RHODE ISLAND EARLY LEARNING COUNCIL

June 28, 2017
10:00 a.m. - 1:00 p.m.
Save the Bay
Meeting Agenda

Welcome, Opening Remarks, and Meeting Overview
- ESSA and Early Learning Update
- State Budget/Legislation Update

Data Dashboard: Progress Toward Goals in Early Learning Council Advisory Plan

Children with High Needs: Identifying and Serving Young Children with Developmental Delays and Disabilities

Policy & Program Updates
- Governor’s 3rd Grade Reading Plan
- DHS: Market Rate Survey and Infant/Toddler TA
- DOH: Successful Start Update
- RI College: Certificate of Graduate Studies in Early Childhood Leadership
- RIDE: Social-Emotional Learning Standards

Facilitated Discussion: Learning from Race to the Top – Early Learning Challenge
- Successes
- Challenges
- Priorities for the Future

Public Comment

Next Steps
FY18 State Budget Update

- FY18 Budget Early Learning (B-8):
  - $45.5 million increase for education funding formula to LEAs
  - $2.5 million made permanent for evidence-based programs to support English Language Learners
  - $1.1 million increase for State Pre-K
  - $390K increase for state-funded Head Start slots

- Not included:
  - $1 million in Governor’s budget for enhanced/tiered rates to promote access to high-quality care for infants and toddlers
  - $250K to support implementation of Kindergarten Entry Profile
  - Funding to support implementation of CCDBG requirements (12 month eligibility, 3 month job search, etc.) – 12 month delay
Early Learning Legislation

- Child Care Assistance Program Exit/Cliff Effect Pilot was made permanent (allowing families to retain child care assistance as income climbs from 180% FPL to 225% FPL)
- Child Care Assistance Program Tiered Quality Rates
- Child Care Assistance Program Eligibility Expansion
- Evidence-Based Home Visiting Act
- Early Childhood Innovation Act
Early Learning Council Data Dashboard

Tracking Progress Toward Goals
**GOAL:** By 2020, 47% of third graders will have reading skills at grade level; By 2025, 75% of third graders will have reading skills at grade level.
ACCESS: # Early Learning Programs

Early Learning Programs in Rhode Island

- Centers
- Family Child Care
- Public Schools

• Data not available for public schools prior to 2013-2014 school year
GOAL: By December 2016, there will be 10,000 children ages birth through 12 participating in CCAP. By December 2020 there will be 14,000 children ages birth through 12 participating in CCAP.
ACCESS: Early Head Start & Head Start

**GOAL:** By 2020, there will be 800 children enrolled in Early Head Start

**GOAL:** By 2020, there will be 2,972 children enrolled in Head Start
GOAL: By 2016, there will be at least 504 children enrolled in State Pre-K program. By 2020, there will be at least 1,080 children enrolled in State Pre-K
As of June 30, 2016, 6% of infants and toddlers were receiving Early Intervention (6% in the core cities, 6% in remainder of state)
Of the 818 victims of child maltreatment under age 3 in 2016, 16% (133) had been found eligible for Early Intervention as of March 2016.

**GOAL:** By 2020, 100% of children under age 3 who have been victims of child maltreatment will be referred to EI/First Connections for assessment and access to services if not already enrolled.
As of June 30, 2016, 8% of children ages 3 to 5 were receiving preschool special education services (8% in the core cities, 9% in remainder of state)

**GOAL:** By 2020, there 11% of children ages 3 to 5 will receive preschool special education services (12% in the core cities and 9% in remainder of state)
GOAL: By 2020, 85% of preschool children with disabilities will be receiving their special education services within high-quality, inclusive early childhood settings.
GOAL: By 2016-2017, 100% of RI kindergartners will be enrolled in full-day kindergarten.
GOAL: By 2020, there will be 1,600 families enrolled in Evidence-Based Home Visiting. By 2020, 80% will begin services prenatally.
ACCESS: K-3 Chronic Absence

K-3 Chronic Absence (Missed 18+ Days)

By 2020, the K-3 chronic absence rate will be ≤ 10%
As of January 2017, 80% of licensed centers are participating (257 of 321)
As of January 2017, 18% of licensed centers have a rating of 4 or 5 stars (58 of 321)

GOAL: By December 2015, 30% of licensed early learning centers will have a rating of 4 or 5 stars. Goal of 100% participation.
• As of January 2017, 84% of licensed family child care homes are participating (411 of 488)
• As of January 2017, 1% of licensed family child care homes have a rating of 4 or 5 stars (7 of 488)

GOAL: By December 2020, 8% of licensed family child care will have a rating of 4 or 5 stars. Goal of 100% participation
• As of January 2017, 65% of public schools serving preschoolers are participating (35 of 54)
• As of January 2017, 17% of public schools serving preschoolers have a rating of 4 or 5 stars (9 of 54)

GOAL: By December 2020 2015, 50% 400% of public schools serving preschoolers will have a rating of 4 or 5 stars
GOAL: 30% of CCAP children, 50% of children with IEPs, and 100% of children in Head Start will be enrolled in a high-quality early learning program by 2020.
GOAL: Increase the % of individuals who complete aligned, high-quality professional development each year.
GOAL: Increase the % of teaching staff and family child care providers who meet the education qualifications in BrightStars
Outcomes: Developmental Screening

Developmental Screenings, Rite Care Members
Under Age 3, 2015

- Under Age 1: 34%
- Age 1 - 2: 46%
- Age 2-3: 45%
Child Outreach Screening, 2015-2016

Outcomes: Developmental Screening

- 3-year-olds: 14% Core Cities, 18% Remainder of State, 16% Rhode Island
- 4-year-olds: 37% Core Cities, 47% Remainder of State, 43% Rhode Island
- 5-year-olds: 43% Core Cities, 62% Remainder of State, 55% Rhode Island
Young Children with High Needs

Identifying and Serving Young Children with Developmental Delays and Disabilities
What do young children with disabilities need?
Child Find- Screening & Referral
Eligibility
Services
Evidenced Based Practices & Systems of Support
Questions
What do young children with disabilities need?

Love and affection

Stable living condition

Good nutrition

Quality learning environment
The environments in which children grow and learn serve as the FOUNDATION for all learning!
The quality of the environments is important for all children but **critical** for children with disabilities!
But for young children with disabilities…

Is a high quality environment enough?
Desired Results for Children with Disabilities…

- a sense of belonging and membership,
- positive social relationships and friendships, and
- development and learning to reach their full potential.

Early Childhood Inclusion: A Joint Position Statement of The Division of Early Childhood (DEC) and The National Association for the Education of Young Children (NAEYC) 2009
Comprehensive Supports

High-Quality Early Childhood Education

Health, Mental Health & Nutrition

Family Support

Supporting Children with Special Needs
Supporting Children with Special Needs
Individuals with Disabilities Education Act (IDEA)- Services for Children with Disabilities

**0-3 Years Old**

Early Intervention (EI)

**3-5 Years Old**

Early Childhood Special Education (ECSE)
Early Intervention (IDEA-Part C)

- Provides support to families with infants and toddlers who have developmental disabilities or delays, so they can help their children develop to their fullest potential.

- Most Early Intervention services are provided in the natural environment through a family coaching model NOT a medical/therapeutic model.
Special Education (IDEA- Part B)

Ensures that all children with disabilities have available to them a FAPE with services designed to meet their unique needs and prepare them for further education, employment and independent living.

**Special Education:**
- Is not a place
- It refers to *specially designed instruction* (adapting the content, methodology, or delivery of instruction)
- It ensures access to the general education curriculum, so that each child with a disability can meet the educational standards that apply to all children
Child Find- Screening & Referral
IDEA- Child Find

Child Find requirements ensure that children with disabilities (including those with developmental delays) are identified, located and evaluated.

- Identifying children with disabilities begins with screening
  - Children 0-3 years old - multiple means
  - Children 3-5 year olds - Child Outreach Screening

- Children that do not pass screening require a referral to EI/ECSE
Screening (Birth-3 Years)

- At Birth
  - MCH Level 1 Screening Program
  - First Connections

- Any other time before 3
  - Pediatricians
  - First Connections (including CAPTA)
  - DOH Home Visiting Programs
  - Other early childhood programs (EHS, Child care centers, Providence Talks)

*Children that do not pass are referred to Early Intervention*
Child Outreach Screening (3-5 Years)

- Each district implements a CO Screening Program
- Children are screened annually at 3, 4 & 5- prior to K entry
- Screenings take place in centers and upon request
- 5 areas- all required
  - Vision
  - Hearing
  - Speech/Language
  - Social/Emotional
  - General Development

* Children that do not pass are referred to Early Childhood Special Education
In addition to direct referrals from screenings, when should referrals be made?

- Even if child passes screening, when concerns persist or are not reflected in the screening (functioning in the home or school)
- Anytime a parent has a concern with their child’s development
- Before a child is in crisis
- Prior to or along with other behavioral health referrals
- When a child experiences a traumatic event (EI)
# How to make a referral:

## Early Intervention

**RI Early Intervention Providers**

Contact Information and Catchment Areas


## Special Education

**Early Childhood or Special Education Office - Local School Department**

http://www.ride.ri.gov/InstructionAssessment/EarlyChildhoodEducation/EarlyChildhoodSpecialEducation.aspx
Eligibility
Eligibility Categories (Birth - Three)

- Single Established Conditions
  - Establish eligibility after 1 year:
    - NAS
    - Lead Poisoning
    - Low Birth Weight

- Developmental Delay/Significant Impact on Functioning
  - Physical development
  - Cognitive development
  - Communication development
  - Social or Emotional development
  - Adaptive development
Eligibility Categories (3-21 yrs)

- Intellectual Disability
- Hearing Impairment
- Deafness
- Speech or Language Impairment
- Visual Impairment (includes Blindness)
- Emotional Disturbance
- Orthopedic Impairment
- Autism Spectrum Disorder
- Traumatic Brain Injury
- Other Health Impairment
- Specific Learning Disability
- Deaf-Blindness
- Multiple Disabilities
- Developmental Delay (3-8 yrs.)
  - Physical development
  - Cognitive development
  - Communication development
  - Social or Emotional development
  - Adaptive development
Developmental Delay Defined

- A developmental delay is defined as
  - a twenty-five 25% delay and/or
  - a score equal to or greater than 2 standard deviations below the mean in one (1) area of development; or
  - a score equal to or greater than 1.5 standard deviations below the mean in two (2) or more of the following areas:
    - (Physical, Cognitive, Communication, Social/Emotional, or Adaptive)

**EI**- standardized tool or significant impact on functioning

**ECSE**- standardized tool or authentic assessment in everyday environments

Children with solely social/emotional needs are eligible if they meet the criteria. *They do not need to demonstrate a cognitive delay.*
Additional Eligibility Guidelines

**Early Intervention**
- Must be eligible based on DD or SEC
- Medical diagnosis associated with DD does determine eligibility
- Eligibility = eligibility for EI, not a prescriptive service (SLP or OT 2xweek)
- Eligibility category does not determine or restrict the type or amount of service

**Special Education**
- Must be eligible under one of the disability categories, including DD
- A medical diagnosis alone does not determine eligibility, child must require special education (specialized instruction)
- Eligibility = eligibility for special education not a specific service (speech services or a classroom)
- Eligibility category does not determine or restrict the type or amount of service
## Percentage of Children Enrolled

<table>
<thead>
<tr>
<th></th>
<th>EI 0-3</th>
<th>ECSE 3-5</th>
<th>SE K-12</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 Core Cities</td>
<td>6%</td>
<td>8%</td>
<td>16%</td>
</tr>
<tr>
<td>Remainder of State</td>
<td>6%</td>
<td>9%</td>
<td>14%</td>
</tr>
<tr>
<td>Rhode Island</td>
<td>6%</td>
<td>8%</td>
<td>14%</td>
</tr>
</tbody>
</table>

* 2017 Rhode Island KIDS COUNT Factbook
Brain Development—majority occurs before age 8

Experience Shapes Brain Architecture

Birth  6 yrs.  14 yrs.

Source: Center on the Developing Child, Harvard University
Image Source: Conel, JL
Services
Standards for Young Children Birth-5

RI EARLY LEARNING & DEVELOPMENT
STANDARDS

These early learning standards articulate shared expectations for what young children should know and be able to do. Further, they provide a common language for measuring progress toward achieving specific learning goals. (Kendall, 2003; Kagan & Scott-Little, 2004)

http://rields.com
Individual Plans

### Early Intervention
**Individualized Family Service Plan (IFSP)**
- Present levels of functional skills
- Routines Based Interview – Pinpoints family priorities and concerns
- IFSP Outcomes are:
  - Family Owned
  - Functional
  - Within Daily Routines
  - Measurable
- Services: Frequency, Duration, and location based on IFSP outcomes

### Special Education
**Individualized Education Plan (IEP)**
- Present Levels of Performance
- Goals
- Objectives
- Special Education Services within the LRE (must be determined after the above)
- Related Services
- Supplementary Aids & Services
Where Are Services Delivered- EI?

- Within child and/or families’ everyday routines and activities
- Natural Environments – where the child and/or family typically spends time, including EC settings
Where Are Services Delivered- ECSE?

**Least Restrictive Environment (LRE)**

- To the maximum extent appropriate, children with disabilities are educated with children who are nondisabled; and
- Special classes, separate schooling, or other removal of children with disabilities from the regular education environment occurs only if the nature or severity of the disability is such that education in regular classes with the use of supplemental aids and services cannot be achieved satisfactorily
- IDEA presumes that the first placement option considered for each child with a disability is the regular education classroom that the child would attend if he or she did not have a disability.
Continuum of Special Education Placements and Services

1) Temporary placement
2) General EC setting with on-site consultation
3) Integrated preschool
4) Home-based
5) Home or general EC setting with supplementary placement in an ECSE setting
6) Separate class
7) Special education day school
8) Residential special education school
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
U.S. DEPARTMENT OF EDUCATION

POLICY STATEMENT ON INCLUSION OF CHILDREN WITH DISABILITIES IN EARLY CHILDHOOD PROGRAMS

September 14, 2015
POLICY STATEMENT ON INCLUSION OF CHILDREN WITH DISABILITIES IN EC PROGRAMS

“It is the departments’ position that all young children with disabilities should have access to inclusive high-quality early childhood programs, where they are provided with individualized and appropriate support in meeting high expectations,”
The purpose of the policy statement is to set a vision and provide recommendations to States, local educational agencies (LEAs), schools, and public and private early childhood programs, for increasing the inclusion of infants, toddlers, and preschool children with disabilities in high-quality early childhood programs.
Evidence-Based Practices &
Systems of Support
The **tri-adic service delivery** model is an **INDIRECT** intervention model in which the EI or ECSE provider support children by working primarily with the parent or general educator.
Instruction is most effective when opportunities to acquire and practice skills occur across the day as opposed to single points during the day/week.

(Dinnebeil & McInerney, 2011; Hemmeter, 2000; Sandall & Schwartz, 2002; Spino, 2013; Wolery, 2000; Wolery, Ault, & Doyle, 1992)
Coaching Model in EI

- Creation of team to meet needs of child & family

- Coaching Model in EI, supports families and EC professionals to:
  - Identify Strategies
  - Practice during visits
  - Reflection
  - Problem Solve challenges
  - Supportive Feedback
IECSE Service Delivery in ECSE

- Research based service delivery model for providing special education services to young children within the general EC environment.

- Alternative to pulling children out of the classroom to separate spaces, classes, programs or schools.

- Allows the IECSE teacher to provide direct service embedded into the typical classroom routines and activities.

- Through planned and routine collaboration, allows EC teachers to embed instruction throughout the week.

- Allows services/supports to be provided seamlessly within the child’s natural environment.

- Benefits children with all types of disabilities.
ECSE within the General Early Childhood Settings

State-Funded PreK’s

Head Start

General EC Programs in Public School

Community-Based EC Programs
Comprehensive System of Support - EI

- RBI: Routines-Based Interview
- ECTA Center: The Early Childhood Technical Assistance Center
- Coaching
- Professional Development
- Technical Assistance
- Parent Consultants
Comprehensive System of Support - ECSE

IECSE PD

IECSE Technical Assistance

IECSE Repository

IECSE CoP
In closing...
What happens in the early childhood years matters...

As achievement gaps exist before K and persist and grow through the elementary years,

It is critical to provide access to high quality environments and individual supports for all children!
For Additional Information:

**Early Intervention**

Jennifer Kaufman  
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(401) 462-3425

**Early Childhood Special Education**

Ruth Gallucci  
[Email Address: Ruth.Gallucci@ride.ri.gov]  
(401) 222-8947
Certificate of Graduate Studies in Early Childhood Leadership

Mary Ellen McGuire-Schwartz, Ed.D.
Christine Kunkel, Ph.D.

Departments of Elementary Education (Early Childhood) and Counseling, Educational Leadership, and School Psychology
Rationale

- The development of this Certificate of Graduate Studies was requested by the Rhode Island Department of Education (RIDE) through Michele Palermo, Associate Director – Early Childhood Education, RI Department of Education, 255 Westminster St., Providence, RI.

- The goal of the Certificate of Graduate Studies is to prepare administrators in community-based programs (Directors and/or Education Coordinators) and public schools (Principals and/or educational leads) to be effective leaders and teachers in supporting high-quality early childhood education programs.

- Content focuses on understanding the developmental and learning needs of young children; shared leadership skills; supervision, mentoring and coaching early childhood teachers; the pivotal roles of family and community in early learning; effective strategies for strengthening teaching and learning and management skills of early childhood centers.
Students in Rhode Island, including RIC alumni, do not currently have the opportunity to achieve a Certificate in Graduate Studies in Early Childhood Leadership. There are no other early childhood leadership programs in the State.

The availability of this Certificate program will allow Rhode Island residents to earn a Certificate in Graduate Studies and graduate credit in Early Childhood Leadership at reasonable cost close to home.
The Program

1. ECL 501 Early Childhood Development: Theory and Research
2. ECL 502 Leadership Strategies: Early Childhood Education
3. ECL 503 Early Childhood Curriculum: Leading Improvement 1
4. ECL 504 Family/Community Partnerships: Early Childhood Leadership
5. ECL 505 Early Childhood Curriculum: Leading Improvement 2
6. ECL 506 Supervision of Early Childhood Teachers

Total 18 Credits
RI Social and Emotional Learning Standards

Competencies for School and Life Success

RIDE Rhode Island Department of Education
The 5 SEL Competencies

Self-Awareness
- Identifying emotions
- Accurate self-perception
- Recognizing strengths
- Sense of self-confidence

Responsible Decision Making
- Making ethical decisions
- Taking responsibility
- Situation analysis
- Problem solving
- Evaluation

Self-Management
- Impulse control
- Stress management
- Self-discipline
- Self-motivation
- Goal setting
- Organizational skills

Relationship Skills
- Communication
- Social engagement
- Working cooperatively
- Resolving conflict
- Helping and seeking help

Social Awareness
- Perspective taking
- Empathy
- Appreciating diversity
- Respect for others
Successes, Challenges, Priorities for Future
Small Group Activity

RTT-ELC Categories:
- Governance/Communication
- Improving Early Learning Program Quality
- Building a Strong Early Learning Workforce
- Promoting Improved Learning & Development Outcomes for Children
- Measuring Outcomes and Progress

For Each RTT-ELC Category, Identify and Write at Least One:
- Success (Green Sticky)
- Challenge (Blue Sticky)
- Priority for the Future (Pink Sticky)

Organize & Place Sticky Notes on Poster Paper by Category

Report Out (one volunteer to summarize successes, challenges, and priorities for each category)
2017 Council Calendar

All 2017 Early Learning Council Meeting are at Save the Bay

- September 20, 2017, 9:00 a.m. to 12:00 p.m.
- December 13, 2017, 9:00 a.m. to 12:00 p.m.