



NC DEPARTMENT OF  
HEALTH AND  
HUMAN SERVICES



PUBLIC SCHOOLS OF NORTH CAROLINA  
State Board of Education | Department of Public Instruction

**B-3 Interagency Council Meeting**  
**NC Department of Health and Human Services**  
**Dix Campus**  
**Adams Building**  
**Room 264**  
**101 Blair Drive**  
**Raleigh, NC 27603**  
**January 31, 2018**  
**1:00pm-4:00pm**

**Council Members:** Senator Chad Barefoot, Dr. Nancy Brown, Kevin Campbell, Representative Josh Dobson, Elisha W. Freeman, Susan L. Gates, Representative Craig Horn, Senator Michael Lee, Susan Perry-Manning, Dr. Sharon Ritchie, Dr. Pamela Shue, Cindy Watkins, Dr. Linda White, Tracy Zimmerman

**Welcome and Council Charge**

- Susan Perry-Manning, Deputy Secretary for Human Services, NC Department of Health and Human Services
- Dr. Pamela Shue, Associate Superintendent of Early Education, NC Department of Public Instruction

**Introductions and Connecting to the Work**

Dr. Shue asked the members of the Council to introduce themselves and state one goal they have for the Council moving forward.

- Dr. Sharon Ritchie—Frank Porter Graham Institute for Child Development—First School—Goal: improving school experiences of minority children
- Ms. Cindy Watkins—North Carolina Partnership for Children—Goal: linkage between EC and K-3
- Ms. Elisha Freeman—Family Resource Center—Goal: linkage between homes and child care and a transition plan from pre-k to K-12.
- Dr. Linda White—Edenton-Chowan Schools—Goal: to contribute the school perspective and to gain information on ways to involve all agencies
- Dr. Nancy Brown—North Carolina Partnership for Children Board Member—Goal: that the 0-8 population is adequately served; smooth transitions; and that early childhood professionals are recognized for the professionals that they are.
- Mr. Kevin Campbell—Child Care Provider—Goal: to bring the provider perspective to the council
- Ms. Tracey Zimmerman—North Carolina Early Childhood Foundation—Goal: to create an environment that allows different systems, sectors to do best for young children ages 0-8 with alignment
- Ms. Susan Gates—SAS Institute—Goal: a comprehensive, aligned system for children
- Senator Chad Barefoot—Goal: a smooth transition between pre-k and kindergarten
- Representative Craig Horn—Goal: all children at age of 8 has achieved physical health (healthy), mental health (good attitude) and academic health (reading)
- Senator Michael Lee—Goal: every child should be allowed to reach his/her potential
- Representative Josh Dobson—Goal: to learn from the Council and represent the General Assembly

Dr. Shue asked the audience to introduce themselves. Some of those in the audience included: Debora Nelson, Michele Rivest, John Pruette, Sherry Williams, Anna Carter, Kristi Snuggs, Cindy Osbourne, Mary Davis, Jill Singer, Karen McKnight, Kristen Guillory, Vivian James, Whitney Zucker, Kristy Jones, Libby Richards, Lorie Barnes, Beth Moore, Anna Burrell, Christina Peterson, Andrea, Michael, Denise Bennett, Mary Hutchings

**Presenters:** Dr. Kelly Sullivan, Dr. Kelly Maxwell

### **Early Brain Development Presentation:**

• Dr. Kelly Sullivan, Director of Mental Health Services, Duke Center for Child and Family Health  
She provided the metaphor of brain compared to a computer; both need to be built well from the beginning.

Deputy Secretary Perry-Manning introduced Dr. Sullivan and commented on the importance of the work of the Council being grounded in this research; she reminded the Council members to keep in mind the 7 focus areas in the legislation during the presentations.

- Standards and Assessments
- Data-driven improvements and outcomes
- Teacher and administrator preparation and effectiveness
- Instruction and Environment
- Transitions and continuity
- Family Engagement
- Governance and funding

### **The Science of Young Childhood**

Brains are built in first 8 years of life

- Functional
- Educational
- Social
- Mental health
- Occupational

### **Birth-8 critical for brain development:**

- *Synapses* are the connections between neurons make the brain what it is; synapses are developed from interactions with environment; and after the synapses are formed, synapse pruning occurs to make synapses more efficient.
- Young childhood is the sensitive period of brain development; if deprived, it will substantially impact later development.

### **Trauma and the Brain**

The brain is exquisitely sensitive to environment (synapse formation).

If traumatic events occur in childhood (e.g., lack of physical safety, food security), the influence on the brain is profound.

- Between 20%-50% of American children are victims of violence within their families, at school, and in their communities.
- An even greater number are witnessing violence from which they may be traumatized.

### **Potential Negative Effects of traumatic events:**

- Decrease intellectual functioning
- Decreased Reading ability

- Lower grade point average (GPA)
- More days of school absence
- Decreased rates of graduation

### **We are Social Creatures:**

- Brain needs years and years of support to develop brains
- Social interaction is critical—caregivers, teachers
- Learning occurs in a social context because we are human beings—research supports that human interaction is necessary for learning

### **Questions:**

- Representative Horn asked for a definition of Trauma. Dr. Sullivan stated that trauma is a threat to life or body in which a person’s life or the life of someone they care about is threatened.
- Representative Horn asked whether trauma is just physical or also psychological. Dr. Sullivan stated that most the examples she referenced in her presentation involve psychological trauma.

### **Dr. Shue introduced Superintendent Johnson**

Superintendent Johnson thanked the Council for their service; he stated that this conversation about education has been occurring for decades, and he is calling the Council to action to be innovative and end their work with an implementable action plan. He stated that there has been so much research about the importance of what occurs in early childhood that needs to be conveyed to the public. He stated that the action plan submitted by the Council *will* result in action at DPI.

### **Why Birth Through Age 8?**

#### **What Research Tells Us About What Improves Young Children’s Educational Success?**

- Dr. Kelly Maxwell, Co-Director of Early Childhood Research, Child Trends

#### **Why is birth-3<sup>rd</sup> grade important**

- Shift from “learning to read” to “reading to learn”
- Period of concrete thinking
- Reading is a major milestone
- Age span defined as young children by national professional organization

#### **A B-3 Framework helps:**

- Developing continuum of services and support for children along the age span from birth-8
- Recognize importance of health and family support and early education
- Focus more on children, rather than the system
- Bring the best of the B-5 and K-3 systems together
- What supports children’s success

#### **Research Base for birth-8 framework:**

- Developmental perspective—created over time through transactions with the world
- Policy areas-health, family support, & learning
- NC Pathways to Third Grade Reading—all NC children will read on grade level by the end of third grade; shared method; focus on strategies
- Health—young children in poor health higher risk for chronic health conditions and risk for obesity and cardiovascular disease
- Health policy choices
- Family Support—adequate prenatal care, food, shelter and medical, living in stimulating environments.

- Learning—birth-8 critical span for physical, cognitive, language, social emotional and motivations and regulatory skills

**Question:**

- Representative Horn asked whether any research has examined the differences in experience for children raised by grandparents instead of parents.
- Dr. Maxwell stated that she will explore the research and report back, but her understanding is that the fundamental components of care would be the same no matter who was the caregiver.

Dr. Maxwell continued to present on the standards of quality programs.

10 Standards of high quality programs

- Relationships
- Curriculum
- Teaching
- Assessment
- Health
- Staff competencies
- Families
- Community
- Physical environment
- Leadership & Management

Quality Early Care and Education at the Classroom level includes sensitive and responsive care and education, intentional teaching, use of curriculum, monitoring progress and individualizing instruction, and engaging families.

Quality Early Care and Education also includes a knowledgeable teacher, teacher support, rich environment, smaller group size, small teacher-child ratios, and community connections.

Dr. Maxwell then discussed the 7 early education components in the B-3 Council Legislation. She highlighted some key points in her powerpoint presentations; the presentation will be emailed to all members of the Council for their reference.

- 1) Standards and Assessments—define expectations for children:
  - *NC Foundations for Early Learning and Development* dimensions—Five domains of learning-- Approaches to Play & Learning; Emotional a& Social Development; Health & Physical Development; Language Development & Communication; Cognitive Development;
  - NC Standard Course of Study in public schools;
  - Purpose of assessing children—support learning and inform instruction; screen and identify potential disability; program evaluation; accountability system, inform state policy
- 2) Data-driven improvements and outcomes—develop goals or desired outcomes for individual programs and B-3 continuum of services (“shared accountability”);
  - Research-based programs
  - Data to demonstrate implementation
  - Ongoing data about outputs and outcomes
  - Independent evaluation of individual program effectiveness
  - Evaluation to examine effectiveness of system
  - Structures in place to review data provide feedback and support change
- 3) Teacher and administrator preparation and effectiveness

- K-3 teachers and administrators required to have at least a BA degree
  - 2017 NC Workforce study of B-5 early care and education teachers—37% of teachers in centers had BA degree; 60% of center directors had BA degree
  - B-5 ECE programs not always in schools of education
  - Content different—B-5— more child development focus; K-3 more instructional methods focused
  - Transforming the B-8 Workforce Report—Transforming the Early Education Workforce a multimedia guidebook
  - Administrator preparation—few programs for b-5 ECE administrators; leadership programs in schools of Education tend to focus on k-12 administrators; little early childhood content
- 4) Instruction and Environment
- Differences between B-5 and K-3<sup>rd</sup> grade—B-5 focused on play and exploration; more emphasis on relationships; multiple settings; k-3 focused on explicit instruction; emphasis on literacy; primarily in public school settings
- 5) Transitions and continuity
- Associated with less stress, more social competence and greater academic growth
  - Transition easier if standards, assessments and curricula align
- 6) Family Engagement
- Systematic inclusion of families in activities and programs that promote children’s development, learning and wellness, including in the planning, development and evaluation of activities programs and systems
  - Better language/literacy schools and school success
- 7) Governance and funding
- Three general models—1) coordinated,2) consolidated, 3) new agency—regardless of model, governance addresses coordination, alignment, sustainability, efficiency and accountability
  - Funding—federal state and local funds support B-5 ECE; federal government funds most (CCDF); state funds required match for federal funds, NC Pre-K Program; local funds—some county governments invest; parents; Funding for K-3 ECE—federal state and local support

**Question:**

- Mr. Campbell asked what the difference is between *Foundations for Early Learning* and curricula.
- Dr. Maxwell stated that the focus of *Foundations* is an outline of the expectations of children’s development and curriculum are tools used to support the learning and achievement of those expectations.
- Dr. Ritchie added that brain research is incorporated into the design of curricula.

**Break: 2:30pm-2:45pm**

**How Should What We’ve Learned So Far Influence Our Work?**

- Pam Shue and Susan Perry-Manning; Group Discussion

Dr. Shue initiated the discussion with the Council asking them what issues from the presentations stood out as areas upon which the Council needs to concentrate.

- Representative Horn raised the issue of the difficulty of defining the role of government in a system of early childhood education, in which government must coordinate with private (often for-profit) industry.
- Ms. Gate stated that the presentations confirmed that the system is siloed. She also noted that everything is dependent on funding.
- Senator Barefoot stated that the Council’s work should begin with the question of what is the ideal situation for a child birth through 5. There should be no assumption that the current system is the ideal situation. Dr. Shue stated that the Council’s role is directing the development of the system.

- Ms. Zimmerman highlighted the importance of ensuring that all the players interacting with children are prepared and aligned to support children’s development. Professional development is currently distinctly different depending on the age group and the setting of the child. There is a false divide as to how the current system prepares those in the home setting versus a school setting. She also highlighted the interconnectedness of all 7 focus areas.
- Senator Lee asked the members of Council to raise their hands if they have had personal experience negotiating the system with an at-risk child. He stated that his personal experience proved to be horrible. His perspective is that family advocates are needed to help families navigate the system; they need to know the families and the children. This goes well beyond pre-k education, and, until we find a connection point for families to connect to the system, not a lot will be accomplished.
- Dr. Ritchie highlighted the importance of smooth transitions. There is a large component of parent choice before entering the education system resulting in kindergarten teachers having the broadest range of children’s experiences than any other teachers. She stated that it is essential to provide support to kindergarten teachers to be able to handle this broad range of experiences.
- Ms. Watkins stated that the presentations highlighted the strong connection to the science of brain development and the importance of the first three years of development. Therefore, a priority needs to be determining how to fund programs addressing these early developing years.
- Dr. Brown discussed the critical problem of balancing the roles of government, professionals and parents when focusing on what a child needs to progress from birth-8. When examining the system, it is obvious that the resources of the private sector are necessary; however, the structure and resources of the private and public settings are completely different. She stated that they cannot start from scratch, but work is needed to determine the needs of the child and how the existing resources can best meet those needs. She also observed that there are vastly different resources and experience across the state and a goal needs to be consistency in experience for children across the state.
- Dr. White thanked Senator Lee for sharing his personal experience. Coming from the school perspective, she asked the question of what can be done to help teachers. She also reiterated that the focus needs to extend beyond the measurement of children’s achievement at the end of third grade. Administrators need to be educated on the importance of focusing on the whole child.
- Representative Horn discussed the importance of recognizing the varying experiences of child caregivers with vastly different capabilities. He also stated the importance of looking at who the players are in shaping a child’s experience beyond educators, such as Public Health, pediatricians, social workers, etc. and how they fit into a larger strategy. He reiterated the question of what is the role of government should be. Should they intervene during the early years or pay the repercussions later?
- Senator Barefoot relayed a success story of the state providing early intervention strategies directly to parents. Dr. Brown reiterated that not all parents know what services are available equally across the state.
- Senator Barefoot discussed that it is a full-time job to understand the developmental literature and negotiating the system.
- Representative Horn referenced Dr. Sullivan’s presentation slide of the comparison of the brain that experienced trauma to the normal brain and inquired about whether a child’s brain can recover if removed from the source of the trauma. Dr. Shue stated that it is her understanding that the child’s brain can heal if child is removed from toxic situations, especially if removed by 8 years of age. Dr. Maxwell stated that most trauma is not a single incident and cumulative trauma is the most harmful and the most difficult from which to recover. Ms. Susan Perry-Manning mentioned the concept of resiliency.

### **Discussion Wrap-up**

- Ms. Perry-Manning summarized the comments of the Council.
- She stated that the discussion revealed the difficult task of focusing the work of the Council, while recognizing the importance of all aspects of a child’s environment.

- It will be the work of the Council to decide whether they are going to focus on children in the context of formal education settings or venture out more broadly to other settings and services outside of the school.
- Examples of issues raised in the discussion include the importance of transitions and addressing the difficulty for parents negotiating a siloed system.

### **Defining Our Work Part I: Work Cluster Areas and Strengths and Weaknesses of Current System**

- Susan Perry-Manning and Pam Shue

Ms. Perry-Manning initiated the presentation of the strengths and challenges of the 7 focus areas in the legislation within the education system. Ms. Perry-Manning spoke about the K-5 system and Dr. Shue spoke about the B-5 systems separately because, as discussed previously, they are vastly different systems that have different strengths and challenges.

Again, the 7 areas of focus were listed.

- Standards and Assessments
- Data-driven improvements and outcomes
- Teacher and administrator preparation and effectiveness
- Instruction and Environment
- Transitions and continuity
- Family Engagement
- Governance and funding

Ms. Perry-Manning and Dr. Shue each presented a powerpoint presentation with slides highlighting the strengths and challenges of each focus area. The powerpoint was provided to the Council as part of their packets for reference.

### **Defining Our Work Part II – Priorities, Measures of Success and Next Steps**

- Pam Shue and Susan Perry-Manning; Group Discussion

- Ms. Perry-Manning mentioned that a large part of the work of the Council will be organized into work groups; however, before this can occur, the group must identify the priorities of the council.
- Ms. Perry-Manning discussed the difference between horizontal alignment and vertical alignment and asked the Council to consider which model they envision for the Council. This will be discussed at the next meeting. Horizontal alignment would involve focusing across systems and agencies outside of the education system when addressing an educational issue. Vertical alignment would involve focusing on connecting the K-12 and Birth-5 education systems when addressing an educational issue.
- Dr. Gates asked what other councils are doing. Ms. Perry-Manning stated that the social services and child welfare council, Child Well-being Transformation Council, has a cross-sector representation and adheres to more of a horizontal alignment focus. The Early Childhood Advisory Council (ECAC) also adheres to more of a horizontally aligned model.
- Ms. Zimmerman stated that it is important to learn from the other Councils.
- Ms. Perry-Manning reiterated the importance of the Council prioritizing their goals.
- Mr. Campbell mentioned that the earlier discussion of the desire to work across silos to address issues seemed to indicate a more horizontally aligned model.
- Senator Barefoot also cautioned against limiting the focus to the classroom.
- Dr. Gates stated that the focus may vary depending on which of the 7 focus areas is being addressed.
- Ms. Perry-Manning stated that *Pathways* indicators will be discussed in detail at the next meeting.

**Meeting schedule proposed:**

- Dr. Shue proposed that initially the Council would schedule to meet in March, May and August
- Ms. Watkins stated that the Council should be mindful that a report is due in April, 2018, which might influence the frequency with which the Council needs to meet.
- Ms. Perry Manning stated that the Council might have a more aggressive meeting schedule at the beginning and then more work will be done in workgroups that would report back to the larger group that would meet less frequently.

**Dr. Shue stated that the Council members will be polled about the future meeting dates very soon.**

**Meeting Adjourned: 4:00pm**