

ECAS OVERVIEW

Launched within the Governor's Office through the Executive Office on Early Learning in 2012, The Early Childhood Action Strategy (ECAS) is a statewide governmental and non-governmental collaborative designed to improve the system of care for our youngest children and their families. Action Strategy is now convened by a local nonprofit organization, Collaborative Support Services Inc. Over 150 partners work across sectors to increase the number of young children in Hawai'i who are born healthy, develop on track, are ready for kindergarten and are proficient learners by third grade.

VISION Hawai'i's young children are healthy, safe and ready to learn.

MISSION To bring together government and non-governmental organizations to align priorities for children prenatal to age eight and to strengthen and integrate the early childhood system by streamlining services, maximizing resources, and improving programs to support our youngest keiki.

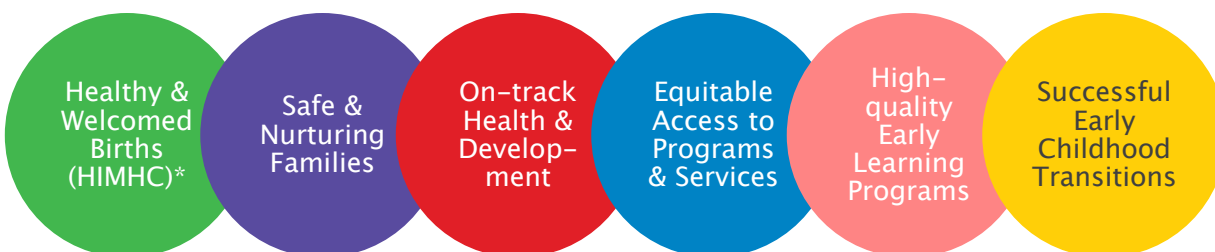
AREAS OF FOCUS Our work is organized into six cross-disciplinary focus areas identified through the Executive Office on Early Learning's strategic planning process that occurred in 2012. Teams in the focus areas identify goals, objectives, strategies and implementation partners to address gaps in the system of support for young children. Where possible, focus areas are co-convened by governmental and non-governmental partners.

FOUR KEY OUTCOMES OF ECAS

Strategies within ECAS are chosen to support improvement on the following four key outcomes:

- 1) The number of babies born healthy
- 2) The number of young children developing on-track
- 3) The number of children ready to learn when they enter kindergarten
- 4) The number of students thriving in 3rd grade

THEORY OF CHANGE When babies are born healthy, into safe and nurturing families, they have a much greater chance of developing to their full capacity during early childhood, reaching kindergarten ready to learn, and thriving by third grade. In addition to a safe and nurturing family, young children are more likely to thrive when they have equitable access to high quality programs and services. This is especially true for young children most at-risk. The Action Strategy network works to provide young children with the village they need to thrive.



*Hawai'i Maternal and Infant Health Collaborative

2021 IN REVIEW:

It has been twenty-one months since COVID-19 reached our shores and Hawai'i went into lockdown. By December 25, 2021, there have been 103,773 known cases of COVID-19 in Hawai'i, and 1,082 Covid related deaths. Both of these figures are more than double where the state stood only 6 months ago. One piece of good news in that story is the share of eligible residents of Hawai'i who are fully vaccinated against the virus has reached 72.6%.¹ At the same time, our definition of fully vaccinated is also in flux, with a growing number of American universities requiring a booster dose for students to return to school after the winter break, and Israel moving to a fourth dose.

The pandemic has taken its heaviest toll on low-income communities and communities of color. In Hawai'i, Native Hawaiian and Pacific Islanders have had the highest rates of COVID-19 infections, followed by Black and Latinx Americans.² In Hawai'i, some 24,107 Native Hawaiians and Pacific Islanders have been infected by the Covid-19 virus and 370 NHPI individuals have died from the virus.³

In 2020, the pandemic and related lockdown brought Hawai'i's economy to a standstill. 21 months later, 61% of Hawai'i residents have lost income due to the pandemic, and a quarter of residents (24%) report having little or no confidence that they will be able to make next month's rent.⁴ Again, the economic toll of the pandemic has fallen hardest on low-income families and disproportionately on communities of color.

Various forms of government assistance likely are responsible for conditions not being worse. By September, 2021, 58% of families with children reported that they received a Child Tax Credit payment last month. National estimates suggest that CARES Act expansions of the Child Allowance are responsible for keeping 10 million children from falling into poverty.⁵ The eviction moratorium likely also delayed the displacement of millions of low-income families.

The effects of the pandemic on Hawai'i's child care industry:

Across the country, pandemic related closures devastated the child care industry.⁶ This was certainly true in Hawai'i. Before the pandemic, over half of children birth to age 5 in Hawai'i (close to 60,000 keiki) were in non-parental child care 10 or more hours each week, and the child care industry generated some \$300 million in state-wide revenue each calendar year.⁷

In February, 2020, 25,247 child care spaces for children between birth and age 5 were registered with the Hawai'i Department of Human Services.⁸ By the end of that first year of the pandemic, providers reported that they had the capacity to serve a quarter of their pre-pandemic total (6,300 children).⁹

As the lockdown eased and the economy reopened, child care capacity expanded as well. By October of 2021, there were 733 child care providers operating, with a combined capacity to care for 20,408 children under 5 years of age. This is almost 20% fewer seats than Hawai'i had before the pandemic, and underscores the work that will be needed to restore our child care capacity.¹⁰

¹ Hawai'i Emergency Management Agency Covid-19 Dashboard. <https://hiema-hub.hawaii.gov/>

² Case rate per 100,000 by Race & Ethnicity. [NHPI COVID-19 Dashboard](#). UCLA Center for Health Policy Research.

³ NHPI Covid-19 Dashboard. UCLA Center for Health Policy Research

⁴ Percent of households not current on their rent or mortgage and/or have no confidence they can pay next month's rent. Weekly Household Pulse Survey, U.S. Census Bureau.

⁵ H-CAN Covid-19 Data Dashboard. https://www.hawaii-can.org/covid19_dashboard

⁶ Learning Policy Institute. 2021. [From Rescue to Rebuild: Developing a National ECE System that Works](#). June 3.

⁷ CED.org. [Child Care in State Economies](#). 2020 Update.

⁸ Hawaii Preschool Development Grant Birth - 5 Early Childhood Comprehensive Needs Assessment.

⁹ ECAS analysis of PATCH provider survey data, collected December 2020.

¹⁰ ECAS analysis of PATCH provider survey data, collected October 2021. <https://hawaiiactionstrategy.org/child-care-provider-data>

Pandemic conditions created the perfect storm for family violence:

Advocates nationwide are concerned that the pandemic was a catalyst for family violence by elevating levels of stress, tension and anxiety related to lockdowns, job losses and financial insecurity.¹¹ Even before the pandemic, 1 in 6 children in Hawai'i experienced 2 or more Adverse Childhood Experiences (ACEs).¹² Nationwide, the proportion of mental health-related visits to Emergency Departments for children aged 5-11 increased 24% between 2019 and 2020.¹³

As the pandemic took hold, families faced income losses, possible eviction, the demands of remote learning for their children, and stay-at-home orders, the number of calls to domestic violence hotlines rose dramatically. The number of helpline calls received by the Domestic Violence Action Center increased from 373 in the summer of 2019 to 837 in the summer of 2020 (a 124% increase). The number of calls to the DVAC Helpline remained far above pre-pandemic levels a year later, with 701 calls received in the summer of 2021, 88% higher than pre-pandemic levels.¹⁴

Violence occurs in all types of families, regardless of socio-economic status. At the same time, there is a strong association between economic crises and parental stress and rising rates of child maltreatment.¹⁵ Research shows that for every 1% increase in a county's unemployment rate, there is a measurable increase in the number of reports of child maltreatment in that county.¹⁶

The pandemic and public policy:

The policy landscape in 2021 in many ways was a reverse image of 2020. The 2020 legislative session opened with an agenda offering hope to working families, and ended with stark budget projections and vastly diminished expectations. One bright spot in that otherwise bleak landscape was the passage of the Early Learning Act (Act 46), designed to make child care and early learning available to all 3 and 4-year-olds in the state.

By comparison, the 2021 legislative session began with state agencies braced for devastating budget cuts. Yet by the end of the session, state agencies and the early childhood community were scrambling to spend billions of dollars of federal emergency relief and recovery aid. Planning for ways to spend those funds became a key policy focus for ECAS this past year.

Still looming, though, are waves of family disruption that are projected to follow the lifting of the moratorium on foreclosures and evictions, compounding income disparities in Hawai'i that leave half of families with young children attempting to survive on insufficient incomes.¹⁷ Further, there is significant concern that the period of lock-downs and distance learning will have a profound, negative influence on the social, emotional, behavioral and cognitive wellbeing of young children.¹⁸

¹¹ Laura D. Lindberg, et. al. 2020. Early Impacts of the COVID-19 Pandemic: Findings from the 2020 Guttmacher Survey of Reproductive Health Experiences. Guttmacher Institute.

¹² National Survey of Children's Health. 2018-2019 Combined. Indicator 6.13. <https://www.childhealthdata.org/browse/survey/results?q=7915&r=13>

¹³ National Syndromic Surveillance Program, US, January-October 2019 and 2020.

¹⁴ Domestic Violence Action Center Helpline call data for July, August & September, 2019, 2020 & 2021, shared with ECAS, December 8, 2021.

¹⁵ Alex R. Piquero, et. al., Impact report: covid-19 and domestic violence trends. February 23, 2021. National commission on covid-19 and criminal justice. <https://covid19.counciloncj.org/2021/02/23/impact-report-covid-19-and-domestic-violence-trends/>

¹⁶ Brooks-Gunn, J., Schneider, W., & Waldfogel, J. (2013). The Great Recession and the risk for child maltreatment. *Child Abuse & Neglect*, 37(10), 721–729. Boyer, B. A., & Halbrook, A. E. (2011). Advocating for children in care in a climate of economic recession: The relationship between poverty and child maltreatment. *Northwestern Journal of Law & Social Policy*, 6(2), 300–317; Weiner, Dana, L Heaton, M Stiehl, B Chor, K Kim, K Heisler, R Foltz & A Farrell. 2020. COVID-19 and Child Welfare: Using Data to Understand Trends in Maltreatment and Response Issue Brief. Chapin Hall. <https://www.chapinhall.org/wp-content/uploads/Covid-and-Child-Welfare-brief.pdf>

¹⁷ ALICE 2018 Report, Census data on income of families with children in Hawai'i.

¹⁸ National Institute for Early Education Research. December 2020. Seven impacts of the pandemic on young children and their parents. <https://nieer.org/research-report/seven-impacts-of-the-pandemic-on-young-children-and-their-parents-initial-findings-from-nieers-december-2020-preschool-learning-activities-survey>

KEY ECAS STRATEGIC EFFORTS AND ACCOMPLISHMENTS IN 2021

Extending the strategic agenda established in 2020, The Action Strategy network and partners continued to devote attention in 2021 to the broad set of challenges to early childhood development, health, safety and learning brought on by the coronavirus pandemic. In parallel, ECAS network partners took advantage of opportunities to shore up the foundations of - and improve access to - the systems that support young children.

During the pandemic, ECAS and network partners identified four fundamental targets to address. These priorities and guiding framework continued to shape ECAS efforts in 2021.

SUSTAIN & STRENGTHEN CHILD CARE & EARLY LEARNING

Leveraging the power of the ECAS network, funders hui and backbone, ECAS worked to make sure the child care industry survived the long period of lockdown and its aftermath.

Key strategic efforts in 2021 included:

Family Child Care Pathways: ECAS and partners are working with Windward Community College (WCC) to create an educational pathway that addresses the knowledge and skills needed by potential family child care providers to start and sustain child care businesses and careers. The project will:

- Pilot 2 cohorts of 25 potential family child care providers to create and refine supportive curriculum; and
- Support creation of at least 10 new Family Child Care providers per cohort
- Components of the Pathways project include the development and delivery of business training and specialized child development curricula for potential providers and the provision of student incentives, such as business/financial tools and funds to acquire materials or make improvements to the child care areas in their homes
- A Program Coordinator for the Pathways project was hired in April and assumed responsibility for the training and course curricula under development at WCC
- The *Family Child Care Essentials Certificate program* was developed in which participants would complete the basic family child care training series offered by PATCH, participate in weekly community-of-practice meetings, and have access to one-on-one practice-based coaching sessions with the Coordinator
- Four prospective providers from Hawaii island and 1 recently licensed provider from Oahu have participated in the Certificate program as of December, with a new cohort group under recruitment and scheduled to start the program in February 2022
- Format for the community-of-practice component will be adjusted for 2022, based on participant feedback, to provide multiple "on-demand" trainings and one group meeting per month
- Efforts are also underway by Windward Community College to provide elective-based credit hours to the FCC Essentials program and to establish articulation pathways for program participants into the Human Development and Family Services degree program

Ka 'Upena Shared Services Model: Many child care providers are overwhelmed by the deluge of administrative needs required to stay in business. Providing centralized, shared services can relieve these administrative challenges and keep existing providers in business, as well as support potential providers with the start-up and early to ongoing stages of business operations. Ka 'Upena is a two-year shared-services pilot, with a planned cohort of 15-20 family child care and small center-based providers.

- The pilot utilizes the "Alliance CORE" online data management system and the expertise/mentorship of Colorado's Early Learning Ventures, as well as the strategies of Nebraska's Early Childhood Exchange, to support providers with their enrollment, attendance, billing, and other business needs.
- Providers also participate in a structured learning community of other early care and learning providers, in which they can benefit from peer support, training, and technical assistance opportunities.

Child care providers across three islands have participated in the Ka 'Upena pilot, with recruitment for additional providers ongoing. Providers have averaged 8.5 years of experience and have an average enrollment of 3.7 children (almost all of which are children receiving child care subsidies). Billing and invoicing are focal points for

service support, while assistance with HR, legal, and tax issues are topics of high interest and greatest demand within the learning community. Key developments include:

- Ka `Upena will move to its permanent home with PATCH, effective February 1st, 2022, connecting the state's Child Care Resource and Referral Agency, licensing, recruiting and trainings platforms
- Y2 funding has been secured
- Hawai'i County has committed to getting all interested child care providers up on Shared Services and engaged in Networks

In 2022, The Family Child Care Shared Services Pilot will expand to reach an additional 10 providers. Key goals for next year include:

- Support providers in learning how to use ELV's child care management system to decrease the time they spend on administrative work
- Build national relationships in Share Services network to learn what infrastructure, resources, and services are relevant to long-term success of Shared Services in Hawaii
- Host engaging networking events that increase providers's success with shared services and improve their operations
- Connect with small centers and recruit 5 small centers and collect data on those who are not interested.
- Provide activities that retain providers in the family child care industry and increase incentives for more providers to join the field

Expanded advocacy efforts: ECAS also expanded policy advocacy efforts in support of our child care infrastructure and system investments. ECAS ARPA funding proposals, as well as recommendations for Hawaii's new, 3-year state plan for the Child Care and Development Fund (CCDF), include suggestions for ways to support the maintenance and expansion of the child care industry, are focused on expanding the workforce, strengthening provider quality measures, and increasing the share of families able to access subsidies. ECAS also engaged in multiple meetings with DHS and Ernst and Young consultants about priorities for child care provider stabilization grants and expanded CCDBG funding with a focus on family child care capacity-building and improvement of child care subsidy reimbursement via alternative rate-setting methodologies.

Future possibilities are offered by the Biden Administration's Build Back Better agenda, should it gain congressional passage. The measure would significantly expand federal support for early learning, and would require states to employ a quality rating system and work with both public and private sector providers. Satisfying these requirements would mandate reorganization of Hawai'i's current early childhood care and learning system.

Words Matter~LENA: These efforts are designed to strengthen family engagement in early childhood language & literacy development, promote family attachment and school readiness, and strengthen FCC and center-based language environments. LENA (Language ENvironment Analysis) programming had to be completely overhauled during the pandemic in order to be delivered in virtual settings. Thanks to the incredible efforts of our implementation partners on Oahu and Maui, 236 families in Hawai'i have participated in Words Matter / LENA programs, including:

- 149 in LENA START (76 in Maui; 68 in Honolulu)
- 32 in LENA Home (10 in Maui; 22 in Honolulu)
- 54 in LENA GROW (11 in Maui; 43 in Honolulu)
- 1 in LENA SP (Honolulu)

Data collected through a 'talk counter' device and through parent surveys offers strong evidence that families and teachers exit these programs with stronger early childhood language and literacy practices, particularly in terms of the number of adult words spoken to children, positive gains on measures of child development, and stronger measures of parent interactions with young children, including increased minutes reading together with young children.

Early childhood language and literacy development collaborative: Established in 2021, this initiative is designed to develop a continuum of strong early language and literacy development efforts in communities of

greatest need, leading to strong language development, early reading success, kindergarten readiness and academic achievement.

- In 2021, ECAS convened the collaborative, developed a shared vision and logic model, and agreed upon first steps
- Met with the Department of Education to identify a school complex that would be interested in working with the collaborative to establish a birth to school entry continuum. These efforts will continue and expand in 2022

PREVENT FAMILY VIOLENCE & PROTECT EARLY CHILDHOOD MENTAL HEALTH

The ECAS network, teams and backbone have focused efforts on initiatives designed to support family safety.

The Aloha at Home: Nurture Daily campaign. Building on the Safe and Nurturing Families Framework developed by Action Strategy's Team 2 in partnership with the FrameWorks Institute, The Aloha at Home effort has grown to include a portfolio of efforts to support safe, secure and nurturing families. These efforts include the creation and expansion of:

The Nurture Daily website for families and service providers

- The site has had 10,000 unique visitors, 22,300 visits, 98,300 page hits, and an average of 4.4 pages visited
- This represents a reach of 1.25% of all Hawai'i households and 2% of the estimated 480,000 families at greatest risk of financial insecurity
- A series of public service announcements that ran on television early in the pandemic and subsequently were shared across social media platforms

The Aloha at Home family toolkit initiative, designed to encourage positive family interaction and share information on available resources and supports for families struggling and in crisis, has completed a prototype with 20 families

Completion of the **Aloha at Home / Nurture Daily** business plan to structure and support continuing implementation of the project

NEST Hui two-way texting platform: ECAS partners are working to address the isolation of new parents and families during the pandemic by expanding the NEST Hui two-way texting platform. Nest for Families provides peer parent educators and clinical specialists through a secure text messaging platform to address parenting concerns, provide guidance, & connect families to vital resources. In partnership with Family Hui Hawai'i, NEST provided another way for families to support each other in the face of physical isolation and heightened worry.

- During the pandemic, NEST served over 500 families, and connected 203 families to additional needed services
- 56% of participating families are Hawaiian or other Pacific Islanders

The Integrated Infant & Early Childhood Behavioral Health Plan: Completed in the Spring of 2021, the IIECBH Strategic Plan proposes to integrate child and family mental health and trauma-informed care into our health and early care and learning systems throughout Hawai'i. This integration will create an intentionally aligned child and family-serving system that promotes positive social emotional development, school readiness, and family success. The plan will lead to equitable systems of care that reduce racial and socioeconomic disparities, ultimately ensuring that children succeed in school and in life. In 2021, the IIECBH Plan made several key implementation steps:

- Hired a coordinator to oversee implementation of the plan (with Department of Health and private foundation support for the first two years)
- It is anticipated that the position will become a permanent position within the Department of Health after those two years

- Legislation was passed creating a DOH Trauma-Informed Care Taskforce
- A Sustainable Financing Workgroup with Med-QUEST Division was created to maximize existing resources
- A vetting process was developed for the Early Childhood Behavioral Health workforce
- To date, 90 people have been trained as part of peer learning communities and 39 mental health professionals are in training to gain new expertise in infant mental health

SUPPORT SAFE PRENATAL, INTERNATAL AND POSTNATAL CARE

Nationwide, one in three women report that because of the pandemic, they have had difficulty accessing SRH (sexual and reproductive health) care (particularly during the period of stay-at-home orders).¹⁹ Protecting the health of mothers and babies during the prenatal, inter-partum and postpartum periods is critical to maternal and infant health and well-being.

In response, ECAS teams, partners and backbone have worked with project teams to fund and scale innovative efforts to reach our most vulnerable communities. These efforts have included:

Midwifery Integration Home Visitation Program (MI-Home): The MI-Home program brings perinatal care to high-risk women who are not able to access perinatal services in a traditional office setting. MI-HOME provides these services regardless of insurance status or a patient's location. Many clients in the program are homeless or house bound, and are dealing with complicating medical conditions such as diabetes, mental health concerns and substance use disorders. Referrals into the program come from a broad range of partners, including homeless outreach services, mental health and substance use providers, and Federally Qualified Health Centers (FQHCs).

- MI-Home has recently established a permanent home with Project Vision and is testing several possible reimbursement mechanisms
- MI-Home has provided midwifery services to 311 individuals (including 111 infants); 56 of the adults were unsheltered or were staying in an emergency shelter.
- Conducted over 970 midwifery visits
- 66% of MI-Home's pregnant clients had a Substance Use Disorder
- 54 of the mothers with SUD maintained custody of their children by meeting CWS requirements

REACH THE HARDEST TO REACH FAMILIES

The pandemic laid bare pre-existing economic, social and health disparities between low-income and more affluent families, and inequities confronting marginalized communities in Hawai'i. The families who are most susceptible to the virus [relying on combinations of front-line, low-wage jobs, lacking financial reserves, or access to many of the work-related benefits available to the middle-class including insurance and more liberal leave policies] also have been hit hardest by the pandemic's economic fallout. With limited access to the internet, safe and dependable childcare, or reliable transportation, these families represent our communities of greatest need and also can be the hardest to reach.

Expanded access to tele-health and remote learning: The lockdown and physical distancing orders curtailed traditional, in-person service provision. Tele-practice, meanwhile, has allowed for access to medical care, early intervention services, and distance learning. Early Intervention providers report that virtual meetings work better than in-person visits for some families. The ECAS Funders Hui and team partners have supported efforts to provide technology and Wi-Fi access to families otherwise unable to access these services. Key lessons learned through this initiative:

- In addition to computers, many families also needed help accessing the internet

¹⁹ Laura D. Lindberg, et. al. 2020. [Early Impacts of the COVID-19 Pandemic: Findings from the 2020 Guttmacher Survey of Reproductive Health Experiences](#). Guttmacher Institute.

- Rather than simply serving as a stop-gap measure, telehealth has potential advantages over in-person visits. (It overcomes transportation barriers, requires that families 'drive' engagement with their children during visits, and leads to increased compliance with meetings for families who may be uncomfortable welcoming a visitor into their home)
- One caution that has emerged concerns ways that families prioritize use of the equipment. Care providers report that families with preschoolers and an older child tend to prioritize the learning needs of the older child

Additionally, the CHAT (the Child Homelessness Action) Team of ECAS Team 4:

Partnered with Chef Hui: to deliver meals to shelters with programs that serve houseless youth.

- 3,100 youth benefited from the program. The majority of recipients were Native Hawaiian, Filipino, Samoan or Micronesian
- Partner agencies report that 28.6% of recipients relied upon the meal deliveries to supplement their diets and 21.4% of recipients would have gone hungry without the meal deliveries

Supported the Department of Education's McKinney Vento (MV) community homeless liaisons to better serve preschool age children. These efforts included:

Early childhood needs-assessment checklist: Completed a prototype needs-assessment checklist for liaisons to use when they encounter families with preschool age children.

Convened listening sessions: CHAT team partners and ECAS backbone worked with the MV Liaison Office to convene listening sessions with forty-five cross-sector stakeholders to identify ways to increase the number of young children in unstable housing who attend quality childcare and preschool across the state of Hawai'i. Recommendations generated in those listening sessions will help to inform expanded efforts by the MV Liaison Office made possible through ARPA funding.

Partners in Care data committee: Continue to work with Partners in Care's Data Committee to access and augment the information PIC collects on young children in homeless families, and the types of support homeless outreach workers are able to offer those families

STRENGTHEN POLICIES SUPPORTING EARLY CHILDHOOD

Commit to Keiki: Modeled after California's Choose Children Campaign, the Commit to Keiki Initiative has been made possible by significant financial support from the ECAS Funders Hui. The initiative is an effort to place the wellbeing of young children front and center in Hawai'i's electoral politics and public policy. The initiative has four main goals:

- 1) All mayoral, county council, legislative, and gubernatorial candidates incorporate young children and families into their campaign messaging
- 2) All candidates participate in forums focused on young children and families
- 3) Winning candidates include commitments to young children and families in their first 100-day priorities and budgets
- 4) Winning candidates dedicate funding in their county and state budgets that support young children and families

The Hawai'i effort began with a statewide voter poll conducted in the midst of the pandemic that indicated that a substantial majority of voters (80%+) support:

- Protecting programs that support keiki and 'ohana from budget cuts
- Investing in early care and learning
- Preventing family violence and
- Supporting children's mental health

In 2021, ECAS has worked actively with the offices of Honolulu Mayor Rick Blangiardi and Hawai'i County Mayor Mitch Roth in order to build strategic agendas, install new staff positions, and prioritize efforts to support the wellbeing of young children and their families in ARPA funding decisions.

- In a major development, Hawai'i County has committed \$7M in funding to strengthen the child care industry in Hawai'i County
- Honolulu County is launching a child care and affordable housing co-location project in Kunia
- Honolulu County is standing up a permanent housing project for domestic violence survivors and their keiki

In 2021, a Commit to Keiki Steering Committee was created and meetings with all democratic gubernatorial candidates were conducted. The Commit to Keiki website was updated to reflect gubernatorial efforts, a social media campaign launched and key messaging efforts are underway. All three candidates have "committed" to keiki and will engage in 2022 efforts.

RESPOND TO DEMANDS FOR BETTER DATA

The pandemic has increased the urgency of calls for clear, targeted and rapid data on family needs, and the reach and effectiveness of strategic efforts. ECAS has responded to the need for better data and information in a range of ways. These have included:

Community Profiles Project: Team 4 has initiated an early childhood community profiles project starting with Maui and Hawai'i Counties, in order to identify the current status of key measures of child wellbeing.

- The effort will help identify areas of greatest need, establish an evidence base for team strategic decisions, and provide a baseline for evaluating progress and the efficacy of team efforts
- Funding for the project was secured through the ECAS Funders Hui, a contractor was hired, and the project team set to work in December
- A first round of data to inform policy will be produced in January. Final profiles for both counties will be submitted by July, 2022

'Ohana Pulse family rapid feedback text-based platform: Developed by the Hawai'i Data Collaborative, the tool is fully developed and is ready for implementation by an organization that expresses interest and is a good fit.

ECAS child care industry dashboard: Drawing upon information collected by PATCH and DHS, the ECAS child care dashboard tracks facility closures, capacity, vacancies, seats lost and industry needs. The most recent iteration of the dashboard was posted in October, 2021 (available [here](#)). The next update will appear in January 2022.

ECAS early childhood data dashboards: The ECAS dashboards available [here](#), monitor and track how Hawai'i's young children are doing in terms of health, safety and learning. These dashboards establish:

- Key benchmarks of early childhood wellbeing specific to each team
- Longitudinal trend and comparative data
- Connections between team efforts and desired changes in interim and subsequent outcomes

Alignment with Executive Office on Early Learning data efforts: ECAS has been working closely with EOEL to align data efforts, prevent duplication, agree on best data sources, and ensure that:

- Our indicators and measures are aligned with the State Early Childhood Plan
- Our dashboards are based on a shared architecture and database
- We believe both projects will be stronger for the collaboration

Honouliuli Early Learning Project: In the spring of 2021, ECAS worked with Kamehameha Schools to build an understanding of the needs and concerns of child care providers in the 'Ewa and Kapolei (Honouliuli) regions of West Oahu. The project conducted virtual focus groups with providers, created resource flyers for families,

businesses and child care providers in the 'Ewa region, and prepared a report summarizing the findings of the focus groups and offering a data-informed picture of family and child care provider needs in 'Ewa, the fastest growing residential community in Hawai'i. Key findings include:

- Providers are scrambling to match their program offerings to rapidly shifting family needs (particularly around the balance of full-time and part-time care)
- Providers are developing creative strategies to reach families through hybrid programs (e.g.: drive through pick up of project materials for a project that is then completed at home with keiki)
- Providers anticipate children will have significant social, emotional and behavioral issues when they reach kindergarten
- Providers continue to have significant concerns around the safety and health of their children and families, their staffs and themselves.
- Families forced to shift child care during the pandemic are not willing to move children back to previous settings, making more care providers even more vulnerable to bankruptcy and closure

PROTOTYPE NEW EVALUATION DESIGNS

User Focused Evaluation Design: In 2021, ECAS completed a user-focused evaluation design sprint focused on the Aloha at Home - Nurture Daily effort, in collaboration with Here to There Consulting. This involved:

- Engaging with key user groups to understand the types of data and evidence that they would like to have in order to assess the utility of the Nurture Daily web platform, and to understand the format and frequency of reports that users would need
- Helping to develop an iterative framework for evaluating the Aloha at Home effort

ECAS evaluation and outcomes: Developing a coherent framework for evaluation with a focus on systems change across multiple dimensions. Shared with board of directors in October.

SIPSI Evaluation sprint: Focusing on ECAS' contribution to important system and policy changes around family safety. The sprint includes:

- Conversations with key stakeholders concerning important system and policy innovations that came about, in part, due to ECAS involvement
- Application of evaluation strategies, potentially including Impact Mapping, Outcomes Harvesting, and SIPSI (Significant Instances of Policy and Systems Improvement) techniques

KEY OPPORTUNITIES IN 2022

Backed by a decade of organizational and strategic development, Action Strategy teams, conveners, Funders Hui and backbone were well positioned to mobilize to respond to the pandemic's implications for families and the early childhood system, and also to launch a concerted mobilization effort to build a bigger, bolder family policy agenda for Hawai'i.

We anticipate seeing an expansion of the following opportunities for strategic innovation in 2022:

LEARNING FROM THE PANDEMIC

Observers caution that the recovery from the pandemic is likely to be K-shaped. While upper income and knowledge-economy workers were able to work from home and saw the value of their assets rise over the past two years, low-wage households struggled mightily to make ends meet. This has been particularly true for female-headed families and marginalized communities.

ECAS is well positioned to convene discussions around our collective response to the pandemic for families with young children. These conversations would allow us to assess our pandemic responses and develop a template for responding to future emergencies.

EXPANDING THE NETWORK'S WORK IN HYBRID SETTINGS

Since March 2020, ECAS has responded to the need for physical distancing by meeting virtually. This has included:

- Converting to virtual engagement and mobilization by moving all network meetings online and expanding our technological capacity to support teams to meet virtually
- Converting our contract with *Smallify* to focus on virtual engagement, healthy mobile work cultures, organizational dynamics and individual wellbeing during the pandemic
- Re-envisioning the format of ECAS All-Network meetings to take advantage of the capacities of virtual meeting technology. In 2021 this allowed for high levels of engagement in two All Network meetings focused on supporting early childhood development and learning opportunities in the shadow of the pandemic

As we anticipate a return to a 'new normal,' ECAS is exploring ways to strengthen hybrid (in-person / virtual) meetings, enabled by strong technological solutions, and sensitive to the different dynamics that characterize 100% in-person versus hybrid meetings. We are grateful for the chance to build out our new office space in Aloha Tower to anticipate this new reality.

SHAPING THE IMPLEMENTATION OF THE EARLY LEARNING ACT

Act 46 establishes a statutory commitment to providing access to early learning opportunities for all 3 and 4-year-olds in Hawai'i. Act 46 is one of the few (and likely the single most extensive) State commitment to expand early learning opportunities during the pandemic.

- With our allies, ECAS will continue to support the implementation of Act 46 to make sure that it is not lost in the flurry of activity and competing needs brought on by the pandemic, presenting a new set of strategic challenges around how best to respond to the need to rethink implementation efforts
- Key provisions in the Act likely will require careful advocacy and education to best support the intent of offering universal access to quality early learning opportunities
 - Ensuring that the implementation timeline is not pushed back indefinitely
 - Pursuing clarification of mechanisms for monitoring and evaluating the initiative
 - Implementation of a meaningful kindergarten entry assessment

CREATING INNOVATIVE FUNDING & POLICY MECHANISMS

Pandemic relief efforts have included development of innovative mechanisms for blending and braiding public and private sector dollars, and for combining state, federal and county funds. A second set of pandemic related funding opportunities has emerged through federal relief and recovery funds, principally including the American Rescue Plan. ECAS has responded to the opportunity presented by ARPA funds by crafting suggestions for community partners about ways that the federal funds might be employed in order to best support the wellbeing of young children and their families.

EXTENDING EMERGENCY RULINGS

During the pandemic, the Department of Human Services used emergency rulings and federal waivers to expand family income and activity eligibility for child care subsidies. Finding ways to continue these policies would be a significant positive step toward establishing a sustainable child care infrastructure. Emergency federal rulings also extended Medicaid coverage to post-partum mothers and infants to 12 months. Advocates intend to ask the Hawai'i legislature to make that coverage permanent in the 2022 session.

ENCOURAGING CROSS-TEAM ALIGNMENT & COLLABORATION

A growing share of ECAS efforts address concerns that cross multiple teams. This promising development speaks to growing alignment of efforts that gained increased urgency during the pandemic.

EXPANDING SPACE FOR INNOVATION

The urgency of the pandemic expanded opportunities for rapid implementation and assessment of projects to respond to the crisis, put the brakes on lower priority efforts, and craft and test innovative pilot efforts.

We are excited about the launch of the New Directions Reentry Program, for example. This effort is designed to reduce recidivism through early identification of clients with mental illness and/or substance use disorder with a particular focus on pregnant and parenting mothers and fathers. The reentry program will offer these detainees access to coordinated, gender-sensitive mental health and substance use disorder treatment, linked to wraparound services including housing, education, skill development, peer support services, and Medicaid enrollment. The pilot will launch as soon as it is possible to access the Honolulu jail facilities (post-covid).

CONTINUING TO STRENGTHEN THE ECAS EARLY CHILDHOOD FUNDERS HUI

In 2021, the Early Childhood Funders Hui continued to focus on relief, recovery and sustainability efforts alongside opportunities to improve the systems that support young children and their families in Hawai'i.

Participants in the Early Childhood Funders Hui include: Aloha United Way, Castle Foundation, Consuelo Foundation, Hau'oli Mau Loa Foundation, Hawaii Community Foundation, Hayashi Foundation, HMSA Foundation, Kamehameha Schools, Lili'uokalani Trust, Menehune Foundation, Samuel N. and Mary Castle Foundation, The Omidyar Group, and the Weinberg Foundation.

The Early Childhood Funders Hui is designed to help private foundations align their efforts around the wellbeing of young children and their families. This coordination took on added significance during the pandemic and recovery. Of the eleven proposals that Action Strategy teams have submitted to the funders' hui, ten have now received full or partial funding and are either in an advance planning or implementation phase.

Through the ECAS Funders Hui, private philanthropic foundations:

- Learn about the priorities of their philanthropic peers
- Discover opportunities to collaborate and share resources
- Align efforts around common priorities
- Create opportunities for shared learning around vital and emerging topics
- Have an opportunity to review ECAS funding-ready projects that have been proposed by the teams and vetted through the funding memo development process
- Share lessons learned

The Hui has recently embarked on learning/discussing/problem-solving around the complex set of issues related to:

- Braiding private and public funds
- Transitioning initiatives that have been incubated via philanthropic dollars to public funding streams

The collective effort and generosity of participants in the Early Childhood Funders Hui have proven critical to the private philanthropic response to the COVID-19 crisis. In 2021, Funders Hui partners pooled and disseminated close to \$1.5M to support projects in the early childhood space.

Projects that have recently received funding through the ECAS Funders' Hui include:

- MI-Home Midwifery Home Visitation Program
- Breastfeeding Toolkits
- Words Matter LENA Early Literacy programs
- Technology Gifting Program
- Early Care and Learning Shared Services
- Commit to Keiki Candidate Education
- Family Child Care Pathways
- Aloha at Home - Nurture Daily
- The Integrated Infant Early Childhood Behavioral Health Plan
- Nest for Families Text Support

- Contributions to the Child Care Grant Program (Matching state funds to sustain the child care industry)

ECAS POLICY EFFORTS, 2021

In 2021, the pandemic structured the legislative session and limited contact opportunities. One advantage of this situation was that hearings were available on the internet and the Capital website seamlessly allowed for tracking bills, following the hearing calendar, and submitting testimony virtually. We would wish that video-casting and public posting of hearings will continue post-pandemic.

Anticipating a devastated economy, State agencies had been told to brace for multi-year budget cuts. Early childhood advocates, meanwhile, hoped to defend against the worst of the cuts to key programs supporting early childhood development and the safety net for families with young children.

In practice, two factors mitigated the magnitude of the cuts. First, state income tax revenue proved more robust than had been forecast. Second, was a massive infusion of federal relief funding through the American Rescue Plan Act. Representing billions of dollars in support, the ARPA funds led to widespread mobilization across the community to identify components of a system-wide effort to follow the President's desire to "build back better" from the pandemic. These funds, however, are time-limited, and our state-agency partners are cautious about embracing the costs of permanent infrastructure investments after the federal dollars are gone.

At the end of 2020, ECAS lost our chief government relations backbone member. Kerrie and Doug were confident we could cover the work until we had a new person in place. When Vivian joined the backbone team in February, we divided legislative policy duties into thirds (family safety, health and nutrition, and early learning). This division worked well for tracking measures and submitting testimony. A lesson learned from the experience was that maintaining the relationships that would best support tracking bills as they are rewritten and evolve through the legislative process, as well as maintaining ongoing conversations with our partners to best align our efforts is difficult to do as an add-on to an already full docket.

REVIEW OF ECAS 2021 LEGISLATIVE POLICY EFFORTS:

In the fall of 2020, ECAS backbone updated each team on our policy efforts and asked for input on important bills that would support the team's work. Additionally, as we approached the 2021 Legislative session, backbone reviewed the policy agendas of our key allies including the Keiki Caucus and Women's Caucus, and the HCAN Children's agenda. Collectively, these efforts led to identification of a set of measures that ECAS supported in the 2021 legislative session, spanning health, safety and early learning. Specific measures included:

HEALTH

SNAP Double-Bucks Program SB512 – This measure was designed to extend and clarify dimensions of the Double-Up Food Bucks (Da-Bux) program. The measure was ultimately successful and the program was reauthorized.

Vision and Hearing Screening HB 986 / SB 1140 - Efforts to improve the identification of newborns and infants with vision and hearing loss, and HB 987 / SB 1141 - Efforts to increase the early identification of children with hearing and vision loss. In spite of being largely revenue neutral and having a broad range of support behind them, these measures did not survive the session and will be revisited in 2022.

Sugar Sweetened Beverages HB994 / SB1148 – These measures would have imposed a fee on sugar-sweetened beverages and would have created a special fund to support efforts to prevent obesity and chronic disease. In spite of support from both public agencies and child advocates, these measures did not survive the legislative process.

SAFETY

Trauma-Informed Care Task Force HB1322 / SB1242 – The measure was designed to create a trauma-informed care task force within the Department of Health. Opposition to the measure centered on concerns that it added an unfunded mandate to the Department. Ultimately, the measure passed the legislature and was signed into law by the Governor.

Protection for Victims of Abuse HB563 / SB826 – The measure was designed to clarify the residential restrictions on sex offenders. Support for the measure was divided, with some partners in the child protection and social work communities concerned that it would weaken efforts to strengthen and rebuild families. Ultimately, these measures were deferred to the 2022 session.

Protection from Abuse HB566 / SB829 – These measures added coercive control to the definition of abuse of family members. The measure successfully passed out of the Legislature and was signed into law and will expand the definition of abuse to include coercive control.

EARLY LEARNING

On-Site Child Care Facilities Tax Credit HB514 – The measure was designed to provide an income tax credit to employers who create on-site childcare facilities. Opposition to the measure centered on the size and implications of the proposed tax credit. Ultimately, the measure failed to make it through the process.

Early Childhood Educator Stipend Program HB1360 / SB 1271 (SD1) – These measures proposed to establish a stipend program to support development of the early childhood workforce. These were popular measures that would expand workforce development opportunities and would initially be funded by private philanthropic dollars. Provisions of the measure were ultimately included in HB 1362.

Clarification of Aspects of Act 46 Implementation HB 1362 – The measure clarified key aspects of implementation of the early learning act. The measure sought to give some rigor to key components of the Early Learning Bill, including review of its timeline in light of pandemic-related delays, clarification of available resources for key components of the effort, and provisions concerning tracking and data. HB 1362 was eventually passed, which is encouraging for the state's effort to expand access to early learning for 3 and 4-year-olds. Some of the more concrete language that ECAS recommended was not included in the final measure. On the plus side, the final measure included funding for a position under ELB to provide support with coordination/implementation of Act 46.

Following the 2021 legislative session, ECAS paused to consider ways that we might strengthen our policy efforts. Our review involved conversations within the backbone, with our convener team, and with our policy team. These conversations focused on:

- The role and voice of ECAS in the policy process
- The types of issues that ECAS might and should advance through policy
- The process and timeline by which ECAS engages in public policy
- Opportunities to modify or expand ECAS policy engagement
- The form and function of the ECAS policy team

Our review of the ECAS policy process has resulted in a number of lessons and suggestions for strengthening the policy process in 2022:

- There is general agreement that ECAS has an important role to play in the policy process as a network of recognized subject matter experts in early childhood development and wellbeing, and that the currencies that underlie that role include expertise and trust; and that policy change is a key component of system change efforts
- There is an opportunity to engage in more proactive efforts around public policy. This can and should involve building stronger relationships with key legislators, and with the Keiki Caucus. Conveners report that there is confusion among legislators as to the role of different actors in the Early Childhood community (including a lack of clear understanding of the different roles played by ECAS, HCAN and EOEL)

- There may be a greater opportunity for ECAS to help articulate preferences of some of our governmental partners that they are not able to voice themselves
- Legislative offices are willing to work with ECAS partners to draft and submit legislation, particularly where we are able to clarify how it would support the wellbeing of the children and families they represent
- Bills supported by ECAS are championed by team members, who collectively form an internal policy team. Underscoring the importance of that role, and articulating what it might include would help to strengthen the process.
- Further, ECAS would likely benefit from having a second policy team made up of external partners and allies working together to align agendas and help to navigate the policy process.

KEY TEAM ACTIVITIES IN 2021 & TARGETS FOR JAN – JUN 2022

In 2021, the six core ECAS teams:

- Continued to meet virtually in order to advance the collective agenda
- Continued to review and re-prioritize efforts in order to build an effective response to the needs of families and support systems during both the pandemic and recovery
- Teams also revisited their work plans in order to best support implementation of Hawai'i's Early Childhood State Plan
- To varying degrees, team conveners are identifying, modifying and reviewing measures of team progress and related measures of success for young children and their families, including:
 - o The dimensions of child and family wellbeing that they hope to improve
 - o The availability of measures to help teams track their success in improving those dimensions of wellbeing, and
 - o The steps that they believe will best begin to move those measures

The following table reports in depth on the principal activities and achievements of each of Action Strategy's six teams in 2021. In addition to activities and achievements, the table includes:

- A preliminary set of measures that each team has chosen to track the success of their efforts, and
- Activities that each team intends to undertake during the first half of 2022

**ECAS TEAM 1 – HEALTHY & WELCOME BIRTHS
THE HAWAI’I MATERNAL & INFANT HEALTH COLLABORATIVE (HMIHC)**

Team 1		Theory of Change		Conveners	
Team 1 HMIHC is working to improve maternal and infant health outcomes, while advancing health equity and reproductive justice, by enhancing systems and supports for Hawai’i’s families and communities.		Healthy pregnancies and physical, social & emotional development in the first years of life support the health of mothers and newborns, and support the optimal, on-track development of young children.		<ul style="list-style-type: none"> Bliss Kaneshiro (JABSOM) JoAnn Farnsworth (Consultant) Jennifer Elia (ECAS) 	
GOALS			Key Measures of Success (and current status of each)		
In 2022, Team 1 HMIHC will continue to advance their work across 6 strategic areas designed to improve maternal and infant health. Specific activities completed, underway, and to be initiated in 2022 are discussed in detail below.			Team 1 will revisit specific metrics in 2022, which will be a component of the team retreat in January. These data points will help the team identify communities in need of intervention, and will provide a baseline for understanding the effectiveness of various interventions. Workgroup goals may include: <ul style="list-style-type: none"> Early and accessible prenatal care Equitable contraceptive access Pre-term birth rate Maternal and Infant mortality and morbidity Breastfeeding exclusivity and duration rates Perinatal substance use For more details, visit.: https://hawaiiactionstrategy.org/dashboard-goal-1		
Strategies	Activities	Key Achievements, Jan-Dec 2021	6-Month Targets (Jan-Jun 2022)		
1) Improve systems of care and support for perinatal women with substance use disorder	<ul style="list-style-type: none"> Train perinatal substance use peer support specialists Implement reflective supervision in collaboration with EPIC `Ohana Inc. Work with evaluation team to understand how we will know that we are doing what we hope Work with CWS, DHS MedQuest & ADAD to secure support for demonstration project Develop the perinatal referral process with the PATH clinic and Kapiolani OB/GYN department, allowing for direct referrals – trying to get a peer-support specialist there at birth to reduce trauma while a baby is removed as mom completes her treatment 	<ul style="list-style-type: none"> Designed a demonstration project for peer support for perinatal substance using women Received funding through both ADAD and Hayashi Foundation for 1st year of that demonstration project Contracted with EPIC `Ohana to provide the peer support Contracted with AIMH-HI to provide the reflective supervision and dyadic support for mom and baby attachment Developed educational materials for substance using moms entering the CW system 	Implement a demonstration peer support project for substance using perinatal women in order to improve access to gender supportive treatment for women and to improve reunification rates for women in treatment with infants (0-3) Have completed a training curriculum for CARES staff on how to address the needs of perinatal substance using women & conduct initial trainings on that curriculum with initial intake workers		

	<ul style="list-style-type: none"> • Establish a workgroup that will develop the curriculum • Meet with the CARES staff to co-create the curriculum, write it and conduct the training 	<ul style="list-style-type: none"> • Drafted pregnant and parenting Women chapter of the ADAD State Plan • The CARES project has asked the team to develop a curriculum and training 	
<p>2) Increase access to contraception and promote reproductive life planning</p>	<ul style="list-style-type: none"> • Conduct One Key Question (OKQ) training through Power to Decide • Create a sustainability plan for reproductive life planning for Hawaii primary care settings • Investigate and resolve barriers that prevent (same-day) access to LARC/contraception of choice in multiple settings • Assess and make recommendations for insurance confidentiality processes for adolescents and dependents 	<ul style="list-style-type: none"> • OKQ training recruitment in progress (contract with HMHB) • LARC/Access to Birth Control, troubleshooting barriers to contraception reimbursement, access, pharmacy access, etc. (contract with UHP) • School of Pharmacy put on webinar for pharmacists about confidentiality of services for teens • Addressed issue of insurers paying less than cost of Nexplanon device • Worked with Department of Family Medicine (UHP) to acquire exception from HMSA's payment transformation program to reimburse for LARC devices separately 	<ul style="list-style-type: none"> • Develop new pregnancy planning (transition away from OKQ), develop our own tool that is sustainable and more in line with community needs • Continue to address contraception reimbursement issues
<p>3) Promote and support breastfeeding</p>	<ul style="list-style-type: none"> • Pilot breastfeeding toolkit for pediatric providers in federally-qualified health center settings • Update and disseminate breastfeeding-related resources for families and providers • Engage with insurance providers to enhance reimbursement for lactation support 	<ul style="list-style-type: none"> • Breastfeeding toolkit pilot & evaluation completed with Bay Clinic, West Hawaii CHC, Waimanalo HC with support from Papa Ola Lōkahi • Breastfeeding and COVID-19 infographic created, translated, and disseminated • Manuscript on breastfeeding and COVID-19 accepted for publication in HJHSW, addressed lack of coverage & other barriers • Coordinated community input to increase breastfeeding support/insurance coverage 	<ul style="list-style-type: none"> • Share results & lessons of toolkit pilot, explore value of revised 2.0 Toolkit effort • RWJF work on expanding breastfeeding support to highest need communities

		<ul style="list-style-type: none"> • Collaborated on infographic on COVID-19 vaccination in breastfeeding and pregnancy • Worked with DOH CDPHPD to include Breastfeeding priorities in CDC COVID-19 disparities grant • Led by Hawai'i Indigenous BF Collaborative, supported educational activities for 'Ōiwi BF Week • E Ho'olaukanaka statewide virtual gathering shared updates & new resources among 40+ BF advocates • Led by BF Hawai'i, secured funding & staffing to identify community solutions to address disparities in coverage/funding for bf support 	
<p>4) Support the implementation of recommendations to prevent preterm birth and maternal/infant mortality</p>	<p>Enhance preconception counseling and screening for comorbidities that could be optimized prior to conception</p> <p>Increase awareness and accessibility of low-dose aspirin for pre-eclampsia prevention</p> <p>Enhance cervical length screening, using telemedicine for ultrasound images and consultation for short cervix</p> <p>Support the implementation of recommendations from the Maternal Mortality Review and Child Death Review</p> <p>Collaborate with Hawaii's Perinatal Quality Collaborative, the formation of which is in progress, to secure hospital champions and pursue future initiatives</p>	<ul style="list-style-type: none"> • Hawaii is now an AIM (Alliance for Innovation on Maternal Health) state, working on maternal hemorrhage first (as way to implement recommendations from MMR) • Community-focused representatives, including HMIHC, now attend HAH PQC meetings. Look at data for hemorrhage • Analyze PTB data from DOH birth certificates (contract with UHP) • Assist with/strategize community engagement for Hawaii AIM 	<ul style="list-style-type: none"> - Support community engagement for and align with the Hawai'i AIM, focused on reducing preventable maternal mortality and severe morbidity - Initial focus of AIM will be on reducing hemorrhage rates - Help identify strategies for implementing the MMR recommendations - Present PTB data at the HMIHC Planning Retreat and use for strategy identification

<p>5) Collect, analyze, and disseminate data to inform the work of the team and its partners</p>	<ul style="list-style-type: none"> • Collect and present publicly available maternal and infant health data for Hawaii and relevant literature • Partner with Department of Health on data governance and potential analysis of vital statistics data 	<ul style="list-style-type: none"> • Now have access to birth record data • Completed HMIHC portion of PHHSBG application • Use data to inform current discussion of updating HMIHC priorities and logic model 	<ul style="list-style-type: none"> • Data to inform strategic direction will be presented at Team 1 Retreat in January 2022
<p>6) Support legislation and other policy actions that enhance maternal and infant health and alleviate health disparities</p>	<ul style="list-style-type: none"> • Support efforts to expand Medicaid coverage from 60 days to 12 months postpartum 	<ul style="list-style-type: none"> • Defined purpose, procedures, and roles for workgroup and HMIHC policy work; merged with Planned Parenthood group • HB 576 passed • RWJF IRL application submitted for data disaggregation • Training for APRNs in aspiration abortion • Partner with Med-QUEST on postpartum Medicaid extension 	<ul style="list-style-type: none"> • Potential legislative efforts in the 2022 session: • Reproductive Health Equity Act • A Housekeeping bill to clarify the state’s existing abortion law (APRNs can now provide abortion care and the two laws now contain conflicting language) • Medicaid Post-Partum Extension

ECAS TEAM 2 – SAFE AND NURTURING FAMILIES

Team 2	Theory of Change	Conveners
<p>Team 2 is working to reduce family violence and support safe and nurturing families by 1) building awareness and understanding of the issue of family violence and 2) building the skills needed to improve the quality of interactions that shape family wellbeing and prevent family violence.</p>	<p>When young children are raised in safe and nurturing homes, they are more likely to develop on-track and reach school ready to thrive.</p>	<ul style="list-style-type: none"> • Kanoë Enos (A’ali’i Alliance) • Shelly Tokunaga-May, EdD (A’ali’i Alliance)
GOALS		Key Measures of Success (and current status of each)
<ul style="list-style-type: none"> • Reduce family violence in homes with young children • Strengthen early childhood providers’ capacities to support families and refer families at-risk • Educate the general public about the prevalence of family violence and the impact to young children • Strengthen our systems of support for families 		<p>OUTPUTS:</p> <p>Toolkits: 300-500 families will receive toolkits Participating families complete and return surveys on the toolkits</p> <p>Trainings: Developed & delivered to 20 service providing organizations 75% of staff in those organizations participate in the training 40 participating programs display Aloha at Home materials</p>

		<p>Messaging Campaign: Increase in visits to / links to the Nurture Daily website Materials on safe & nurturing families & child development developed / distributed through community events</p> <p>OUTCOMES:</p> <p>Short Term:</p> <ul style="list-style-type: none"> • Increase in families taking advantage of available family supports (including: AUW-211, Keiki Central, Domestic Violence Action Center, Parenting Line, and other referral lines) • Increase in utilization of family support services • Increased referrals of families to support services • Increased community awareness about family violence and creating safe and nurturing homes <p>Medium Term:</p> <ul style="list-style-type: none"> • Decreased rate of reports to DHS with concerns about child abuse & neglect and intimate partner violence • Decreased rate of substantiated cases of child abuse and neglect and • Decreased rate of intimate partner violence/domestic violence <p>Long Term:</p> <ul style="list-style-type: none"> • Reduced rates of family violence to include child abuse and neglect and intimate partner violence • Reduced number of children referred to child welfare services • Increase in children arriving at kindergarten ready for school-success <p>For more information, see: https://hawaiiactionstrategy.org/dashboard-goal-2</p>	
Strategies	Activities	Key Achievements, Jan-Dec 2021	6-Month Targets (Jul-Dec 2021)
<p>1. Create an Aloha at Home ~ Nurture Daily framework that is:</p> <ul style="list-style-type: none"> • Strength-based • Skills-focused • Based on validated national research • To be used by the network of practitioners 	<ul style="list-style-type: none"> • Develop a Safe and Nurturing Families Framework, based on: <ul style="list-style-type: none"> ○ 5 Frameworks Themes (leading w/Serve-and-return) ○ 5 Protective Factors ○ Sequenced roll-out ○ Cultural-responsiveness • Roll-out framework with early adopters - DHS, WIC, Head Start, Zero-to-Three Court 	<ul style="list-style-type: none"> • Developed presentation for funders reviewing the prototype: reach / user experience / proposal for next iteration (Presented May 19, 2021) • Developed Business plan for Aloha at Home ~ Nurture Daily implementation and sustainability (completed June 2021) • Shifted campaign focus to “Aloha At Home - where it matters most,” consistent with 	<ul style="list-style-type: none"> • Pursue stability through additional funding from governmental and private foundation sources to support implementation (inc.: next round of Children’s Trust Fund RFP)

		<p>local culture and focus group feedback.</p> <ul style="list-style-type: none"> • Extensive fund development including CHANGE grant application (successful), Children’s Trust Fund proposal (under review), Honolulu GIA proposal (under review) 	
<p>2. Develop Materials:</p> <ul style="list-style-type: none"> • Including messaging and outreach materials to support the framework 	<ul style="list-style-type: none"> • Develop culturally appropriate msgs built on the 5 FrameWorks themes • Use the FrameWorks slide-deck to explain and implement findings • Develop metaphor-based materials, including: <ul style="list-style-type: none"> ○ Slide deck ○ Google sheet for AUW 211 	<ul style="list-style-type: none"> • Website completed (and continually updated): • 54 clickable links, content organized into 5 protective factors • Track visits / use of website. Identified questions users would like to be able to answer, including: • To date: there have been: <ul style="list-style-type: none"> ○ 10,000 unique visitors ○ 21,300 visits ○ 98,300 page hits ○ 4.4 pgs / visit, on avg. ○ 336,000 search engine hits • 	<ul style="list-style-type: none"> • In 2022 Expand focus on social media sharing media avenues to drive traffic to website – expanding use of ‘intrinsic marketing’ to reach broad audiences w/out an advertising budget • Increase focus on family engagement w/the website (through activity pages tied to tool-boxes) • Increase referral to services via the website • Mine data to determine if the website is driving traffic to needed resources
<p>- Develop associated materials (continued)</p>	<ul style="list-style-type: none"> • Develop and expand the Aloha at Home family toolkit effort, sharing materials directly with families to strengthen their positive interactions and reduce rates of family violence • Develop new collateral (inc. logos, photo imagery) • Pilot toolkits w/20 families 	<ul style="list-style-type: none"> • Developed and distributed a sequence of 5 themed toolkits to 20 families <ul style="list-style-type: none"> ○ Created toolkits based on Frameworks serve-and-return theme ○ Included culturally appropriate materials for Native Hawaiian families ○ Engaged Team 2 in development & review • Completed evaluation of the Aloha at Home toolkits <ul style="list-style-type: none"> ○ 100% of survey respondents used items from the boxes ○ All of the respondents spent more quality time with their 	<ul style="list-style-type: none"> • Messaging plan development (including timing [& time frames] of roll-out of msgs, deployment of content, alignment across venues & activities) • Conduct an environmental scan / lit review (drawing from best available resources) <ul style="list-style-type: none"> ○ Review available resources on CDC trauma-informed page • Next steps include expanding the reach of the program via scaling & replication, with modifications based on lessons learned from the prototype (developing an iterative feedback & learning loop) <ul style="list-style-type: none"> ○ Determine which families and organizations will receive toolkits • Working on development of more collateral materials that will align w/protective factors & themes

		<p>children after receiving the boxes and</p> <ul style="list-style-type: none"> ○ 67% of respondents spent more quality time with their partners ○ Respondents felt supported in their parenting and partner roles and reported being better able to share their thoughts and feelings together with their children and partners ○ Participants reported more positive interactions and greater self-care 	<ul style="list-style-type: none"> • On-going website development and expansion into social media
<p>3. Develop Training materials to support the framework</p>	<ul style="list-style-type: none"> • Identify materials to include on the website for providers • Engage with service providers to strengthen the care and response safety net 	<ul style="list-style-type: none"> • Nurture Daily website build-out included educational and resource information and training materials for providers (organized around the 5 protective factors) 	<ul style="list-style-type: none"> • Work with Team 2 partners to review staff capacity and competencies, scan landscape of professional development opportunities and aid in promotion or coordination of trainings to address gaps • Gather materials from service providers to begin to develop a master set of training materials to be shared through the website <ul style="list-style-type: none"> ○ To be addressed in Q3-Q4 ○ Align these materials with FrameWorks guidelines and in light of family feedback on the Aloha at Home toolkits • Continue to build out the website to support service providers (in addition to families)
<p>4. Create a family support system that connects families to support programs from the prenatal period through childhood</p>	<ul style="list-style-type: none"> • Expand the use of 211, Parentline, Nest for Families, Family Hui, Domestic Violence Action Center etc. as resources and referrals in support of violence prevention. • Ensure all family strengthening resources are included 	<ul style="list-style-type: none"> • Built out capacity on the Nurture Daily website with educational and resource content for families 	<ul style="list-style-type: none"> • Determine what organizations have families and clients that could benefit from connecting and building a support system • Create spaces and opportunities for relationship building between families to expand healthy social support networks (e.g., online and in-person events and activities bringing families together)
<p>5. Identify policy opportunities to strengthen family safety</p>	<ul style="list-style-type: none"> • Support potential legislation to expand family strengthening supports 	<ul style="list-style-type: none"> • Supported successful legislative effort to classify domestic violence as a misdemeanor 	<ul style="list-style-type: none"> • Continue to work w/ Team 2 to identify and support potential legislative

		<ul style="list-style-type: none"> Supported positive discipline legislation (working with Dr. Pantell) 	<p>measures that would advance family safety efforts</p> <ul style="list-style-type: none"> Engage in education and advocacy efforts around family safety and violence prevention, with: <ul style="list-style-type: none"> Elected officials Candidates for elective office Agency personnel
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ECAS TEAM 3 - ON-TRACK HEALTH AND DEVELOPMENT

Team 3	Theory of Change	Conveners
<p>Team 3 is working to ensure all children are supported to reach their optimal development by working with early childhood and healthcare providers and families.</p>	<ul style="list-style-type: none"> When children with developmental concerns are identified early and receive needed services and supports without delay, they are more likely to reach key developmental milestones. In turn, children who develop on-track are more likely to be kindergarten-ready and thriving by 3rd grade. Additionally, Children are more likely to thrive when their families have the knowledge, skills and resources they need to be strong advocates for their children's health, wellness and early learning. 	<ul style="list-style-type: none"> Keiko Nitta (DOH) Cherilyn Shiinoki (Family Hui Hawai'i) Jordan Smith (DOH)
GOALS		Key Measures of Success (and current status)
<ul style="list-style-type: none"> All children, especially those at-risk, are screened at AAP recommended ages, provided with appropriate referrals, and access needed services There is communication with the medical home and early childhood programs Young children's social and emotional development is supported by child care providers, medical and health care providers and parents and families Physical activity and nutrition best practices are understood and supported in early childhood programs 		<p>DRAFT: Team 3 Data Dashboard : https://hawaiiactionstrategy.org/dashboard-goal-3</p> <p>Key Measures:</p> <ul style="list-style-type: none"> # children (0-3 years) who have had a developmental screening: Currently, the data shows a slight downward trend in this measure. Our concern is that, with fewer in-person, well-child visits, this number will decrease further. This possibility calls for greater outreach and service provision through telehealth, and collecting data on telehealth visits as a critical part of the screening, referral and treatment loop. # of children (0-5) having a medical home - The story told by the data: The most recent NSCH data shows a slight increase (52.7%). Our concern is that the pandemic will reduce the share of children receiving their care from a regular provider, particularly one that meets the medical home definition. The first years of childhood are critically important to a child's health, well-being, and development. Early childhood has also been recognized as a critical period in the development of childhood obesity. This is concerning because lifelong nutrition and

		<p>physical activity behaviors and habits are developed during the early years and because the younger a child becomes overweight or obese, the higher likelihood that overweight or obesity will persist into adolescence and adulthood.</p> <ul style="list-style-type: none"> • According to UH Manoa’s Children’s Healthy Living Program (2015), 29.4% of Hawaii’s keiki ages 2–8 are overweight/obese. • Child food insecurity rate – concern that the number will increase because of the pandemic. • A new report from UH Manoa was published in spring 2021 highlighting that food insecurity among children in Hawaii has dramatically increased. <ul style="list-style-type: none"> ○ # of young children (age 6 months – 5 years) who are flourishing (how often is the child affectionate and tender, does this child bounce back quickly when things do not go his/her way, does child show interest and curiosity in learning new things, and does this child smile and laugh; must answer “always” or “usually”). – National Survey of Children’s Health ○ Currently 86.4% of parents in Hawai’i report that their children meet all 4 flourishing items. This is slightly higher than the nationwide average of 83.8%. Hawaii has seen a dramatic increase from the 2017 data which was at 64.6% of children flourishing in all 4 items as compared to 2018 data which has 86.4%. 	
Strategies	Activities	Key Achievements (Jan – Dec 2021)	6–Month Targets (Jan – Jun 2022)
<p>1) Create a framework for a screening–referral–utilization of services feedback loop within the medical home model</p>	<ul style="list-style-type: none"> • Engage families in learning about typical developmental milestones in bite–size family–friendly pieces supported by tangible follow up activities to practice what was learned. <ul style="list-style-type: none"> ○ Connections to PDGB5 MFKE Strategic Implementation Plan Objective 1: Family Focused – Develop and implement learning opportunities for families utilizing best practice materials and models that build their capacity to be engaged in their child’s development. • Pilot LENA program supporting developmental growth through attachment through interactive talk and reading together. 	<ul style="list-style-type: none"> • Promote distribution of CDC Act Early materials to families through Team 3 partners and DOH agencies (WIC, Home Visiting, Early Intervention) as part of CDC Act Early COVID–19 grant awarded to American Academy of Pediatrics – Hawaii Chapter) • Presentation on opportunities to engage and implement CDC Act Early Materials to ECAS Team 3 members by the Department of Health • Piloted LENA START with 10 families who have hearing concerns to support language development • Established partnership with EIS to pilot LENA SP with care providers supporting families with children with special needs receiving services through Early Intervention. • Continuing to use LENA to support language development and literacy connections with families, child care providers, and EIS interventionists • Partnered with Family Hui Hawai’i to promote text messaging support 	<ul style="list-style-type: none"> • Continue to support the implementation of the CDC Act Early materials and consider looking at hearing and vision screening and use of a social determinants screening tool. • Assess & align with screening & referral activities in: <ul style="list-style-type: none"> ○ ECCS grant ○ HCF Screening initiative ○ EPSDT Med–QUEST efforts

	<ul style="list-style-type: none"> ○ Connections to PDGB5 MFKE Strategic Implementation Plan Objective 1: Family Focused – Develop and implement learning opportunities for families utilizing best practice materials and models that build their capacity to be engaged in their child's development. 	<ul style="list-style-type: none"> • Provided two-way text messaging around developmental milestones • NEST for families provides text support to perinatal mothers 	
<p>2) Increase the number of children enrolled in a medical home</p>	<ul style="list-style-type: none"> • Promote families' understanding of medical home • Promote use of telehealth through technology and make sure families have access by arranging technology gifts to families. With each computer given, include CDC developmental milestones resources, and invitations for families to participate in program partner activities that promote support through virtual/online engagement as well as information on nutrition and food security) ○ Connections to PDGB5 MFKE Strategic Implementation Plan Objective 1: Family Focused – Develop and implement learning opportunities for families utilizing best practice materials and models that build their capacity to be engaged in their child's development. 	<ul style="list-style-type: none"> • Strategies supporting this goal have shifted in response to the pandemic. Currently distributing computers and gift cards to supplement access to technology and to the internet in order to support families' access to telehealth and tele-services • Distributed information on telehealth through Team 3 partners • Distributed computers to families with limited access to technology, supporting their access to medical care, Early Intervention and other needed services to support early childhood development through tele-practice. • 100 families have received computers and gift cards to supplement internet expenses. 	<ul style="list-style-type: none"> • Continue to monitor use of telehealth vs. in-person visits
<p>3) Implement health and wellness guidelines in early childhood</p>	<ul style="list-style-type: none"> • Create and deliver trainings to support Physical Activity and Nutrition Guidelines 	<ul style="list-style-type: none"> • In partnership with NACDD, hosted an ECE provider listening session (August) and 2 key stakeholder meetings in September and October 2021 	<ul style="list-style-type: none"> • Host additional ECE stakeholder meetings and work on action items developed

	<ul style="list-style-type: none"> ○ Connections to PDGB5 MFKE Strategic Implementation Plan: Objective 2. Provider-focused. Develop and implement learning opportunities for providers of all types utilizing best practice materials and models. • Create fun and inviting activities to engage families to learn about and incorporate what they learn into their daily lives with a particular focus on engaging families during the COVID19 pandemic. ○ Connections to PDGB5 MFKE Strategic Implementation Plan: Objective 1: Family Focused – Develop and implement learning opportunities for families utilizing best practice materials and models that build their capacity to be engaged in their child's development. 	<ul style="list-style-type: none"> • Designed an action/implementation plan for the ECE Wellness Guidelines focused on outreach and marketing, and Technical Assistance/Professional Development objectives • Contracted with Honolulu Theatre for Youth for work in 2022 and 2023 to create a live play promoting physical activity and nutrition to be performed for ECE and pre-K audiences statewide, two television episodes to air statewide promoting physical activity and nutrition, and create interactive resources for ECE providers to implement the ECE Wellness Guidelines. • Developed and launched in November 2021 a statewide ECE Children’s Health Survey focused on physical activity and nutrition related indicators. • Secured SNAP–Ed funding through September 2023 to support implementation of the ECE Wellness Guidelines. 	<ul style="list-style-type: none"> • Working to secure additional funding and technical assistance to support the Healthy Keiki in ECE Settings implementation plan through the Nemours Healthy Kids Healthy Future technical assistance program. • Compile and analyze data from the Hawaii ECE Children’s Health Survey to be shared with stakeholders.
<p>4) Promote social and emotional health by developing an Infant and Early Childhood Behavioral Health Plan (A Cross Team Initiative supporting the work of ECAS teams 1, 3, & 4)</p>	<ul style="list-style-type: none"> • Promote Infant and Early Childhood Behavioral Health plan and environmental scan of resources and share with stakeholders. ○ Connections to PDGB5 MFKE Strategic Implementation Plan: Objective 3: Community-focused. Generate increased community understanding and support for family engagement and child development. 	<ul style="list-style-type: none"> • Infant/Early Childhood Behavioral Health Plan completed & released • Press release coordinated by Hawaii Community Foundation and Department of Health on May 13, 2021. • Vendor hired to address MedQUEST issues identified in the plan. • Secured funding and hired a contractor to lead project coordination through the first two years. 	<ul style="list-style-type: none"> • Work with IECBH Coordinator to support focus groups on behavioral health in the communities.

TEAM 4: EQUITABLE ACCESS TO NEEDED PROGRAMS AND SERVICES

Team 4	Theory of Change	Conveners
<p>Team 4 is working to increase access to existing early childhood programs and services throughout the state and to resolve program/ service gaps community by community.</p>	<p>When families with young children are able to access needed programs and services, their children are more likely to develop on-track and reach school ready to thrive.</p>	<ul style="list-style-type: none"> • Ka'ina Bonacorsi, Maui County • Angela Thomas, Independent Consultant
GOALS		Key Measures of Success
<ul style="list-style-type: none"> • Increase access to existing early childhood programs and services throughout the state. • Resolve program/service gaps community by community. 		<p>Co-Conveners continue to work on measures that align with each subgroup's activities. This conversation will identify Key Process Indicators (KPI), output measures, and measures of population-level change (outcomes). Conveners & backbone are meeting biweekly and are collecting data from Team 4 members.</p> <p>Conveners will develop a draft set of measures and then meet with the team to review (by end of Q3)</p> <p>Potential measures to capture and track include:</p> <ul style="list-style-type: none"> • Children enrolled in licensed / regulated care, by age group, provider type, and geographic area (Included on ECAS Child Care Capacity dashboard, but age group data is weak) • Children enrolled in DHS subsidy (CCC & POD) and other subsidy programs, by age group, provider type, and geographic area (not currently collected) • Provider licensed & desired capacity (by zip code) (Available on ECAS Child Care dashboard quarterly) • Workforce capacity (required by license type) • Children in homeless families enrolled in early learning programs (# & %), • Share of eligible families accessing DHS subsidies, and • Families participating in family/fatherhood engagement programs (survey census of nonprofit providers re: # of families served) <p>The team is reviewing <u>some possible examples</u> of key metrics to track, relating to access to early childhood learning and family support.</p> <p>Immediately before the pandemic (in February 2020), Hawai'i had 25,247 child care spaces in facilities regulated by the Hawai'i Department of Human Services, including:</p> <ul style="list-style-type: none"> • 21,934 seats in child care centers • 1,514 spaces in infant-toddler centers, and • 1,799 spaces in family child care homes <p>As of October 2021, there were 107,493 children under age six in Hawai'i</p> <ul style="list-style-type: none"> • 64,172 of these children (59.7%) have all parents in the workforce, and need non-parental child care

		<ul style="list-style-type: none"> • 33,755 of these children (31.4%) live in families in or near the federal poverty level <p>Meanwhile, in October 2021 statewide, there were:</p> <ul style="list-style-type: none"> • 733 child care providers registered with PATCH, with a combined capacity to care for 20,408 children <ul style="list-style-type: none"> ◦ This represents a 24% reduction in the capacity of the child care sector to care for children younger than 5. 	
Strategies	Activities	Achievements, Jan – Dec 2021	6–Month Targets (Jan – June 2022)
<p>The Infant/Toddler (IT) subgroup is working to increase the access of children birth through 3 years of age to quality early care and education services by addressing policy/regulatory/funding barriers, supporting quality–improvement and capacity–building activities, and engaging new partners/advocates from other sectors of the community.</p>	<ul style="list-style-type: none"> • Increase share of income eligible families applying for child care subsidy support • Partner with the DHS Child Care office to revise child care subsidy administrative rules • Engage businesses in supporting employee access to child care via events or child care related legislation • Strengthen and expand support for FCC providers, including accreditation support • Increase engagement of IT providers in training opportunities • Support growth of IT workforce and small business start–ups for IT care via needs assessment research/studies • Support funding, materials development and activities for existing family outreach, education, and engagement efforts (e.g., Little Minds Matter, Vroom, Family Hui) 	<ul style="list-style-type: none"> • Due to COVID–19, the team shifted its focus to assess how best to support the sustainability of child care businesses. • Successfully reconvened core members of I/T subgroup to: 1) incorporate ongoing COVID response strategies into subgroup work plan, 2) assess whether members are championing activities we could acknowledge in work plan, and 3) examine alignment and incorporate PDG Strategic Implementation Plan elements into subgroup work plan. • Invited partners to provide updates on I/T initiatives/activities/ deliverables that align with the work plan as a standing meeting agenda item (e.g., IECBH plan; Promising Minds initiative) • Continued participation in and support of FCC pilot project initiatives (via team members serving on advisory group) <ul style="list-style-type: none"> ◦ Ka ‘Upena – shared services project. ◦ FCC Essentials – career pathways project • Engaged in advocacy work around sustaining and building infant/toddler child care capacity and parental access to infant/toddler care, including recommendations for: <ul style="list-style-type: none"> ◦ COVID subsidy waivers/ measures (increased provider reimbursement rates, expanded family eligibility) ◦ CARES relief funding ◦ ARPA stabilization grants ◦ CCDBG ARPA funding ◦ CCDF state plan 	<ul style="list-style-type: none"> • Ongoing attention to business and admin capacity of providers and continued expansion of FCC–specific supports, such as recruitment/start–up services, staffed networks, shared services • Development of strategies for addressing I/T workforce issues: <ul style="list-style-type: none"> ◦ Possible alternatives for experiential requirements for center–based staff ◦ Existing and new compensation strategies, including wage supplements, educator stipends and scholarship opportunities • Advocacy and policy work to expand public funding and improve administration of public funding to the benefit of I/T care: <ul style="list-style-type: none"> ◦ Use of ARPA CCDBG expansion funds for I/T care ◦ Subsidy administration (e.g., reimbursement rates for I/T care) ◦ EHS Rising state policy agenda ◦ Implementation of public pre–k via a mixed delivery system • Identify/develop/support strategies for I/T quality improvement, including site– and practice–based coaching and Technical Assistance services <ul style="list-style-type: none"> ◦ Address anticipated potential impacts of Act 46

			(accreditation requirements) and Build Back Better Act (QRIS requirements)
<p>Child Homelessness Action Team (CHAT) is working to increase access for children in unstable housing to early care and education programs and services</p>	<ul style="list-style-type: none"> • Expand the number of EC programs/settings supporting children experiencing homelessness • Expand the number of enrolled children experiencing homelessness in EC programs/settings • Leverage existing data sources to gain a clear picture of where to target services for homeless children • Raise awareness about child homelessness/ Increase public awareness about young children experiencing housing instability • Develop a systematic data collection tool/methodology for assessing numbers of children, birth to five, experiencing homelessness and numbers being served in EC programs/settings 	<ul style="list-style-type: none"> • CHAT Workgroup Leads surveyed membership, and 1) assessed where we are with activities identified in our work plan to plan next steps; and 2) examined alignment and incorporated PDG B-5 strategic implementation plan elements into the subgroup work plan • Sought funds to expand upon the 2020 EC Homelessness Needs Assessment to include a family assessment piece (unsuccessful so far) • Used a mini-grant from Education Leads Home (ELH) to develop a brief for shelter and EC providers based on 2020 EC Homelessness Needs Assessment findings. • Continued to work with Partners in Care on Oahu (PIC) and the HIDOE Education for Homeless Children and Youth Program (EHCY). • Identified metrics for our CHAT work and strengthened our data collection efforts to support work plan activities. (Created a family needs assessment (focused on B-5 children) and resource list for McKinney-Vento Community Liaisons and shelter staff use) • Developed a new K registration flyer, June 2021 • Through a partnership with Under My Umbrella (UMU) and Chef Hui, distributed meals to families at shelters on Oahu as part of a summer outreach campaign to connect families with resources in their communities, and into the fall (until early October) to stay connected with families. (This work was made possible by the HIDOE liaisons and PACT Head Start, and by Donna Manibog who helped to coordinate the effort; by the chefs who participated, and by UMU/Chef Hui who subsidized the cost of this project.) • A kindergarten flyer was created to fulfill an action step in the Early Childhood State Plan to support kindergarten transition of young children experiencing homelessness. The flyer was distributed this summer to families and shelter providers by HIDOE liaisons to help families understand what Kindergarten registration documents were needed and where to register 	<ul style="list-style-type: none"> • Establish routinized process for regular collection of data on children 0-5 served by EC programs (Ongoing & will continue through Q2, 2022) • Continue to provide support for DOE's efforts to establish a statewide B-5 Navigator position and to explore ways to increase numbers of children served in EC programs/settings (e.g., contract for slots in EC programs or site expansion of programs) through ARPA funding for Homeless Children and Youth. • Identify possible policy recommendations and use newly published ELH brief as source document to establish need • Continue work with Partners in Care on Oahu and with the DOE EHCY Program, and initiate partnership with Bridging the Gap (BTG) Continuum of Care on Neighbor Islands.

		<p>keiki for kindergarten enrollment for SY 2021–2022.</p> <ul style="list-style-type: none"> • Provided support for DOE’s efforts to establish a statewide B–5 Navigator position and to explore strategies to connect more B–5 children to EC programs/settings, statewide through ARPA funding. <ul style="list-style-type: none"> ○ Two listening sessions with cross–sector stakeholders were convened in November by CHAT to support the HIDOE Education for Homeless Children and Youth (EHCY) program in obtaining ideas on how to use American Rescue Plan (ARP) HCY funds to connect more birth to five keiki to early childhood programs and settings – what the system needs and what some of the challenges are. Many ideas were shared which will help the EHCY program identify potential funding opportunities and new partnerships to explore, going forward. We hope to continue our collaboration with the EHCY program to help in this effort. 	
<p>Fatherhood Engagement subgroup is working to increase the positive involvement of fathers and other men in the lives of young children.</p>	<ul style="list-style-type: none"> • Identifying Existing Resources and unmet needs of fathers and other men with responsibility in the lives of young children • Increasing Leadership and Championing of Fatherhood Initiatives • Impact the Early Childhood Field to Intentionally Engage and Include Fathers and • Expand the focus of fatherhood engagement opportunities to include early childhood 	<ul style="list-style-type: none"> • Continuing to develop subgroup workplan and supporting activities, identified key activities to start implementing • Create a fatherhood specific tab on keiki central (on hold, conversation with United Way may be stalled) • Dads and Data: Create report or dashboard with Commission on Fatherhood (project modified to include data on dads in more general data collection efforts) • Getting dads more involved in daily activities and literacy action steps (on hold) • Connect with DHS, 0–3 Court, and Family Programs HI to understand [and potentially improve] pathways to mediation from Family Court in divorce and custody hearings (less of a priority at this point) • Connected with Ralph Smith of the Campaign for Grade Level Reading to discuss ways that dads can better support early literacy development 	<ul style="list-style-type: none"> • Build and pilot test a father engagement survey (to go directly to dads) (Q1 2022) • Identify key indicators that affect fatherhood programming to be added to the community profile effort (building our understanding of key indicators concerning fatherhood) (Q2 2022)
<p>Family Engagement and Supportive Partnerships subgroup is working to increase access to</p>	<ul style="list-style-type: none"> • Increase parent engagement in a child’s life, and encourage 	<ul style="list-style-type: none"> • This subgroup has been put on hold during the COVID–19 outbreak, and will be resumed after the virus has passed 	<ul style="list-style-type: none"> • Setting targets will happen after the subgroup reconvenes

services for family engagement and parent leadership	<p>program supports and family partnership</p> <ul style="list-style-type: none"> • Improve/access of the supports available for programs and families to develop healthy partnerships 	<ul style="list-style-type: none"> • Convene subgroup, recruit/confirm members and establish workplan (still on hold given other priorities) 	
Neighbor Island Networking subgroup is working to strengthen and integrate county and island-level early childhood systems and networks across Hawai'i.	<ul style="list-style-type: none"> • Extend the networking effort to other counties & islands • This effort began in Maui County in partnership with the ECCS/COMMIT team and the Maui Co. Early Childhood Resource Office. It is intended to: <ul style="list-style-type: none"> ○ Increase understanding of the county-level system to support for young children; Identify Key County level indicators of early childhood wellbeing ○ Increase collaboration between Maui early childhood system and statewide network ○ increase awareness of high-quality programs and services for Maui County Families with young children 	<ul style="list-style-type: none"> • Create baseline, county-level data sheets for each county on the well-being of young children • Secured funding and a contractor to complete the project for 2 Counties (Maui & Hawai'i, with the other 2 Counties following next year). First round of the project will run from Dec. 15, 2021 to June 30, 2022 with alternating counties to be updated on a 2-year basis <ul style="list-style-type: none"> ○ This project will lead to: community profiles, data summary sheets and key early childhood indicators. ○ Each ECAS team identified the key indicators that they would like to have included in county-level data sheets / indicator summaries & community profiles • Developed an intentional connection with Keiki Caucus in order to better align and articulate early childhood agendas that span communities statewide • Led to drafting of a bill to ensure stronger neighbor island representation on ELB, to be introduced in 2022 Leg. session 	<ul style="list-style-type: none"> • Articulate & promote the connection between data sheets / indicator summaries & community profiles and funding opportunities • Convene a community profile advisory group to work with contractor (Q1) <ul style="list-style-type: none"> ○ Community profile quick data review will take place in Q1 2022 • Complete profiles for Maui & Hawai'i Counties by Q2 2022
Create virtual and mobile 1-stop shops for early childhood resources and referrals	<ul style="list-style-type: none"> • Expand participation in the Keiki Central platform with call-in and linguistic supports via AUW 211 and increased inclusion of local, island-specific resources/services 	<ul style="list-style-type: none"> • On hold due to the pandemic • Review of user experience and performance data and work to increase the use of Keiki Central (conversation seems to be on pause around resources & effort needed) 	<ul style="list-style-type: none"> • Fatherhood subgroup will produce a document of resources that are not yet in Keiki Central • Reevaluate efficacy and priority in 2022 • Identify commitments to Keiki Central and clarify what needs to happen and next steps

ECAS TEAM 5 - HIGH QUALITY EARLY CHILDHOOD PROGRAMS

Team 5	Theory of Change	Conveners
Team 5 will develop a comprehensive personnel development (CSPD) system to strengthen and sustain an Early Childhood	High quality programs and services support early childhood development, and continued	<ul style="list-style-type: none"> • Stacy Kong, Early Intervention, Dept. of Health • Kerrie Urosevich, ECAS

(EC) workforce that provides meaningful outcomes for children with special needs, birth to five and their families.	quality improvement ensures a highly skilled Early Childhood workforce.		
GOALS		Key Measures of Success (and current status of each)	
<ul style="list-style-type: none"> • Provide children with early childhood (EC) services that support their optimal development and prepare them for kindergarten • Develop a statewide system that promotes professional and workforce development and retention in EC • Create a shared professional standards and data system to ensure quality 		<ul style="list-style-type: none"> • Increased # of providers are culturally and linguistically responsive to Hawai'i's keiki • A leadership team is in place to set priorities & make policy, governance & financial decisions • Increased # of providers follow national professional organization personnel standards • Across disciplines, criteria for state certification, licensure, etc. are aligned to state personnel standards & national standards • Increased # of providers graduate from IHE (institutions of higher education) programs • Increased # of IHE programs and curricula are aligned w/national & state standards • Increased # of providers access statewide in-service Professional Development / Technical Assistance opportunities • There is a statewide system for in-service PD/TA that is aligned & coordinated w/ IHE programs & curricula • Increased # of incentives for workforce training & engagement • Recruitment / retention strategies result in a workforce supply that meets system needs • Increased # of professions with professional competencies • Increased rates of retention in workforce • There are adequate & sustainable funding streams supporting system capacity 	
Strategies	Activities	Key Achievements, Jan-Dec 2021	6-Month Targets, Jan-June 2022
1. Create a CSPD Infrastructure for the State	<ul style="list-style-type: none"> • Ensure cross-sector representation • Establish a management process for teams • Establish a sustainability plan • Create a CSPD marketing & outreach plan • Align integrated CSPD with state policies and other EC initiatives • Increase understanding of current EC workforce policies and initiatives • Align personnel standards across early childhood sectors 	<ol style="list-style-type: none"> 1) Drafted a CSPD website <ul style="list-style-type: none"> o Going live Q1 2022 o Hawai'i CSPD Logo and infographic created based on input from workgroup members 2) Ensured co-leads are fully supported <ul style="list-style-type: none"> o Drafted CSPD blurb for MOUs o Drafted Commitment letters and redesigned the commitment process 3) Finalized Onboarding process <ul style="list-style-type: none"> o Onboarding process finalized and uploaded to shared google drive for all workgroups to access 4) Drafted a business plan for sustainability 5) Convened partners (AIMH-HI, PATCH, EOEL, College of Education, CSPD) to explore shared training and trainer 	<ol style="list-style-type: none"> 1) CSPD website will go live Q1 2022 2) Include CSPD commitment blurb in appropriate MOUs for sustainability purposes 3) Upload onboarding documents on the website 4) Create Facilitation 101 materials 5) Secure funding for a CSPD Coordinator and other operational expenses as defined 6) Host a stakeholder meeting in Q1 or Q2

		registries to share costs and avoid duplication 6) DOH hired an evaluator to design the workforce development data collection process, using Part C ARPA dollars	
2. Adopt and integrate the EI-ECSE Standards	<ul style="list-style-type: none"> Align state professional standards to EI-ECSE standards Establish definitions for certification, licensure & endorsement in Hawaii Identify commonalities and gaps between current state and EI-ECSE standards across disciplines Strategies to address identified gaps 	1) Working to establish definitions for certification, licensure and endorsement & identify what currently exists in Hawaii. <ul style="list-style-type: none"> Drafted definitions for certification, licensure and endorsement by profession 	<ol style="list-style-type: none"> Finalize definitions for certification, licensure and endorsement by profession and post on CSPD website Work with early adopter partners to adopt the EIECSE Standards Identify commonalities and gaps between current Hawaii and national EI-ECSE standards. Standards are listed by profession on the new website
3. Ensure preservice preparation programs across disciplines align to national professional standards	<ul style="list-style-type: none"> Identify Hawaii preservice preparation programs Identify core competencies for each program Map coursework across programs Crosswalk preservice programs and curricula to EI-ECSE Personnel Standards & cross disciplinary competencies 	1) Identified and compiled all Hawaii Based EI-ECSE <ul style="list-style-type: none"> Preservice preparation programs cross-walked current competencies and standards with national EI-ECSE Standards and cross disciplinary competencies Drafted survey to collect data on how EI-ECSE standards are reflected in Hawaii Preservice programs and coursework. 	<ol style="list-style-type: none"> Distribute the Preservice survey in Q1 Analyze survey data Q2 2022 to identify: <ul style="list-style-type: none"> Preservice programs and coursework that align to the EIECSE standards Gaps in alignment
4. Ensure statewide systems for in-service PD and TA are aligned and coordinated across disciplines	<ul style="list-style-type: none"> Crosswalk of current training and TA initiatives that align across systems Develop rubrics to align PD content to the DEC Recommended Practices and six features of effective PD Develop family needs assessment Identify gaps in training Address training gaps 	1) Developed a survey to gather PD information about current trainings and TA initiatives provided across the EC system <ul style="list-style-type: none"> Drafted survey to collect data on PD information across the EC system. 	<ol style="list-style-type: none"> Distribute survey in Q1 2022 Analyze survey data in Q2 2022 to identify: <ul style="list-style-type: none"> PD opportunities that align to the EI-ECSE standards (3a,3b) across EC systems Gaps in training/PD opportunities (3d)
5. Recruit and retain staff across the EC system.	<ul style="list-style-type: none"> Develop comprehensive recruitment strategies using multiple data sources Identify current recruitment strategies 	<ul style="list-style-type: none"> Developed a recruitment and retention survey for direct service providers and administrators in EIS, HS/EHS, EOEL Pre-K and DOE Special Education. 	<ol style="list-style-type: none"> Distribute the R&R survey in Q1 2022 Analyze and report on survey responses in Q2 2022 Identify ways findings may be used to support cross sector groups with recruitment and retention of staff

	<ul style="list-style-type: none"> Assess the effectiveness of current recruitment strategies Conduct a systematic review of other recruitment strategies Develop a list of effective recruitment strategies 	<ul style="list-style-type: none"> Developed a summary report of staff vacancies in 2019–2020 across sectors to serve as baseline data 	
6. Develop sustainable mechanisms to collect and analyze data across all 6 subcomponents	<ul style="list-style-type: none"> Develop a CSPD logic model for team leads to follow Develop evaluation questions, identify data sources, methods, person responsible, timelines and milestones for the evaluation plan Develop a checklist for milestone indicators Ensure evaluation plan is monitored and revised as necessary Use evaluation findings to inform state stakeholders, workgroup, practice inputs Develop a dissemination plan for products and materials developed by the subcomponent workgroups 	<ol style="list-style-type: none"> Worked with teams to establish baselines and key metrics for each team <ul style="list-style-type: none"> Some workgroups established baselines and key metrics Worked with teams to refine logic models for tracking progress for teams and have a solid plan in place <ul style="list-style-type: none"> Logic models were refined 	<ol style="list-style-type: none"> Part C ARPA dollars are being used to contract with the Center on Disability Studies to collect and analyze the CSPD surveys. Q 2 2022

TEAM 6: STRONG EARLY CHILDHOOD TRANSITIONS

Team 6	Theory of Change	Conveners
Working with families and communities to strengthen transitions through early childhood and into school	Strong early childhood family language and literacy practices support optimal early childhood development and school readiness	<ul style="list-style-type: none"> Kara Kusunoki, Read to Me International Doug Imig, ECAS
GOALS	Key Measures of Success (and current status of each)	
<ul style="list-style-type: none"> Increase the number of families engaged in early childhood language & literacy interventions Target strong early language and literacy development efforts to communities of greatest need, leading to the development of a pipeline for early reading, kindergarten readiness and early academic achievement 	Team 6 is working to increase the number of: <ul style="list-style-type: none"> Children & parents enrolled in early literacy interventions. <ul style="list-style-type: none"> One key set of interventions that we have been tracking is the LENA (Language ENvironment Analysis) suite of programs. To date: <ul style="list-style-type: none"> 236 families in Hawai'i have participated in Words Matter / LENA programs (since September 2019), including: <ul style="list-style-type: none"> 149 in LENA START (76 in Maui Co; 68 in Honolulu Co) 32 in LENA Home (10 in Maui; 22 in Honolulu) 54 in LENA GROW (11 in Maui; 43 in Honolulu) 1 in LENA SP (Honolulu) 	

<ul style="list-style-type: none"> • Increase the number of communities across Hawai'i with an active early childhood team [On hold] 	<ul style="list-style-type: none"> • Reach traditionally underserved, at-risk families <ul style="list-style-type: none"> ○ On Maui, 44% of participating families have ≤ high school degree & 50% of families are Native Hawaiian or Pacific Islander ○ On Oahu, 62% of participating families have ≤ high school degree & 77% of families are Native Hawaiian or Pacific Islander • Gains associated with participation in LENA programs: <ul style="list-style-type: none"> ○ Families exit the LENA program with stronger early literacy practices, including: <ul style="list-style-type: none"> ○ # of adult words spoken to children <ul style="list-style-type: none"> ▪ 10% increase (Maui) ▪ 6% increase (Oahu) ○ Increases in childhood developmental (as assessed on child language development snapshots -- a parent questionnaire that measures a child's receptive and expressive language development. Evidence to date shows a: <ul style="list-style-type: none"> ▪ 33% gain on Maui ▪ 9% gain on Oahu ○ Improved parent perceptions of self-efficacy and positive interactive behaviors <ul style="list-style-type: none"> ▪ Across all settings, 75% of parents show gains in domains associated with knowledge, efficacy, and behavior ○ Early Childhood Education providers (in both center-based care and family home settings) enrolled in the LENA Grow intervention show substantive increases in their classroom language environments. To date: <ul style="list-style-type: none"> ▪ 82% of teachers on Maui achieved <u>Accomplished</u> status (15 or more conversational turns with all of their students) by the end of the intervention (a 28% gain) and 45% of teachers achieved <u>Advanced</u> status (25 or more conversational turns with each of their students) (a 67% gain) ▪ 47% of teachers on Oahu achieved <u>Accomplished</u> status (15 or more conversational turns with all of their students by the end of the intervention) (a 47% gain) • Increase population-level measures of strong early language and literacy practices: <ul style="list-style-type: none"> ○ Share of families with a young child that sing & tell stories together every day: <ul style="list-style-type: none"> ▪ 53.2% (NSCH Indicator 6.8 Hawai'i. 2019-2020) ▪ UP 2.7% from 2018-2019 ○ Share of families with a young child that read together every day: <ul style="list-style-type: none"> ▪ 39.3% (NSCH Indicator 6.7 Hawai'i. 2018-2019) ▪ UP 17% from 2018-2019 ○ # of communities across Hawai'i with an active early childhood team [on hold] 		
Strategies	Activities	Key Achievements Jan-Dec 2021	6-Month Targets

<p>Implement Words Matter / LENA in diverse settings</p>	<ul style="list-style-type: none"> Expand the # of implementing partners and sites on Oahu & Maui to serve more families 	<ul style="list-style-type: none"> Traditionally, the Words Matter / LENA program was delivered by trainers working with small groups of parents and young children. The pandemic lockdown effectively suspended this service delivery model. Program cohorts during the stay-at-home orders suspended their offerings and then pivoted in order to respond to the pandemic. Our implementing partners continued to meet weekly with LENA to develop virtual program delivery models and strategize around new cohorts to launch this fall. Family Hui Hawai'i was awarded a CLSD (\$1.4M) grant to strengthen early language and literacy development in the Wahiawa community. This includes implementation of LENA SP, Start & Grow. FHH is also implementing LENA Home with Family Hui groups. Maui County implements LENA programming in partnership with PATCH, Malama Family Services, IMUA Family Services, MEO Head Start and with FCC providers Read To Me International implemented LENA on O'ahu, and also offered literacy development support to three CLSD grant teams. First cohort received LENA programming as part of the CLSD Early Literacy Grant (offered by Family Hui Hawai'i as part of the Wahiawa collective). Offered LENA SP services to Early Intervention Services to support interventionists working with deaf and hard of hearing children (currently being tested with 1 family) Expanded coverage on Maui (currently including START, Home & Grow programs) 	<ul style="list-style-type: none"> Continue to implement LENA through the Wahiawa collaborative as part of the CLSD grant (offered by Family Hui Hawai'i) Expand LENA SP services to deaf and hard of hearing children Offer a 'double dose' of LENA to children and families in Family Child Care settings on Maui. (FCC providers receive LENA Grow coaching, leading to certification. Meanwhile, families of children in the program receive LENA Home support.) This is the first implementation of LENA programming that will reach children both at home and in their child care setting.
<ul style="list-style-type: none"> Target strong early language and literacy development efforts to communities of greatest need, leading to the development of a pipeline for early reading, kindergarten readiness and early academic achievement 	<ul style="list-style-type: none"> Convene an Early Literacy Collaborative to develop a community of practice Define & identify effective early language & literacy development practices Strengthen links between family engagement & language / literacy development efforts Map the landscape of current early language & 	<ul style="list-style-type: none"> Convened the collaborative, meeting monthly Developed a shared focus & logic model and modified model based on feedback from collaborative attendees Established several first steps to undertake, including addressing the interest in further developing a community of practice within the collaborative Kara Kusunoki (Read To Me International) agreed to co-convene the group With Marlene Zeug, met with Department of Education representatives to identify a school complex area and school that would be interested in working with the collaborative to establish and evaluate the efficacy of a birth to school entry continuum of early childhood 	<ul style="list-style-type: none"> Continue to sharpen focus and agenda of collaborative, Q1 With DOE, identify a community and school to host a 'pathway to success' continuum, Q1 Initiate regular meetings with the CAS and school Principal to build a shared understanding of the needs of the community, existing preferred providers, and to identify gaps in the system of support that might be

	<p>pre-literacy development efforts</p> <ul style="list-style-type: none">• Develop a prototype continuum in one community spanning the years from birth through early elementary school	<p>language / literacy & engagement effort efforts in supporting school readiness</p>	<p>addressed by continuum partners, Q 1-4</p> <ul style="list-style-type: none">• Establish a master agreement between ECAS (as lead intermediary association) and DOE to begin to implement the continuum, Q4
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