

SIGN-UP SHEET

I am interested in working on this area:

Coordinated Referral Pathway System

Pat Crozier

Signe Miller

Terry Persson

Nina Roll

Lauren Sigman

Renee Smith

Cyrel Gable

Shelley Paeth

Stephany Koehne

Developmental Screenings

Debbie McPheeters

Stephany Koehne

Karen Stevens

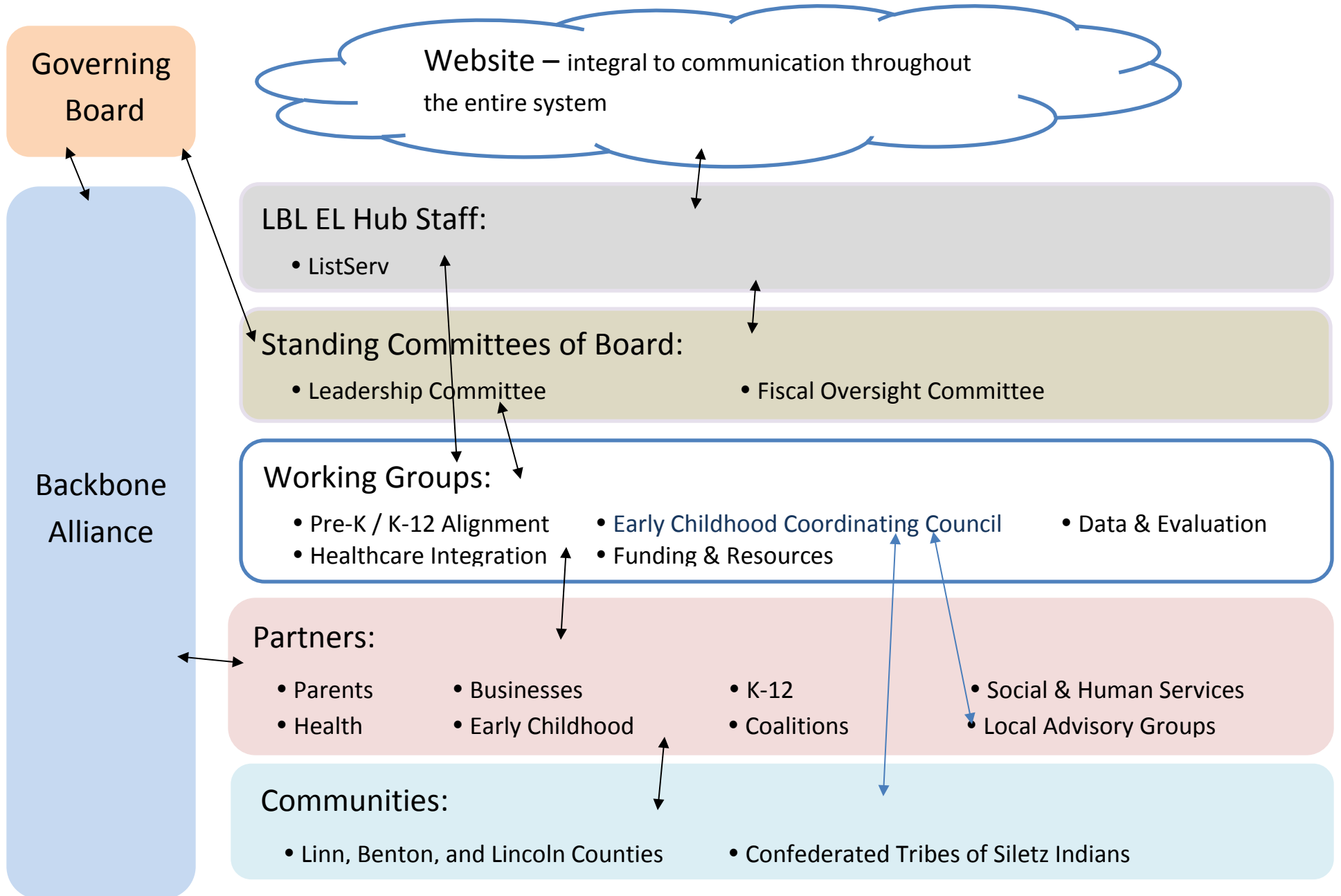
Rebecca Austen

Cindy Bond

Renee Smith

MaiKia Moua

Linn Benton Lincoln Early Learning Hub Communication Model



CHARTER OF LINN BENTON LINCOLN EARLY LEARNING HUB
10/24/2014

ARTICLE I – NAME and LEAD AGENCY

Section 1: The name of this organization shall be Linn Benton Lincoln Early Learning Hub, which will serve as the Regional Early Learning Hub, hereafter referred to as Hub or EL Hub, for Linn, Benton and Lincoln Counties as awarded under the Oregon Department of Education’s Early Learning Division and as mandated in HB2013.

Section 2: Linn Benton Community College, “LBCC,” a community college serving Linn and Benton Counties, shall be the Lead Agency for the Hub.

ARTICLE II – COMMON AGENDA, PURPOSE AND GUIDING PRINCIPLES

Section 1: Common Agenda. The Hub is a cross-sector of community partners in the region with the common agenda of working collectively to ensure that young children, regardless of family situation, receive opportunities and supports to prepare them to enter school healthy and ready for success. The Hub is charged with guiding the region toward achieving the following three overarching outcomes:

- Children enter kindergarten ready for school.
- Children are raised in safe, stable and supportive families.
- Early childhood services are coordinated, efficient and effective.

Section 2: Statement of Purpose (Legislative Intent). Pursuant to Early Learning Legislation, the Hub shall have as its purpose the development and support of a coordinated system of early learning services designed to maximize resources and to ensure that children in the service area birth through six years of age receive the support they need to enter kindergarten safe, healthy and ready to be successful in school. The Hub will perform its work in compliance with state statute and federal rules and regulations pertaining to Early Learning Hubs [including Senate Bill 909 (2011); House Bill 4165 (2012); House Bill 2013 (2013); Oregon Revised Statute, Chapter 329; Oregon Administrative Rules 414-002-0995 through 414-002-0010; and 414-900-0005 through 414-900-0020.]

Section 3: Guiding Principles. The Hub and its governance Councils shall operate under the following guiding principles in fulfilling the vision, mission and outcome goals of an Early Learning Hub:

- There are several places where families and organizations cross the three counties, providing opportunities for systems alignment and coordination.
- We will strive to create community-specific strategies, since needs and programs differ across counties and communities.

- We respect and value our existing relationships and will seek to expand our partnerships and build new relationships.
- The Collective Impact Model will guide our actions including the five core components; common agenda, shared measurement, mutually reinforcing activities, continuous communication and backbone support.
- We seek to create a Hub that is inclusive and transparent with processes and procedures that are as stream-lined as much as possible.
- Our governance model will evolve over time, and will be evaluated and adjusted to strategically meet outcomes.

ARTICLE III – SERVICE AREA, TARGET POPULATION AND APPROACH

Section 1: Service Area. The Hub will serve Linn, Benton and Lincoln Counties and the Confederated Tribes of Siletz Indians.

Section 2: Target Population. The Hub’s primary focus is on children six years of age and younger and their families who are defined by Oregon Revised Statutes as at-risk for arriving at kindergarten unprepared if they have one or more of the following risk factors:

- Living in a household that is at or near poverty, as determined under federal poverty guidelines;
- Living in inadequate or unsafe housing; having inadequate nutrition;
- Living in a household where there is significant or documented domestic conflict, disruption or violence;
- Having a parent who suffers from mental illness, who engages in substance abuse or who experiences a developmental disability or an intellectual disability;
- Living in a circumstance under which there is neglectful or abusive care-giving; or
- Having unmet health care and medical treatment needs; or
- Having a racial or ethnic minority status that is historically consistent with disproportionate overrepresentation in academic achievement gaps or in the systems of child welfare, foster care or juvenile or adult corrections.

Section 3: Approach. The Hub is committed to improving the three overarching outcomes by using the Collective Impact approach.

1. **Common Agenda** – Establishing and guiding the shared vision and strategies for change and building the public will for change;
2. **Shared Measurement** – Establishing shared measurement practices, collecting data and measuring results consistently;
3. **Mutually Reinforcing Activities** – Supporting differentiated yet coordinated and aligned activities toward achieving the common agenda;
4. **Continuous Communication** – Consistent and open communication which includes building public will; and
5. **Backbone Support** – Staff that coordinates and facilitates the initiative and coordinates cross sector partner efforts.

ARTICLE IV - GOVERNANCE STRUCTURE

The governance structure of the Hub will include the following four components:

- 1) Lead Agency
- 2) Backbone Alliance
- 3) Governing Board and its Standing Committees
- 4) Advisory/Working Groups

ARTICLE V – LEAD AGENCY

Linn-Benton Community College (LBCC) as the Lead Agency and fiscal agent will sign the contracts and accept responsibility for advancing the Hub outcomes. LBCC will enter into contracts on behalf of the LBL Early Learning Hub, and a staff Coordinator will provide program coordination and reporting. Project oversight will be delegated to the Governing Board. LBCC will review all recommendations to ensure they are in line with the obligations of the College and the EL Hub to the contract with the State Early Learning Division.

ARTICLE VI - BACKBONE ALLIANCE

LBCC, IHN-CCO, LBL-ESD and the three county health departments will work together to provide backbone support to the EL Hub. The role of the Back Bone Alliance is to provide coordination and facilitation support to the EL Hub. An MOU has been created to document the agreement and commitment of the backbone organizations.

Roles and Responsibilities of Backbone Alliance

- Work group facilitation
- Development of an ongoing communication plan.
- Insuring all three counties and associated sectors are equally represented in working groups.
- Advocacy at the local and state level
- Connecting with business and other potential partners, who have not been previously engaged
- Facilitating alignment of evaluation and tracking of common outcomes

ARTICLE VII - GOVERNING BOARD

Section 1: Membership. The Governing Board will be made up of twenty-three members: eighteen sector members, consisting of six individuals from each county representing each of the six sectors (K-12, Health, Human and Social Services, Parents, Business, and Early Childhood), plus five members from organizations with standing positions, one from each of the following five organizations: LBCC, IHN-CCO, DHS, LBL-ESD and the Confederated Tribes of Siletz Indians.

Section 2: Nominations and Appointments. The initial board was selected through a nomination process and selected by a committee representing all three counties and multiple sectors. Subsequent board members for the sector positions (other than the K-12 sector) will be recruited by EL Hub partners based on identified sector and county. Selection will be made by the Governing Board with consideration for needs (i.e. expertise, equity lens) of the Board. The K-12 sector, upon their request, will appoint its own members for the three counties, since this is the only sector having a leadership body that includes all three counties. The five organizations with standing positions will appoint their own representatives to the Board; those appointed should have key decision-making responsibilities within their organizations.

Section 3: Alternates

As continuity is important, the use of alternates is discouraged, however, when necessary, any organizations with standing positions may use alternates. These alternates should ideally be identified in advance, should be fully briefed and able to represent the organization during decision making.

Section 4: Length of Service. Initial members who represent the six sectors will serve for staggered terms as follows: 1/3 will rotate off in two years, 1/3 in three years and 1/3 in four years. All future members who represent the six sectors will serve for a term of three (3) years. The terms of the organizational standing position members will be determined by each organization.

Section 5: Roles and Responsibilities of the Governing Board

- Ensure the vision and mission of the Hub
- Provide fiscal oversight
- Provide work groups oversight
- Foster cross sector alignment and integration
- Oversee the implementation of the strategic plan and monitor and ensuring outcomes
- Manage resource allocations

Section 6: Meetings, Quorum

On an annual basis the Board will establish a schedule of regular meetings. Special meetings will be called as needed. Attendance at meetings may be in person, by call-in or by virtual measures. When members participate remotely, their presence will count toward a quorum. The quorum necessary to make final decisions will be 51% of the Governing Board Members (n=12).

Section 7: Notice

All members shall be given written(including e-mail) notice of time, date, location and purpose of the meeting at least 3 days before a regular Governing Board Meeting and a written (including e-mail) or verbal notice one day before a special meeting. Public notice shall also be given of regular Governing Board Meetings.

Section 8: Stipends

Parent representatives will be provided a stipend to reduce the costs of attendance.

Section 9: Officers

The Governing Board will have two co-chairs, who will facilitate the Board meetings and serve on the Leadership Committee.

Section 10: Removal of Board Members

A Member may be recommended for removal by the Leadership Committee and removed from the Board by a super-majority vote (75%) of the membership then in office. A member may be removed for the following reasons: being convicted of a felony; for conduct detrimental to the ability of the Board to effectively conduct business; or for missing three (3) consecutive meetings or for three (3) unexcused absences during one fiscal year (July 1 to June 30). Such

instances of absenteeism shall be reported by the chair to the Member by written notification. The Leadership Committee shall make its recommendation for removal to the Board only after notifying the Member and after making informal attempts to remedy any situation involving detrimental conduct.

Section 11: Standing Committees of the Governing Board

Leadership Committee

The Leadership Committee will be made up of: 3-5 Board Members, including the co-chairs; the Hub Coordinator; and a representative of each active advisory/working groups. They will meet in between the general board meetings. Their duties include: debriefing the past board meeting and planning the agenda for the upcoming meeting; making recommendations to the full Board as needed; and other duties that may arise. The co-chairs of the Governing Board will function as facilitators of the Leadership Committee.

Fiscal Oversight Committee

The Fiscal Oversight Committee will be made up of 2-4 Board Members. Their duties include: coordinating with the EL Hub Coordinator and the LBCC Program Accounting Specialist; ensuring that accurate financial information is available to the Governing Board; tracking funding streams and reviewing the financial situation of the Hub; and supporting the Hub budgeting and financial management. One of the committee members will be chosen as facilitator. The Fiscal Oversight Committee makes recommendations to the full Board, it has no decision-making authority.

ARTICLE VIII - ADVISORY/WORKING GROUPS

Working groups identified as fundamental to implementing the concepts and processes in the EL Hub include Funding and Resources, Data and Evaluation, Health Care Integration, Pre-K/K12 Alignment and Early Childhood Coordination. Additional groups may be established by the Governing Board as needed to accomplish the EL Hubs strategic goals and outcomes. Working groups will be open to interested participants. The Backbone Alliance will ensure that all three counties and associated sectors are equally represented in working groups. Working groups will be led by co-chairs, determined by each respective group.

Funding and Resources – Responsible for mapping funding opportunities in the region, creating the annual Comprehensive Children’s budget, and identifying and reviewing potential grant opportunities.

Data and Evaluation – Ensure that the EL Hub has the data it needs to make decisions informed by an understanding of the target population and progress towards outcomes.

Health Care Integration – Inform and facilitate the alignment of EL Hub outcomes with health care sector initiatives.

PreK/K12 Alignment – Responsible for building connections between families, early learning and K-12.

Early Childhood Coordinating Council – A forum for the broad based discussion of early childhood programming: including QRIS, ASQ, parenting education, home visiting, and family resources managers. Responsible for improving the referral pathway for families; identifying unserved children and identifying strategies or collaborations for providing appropriate services.

ARTICLE IX – DECISION MAKING

The Governing Board will strive for consensus in all of its decision-making. Working toward consensus is a fundamental principle and includes the following understandings:

Definition of “Consensus”: Consensus means that all group members either fully support or can live with a proposal or decision and believe that their constituents can as well. In reaching consensus, some Board members may strongly endorse a particular proposal while others may accept it as "workable." Others may be only able to “live with it.” Still others may choose to “stand aside” by verbally noting a disagreement, yet allowing the group to reach a consensus without them. Any of these actions still constitutes consensus.

Those who choose to "stand aside" may request to have their views represented in meeting summaries and any final report or decision document.

Representatives

When initial agreement is achieved, some participants may need to take the agreement back to their constituencies or a higher decision-making authority for ratification. If those higher authorities or constituents express concerns or reservations, they also have an obligation to propose an alternative that will address all interests. These responses will be brought back to the group for further deliberations.

When Consensus Cannot be Reached: Reaching consensus is the intended outcome of each discussion. If the group is not able to reach consensus after full deliberation and attempts to break impasse have not been effective, a vote on the proposal will be taken by show of hands. The proposal or decision passes if a super-majority (75%) of the members who are present vote in favor of it. Those in the minority are invited to write a “minority statement” describing their concerns and views, and this statement will become part of the official meeting summary.

Agenda, Absent Meetings, Meeting Summary

- Items requiring a formal decision will be noted on the agenda. Absent group members are invited to provide their input for group consideration in advance of the meeting they will miss.
- Highlights of the discussion leading to a decision; the decision; and any minority opinions will be included in the meeting summary.

ARTICLE X – STANDARD OF CONDUCT

Section 1: Confidentiality. All individual client information obtained by the EL Hub Staff, Board members, members of working/advisory group, subcontractors or partners will be treated as confidential, and shall not be divulged without the written consent of the client, the responsible parent of a minor child, or his or her guardian except as required under mandatory reporting guidelines. Disclosure of information in summaries, statistical or other form, which does not identify specific individuals is allowed. The use or disclosure of information concerning clients shall be limited to persons directly connected with the administration of the agreement between the EL Hub, and the ODE Early Learning Division. ODE, Early Learning Division and EL subcontractors will share information as necessary to effectively serve ODE clients. Board members will be required to annually sign the EL Hub Confidentiality form.

Section 2: Conflict of Interest. All members of the EL Hub Governing Board **must disclose** when they believe they have *or may have* a conflict of interest, and may participate in discussions that are leading to consensus. If, however, consensus cannot be reached and the group uses the fall-back voting process, the individual with the conflict of interest may not participate in that final vote.

Definition A conflict of interest occurs when one’s responsibilities to the EL Hub Governing Board, could be influenced or compromised by self-interest, a prior commitment, competing loyalties (for example, caused by another role one is serving in) or an inability to be objective.

- **Example:** Financial conflict—a member, or a member of his/her family, would serve to benefit financially from a decision made by the Board.
- **Example:** Role conflict--a member’s role in an organization other than the EL Hub carries with it certain responsibilities that compromise his or her ability to act objectively on an issue being considered by the Board.

Failure to disclose

If the Board or Leadership Committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.

If, after hearing the member’s response and after making further investigation as warranted by the circumstances, the Board or Leadership Committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

Conflict of Interest Form

Board members annually agree to and sign the EL Hub Conflict of Interest form.

Section 3: Personal Conduct. Staff and Governing Board members shall conduct themselves in a manner calculated to avoid damaging the reputation and good name of the EL Hub.

ARTICLE XI - DURATION AND MODIFICATION OF THESE BYLAWS

Any amendments to the Charter shall be approved by 75% of the Governing Board membership. Written notice of the proposed amendment shall be given in the agenda for the meeting. Review and revision of this Charter shall take place annually prior to the Hub contract renewal. All adopted Charter changes will be forwarded to the Early Learning Division.

ARTICLE XII - CONTROLLING AUTHORITY

As it is recognized that the existence of this EL Hub is controlled by statute, all conflicts between this Charter and the controlling statute or administrative rule now in existence or adopted in the future, are to be resolved in accordance with the appropriate statute or administrative rule.

Linn Benton Lincoln Early Learning Hub Governance Model

Governing Board

COMMON AGENDA

Governance, Vision, and Strategy

Working Groups:

- Pre-K / K-12 Alignment
- Healthcare Integration
- Data & Evaluation Committee
- Early Childhood Coordinating Council
- Funding & Resources Committee

Partners:

- Parents
- K-12
- Health
- Coalitions
- Businesses
- Social & Human Services
- Early Childhood

Communities:

- Linn, Benton, and Lincoln Counties
- Confederated Tribes of Siletz Indians

Backbone Alliance

Action Planning

Execution

Public Will

Section 3: Guiding Principles

The Hub and its governance Councils shall operate under the following guiding principles in fulfilling the vision, mission and outcome goals of an Early Learning Hub:

- There are several places where families and organizations cross the three counties, providing opportunities for systems alignment and coordination.
- We will strive to create community-specific strategies, since needs and programs differ across counties and communities.
- We respect and value our existing relationships and will seek to expand our partnerships and build new relationships.
- The Collective Impact Model will guide our actions including the five core components; common agenda, shared measurement, mutually reinforcing activities, continuous communication and backbone support.
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- Our governance model will evolve over time, and will be evaluated and adjusted to strategically meet outcomes.

Outcome #1: Children are ready for kindergarten

Goal # 1: Children experience quality early learning environments

Success Metric:

1.1 Increase in the number of high quality early learning environments as measured by the Quality Rating Indicator System (QRIS)

Year One Milestone: Increase the number of high quality early learning and care facilities in coverage area as measured by QRIS.

Commitment to quality: 27 Three Star: 11 Four Star: 5 Five Star: 11

Increase the number of children in high quality learning environments as measured by available slots in programs participating in QRIS. Data available from WOU on number of QRIS slots by age (0-17 mos, 18 – 35 mos, 3 years, 4 years, 5 years) and by type of care (child care center, certified family, registered family and Head Start). Develop targets after watching trends in Hub year 1.

Objective	Tasks Year 1	Timeline	Person/Partner Responsible	Documentation	Completion Date	Estimated Costs by Funding Streams
1.1 Increase the number of high quality early learning and care facilities in coverage area as measured by QRIS	Partner with Child Care & Resource Referral agencies to map early childhood care providers (3 counties) potential movement through QRIS process by 6/30/2018.	2 months	LBL EL Hub, Family Connections, Family Care and Connection (CCR&R agencies)	Map, new targets set	By 10/30/14	Nominal cost
	Provide training to providers on the QRIS process.	On going	CCR &Rs - QRIS staff	Training Calendar	Ongoing	CCR&R QRIS funding from ODE
	Target providers who are at C2Q for additional support	On going	CCR&Rs – QRIS Staff	Number of portfolios submitted	Monthly	CCR&R QRIS funding from ODE

	for portfolio completion					
	Targeted recruitment of Latino Providers to participate in the QRIS Process	6 month	Family Connections – QRIS staff	Signed Commitment to Quality	On-going	CCR&R Budget
	Develop a training cohort, with training specific to the needs of Latino providers	On going	Family Connections	Training Calendar	On-going	Apply for OCCD Cohort Funding, deadline 2/28/15
	Provide set 1 and set 2 professional development trainings based on providers needs for achieving QRIS professional development targets.	On going	CCR&Rs	CCR&R Quarter reports – Supply Goal 2 Key Measure, data provided by WOU	On-going	CCR&R Budget, Great Start funds \$3567
	Work with LBCC Department of Education/Child and Family Studies to create a pathway to certificates and AA for early learning providers.	On going	Family Connections Director, ED/Child & Family Studies Faculty and Division Dean.	Provider Pathway document	Ongoing	Nominal
	Provide coaching (through classes, one-on-one and community cafes) to Early Learning	On going	CCR&Rs	CCR&R Quarter reports – Supply Goal 2 Key Measure, data provided	Ongoing	CCR&R – ODE Building Capacity Workforce Funds

	<p>providers with the goal of increasing participation on the Oregon registry with focus on registered family providers who are DHS listed (serve low income families)</p> <p>Educate community partners on the current state of the Child Care in the EL Hub region, the CCR&R role and QRIS strategy for improving quality.</p>	<p>9 months</p>	<p>EL Hub Coordinator, CCR&Rs</p>	<p>by WOU</p> <p>Meeting Agendas, Quarterly QRIS report to partners</p>	<p>Quarterly</p>	<p>Nominal</p>
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Outcome #1: Children are ready for kindergarten

Goal # 2: Connections are built between families, early learning and K-12

Success Metric:

1.2 By June 30, 2017, increase by 8% the children assessed as “ready” on the Kindergarten Readiness Assessment (KRA) (from baseline of 8.6% to 16.6%)

Year One Milestone:

Parenting Education Programming using evidence-based curriculum is held in partnership with six elementary schools. Five out 10 target schools catchment areas are actively engaged in P-3 Data-driven work plans.

Objective	Tasks Year 1	Timelines	Person/Partner Responsible	Documentation	Completion Date	Estimated Costs by Funding Streams
1.2 Connections are built between families, early learning and K-12	Map all early learning to K-12 transition projects across the EL Hub.	6 months	EL Hub Coordinator, PreK-K12 workgroup (include parents in workgroup)	Document including target audience, funding, strategies and outcomes	March 30, 2015	Nominal
	Leverage existing Parenting Education Hubs to provide parenting education opportunities for parents of 0-6 in Elementary Schools utilizing research or evidence based parenting education curriculums. (universal strategy)	6 months	EL Hub Coordinator, Parenting Hubs (Coastal Families Together, Parenting Success Network), Pre-K/K-12 Workgroup	Training flyers, agenda and rosters, Parenting Skills Ladder	June 30, 2015	OPEC grants to Parenting Hubs – Parenting Success Network, Coastal Families Together, Great Start funding to reduce barriers and/or provide incentives for participation.
	Targeted	6 months	EL Hub	Contracts with	June 30, 2015	EL Hub Strategic

	<p>engagement of parents, schools and partners in Priority, Focus and Other Title 1 School catchment areas. Engage parents through focus groups, surveys, parent cafes, community input sessions. Identify parents for leadership roles across Hub Governance structure. Utilize P-3 Community Needs & Resources Assessment Planning – Key Information Worksheet to prioritize questions and data collection strategies. Work with Site Councils. Develop recommendations for year 2 pilot projects including funding sources, resources and common evaluations across programs.</p>		<p>Coordinator, Pre-K/K12 Work groups, Key community partners in ten catchment areas.</p>	<p>community partners for parent engagement.</p> <p>Draft Data-Driven Work Plan (For P-3 Initiative Work), Recommendations to Governing Board for year 2 & 3 projects.</p>		<p>Investment \$10,000 to support community level work (i.e. contract with local partners to coordinate work, funding for parent cafes, community meetings)</p>
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Outcome #1: Children are ready for kindergarten

Goal # 3: Children and families engage in activities that build executive functioning, reading and numeracy skills.

Success Metric:

By June 30, 2017 increase by 8% the average number of letter names that children identify in one minute.

By June 30, 2017 increase by 8% increase the average number of letter sounds that children identify in one minute.

By June 30, 2017 increase by 8% increase the average number of questions to which children are able to respond to in early math numbers and operations.

By June 30, 2017 increase by 8% the average approaches to learning score.

Year One Milestone: (Early Literacy Projects)

400 at-risk children will participate in enhanced literacy activities.

Objective	Tasks Year 1	Timelines	Person/Partner Responsible	Documentation	Completion Date	Estimated Costs by Funding Streams
1.3 Provide access to quality early childhood experiences for at-risk children not currently engaged in formal early learning experiences	Track success of three ELD Early Literacy grants (one in each county) to promote early literacy in target population.	9 months	EL Hub Coordinator, Grant recipients – Greater Albany School District, Strengthening Rural Families, Coastal Families Together	Presentation to EL Hub Early Childhood Coordinating Council including key activities, children served and outcomes	June 30, 2015	ELD Early Literacy grants, GAPS, SRF, CFT
	Partner with Mid-Valley, Mid-Coast Partnership to develop pilot project proposal to support learning of numeracy concepts that aligns with K-12 through college.	6 months	EL Hub Coordinator, PreK-K-12 workgroup, RAC Coordinator, RAC Committee	Presentation to EL Hub Early Childhood Coordinating Council	May 30, 2015	Nominal

Outcome # 2: Families are stable and attached.

Goal 4: Families are connected to a Patient Centered Primary Care Home (PCPCH)

Measurable Five-Year Outcomes

By June 30, 2017, increase the number of children six and under who are enrolled in a PCPCH (from a baseline of 93.7% to 98%)

One Year Milestone:

Active engagement by multiple sectors in the newly formed EL Hub Health Care Integration Workgroup.

Objective	Tasks Year 1	Timelines	Person/Partner Responsible	Documentation	Completion Date	Costs
2.1 Target families are connected to a PCPCH.	Educate EL Hub Partners on the PCPCH Model.	9 months	EL Hub Coordinator, Public Health Backbone Alliance members	Materials developed, attendance roster	June 30, 2015	Nominal
	Convene EL Hub Health Care Integration Workgroup and establish work plan aligned with EL Hub Strategic Plan.	On going	Backbone Alliance, Health Care sectors Governing Board Members, EL Hub Coordinator	Meeting rosters and minutes	On going	Nominal
	Include PCPCH referral information in strengthen referral pathway, and family resource navigator model and trainings.	9 months	EL Hub Coordinator, Health Care Integration Workgroup, Early Childhood Coordinating Council	Number of children under six enrolled in PCPCH	June 30, 2015	Nominal

Outcome # 2: Families are stable and attached.

Goal 5: Children are raised in stable and attached families.

Measurable Five-Year Outcomes:

By June 30, 2017 decrease by 10% the number of children six and under entering the foster care system.

By June 30, 2017 decrease by 10% the number of children six and under returning to the foster care system.

By June 30, 2017 increase by 10% the number of children six and under involved with Child Welfare who remain safely at home.

Year One Milestone/Evaluation:

Observe trends for all three outcomes.

Objective	Tasks Year 1	Timelines	Person/Partner Responsible	Documentation	Completion Date	Costs
Targeted high risk families have access to resources within their communities.	Convene stakeholders to determine the level of interest in establishing a relief nursery in Lincoln County.	6 months	Lincoln County Health Department (Backbone Alliance), EL Hub Coordinator, Family Tree Relief Nursery, Old Mill Relief Nursery	Meeting agenda	6/30/2015	Leverage Family Tree RN and Old Mill RN expertise. \$250 for meeting materials and supplies.
	Improve referral pathways for families identified through the DHS Hotline but not assigned for intervention.	6 months	Working group of the Early Childhood Coordinating Council to include DHS managers, Family Support and Connections.	Referral pathway documentation	6/30/2014	Nominal
	Create a referral process and provide family resource managers/navigators for families with young children in Drug and Alcohol outreach programs.	6 months	EL Hub Coordinator, Early Childhood Coordinating Council, Family Connections, Family Care and Connection	Referral form, process, Referral documentation to include number and type of referral	Process by 3/30/14 Referral – ongoing	EL Hub Contract with Family Connections and Family Care and Connection for Family Navigator Services

Outcome # 2: Families are stable and attached.

Goal 6: Children are developmentally screened and referred.

Measurable Five-Year Outcomes:

Increase to 50% (from baseline of 24%) the number of children prior to the age of 3 who receive developmental screening by the Ages and Stages Questionnaire (ASQ)

Year One Milestone:

Increase the number of children who receive developmental screening prior to age three from 24% to 40% as measured by the IHN-CCO.

Objective	Tasks Year 1	Timelines	Person/Partner Responsible	Documentation	Completion Date	Costs
Increase the number of children under three who receive developmental screening by age three.	Inventory all providers, including primary care physicians to better understand the gaps and opportunities for establishing consistent use of ASQs.	6 months	Early Childhood Coordinating Council, EL Hub Coordinator	ASQ Map	6/30/2015	nominal
	Develop and strengthen pathways that assure ASQs not provided in the medical setting are forwarded to primary care providers.	6 months	Joint work group of the Health Care Integration Workgroup and the Early Childhood Coordinating Council	Field testing of strategies by multiple agencies (i.e. Relief Nurseries, Healthy Start, Early Head Start, Public Health)	6/30/2015	EL Hub funds for incentives, materials
	Expand the reach of the "See How I Grow" campaign (to	6 months	Family Connections Director, EL Hub Coordinator	Material tailored for local use and	6/30/2015	EL Hub funds -ASQ kits to non-traditional

	<p>promote a common message and on the importance of developmental screening) to Lincoln County and new partners.</p> <p>Offer trainings in the use of the ASQ to early learning providers and other early learning partners.</p> <p>Train master trainers in ASQ for Child Care Provider Professional Development</p>	<p>Quarterly</p> <p>2 months</p>	<p>Family Connections, LBCC Parenting Education</p> <p>Family Connections, Family Care and Connection</p>	<p>distributed to all early learning partners.</p> <p>Training calendar, participant list</p> <p>Training certificate</p>	<p>Ongoing</p> <p>December 5, 2014</p>	<p>providers, ASQ resource fair materials available for community use</p> <p>CCR&R, EL Hub strategic investment</p> <p>EL Hub funds for stipend, mileage</p>
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Outcome #3: System Coordination

Goal # 7: Children and Family Services are aligned and coordinated.

Measurable Five-Year Outcomes

By June 30, 2017, decrease the costs to serve at-risk children including administrative overhead.

By June 30, 2017, increase by 60% the number of at-risk children served across early education, health and human services (from baseline of 30% to 90%)

By June 30, 2017, increase 15% the number of at-risk children identified and connected to services by age 3.

Year One Milestone:

50% of Family Resource Managers in the region have participated in a training focused on consistent protocols.

Objective	Tasks Year 1	Timelines	Person/Partner Responsible	Documentation	Completion Date	Costs
Create a comprehensive, accessible web of resources and family resource managers across the region.	Map family resource manager/navigator services and identify target population, protocols and procedures. Identify unserved children and families.	4 months	Early Childhood Coordinating Council	Mapping document	5/30/2015	Nominal
	Develop consistent protocols, forms and data collection for Family Resource Managers	On going – Pilot process 5/30/2015	Work group of Early Childhood Coordinating Council	Newly created documents	On going	EL Hub Funds
	Establish protocol for sending information on unserved families and families on	2 months	EL Hub Program Assistant, EL Hub Early Learning Providers (i.e. Head Start, Public	Procedures and forms for sharing contact information, Number of	On going	EL Hub Program Assistant -staff time for family resource manager function

	<p>waiting lists to community based agencies who will provide the resource manager function and document needs and gaps.</p> <p>Convene regional EL Hub Learning Community that brings together Family Resource Managers/Navigator across multiple agencies for cross training, professional development and program planning.</p> <p>Partner with 211 and other key stakeholders to consolidate existing information and referral systems to ensure the information about community resources is current and accessible to all providers and families.</p>		<p>Health, Healthy Families, WIC, Relief Nurseries, Preschools</p>	<p>families engaged and types of referrals provided, results of referral</p>		
		On going	EL Hub Project Staff, Early Childhood Coordinating Council	Meeting agenda and participant roster.	On going	EL Hub Funds for food, meeting supplies
		On going	EL Hub, 211, Early Learning Programs, Family Connections, Family Care and Connection	Updated 211, Regional resource information available to programs	On going	EL Hub Funding to Family Care and Connections and Family Connections to contact providers and facilitate updated information to 211
Develop	Convene a Identity	On going	EL Hub Co- Chair	Meeting notes	On going	IHN-CCO Funding

Communication Plan for EL Hub	Work group to led activities towards develop a brand identity for the EL Hub that will support communication with the multiple audiences served by the Hub		Julie Manning, Identity Work Group, Governing Board			
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Outcome #3: System Coordination

Goal # 8: Performance is measured and data is used to learn, adjust and innovate

Year One Milestone:

All governance model groups (Governing Board, Backbone Alliance, Working/Advisory Groups) are established with co-chairs, cross sector membership, work plans and progress toward outcomes.

Objective	Tasks Year 1	Timelines	Person/Partner Responsible	Documentation	Completion Date	Costs
Continuous update and disseminate relevant data on target population.	Review and synthesize population data, develop easy to understand materials for dissemination.	4 months	Data and Evaluation Committee (includes members from Health Department, Head Start, CCR&R, DHS)	Materials for partner use	Ongoing	Nominal
Develop and implement common data protocols across early learning programs.	Identify common data points across early literacy projects and service delivery fund recipients	9 months	Literacy grant recipients – Greater Albany School District, Coastal Families Together, Strengthening Rural Families, and service delivery fund recipients	Quarterly reports	6/30/2014	Nominal
	Review one year plan, identify common data points across programs, collect meaningful data targeted to inform systems adjustments and investments.	3 months	Data and Evaluation Committee	Work group minutes	6/30/2015	Nominal
	Work with IHN-CCO	Ongoing	IHN-CCO, Benton	Metrics	Ongoing	IHN-CCO

	and Benton County Health Department to incorporate EL Hub metrics into new regional metrics framework.		County Public Health, Data and Evaluation Committee	Framework		
Improve understanding of the needs, strengths and opportunities for better engaging diverse parent/family communities.	Inventory existing groups/partners with current, well established capacity to reach and engage parent/families in services and/or program planning and evaluation activities.	2 months	EL Hub Coordinator, Early Childhood Coordinating Council	Inventory	2/30/2015	Nominal
	Apply for Northwest Health Foundation, Healthy Beginnings – Healthy Communities Organizing grant to develop outreach models that foster meaningful parent/family engagement among communities most impacted by educational and health inequities in the EL Hub region.	2 months	Funding and Resources Committee (includes members from Samaritan Health, Lincoln Co. Health, Community Service Consortium, Arc of Benton Co. LBL-ESD, LBCC, Old Mill Center, United Way of Lincoln and Benton Co., EI/ECSE)	Submitted Proposal	10/11/2014	Nominal
Utilize data to drive decision making.	Administer performance-based contracts across the	Ongoing	EL Hub Coordinator, LBCC Business Office	Contracts and quarterly reports	Ongoing	Nominal

	region informed by OLC and LBL EL Hub metrics and milestones. Use data to inform programming and funding decisions.	Ongoing	Governing Board	Meeting minutes	Ongoing	Nominal
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ARTICLE X – STANDARD OF CONDUCT

Section 1: Confidentiality. All individual client information obtained by the EL Hub Staff, Board members, members of working/advisory group, subcontractors or partners will be treated as confidential, and shall not be divulged without the written consent of the client, the responsible parent of a minor child, or his or her guardian except as required under mandatory reporting guidelines. Disclosure of information in summaries, statistical or other form, which does not identify specific individuals is allowed. The use or disclosure of information concerning clients shall be limited to persons directly connected with the administration of the agreement between the EL Hub, and the ODE Early Learning Division. ODE, Early Learning Division and EL subcontractors will share information as necessary to effectively serve ODE clients. Board members will be required to annually sign the EL Hub Confidentiality form.

Section 2: Conflict of Interest. All members of the EL Hub Governing Board *must disclose* when they believe they have *or may have* a conflict of interest, and may participate in discussions that are leading to consensus. If, however, consensus cannot be reached and the group uses the fall-back voting process, the individual with the conflict of interest may not participate in that final vote.

Definition A conflict of interest occurs when one’s responsibilities to the EL Hub Governing Board, could be influenced or compromised by self-interest, a prior commitment, competing loyalties (for example, caused by another role one is serving in) or an inability to be objective.

- **Example:** Financial conflict—a member, or a member of his/her family, would serve to benefit financially from a decision made by the Board.
- **Example:** Role conflict--a member’s role in an organization other than the EL Hub carries with it certain responsibilities that compromise his or her ability to act objectively on an issue being considered by the Board.

Failure to disclose

If the Board or Leadership Committee has reasonable cause to believe a member has failed to disclose actual or possible conflicts of interest, it shall inform the member of the basis for such belief and afford the member an opportunity to explain the alleged failure to disclose.

If, after hearing the member’s response and after making further investigation as warranted by the circumstances, the Board or Leadership Committee determines the member has failed to disclose an actual or possible conflict of interest, it shall take appropriate disciplinary and corrective action.

Conflict of Interest Form

Board members annually agree to and sign the EL Hub Conflict of Interest form.

Section 3: Personal Conduct. Staff and Governing Board members shall conduct themselves in a manner calculated to avoid damaging the reputation and good name of the EL Hub.

Task from One Year Work Plan – ECCC

1. Include PCPCH referral information in strengthen referral pathway, and family resource navigator model and trainings. – Jointly with Health Care Integration Workgroup
2. Improve referral pathways for families identified through the DHS Hotline but not assigned for intervention.
3. Create a referral process and provide family resource managers/navigators for families with young children in Drug and Alcohol outreach programs.
4. Inventory all providers, including primary care physicians to better understand the gaps and opportunities for establishing consistent use of ASQs.
5. Develop and strengthen pathways that assure ASQs not provided in the medical setting are forwarded to primary care providers. – Jointly with Health Care Integration Workgroup
6. Map family resource manager/navigator services and identify target population, protocols and procedures. Identify unserved children and families.
7. Develop consistent protocols, forms and data collection for Family Resource Managers
8. Convene regional EL Hub Learning Community that brings together Family Resource Managers/Navigator across multiple agencies for cross training, professional development and program planning.
9. Inventory existing groups/partners with current, well established capacity to reach and engage parent/families in services and/or program planning and evaluation activities.

Timeline from One Year Work Plan – ECCC

Task Year 1	Timeline			Completion Date
1. Include PCPCH referral information in strengthen referral pathway, and family resource navigator model and trainings. – Jointly with Health Care Integration Workgroup.	9 months			June 30, 2015
2. Improve referral pathways for families identified through the DHS Hotline but not assigned for intervention.	6 months			6/30/2014
3. Create a referral process and provide family resource managers/navigators for families with young children in Drug and Alcohol outreach programs.	6 months			Referral - ongoing
4. Inventory all providers, including primary care physicians to better understand the gaps and opportunities for establishing consistent use of ASQs.	6 months			6/30/2015
5. Develop and strengthen pathways that assure ASQs not provided in the medical setting are forwarded to primary care providers. – Jointly with Health Care Integration Workgroup.	6 months			6/30/2015
6. Map family resource manager/navigator services and identify target population, protocols and procedures. Identify unserved children and families.	4 months			5/30/2015
7. Develop consistent protocols, forms and data collection for Family Resource Managers.	On going – Pilot process 5/30/2015			On going

Task Year 1	Timeline			Completion Date
8. Convene regional EL Hub Learning Community that brings together Family Resource Managers/Navigator across multiple agencies for cross training, professional development and program planning.	On going	On going		
9. Inventory existing groups/partners with current, well established capacity to reach and engage parent/families in services and/or program planning and evaluation activities.	2 months	2/30/15		

ARTICLE VIII - ADVISORY/WORKING GROUPS

Working groups identified as fundamental to implementing the concepts and processes in the EL Hub include Funding and Resources, Data and Evaluation, Health Care Integration, Pre-K/K12 Alignment and Early Childhood Coordination. Additional groups may be established by the Governing Board as needed to accomplish the EL Hubs strategic goals and outcomes. Working groups will be open to interested participants. The Backbone Alliance will ensure that all three counties and associated sectors are equally represented in working groups. Working groups will be led by co-chairs, determined by each respective group.

- Funding and Resources – Responsible for mapping funding opportunities in the region, creating the annual Comprehensive Children’s budget, and identifying and reviewing potential grant opportunities.
- Data and Evaluation – Ensure that the EL Hub has the data it needs to make decisions informed by an understanding of the target population and progress towards outcomes.
- Health Care Integration – Inform and facilitate the alignment of EL Hub outcomes with health care sector initiatives.
- Pre-K/K12 Alignment – Responsible for building connections between families, early learning and K-12.
- Early Childhood Coordinating Council – A forum for the broad based discussion of early childhood programming: including QRIS, ASQ, parenting education, home visiting, and family resources managers. Responsible for improving the referral pathway for families; identifying unserved children and identifying strategies or collaborations for providing appropriate services.