

**Southern Oregon Early Learning Services Hub
Agency Advisory Council
Raise Up Oregon Work Sessions**

Directions:

One person in your group should facilitate the conversation – reading the Objective and strategy and leading the members through each brainstormed item on the list. Your group is tasked with adding more details to what is listed, building on what’s there, and asking clarifying questions of what you see listed.

One person in your group will take notes, directly onto this document.

Before moving onto the next strategy, you need to come to consensus in ranking the strategy in terms of urgency.

1= Critical, must be addressed NOW

2= Very important to address within one year

3= Although very important, it can wait until some of the other objectives are completed, since we cannot do everything at once.

Finally, look at the agencies listed as “Point” for this Strategy – any other suggestions?

We will repeat this process for the next meeting or two, filter the results using your rankings, and begin to create a 2 year strategic plan for the early learning system in Southern Oregon.

Objective 1: Families are supported and engaged as their child’s first teachers

What are we doing?

What else can/should we do?

Strategy 1: Expand parent education

RANK PRIORITY 1-3: 1

Listo Family Literacy Program - Supporting Latino Families w/Language & Education Program – **how many families are being served? Do they have capacity to serve more families?**

Better collaboration for all services to reach more families. **What should this look like?**
Family Nurturing Center/Rogue Hub Needs Screener: contact with 3,500 families, served over 1,000 families since April. **MOVE TO DIFFERENT SECTION**

Early Intervention/Early Childhood Education (EI/ECSE) – interventions for children experiencing delays –**how many more children are being served with SSA expansion? What does the service model look like during COVID?**

Prenatal Referrals **From who to where? OB Providers are key!!! How to help Pediatricians be consistent in referrals and information? Make a list of top recommendations that can be consistently offered by everyone. Can referrals to EI/ECSE be made once a diagnosis is made, even during**

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	pregnancy, so a connection is there?
VROOM - how can we encourage more partners to promote?	Incentives to engage families early and keep them engaged. Ideas for incentives?
State/Federally funded Preschool/ child care subsidies: Head Start, Early Head Start, Preschool Promise, Employment Related Day Care (ERDC) subsidy; scholarships via privately run early learning programs	Better collaboration with healthcare providers-- more info shared with providers.
The Family Connection Parenting Hub – are the current offerings sufficient for the needs of families right now? What does the demand look like during COVID? Significant increase in offerings and participation during COVID.	Parent classes via Zoom are also kind of Home Visit programs now
Nurse Family Partnership - home visiting	Parent groups--learn from each other (Bridging Communities?)
Healthy Families Oregon -home visiting and onsite programming	Family Independence Initiative pilot starting this spring through Southern Oregon Success
Early Head Start - home visiting and onsite programming	
SOELS Kaleidoscope Play and Learn Groups –currently modified due to COVID, but in high demand from families.	
SOELS Kindergarten Readiness Backpacks – share them with partners to give to families with children who will be entering kindergarten.	
Swindells/Bridging Communities/FACT Oregon for support, training and connection for families with children experiencing disability	
Early Literacy Programs – list them	
Jackson County Library System – Storytime, Baby’s 1 st Book, 6000 Books Before Kinder. Services during COVID?	
Josephine Community Library – list opportunities	

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and limitations on services during COVID	
Promote Strengthening Families Resilience Campaign	
Family Nurturing Center	How to build capacity to increase their wrap around services?
Resource List for all new parents	Videos, podcasts, groups available--a go-to resource
Promote Protective Factors Training, Agency Self-Assessment & Family Engagement Toolkit to family-serving organizations	
Point: Child and Family Wellbeing Subcommittee	
Strategy 1.2: Scale culturally responsive home visiting RANK PRIORITY 1-3: 2 (COVID has impact)	
DHS working with Employee Resource Groups (ERGS) to recruit, retain, & train	AllCare's plan for equity training for home visitors
Training for culturally responsive parent leadership cohort	Hiring of culturally diverse staff in agencies that do home visits – train organizations to do effective recruitment and training
Providing translators for every home visit	Require grant recipients to embed equity training and practice
Phoenix/Talent District Home Visits	Universal home visiting
Early Intervention/Early Childhood Special Education	Remove stigma and income qualifier
Point: Home Visiting Network, MIECHV Leadership Group, HCCSO	

Objective 2: Families have access to high-quality (culturally responsive, inclusive, developmentally appropriate) affordable early care and education that meets their needs	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 2.1: Infant and Toddler Care RANK PRIORITY 1-3:	
LISTO Family Literacy Program	Recruit racially and ethnically diverse providers
DHS TANF Child Care Subsidy & ERDC – allows families to select the provider they want, as long as the provider is listed with DHS	Expand Baby Promise
Preschool Promise – many Spanish-speaking providers	

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Early Head Start	
Point: Child Care Resource Network for Provider Supply/Child & Family Wellbeing Subcommittee for Family Engagement	
Strategy 2.2: Preschool Care RANK PRIORITY 1-3:	
LISTO	Recruit racially and ethnically diverse providers
DHS TANF Child Care Subsidy & ERDC	Continue to expand funding for state sponsored early learning
Preschool Promise	
Head Start and Oregon Pre-kindergarten	
Point: Child Care Resource Network for Provider Supply/Child & Family Wellbeing Subcommittee for Family Engagement	
Strategy 2.3: Strengthen child care assistance programs RANK PRIORITY 1-3:	
DHS TANF Child Care Subsidy and ERDC (Employment Related Day Care Subsidy) – needs more promotion to both providers and families	Educate providers and families in DHS TANF Child Care Subsidy and ERDC
Preschool Promise	Awareness of child care quality rating system
211 – needs more development and promotion	Awareness of 211 providing information on quality rating
Outreach to child care providers	Assistance for “Missing Middle”
Point: ECE Workforce Subcommittee	
Strategy 2.4: Build capacity to ensure healthy and safe child care RANK PRIORITY 1-3:	
CCRN – Training / TA to child care workforce	Further professionalize the career. List examples
	Incentivize providers to be part of SPARK rating system
Point: Child Care Resource Network & ECE Workforce Subcommittee	
Strategy 2.5: Improve essential infrastructure for high-quality early care and education RANK PRIORITY 1-3:	
CCRN – Trainings, Technical Assistance, Coaching	Expand CCRN trainings and include more Culturally Responsive trainings
RCC & SOU – ECE Educational Pathways	

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Point: Child Care Resource Network & ECE Workforce Subcommittee

Objective 3: The early care and education <u>workforce</u> is diverse, culturally responsive, high quality and well compensated.	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 3.1: Improve professional learning opportunities for full diversity of ECE workforce	
RANK PRIORITY 1-3: 2	
DHS recruiting from customer base	Increase business acumen support to ECE workforce
ORO scholarships- should have focus on recruiting diverse scholarships	
JCLS and WorkSource Rogue Valley provide résumé & career assistance	Require state and federally funded ECE providers to receive diversity/equity trainings- required for state funded programs ADD to licensing requirements
	Leadership opportunities for ECE educators of color- incentivise/bonuses for starting leaders
	Better/more effective lobbying - advertise lobbying days, incentivise teachers to participate in lobbying opportunities
	SOCORAEYC presenters varies including persons of color
Point: CCRN & ECE Workforce Subcommittee	
Strategy 3.2: Build pathways to credentials and degrees that recruit and retain a diverse ECE workforce	
RANK PRIORITY 1-3: 2	
ORO – partnership with RCC and SOU	Compensate with competitive salaries
Head Start partnerships with SOCFC	Better partnerships with school districts and Migrant Ed to encourage youths of color to engage in ECE workforce
<i>Cohorts offered through RCC to start/finish degrees</i>	More workforce prep between organizations and colleges/universities
Early Childhood Enhancement Project Fall and Winter Term including coaching and CoP	Promote ECE as a profession
<i>Head start sends staff to speak to different classes for both family services and ECE</i>	Eileen is planning to meet with the Dean to create a stronger communication for recruitment

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Head Start hired a PD coordinator to support staff who are pursuing degrees or attending courses to support their PD plan	
RCC offers mentoring for ECE Staff?	
Point: RCC, SOU and ECE Workforce Subcommittee	
Strategy 3.3: Compensate and recognize ECE as professionals RANK PRIORITY 1-3: 1	
Compensating for education	Include ECE professionals with K-12 and library professionals
Head start will pay for some coursework if scholarships are not available	Rogue Worksource needs to include ece educators as a positive employment opportunity
SORS workgroup is aligning k-12 educators and ece educators	
Point: ECE Workforce Subcommittee	
Strategy 3.4: Improve state policy to ensure ECE work environments guarantee professional supports RANK PRIORITY 1-3: 3	
Continue lobbying at state level	Standardized health benefits for all educators
Law passed on equal employment wages- Oregon equal pay act	experience years= degree year for compensation
	IMprove state policy- specific work on the EL council
Point: CCRN & ECE Workforce Subcommittee	

Objective 4: Early childhood physical and social-emotional health promotion and prevention is increased	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 4.1: Ensure prenatal-to-age-five health care services are accessible, high quality, and culturally and linguistically responsive RANK PRIORITY 1-3:1	
OHP Availability – high enrollment, but what is the utilization?	Be aware of eligibility/comfort of being served and availability
Kairos Jackson Services, Options, Family Solutions offer children and family mental health services	Being able to support all families financially
La Clinica - Services that are culturally and linguistically	Better communication with hospitals and healthcare professionals

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responsive.	
Rogue Challenge Hub / Connect Oregon (Unite Us)	Need bilingual doulas/OB providers
The Family Nurturing Center - Referral Process	GIS mapping of services by type, eligibility, and capacity. Define high quality, culturally responsive, and linguistically responsive. Really understand the landscape of what is available. Ensure CIE efforts are connected.
<i>Point: Child & Family Wellbeing Subcommittee, HCCSO (for Josephine)</i>	
Strategy 4.2: Increase capacity to provide culturally responsive social-emotional supports for children and families RANK PRIORITY 1-3: 1	
Offering services in home language – which organizations?	Need more dual language services/materials
Providing materials that are culturally responsive – which organizations?	Expand ACEs to include cultural differences
ACEs trainings in English and Spanish	Provide all-inclusive support
JCLS – bilingual programming, materials and outreach	Bilingual/Cultural parenting education
	Ensure that all Medicaid funded services have certified medical interpreters. Expedite the interpreter certification process. Focus on multicultural/multilingual staff hiring and retention. Train up staff on TI Care Train up staff on DEI Practices Increase Family Coaching and Training via EI/ECSE
<i>Point :Early Learning Educational Equity & Child and Family Wellbeing Subcommittees</i>	
Strategy 4.3: Increase and improve equitable access to early childhood oral health RANK PRIORITY 1-3: 3	
Offering services – but piece-mealed	More dental providers/locations
Kids Care Fair – Josephine	Need Kids Care Fair in Jackson County

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County	
Visit the schools/classrooms – referrals	
Options has dental staff on-site to get screening.	
Point: CCOs, CDOs and Child and Family Wellbeing Subcommittee	
Strategy 4.4: Strengthen coordination among early care and education, health, and housing to promote health and safety for young children	
RANK PRIORITY 1-3: 1	
The Rogue Challenge (closed loop referral process for families with children)	Need a strategy to coordinate the ECE, health and housing sectors
	JCLS – offer meeting rooms for talks and classes
	Promote services at the pre-natal level
Point: Hub, Rogue Hub	

Objective 6: Children and families experience supportive transitions and continuity of services across ECE and K-12 settings	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 6.1: Establish shared professional culture and practice between ECE and K-3 that supports all domains, including S-E learning	
RANK PRIORITY 1-3: 1	
PLT's with early learning and K-12 teachers	Engage more districts in PLT's
Raising professionalism of ECE workforce	Raise wages and benefits for ECE
Warmline	Better engagement with ECE
Walking alongside families (FSP) through the process	JCLS – Ask K-12 educators how we can help transition kids into schools (kindergarten readiness)
JCLS – Hiring an outreach-to-schools liaison	Better communication to ECE from CCRN
JCLS – Educator and Early Literature newsletters	Look at established processes
Teresa Slater sits on SOHS ECE Committee	More collab & communication between ECE and K staff and administrators
SORS Early Learning & Kindergarten Workgroup	More collab between ELD and ODE
Point: Hub/KPI and Southern Oregon Success Early Learning & Kindergarten Transition Workgroup	

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Strategy 6.2: Improve the Oregon Kindergarten Assessment (OKA) to better support decision-making between early learning and K-12 stakeholders RANK PRIORITY 1-3: 3 (due to ELD retooling this assessment)	
KA is utilized by all districts. It is more informative at the systems-level and not used by teachers to inform practice.	Look at a better assessment tool more timely and student focused Update: ODE will be retooling this assessment.
	A more flexible assessment to accommodate a variety of learning styles Consider COVID impact on any sort of assessment
Point: Hub/KPI and Southern Oregon Success Early Learning & Kindergarten Transition Workgroup	

Objective 7: Parents and caregivers have equitable access to support for their physical and social-emotional health.	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 7.1: Increase equitable access to reproductive, maternal, and prenatal health services. RANK PRIORITY 1-3: 2	
CCO's offer: Babestore, Starting Strong, Doulas, Wrap-Around Services	Healthcare for all (region and state)
La Clinica offer: Access for anyone and Spanish language ;mobile clinics at schools and missions	Elementary/Middle/High School reproductive class and consent comprehensive curriculum
Home Visitors (MIECHV, EHS, Siskiyou Community Health Center/HFO,NFP)	Increase awareness of available services
Planned Parenthood sliding scale health services	Implementing CHIP
Prenatal Task Force (JoCo) and Reproductive Health Taskforce (JaCo)	Need to better serve Latino community, especially mental health
Teen Parent Support Group in Josephine County; provides social connections, parenting education, life skills, connects young parents to resources	<u>Live</u> interpretation for deaf community
Oasis Center of the Rogue Valley – Work with families with opioid dependency; Wraparound team of DHS, parole/ probation, drug court	Child care providers need access to healthcare – <i>Power to the Profession</i>
Magdalene Home - temporary housing for pregnant and parenting teens; connects to resources	
Pregnancy Care Center in Josephine County; Pathways classes, pregnancy classes, referrals to	

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partner agencies	
Mom Support Groups	
SORS workgroup focused on expanding school-based health centers in Jackson and Josephine Counties	
Family Nurturing Center Warmline, Needs Screener to ID healthcare and other needs	
Rogue Hub Closed Loop Referral Collaborative	
Point: Child and Family Wellbeing Subcommittee	
Strategy 7.2: Improve access to culturally and linguistically responsive, multi-generational approaches to physical and social-emotional health. RANK PRIORITY 1-3: 2	
100 interpreters for region	Schools and teachers need more training around culturally-responsiveness and trauma
Asante Sanctuary program and training staff with trauma informed/culture response	CBO's, Health and Education Partners - Hire bicultural/bilingual staff
The Family Connection grant with providence	Help parents feel more comfortable and confident in advocating for their children at school
Kairos Jackson Services – two bilingual therapists	CBO's, Health and Education Partners - Translating material into Spanish
Equity/Inclusion training (DHS, agencies)	Easier billing process
DHS resource groups – LGBTQ, Latino, African American (recruit staff and foster parents)	Better services for special needs
DHS mental health navigators	Need more navigators – everywhere! Specifically bilingual. Possible SOU micro-credential program?
Working to expand School Based Health Centers and Parent/Guardian Peer Support Group; Also Grants Pass ODHS has Multi-generational bilingual tele-health.	More acute care options across the board – especially for youth
Hub convening Early Learning Educational Equity Taskforce	Need more bilingual material
JCLS – Tai Chi in Medford	Extend additional offerings

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Head Start programs provide supports for families to get connected to health care providers	Include “Story Walls”
	Work more closely with CCOs to develop new services.
	Expand bilingual staff for SBHC, peer support groups, mental health navigators and Multi-generational bilingual tele-health.
Point: Child and Family Wellbeing Subcommittee and SORS Human-Centered Equitable Services work group.	

Objective 8: All families with infants have opportunity for connection.	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 8.1: Create a universal connection point for families with newborns.	
RANK PRIORITY 1-3: 1	
Library Storytimes/groups	Improve the process in which the birthing team hands off the new mom to agencies that can provide support (doula – mom’s groups) Martha Rivera- doula business Grandmas2go- doula Sadie Emmons - doula
Family Support & Connections – New Mom’s Circle (bilingual)	Provide quicker follow-up with family following birth have tangible resources/pamphlets that can be handed out during different moms groups is helpful
Dad’s Circle	Begin connecting with agencies before birth to help support the family later
Home Visiting – Siskiyou Community Health Center/Healthy Families, Nurse-Family Partnership, Early Head Start, CCOs (bilingual)	Hospitals sharing resources with a softer approach find out who is offering virtual groups with families during COVID ASANTE NICU baby cuddler- can DHS help families by providing those resources to families ESD and FNC has access to videographer, would it

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	<p>work to create a video that can be showed to families in the birth center on the resources available</p>
<p>Kid Time – Toddler/Baby programs</p>	<p>Standardized screening/support for anyone who works with an infant help make connections for families on places to be screened/observed FIND OUT WHAT TOOLS ARE AVAILABLE AND WHAT IS BEING USED</p>
<p>Doula Program/Midwives/La Leche</p>	<p>More open and safe spaces for Latino families with newborns kidtime can be a good resource to support this and be available for spanish speaking families</p>
<p>Grandmas2Go- ORCHID babies partnership with eat, sleep, console with Asante</p>	<p>The majority of pregnant couples take childbirth classes. Is there a hand-off/introduction to other partners once they are completed?</p>
<p>Social media “Mom groups” - (Crystal will provide a list of groups in the valley) Ashland Family Circle Medford Oregon Moms MOMS Club of Medford, OR Rogue Valley Doulas Playdate Connection Southern Oregon Rogue Medicine Wheel Rogue Valley Moms for Sale/Advertising Group Rogue Valley Services Help Wanted Group Playdate Connection Southern Oregon Providence Medford Mommy/Daddy /Baby Group Wolf Creek Concerned Citizens Phoenix, Oregon Grants Pass Community Chat West Medford Residents Central Point Oregon - What’s Happening Around Town White City Community Awareness East Medford Residents</p>	

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Grants Pass/Merlin's moms group Rogue River Oregon	
Kaleidoscope Play and Learn groups- infant/toddler group offered through primary health, replicating in the future	
Asante Eat, Sleep, Console	
S.O. Pediatrics screens for post-partum	
LISTO – New parent group	
Oasis Center supports to pregnant and new moms	
Child Welfare – Increased visits for bonding	
Kairos Jackson services– Needs/strengths assessment for newborns (DHS can better plan for serving family/foster family)- family therapy	
Babies First Book - JCLS supplies hospitals with board books including resources and the importance of reading (bilingual) →	Include resources (succinctly)-
Dolly Parton Imagination Library Books- josephine community library	
Breastfeeding support group through pediatric office	
family nurturing center offers therapy for infants/toddlers	Hub and CCO's surveying health care providers to find best way to get parenting ed and family resources to families through providers
JCMH offering PCIT for toddlers	
Teen Parent Program at GP High School through HS	
Teen parent support groups offered through EL hub	
sisikiyou recruiter position in hospital	
providence offers prenatal classes and doula services as well as new parent groups/touchbase with families- Tracy Hansen?	
grandmas2go created videos snip its on infant massage	

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Point: Child and Family Wellbeing Subcommittee	
Strategy 8.2: Provide paid family leave.	
RANK PRIORITY 1-3:	
Oregon Legislation passed for up to 12 weeks of paid leave beginning in 2023 (HB 2005 from 2019 Session)	Advocacy from community and local businesses
	Look to other nations/systems that already are already providing proper family leave for guidance
	Sharing best practices for how businesses can implement policy
	Flexibility in the workplace
	Comprehensive advocacy plan
	Increase awareness of need
	Prioritize family connection/work-life balance
	SOELS Family Friendly Business Project
Point: JCLS business librarian, chambers of commerce, rotary,	

Objective 9: Families with young children who are experiencing adversity have access to coordinated and comprehensive services.	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 9.1: Expand and focus access to housing assistance and supports for families with young children	
RANK PRIORITY 1-3:	
Rogue Hub Closed Loop Referral Collaborative	Build partnerships with businesses/hotels to develop more suitable housing for families
Housing Consortium (portal for referrals)	Forge a stronger relationship with HAJC (KPL)
Housing first approach	Provide child care onsite with assisted housing
Family Nurturing Center – Housing Project	Encourage/advocate supports for split custodial rights
Maslow case management	Encourage people to advocate for themselves and provide support to help them in the effort
Housing Authority of Jackson County (HAJC) –Newbridge Place	Encourage development of co-housing, connecting families for support - create “The

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	Village”
Rogue Retreat (housing and substance abuse help)	Sliding fee scale for housing
JCLS – Displaying community resources/ reference teams provide information	Reduce housing waiting lists
	Housing Consortium staff funding
	Need Housing Authority representative on AAC from both counties
	Change how housing application fees are collected
	CCO SDOH housing project
Point: Child and Family Wellbeing Subcommittee	
Strategy 9.2: Provide preventive parenting support services to reduce participation in the child welfare system	
RANK PRIORITY 1-3:	
Parent support groups	Increase attendance and involvement at parent meetings
JCLS – Resumé assistance, databases, help using computers and Internet	Provide Strengthening Families training for <u>all</u>
DHS SS – Shifted to strength-based model	Educate workforce employers
Parent Education – FNC, TFC, Kid Time	Emphasize social connections
Kaleidoscope Play and Learn Groups	Consider cultural differences (cookie-cutter approach does not work)
Oasis Center of the Rogue Valley	Emotional support of parents
FSC, NFP, EHS/HS, offer parenting education	Additional training for DHS CS/SS
Strengthening Families training series - 5 Protective Factors	Normalize parent education
JCMH – Wraparound program	
Child Welfare – Safe Families (5 protective	

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factors)	
LISTO - Invite agencies to share services with families	
DHS SSP – Looking at whole family and providing specialized care	
CCRNWarm Line supports providers and families	
Kairos family therapy	
Heart with Mission (keeps kids out of CW system)	
System of Care (Jackson and Josephine) - focused on coordinating and aligning services	
Point: Child and Family Wellbeing Subcommittee	
Strategy 9.3: Improve nutritional security of pregnant women and young children, particularly infants and toddlers	
RANK PRIORITY 1-3:	
DHS – Food boxes in offices for emergency needs	Better coordination with WIC–Spanish resources?
WIC	More mobile food pantries
Head Start/EHS – works with families →	Immigration issues currently affecting use of resources
JCLS – Summer meals program →	Allow adults to eat too, or at least purchase
Food Pantries	Outreach to Latino communities – ensure safety
Medford Food Project (Green Bag)	Food for families
Medford School District Food Service Program - SODEXO	WIC representative at AAC
Rogue Valley Farm to School	Involve medical partnerships in caring way, i.e. repercussions of reporting
Farmers Market now accepting WIC	Support breast-feeding moms
KPL groups offer snacks and possibly a meal depending on the site	Farm to families – provide classes and food
Point: Child and Family Wellbeing Subcommittee	
Strategy 9.4: Link high-quality early care and education, self-sufficiency,	

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and housing assistance programs RANK PRIORITY 1-3:	
LISTO/HS, EHS – Wraparound for whole family	DHS – More in-house education on policy
Head Start/EHS – Family Advocates	Partner with other agencies – AAC can help
DHS – Family Coaches (funding for housing assistance, encourage child care as a career)	Greater attendance at AAC meetings
Kairos – Family Support Specialists	Universal linking of online resources
UNITE – Helps with OHP and DHS navigation	Schools become “no wrong door” with mobile office and caseworkers
JCLS – To Quick WIC	JCLS – Providing space for classes/groups
CCOs – Provide links to information	All community clinics support and link to services
HUB – AAC Meetings	
Point:	

Objective 10: State-community connections and regional systems are strengthened.	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 10.1: Family voice in system design and implementation. RANK PRIORITY 1-3:	
Kaleidoscope Play and Learn parent surveys	More education on the effects of poverty to professionals and families
Professional Learning Teams	Parent Forum with Children’s Institute
Systems of Care Workgroup	Community survey (registered voters)
Resources offered though libraries →	More outreach
Hub and other surveys (School Readiness backpack surveys, Preschool Promise parent surveys, The Family Connection (TFC) parent survey, Head Start Parent Advisory Council, Jackson Care Connect resource assessment survey) →	Increase number of Hub surveys
Jackson Care Connect – Youth Advisory Council	Collect parent feedback during Wellness checks

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Parent-Teacher Association/Organization	Oregon Helps use data collected from parent forms to inform need
AllCare Community Advisory Council has parents on council for family voice	Use best practices for other organizations and share data and what works!
LISTO has 2 Parent Leadership Committees	Make sure people use the CHIP database to coordinate efforts
LISTO Core Champion Advisory Committee for fund development	Ensure that data from underrepresented communities is collected
LISTO parents are part of hiring process and are trained	Ask for participation
Family Nurturing Center has parent peer counselors	Build leaders with training and support
TFC community and exit surveys	OAEYC – parents on planning committee
TFC parents are on advisory board	
TFC - Relies on FACT OR and Bridging Communities for help	
<i>Point: Early Learning Hub and other partners' parent surveys, advisory councils</i>	
Strategy 10.2: Ensure family-friendly referrals	
RANK PRIORITY 1-3:	
Warmline referrals	Increase number of trainings available to all staff in early childhood programs
211 info	Reach out to families to determine how they want to receive the trainings
AAC meetings	“No Wrong Door” eligibility process
Rogue Challenge closed loop referral system	Continuity of referrals
CHIP housing for priority populations	Make resources available in preferred language
	Access for those with special needs
Housing Continuum	More collaboration for improved alignment
EI/ECSE referral process	Improved relationships between providers
	Explain the “why” to increase engagement
	Connect Oregon Helps to Rogue Challenge
	PP/Interagency referral platform

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Point: Hub	
Strategy 10.3: Further develop the local Early Learning Hub system RANK PRIORITY 1-3:	
Diverse group of representatives	→ Fill in gaps/missing representation
Kaleidoscope Play Learn Groups	Increase youth and family representation
Professional Learning Teams for Kindergarten readiness	Provide parent stipends to encourage participation
Conscious Discipline training	More Conscious Discipline trainings for providers and parents
SOC-ORAEYC Conference	Interact with families in less formal way
Parent/Provider Education	Use social media to communicate
No Small Matter Screening on October 30 (offering Spanish translation)	Get ideas from Youth ERA (formerly Medford Drop) to encourage youth participation
Partnering with Southern Oregon Success	Need to improve marketing language
Strong advisory council	Create Director's Association
Home Visiting Network	
Protective Factors trainings for professionals	
Point: Hub	

Objective 11: Investments are prioritized in support of equitable outcomes for children and families.	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 11.1: Ensure resources are used to reduce disparities in access and outcomes. RANK PRIORITY 1-3:	
Focused Child Care Network for Spanish-speaking providers	Shared database/system among partners
CHIP work on family supports	TFC track demographic information
Kid Time's Spanish programs	Partner to share existing data/results/successes
Spanish-speaking Preschool Promise providers	Create Investment Committee
CCO/Hub Provider survey on family resources for clinicians to complete	Work to reduce disparity access to resources
JCC resource assessment survey	More help for higher levels of care

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TFC variety class schedule	Medicare for All
Library provides bi-lingual materials	Allow for different methods of access
CCRN – bilingual services	Have one data collection point
Kairos uses C.A.N.S. to measure outcomes	Teach/empower parents to advocate for themselves and their children
Rural outreach	
LISTO is collecting outcomes from families to determine how we can best work collaboratively	
LISTO provides parent training on interacting with education system	
LISTO informs parents on community resources →	Partners working together to increase knowledge
Coordinating care (housing, food, childcare) →	Need to do more
Point: Hub	
Strategy 11.2: Align and expand funding opportunities for culturally specific organizations. RANK PRIORITY 1-3:	
Migrant Education Pre-K Program →	Expand program to meet family schedules
LISTO	Conduct outreach to determine families' needs
JCC bilingual community outreach program	Offer more “need based” services
Kid Time bilingual staff/programming	Stronger partnerships with multi-cultural organizations
TFC interpretation	Create Investment Committee
Bi-lingual Preschool Promise	Define “culture”
CCRN – may have lists	Identify culture gaps
	Remove barriers for skilled bilingual/bicultural workforce
	Build workforce by reaching out to client base (offer training and support in transitioning)
Point: Hub, CCRN	

Objective 12: The alignment and capacity of the cross-sector early learning workforce is supported.	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 12.1: Support consistent, high-quality practice among all professionals	

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in the family and child-serving early learning workforce. RANK PRIORITY 1-3:	
SOC-ORAEYC – Professional Development	More coordination to connect and collaborate efforts to serve families with disabilities
CCRN	Collect data on the start of the workforce
TFC	Provide mental health services for whole family
Head Start – Professional Development	Bring SOU/RCC early education students into proper pre-k programs
LISTO – Professional Development	More practice in classrooms prior to graduation
Strengthening Families	RCC/SOU easier transfers – “pipeline”
Family Support and Connections	Child care for PD opportunities
RCC/SOU – Early Childhood Education	Improve wages
SORS – ACEs	Provide PLTs with Kindergarten teacher and ECE providers – increase cohesiveness
S.O. Child Family Council (HS, EHS, PP, LISTO, TFC)	Provide substitutes during trainings
Parent Family Child Engagement	
FACT OR	
Bridging Communities	
Swindells	
Protective Factors Trainings	
Early Childhood Enhancement Project	
Conscious Discipline Training for Preschool Promise	
Home Visitor Network Meetings	
MIECHV Quarterly Trainings	
HUB PLT for Kinder Readiness	
TFC Quality Control Process	
Community Resource Orientation for Providers (CROP)	
Early Literacy Trainings	
Power to the Profession	
Point: Hub, Head Start	
Strategy 12.2: Improve cross-sector recruitment, retention, and compensation. RANK PRIORITY 1-3:	
Working to increase professionalism of the field	Need more language/cultural support
CCRN	Need bilingual curriculum/training
ELD/OCE	Political advocacy for Early Childhood Education

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SOELS – Conscious Discipline	Collect data on strengths and challenges of frontline staff
Bilingual differential pay/bonuses for retention	Advocate for funding/long-term funding
Learning Loft keeps additional staff to address behavior challenges	Address burnout/offer sabbaticals
	STOP “warm body” hiring
	Inverted Triangle staffing
	Support direct staff more
	Use of proper Human Resources operations
	Offer more paid professional development opportunities
	Listen to staff needs and deliver on those needs
	Presence at job fairs to educate those interested in ECE
	High School / ECE Classes
	Shift organizational culture regarding “asking for help” for hiring/training needs
	Sub-list for ECE providers
	Legislative advocacy
	ECE Benefits
	Provide moral support for ECE workforce
Point: Hub, DHS	

Objective 13: The business and philanthropic communities champion the Early Learning System	
<u>What are we doing?</u>	<u>What else can/should we do?</u>
Strategy 13.1: Educate business leaders on the economic value of early care and education to the Oregon economy.	
RANK PRIORITY 1-3:	
CCRN – Support college education for higher qualified teachers to create business/childcare centers	Encourage more professional development
TFC/Southern Oregon Pediatrics partnership	Invite more business leaders to Early Learning System meetings to educate and create

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	partnerships
KidTime working with businesses to partner for funds for the museum & travel Medford to pull in more parents to the region	Encourage family-friendly business practices (telecommuting, flexible hours, etc.)
Chamber of Commerce	Friendly spaces in the workplace for new moms
	Collect data on impact on early care and education ROI and promote it
	Parenting education support for employees
	Support flexible leave benefits for parents
	Child care Executive Partnership (Florida model)
	Businesses start Pre-K Program on campus
	Government partner with businesses
	Work with School Boards, Chamber, Rotary, SBA, women's groups, etc.
	Family Friendly Business model
Point: Hub, SORS	
Strategy 13.2: Introduce business leaders to the science of early childhood development and the impact of public investment.	
RANK PRIORITY 1-3:	
ACEs sessions for businesses →	Provide more
CHIP will be collecting data →	Share data
Report on Social Determinants of Kindergarten Readiness including obstacles for foster children, poverty and ESC →	Share this data with business community
Children First for Oregon in advocating – get them here	Raise awareness of struggles and barriers for people of color and with special needs
	Demonstrate cost savings
	Show that when families feel supported, they will stay (testimony data, exit interviews)
	Invite people to join boards and committees
	Ask for help from businesses to add and fundraise
	Share Harvard report (ideal learning website)
	Bring back poverty simulation training (include part 2 with actions steps)
	Identify champions to speak with the business community to show successes
	Speak with a united voice to Chamber of

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	Commerce
	Develop a presentation to share with business and boards
	F.F.B
	Community Auction with participating businesses
Point: Hub,SORS	

Objective 14: The data infrastructure is developed to enhance service delivery, system building and outcome reporting.	
What are we doing?	What else can/should we do?
Strategy 14.1: Strengthen data-drive community planning and integrate early learning data into the statewide longitudinal data system.	
RANK PRIORITY 1-3:	
Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP)	Have system to use same SSID#
Stewardship Committee	Shared community database accessible by agencies online
Rogue Challenge	Criminal background checks (universal)- systems should talk to each other
EC Web- access shared with other agencies	Annual data summit
Head Start Community Assessment and Program Planning Process	
TFC data collection and planning	
CCRN CCRIS- licensing database plus parent portal	
NACCRRRA- database of providers	
ORO- Oregon Registry for Professional Development	
Head Start THEO- statewide MIECHV database	
Teaching Strategies GOLD- child assessment database	Needs to be more affordable and user-friendly ex. Brightwheel...plus align data assessment collected
PIR- local and statewide national database on child and family wellbeing indicators	Update technology
SPARK/TRI/WOU- star rated providers	
OARN- relief nursery	
EC Web	

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Points of Contact: Hub Data Committee to be formed soon.	
Strategy 14.2: Develop and implement a population survey to track child and family well-being. RANK PRIORITY 1-3:	
OPK Survey	Local text surveys
OCDL parent survey	Thought exchange tool
Child outcome study for IFSPs	Could SPARK data be shared/generated for others?
SPARK surveys	How to collab with healthcare?
Rogue Challenge	How to get home care?
AHC Clinic Survey- assessing SDOH needs	Shared MIECHV or public health HR?
Head Start Parent Survey	Have one accessible family survey, SOELS?
	Early learning needs to track kindergarten transition including one page summary of child's social emotional development
Point: SOELS Child and Family Wellbeing Subcommittee	
Strategy 14.3: Create and use an early learning system dashboard for shared accountability. RANK PRIORITY 1-3:	
CHIP- excel spreadsheet that is tracking activities and outcomes for families matter group →	Apply for higher level data system
OCF- Susan Fischer project	Need for database for job openings in early learning centers
Rogue Challenge Collaboration	Collect ASQ from partner organizations
SORS tracks Kindergarten readiness on dashboard	Incorporate OPIP data
Head start and Early Head Start-SRGs and child outcomes plus TSG and shine report	Consider how to share data for the projects listed in this section
EC Web and COS- State and ODE reporting	
Point: Hub and SORS	