# Data Carousel Notes – Directors Retreat, 7/12/17

## Kindergarten Readiness

Data sets: ECEAP fall/spring Physical, Literacy, Math, Cognitive (ECEAP Outcomes Report); WaKIDS % K-ready by race/ethnicity in each domain (OSPI); % ready for Kindergarten Entry (ECEAP Outcomes report); Drop off Spring ECEAP to Fall WaKIDS by various factors (Vickie Ibarra DEL)

**Summary Team Report-Out:**

* Strengths – kids make gains fall to spring. 2 years make higher gains
* Concerns – have to be very careful about ‘drop off’ info. We’re not comparing apples to apples – different data collected in spring eceap and fall wakids. We need to make sure the data we’re using is comparative.
* Notable – big gains, even in math, but they arrive so far behind.

**Collective notes:**

***Strengths:***

Gains for ECEAP fall to spring (3)

Stable benchmarks over time

% rate of growth in math is higher

Two years of eceap equates to greater gains (2)

***Concerns:***

Why difference between end of ECEAP ‘readiness’ and WAKids scores? Is it drop off or is it an assessor issue in K? (2)

Disparity between WaKIDS and TSG (2)

Math continues to be low, even lower for ethnicity disparity (2)

Dropoff exists

HS doesn’t have rolled up data by state

Can we use a different term than ‘drop-off’? Multiple factors, not necessarily slide or drop off.

***Other:***

More data needed for full year

What is the impact of duration? (2)

HS use same assessment/curriculum?

Accurate data to inform policy

## Family Support

Data Sets: % of Families who received each HS FS service (PIR); % of Families experiencing homelessness 2011-2015 (PIR, ECEAP Demographics), ECEAP Families under stress (ECEAP demographics)

**Summary Team Report-Out:**

* Concern – consistency in head start and eceap data collection. Families don’t always disclose, etc.
* It’s a difficult area to collect data – different assessments, complex and changing, .
* In the future how do we better align data? Better outcomes reporting?
* Need more training for family support specialists in financial literacy.
* How do we market our programs? If we said in our marketing that this is a family growth program, not just pre-k, they might be willing to give info sooner.

**Collective notes:**

***Strengths:***

We have this data!

***Concerns:***

Only 75% of families need support services (2)

DV and substance abuse prevalence does not equal intervention pace

Not doing enough on job training and parent education

Homelessness up for ECEAP

Not enough access to mental health services

***Other***

Why doesn’t HS/EHS report data

How can we capture family progress and successes?

HS/ECEAP homeless trends diverging – why?

Access need for substance abuse resources

No data on employment

When is homelessness captured?

## Health and Disabilities

Data Sets: Types of Disabilities in HS 2014-15 (PIR); # OF HS Children treated for Chronic Conditions 2009-2015 (PIR); HS/EHS Children with Disabilities (PIR); Table of Health Indicators HS/ECEAP at enrollment and end of year (PIR, ECEAP outcomes report)

**Summary Team Report-Out:**

* Strength - # of kids with insurance
* Concerns – ongoing preventative health. Lots not up to date on immunizations. Increase in diabetes.
* Looking at that data, there’s access to Health Insurance, but do parents have the supports needed to know how to access and follow through on ongoing medical/dental treatment and prevention.
* Wondered about (related to chronic health) why we’re seeing increases, then cliffs. What causes that? Correlation with affordable health care? Need more data.
* To what extent do we ‘enable’ parents? To what extent do we provide so much onsite that they don’t develop the relationship with the medical/dental home?
* Lack of accessibility to mental health a major concern.
* EHS has medical all the time – approach it ask skill-adoption that they help parents to develop. They do ‘coupons’ that describe what kids get at their 1 year exam and what they’re eligible for

**Collective notes:**

***Strengths:***

% of kids with health insurance (2)

Progress on access to health – med/dental homes, immunizations

***Concerns:***

Why the dropoff in # of children treated for chronic conditions 2012-2014?

Increased # of kids with diabetes

So few kids up to date with immunizations

How to capture kids with disabilities who are getting services through Medicaid and not on IFSPs through school district

Why the difference in doctor visit completion rates between HS and ECEAP?

Vision and hearing spike

***Other:***

Connecting weight to diabetes

How do we compare to other states?

Decline in other health concerns but increase in diabetes

How much $$ is spent on health services?

Where are they getting insurance?

How much does it cost us? “Payer of last resort”

It would be helpful to look at # of concerns vs. # of diagnoses

## ECEAP Expansion

Data Sets: Estimated # of classrooms needed by county, 2020 (DEL 2016 Facility Needs Assessment); ECEAP Locations (ECEAP Outcomes Report); Gap between Demand and Supply (Thrive WA Statewide Quality Pre-K and Classrooms Expansion Data Report); Priority Points Analysis (DEL Research division); Relationships between Poverty & WaKIDS by School District (DEL Research division); 90% Box (DEL)

**Summary Team Report-Out:**

* Strength – we can add
* Concern – doesn’t adequate portray the # of facilities needed.
* Need data on aging facilities, repair/replacement needed
* Focus on public schools – licensing in public schools would be a nightmare.

**Collective notes:**

***Strengths***:

If we can add more facilities we won’t have to reduce children

***Concerns***:

Need better data for actual need of classrooms (2)

Estimated # of classrooms needed seems low (2)

# of ECEAP in public schools related to # needed – how does K-3 class size reduction play?

How are we meeting parent need?

To many underserved areas

Licensing classrooms in school buildnigs will be a huge challenge or can’t do (3)

Fire marshal code (2)

Need better/different statewide data

***Other***

Need data on aging facilities – many kids being served in low quality facilities in need of repair or replacement

## Demographics

Data sets: ECEAP Race & Ethnicity; ECEAP Family Income Levels (ECEAP demographics report); HS/EHS/MS/AIAN Race & Ethnicity (PIR); Parent Work/School status (PIR, ECEAP Demo); HS/EHS/Tribal Parent Education Level (PIR)

**Summary Team Report-Out:**

* Data validates that we’re serving target population – most at 110% and below.
* Concern – very low parent education levels.
* Would be great to look at it by region.
* Takeaway – have responsive programming around Parent Ed levels because it is tied to child outcomes.

**Collective notes:**

***Strengths***:

That we have the data (2)

Data validates that we are serving the target population (3)

70% of our families are working

***Concerns***:

Parent education level (3)

Large number of 1 working parent and large # of children in poverty (3)

Big difference between HS & ECEAP job training – how do we track it?

Very poor high school graduate rates

***Other***

Track income level for entered and waitlisted families – 5 year period

Is demographics indicative of state as whole – regional breakdown more informative (3)

Knowing parent/student debt loans

Break down race/ethnicity data by region

How do we move WORKING

parents out of low poverty?

## Program Information

Data Sets: Program models – number of kids served in WA by program model (PIR, ECEAP outcomes); Classroom Pre-school lead teachers qualifications (PIR, ECEAP outcomes); % of staff who are current or former HS/EHS parents (PIR); Avg amount per child per year received by program (DEL, Region X)

**Summary Team Report-Out:**

* Concern – low degreed staff in migrant/seasonal.
* Higher degreed staff than expected.
* Curious about what trend data looks like – how have we gained? What do we look like compared to other states?
* Strength – lots of former head start parents.

**Collective notes:**

***Strengths***:

Pre-k staff quals looks better on graph than expected (2)

# of staff who were head start parents

***Concerns***:

Not serving enough babies (reasons – cost, cultural, conservative policymakers) (3)

Degreed staff, esp. migrant 93)

Funding per child differences

Need more extended day (2)

Lack of childcare and employment, education supports, flexibility for parents

***Other***:

Wondering what breakdown is re: degree vs quality/outcomes (2)

Like to see more staff who were HS parents

Tribal HS has higher # of degrees than MSHS