

NCIT Data Case Story

Addressing Data Challenges to Track Progress on Community Initiatives



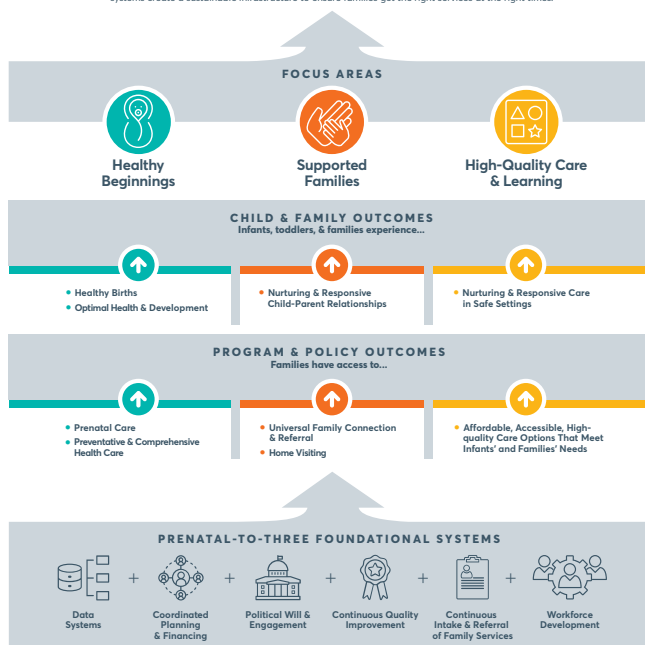
The National Collaborative for Infants and Toddlers (NCIT) is committed to advancing promising policies and programs that ensure every parent has the support they need to give their children a strong start in life. To guide communities in their efforts, NCIT created the *Prenatal to Three Outcomes Framework*—a roadmap for communities to identify a common set of outcomes that support infants and toddlers on their pathway to prepare for kindergarten.

The Outcomes Framework guides communities in their efforts to develop action plans that lead to their identified outcomes and supports the assessment of their progress.

These case stories show how communities are bringing the NCIT Outcomes Framework to life through their own efforts, and how they are tailoring their approach to meet the unique needs of the children, families, programs and services in their areas.

Measuring Success: Healthy Child Development By Age 3

With a focus on equity, states and communities can build and sustain locally responsive programs, policies, and systems that meet the needs of infants, toddlers, and their families. Policy outcomes support child and family outcomes, and prenatal-to-three systems create a sustainable infrastructure to ensure families get the right services at the right times.





THE NCIT OUTCOMES FRAMEWORK IS A TOOL FOR COMMUNITIES TO TRACK PROGRESS TOWARDS THEIR GOALS

To develop the Outcomes Framework, NCIT identified a set of indicators that provide research-based, valid metrics for each of the identified outcomes that can be measured and tracked over time. Each of the NCIT communities have been asked to identify the indicators they aim to track to both define the baseline of the issue they are trying to address and, over time, to measure the reach of their initiatives and efforts in making progress on the indicators. When possible, communities are encouraged to look at these data not only for the entire population in their community but also to disaggregate the data by characteristics such as race/ethnicity, immigration status, home language, and household income.

Many NCIT communities have been able to identify and analyze the data they need to track their efforts, and several of the communities have developed innovative approaches to address gaps in the data that is available.

This brief highlights NCIT communities and their innovative approaches to identifying the data they need to track progress towards their goals. Each of the communities profiled did not initially have the data they needed at the county or city-level to track progress towards their goals. Instead, they used unique approaches to obtain the data and information needed for success.

Key lessons learned from these efforts include:

- **Start with the data you have.** Instead of waiting until county-level data are available, Dauphin County is using data from a responsive caregiving training initiative to understand changes in practice among participating caregivers and the outcomes of the children they work with.
- **Go directly to the source.** Community leaders in Minneapolis are working directly with churches, libraries, family outreach programs, and home visitors to identify family, friend and neighbor providers since these caregivers do not exist in any formal data system.
- **Create a collaborative.** In Tarrant County, organizations that work directly with infants, toddlers, and pregnant women are collaborating to foster a culture of developmental promotion across the county. The Ages and Stages Questionnaire (ASQ) is used as a community-wide developmental screening tool. In 2018, the collaborative set its sights on creating a coordinated intake and referral system of screenings and services, connecting families to the necessary supports and resources available to empower them in fostering their children's healthy development. In 2019, the collaborative joined the Help Me Grow National Network as the first affiliate in the state of Texas, now known as Help Me Grow North Texas.

DAUPHIN COUNTY, PA

To improve caregiving practices, Dauphin County has been working with the state of Pennsylvania to gain access to data on children experiencing suspensions and expulsions from childcare settings. The county plans to use this data to determine how Positive Behavioral Intervention and Support (PBIS) trainings can help minimize the number of suspensions and expulsions in the community. To achieve their goals, Dauphin County identified four primary indicators to inform their work and track their progress:

1. **Number of children receiving an ASQ-SE developmental screening and referral to Early Intervention (EI):** Dauphin County offers the ASQ-SE tool with training on use and referral to child care providers within the county who attended their PBIS trainings. County staff use data on the number of child care providers who use ASQ-SE screening tools and refer to EI as needed. In addition, the County also cross-references referral sources with individuals involved in the trainings to determine if new referral sources should be developed from this targeted community awareness.



- 2. Number of caregivers who receive training on warm, attentive and responsive caregiving:** Dauphin County developed a standard survey to be administered following PBIS training and other relevant stakeholder events. This survey provides data on the number of caregivers who complete the training and assesses their understanding of the PBIS framework and early intervention as a resource to support the inclusion of children with developmental delays, including behavior.
- 3. Number of children who experience interactions with teachers and caregivers who respond to children's individual needs and promote their self-regulatory skills:** Several weeks after the PBIS training is completed, care providers complete a survey on their use of PBIS practices, specifically the strategies they use to individualize their response to children's needs and promote self-regulation and social emotional development.
- 4. Number of children suspended or expelled from child care sites in Dauphin County:** Since the data on the number of child care providers who report having suspended or expelled a child do not exist at state or local systems, Dauphin County is in the process of exploring data sharing agreements with the Office of Child Development and Early Learning (OCDEL) as a data system to track these incidents is developed. Ideally, OCDEL will collect the data from licensed child care providers in the Keystone Stars system, a state-administered QRIS, and provide aggregate data at the county level.

MINNEAPOLIS, MN

Minneapolis is working to increase the reach and scope of their child care provider network to include Family, Friend, and Neighbor (FFN) care providers. By expanding their reach to FFN providers, Minneapolis plans to address two primary goals. First, they will identify the FFN providers so they can better connect them to supports and quality improvement resources. Second, once the FFN providers are engaged in the provider network, it may be possible to track the quality of care provided in these care settings.

Goal 1: Identify Family, Friend, and Neighbor care providers. FFN providers are often located outside of formal networks, which can make identifying and reaching them difficult. Although Minneapolis' goal to include these providers in the provider network will make it easier for families to find them, the city also needs data about these providers to bring them into a more formalized network. Minneapolis is currently working with churches, libraries, Early Childhood Family Education programs, and home visiting programs to identify and engage FFN providers.

In their outreach they are working to develop trust and rapport among FFN providers and communicate to them the resources that are available to support their work. This provides the city with an opportunity to gather more information about infant and toddler care providers and engage them in ongoing communication about future trainings and supports.

Goal 2: Track the quality of FFN care. Minneapolis is working to build a robust and well-funded system of services for infants and toddlers that is responsive to the needs of families and children and focuses on equity, cultural relevance, and accessibility to families and FFN providers. Minneapolis has a universal process in place in which all children are required to be screened prior to entering kindergarten by Minneapolis public schools or pediatricians. If Minneapolis can encourage FFN providers to participate in the provider network, it may be possible at a future date to connect data from the kindergarten screenings to their efforts to increase the quality of FFN services.



Minneapolis is also working collaboratively with existing coalitions across the state that are connected to FFN providers. The coalitions are working to garner statewide support for a legislative agenda that will move forward in the form of a bill supporting coordinated data collection, data systems, and coordinated financing and planning to increase resources for FFN providers.

Minneapolis is also in early discussions with state partners to explore the possibility of working together to create a statewide data sharing system and universal child ID that will allow the city to follow children and find out where and who caregivers are.

TARRANT COUNTY, TX

Tarrant County is working to ensure that all families with young children have access to and knowledge about the community supports that are available to them, and that all children, especially those who may be at risk for developmental delay, are identified early and are provided with the appropriate services to support their optimal growth and development. They are using the following indicators to track progress:

1. Number of children who are screened for early intervention. Because developmental screenings can take place in a variety of settings, Tarrant County needed a collaborative strategy for maximum reach and data collection. The county is working with a range of providers throughout the area, including:

- Pediatric and OB/GYN providers
- Federally Qualified Health Clinics (FQHCs)
- Women, Infants, and Children (WIC) clinics
- Childcare providers, including Early Head Start, Head Start, and home-based care
- Home visiting providers
- Public libraries
- Other community providers that interact with young children and their families

This network of community providers is using the Ages and Stages Questionnaires (ASQ) and the Help Me Grow system model as part of a coordinated intake and referral system. Together, they share the collective goal of reaching 4,000 infants and toddlers in households with incomes that are less than 200% of the Federal Poverty Level (FPL) by December 2020.

2. Number of children who are referred to and receive early intervention services. Tarrant County is also working toward customizing a data system that can capture the full scope of the screening process, which includes the screening itself and a closed-loop referral process. The data system FINDconnect was purchased for use in Tarrant County to build out a centralized access and referral point to assess families' needs, collect vital data, process referrals to appropriate community resources, and ensure access to referred resources. Once the system is in place, the collaborative will gain a deep understanding of families' needs in their community, broken down by demographic and geographic factors, as well as the rates of children who have received the appropriate services identified by screenings.



The National Collaborative of Infants and Toddlers (NCIT) is committed to advancing promising policies and programs that ensure every parent has the support they need to give their children a strong start in life. NCIT is working to do this by supporting communities in pursuing efforts that ensure infants and toddlers have: 1) healthy beginnings; 2) supported families; and 3) high-quality child care and learning. With this vision, there are two main goals of NCIT: 1) to increase the number of families with children prenatal-to-age three who are connected to essential health, development, and social emotional support services and 2) increase the number of low-income infants and toddlers receiving affordable, high-quality child care. Reaching these goals require support systems for both parents and children, at or before birth, and expanding access to affordable, high-quality infant and toddler care and learning environments in settings that meet the families' needs.

To guide communities in their efforts, NCIT created the Prenatal to Three Outcomes Framework. The purpose of the Outcomes Framework is to serve as a roadmap for communities to both identify a common set of outcomes that support infants and toddlers on their pathway to preparing for kindergarten. The Outcomes Framework also helps guide communities in developing action plans that lead to their identified outcomes, and supports their assessment of their progress. The Outcomes Framework acknowledges that community efforts to promote the kindergarten readiness of infants and toddlers is dependent on: 1) developing a prenatal to three system with a focus on equity; 2) supporting families' access to high quality services; and 3) promoting outcomes for infants, toddlers, and their families. There are eight key outcomes in the framework that collectively work to support children's readiness for kindergarten entry, with associated indicators communities can use to track their progress.

The purpose of this brief series is to share examples of how the NCIT communities are or are not using the Outcomes Framework as a driver for change in their efforts. These briefs aim to understand what is the value added of having an Outcomes Framework to guide the work of the NCIT communities? In working with the national partners who are supporting the individual communities in their efforts, we have identified the following ways in which the Outcomes Framework is being used as a tool to help communities:

- identify the data they need to track progress towards reaching their identified goals;
- promoting data sharing among entities, community agencies, and/or organizations;
- inform systems building and strategic planning;
- promote participatory engagement among families;
- bring stakeholders together, championed by a community leader

In addition to these themes, we also learned about the strategies the national partners are using to support NCIT communities use of the Outcomes Framework. This brief closes with a summary of these technical assistance strategies in an effort to share our understanding of how an Outcomes Framework can be effectively used to promote action.

The production of this brief would not be possible without the time and input from several NCIT members. These individuals include Cheryl Gundrum and Bobbi Segin (Dauphin County Department of Mental Health/Autism/Developmental Programs, Dauphin County); Deby Ziesmer and Ann DeGroot (Minneapolis); Faith Rivera, M.Ed., Pritzker Fellow Help Me Grow North Texas, Tarrant County Public Health, and Michelle Larva, M.S., Project Manager, Early Learning Alliance.