elquist, Co-Chair*

- Marty Elquist suggested that agenda items for the next meeting include:
  - Solidification of the Housing Stability definition.
  - A vote on the updated data points research question document.
  - Gap Analysis of the research questions data points and data dictionary.
- Marty Elquist asked if there were any other suggested agenda items. Hearing none, she recommended moving onto public comment #2.

### 6. Public comment #2

*Public comment will be taken during this agenda item on any matter within the Council’s jurisdiction, control, or advisory power. No action may be taken on a matter raised under this item until the matter is included on an agenda as an item on which action may be taken. The Council Chair will impose a time limit of three minutes.*

- Marty Elquist requested that the Data & Evaluation Subcommittee roster be updated to include Karissa Loper Machado as co-chair.

### 7. Adjournment

- Marty Elquist adjourned the meeting at 2:11 PM.

### ACTION ITEMS:

- add infectious disease as an indicator alongside chronic disease in the research questions
- change language in the research questions to “birthing centers/ group prenatal care” and add (PN3-E) evidence-based strategy designation



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- decide on proper language to add percentage of children receiving well checks as an indicator in the research questions.
- create a standing agenda item to review (PN3-E) designation updates and consider adding them to any applicable sections on the research questions
- solidify housing instability definition
- fix a typo under the first bullet of Mental/ Behavioral Health: “depressing” should be changed to “depression.”
- update research questions to include the language “the number of children receiving a mental health/ social emotional screener by type and each factor in the vulnerable population definition including race and ethnicity.”
- vote on approval of the updated research questions document
- complete preliminary gap analysis between the research questions data points and data dictionary for next meeting.
- update Data & Evaluation Subcommittee roster to include Karissa Loper Machado as co-chair