



Attendees

Karen Ruprecht, Megan Purcell, Emily Rouge, Sarah Parks-Reece, Cynthia Smith, Beth Barrett, Susan Bryant, Melissa Wall

Key Topics Discussed

A. ELAC Updates

- a. No news yet on a new chair for ELAC.
- b. No ELAC public meeting in August. Next meeting is Friday, September 14th.
- c. Annual report is underway. Will update workgroup when next steps with ad hoc group are decided.

B. National News and Partner Updates

- a. Preschool Development Grant announcement was supposed to be released around August 14th/16th but has yet to be released.

C. Adverse Childhood Experiences (ACEs) White Paper

- a. Reviewing
 - i. Amanda's comment on page 1 mentions potentially adding in educational outcomes impact. One person thought that wasn't really as exciting as what's there.
 1. Megan: Change it to "besides academic impact there's also lifelong health impact" to mention educational impact in a way that makes the others stand out even more.
 - ii. Take out the section Megan asked about at very end
 - iii. Turn "how can we address" into a call out box.
 - iv. The document needs something visually to help tie the first sentence of second paragraph to the actual figure (besides "see figure").
- b. Communications Plan
 - i. Cynthia suggested adding additional audiences based on her communications plan for Help Me Grow (HMG). Megan added her professional association.
 - ii. Key message:
 1. ACEs is a systems-level issue, requires systems-level response.
 2. Many children in our State (under the age of 5) have multiple ACEs.
 3. There's community work happening already that's addressing some of this.
 - iii. Talking Points



1. It doesn't matter where you live; these experiences have happened to many children and adults suffer the effects of it too. It doesn't matter if you're urban or rural.
 2. Just because you or your child may have multiple ACEs, there are ways to get help (resilience).
 3. What are ACEs?
 4. What impact do ACEs have on the child both short-term and long-term?
 5. What can communities do to help children and families who are facing ACEs?
 6. Where can I get further information? (Send them to the national resources.)
- iv. Tactics
1. IAAYC conference: Perhaps encouraging someone to talk if it's a relevant topic.
 2. Indiana DEC: ACEs is something to mention for their November conference.
 3. On communicate – establish link, second bullet with communicate to partners
- v. Next steps: Wrap things up with the co-chairs. The workgroup doesn't need to review again.

D. Continuous Quality Improvement (CQI) - Next Steps

- a. What do we want to do with this topic?
- i. Child and family outcomes feed program evaluation and vice versa.
 - ii. Maybe a best practices one pager.
 1. ECE doesn't do CQI very well. It takes time, resources, etc. This goes back to systems-building and could be seen as something to help all children and all families.
 2. Emily: To only look at improving outcomes is to constantly be looking to improve quality (CQI). Without quality, we don't achieve outcomes.
 3. NIRN has some great resources on CQI to review, and then we could add some examples that we had on the conference call about what was involved and what they learned.
- iii. What do we want to produce?
1. Emily has been tasked to create a 2-hour training on CQI for providers, and that could be something we could work on. Potentially.
 - a. Beth: Assist Emily with her work. Thinks the target audience for information on CQI is providers.
 - b. Megan sees two different levels – nonprofit management staff and nonprofit program staff.



- i. Wondering which level should be the audience?
 - ii. Sarah: Thinks you need the buy-in at the top.
 - iii. Emily: Has been tasked with individual program improvement, but organization program improvement/organizational improvement is an essential component. The organization side needs more information, but that's not part of her task.
2. Cynthia: When they started CQI (Healthy Families and Nurse-Family Partnership), they initially created a train the trainer model with program directors and their supervisors. They knew it needed to be that organizational buy-in but also knowing that CQI needs to occur at local or direct service staff level.
 - a. Might be able to offer to Emily some information on what the important topics are to get people to begin the process. A rapid cycle process (little changes to see the impact in a short-period of time) is one such topic. (Cynthia's training is 2 day so pick the highlights/low hanging fruit for 2-hour training.)
3. Cynthia: Maybe we identify conferences that happen in the state to see if they'd add a CQI track for continuous discussion around CQI – to connect what they hear to actual action items.
 - a. The thought is to maybe not take on another project but help facilitate or support what already exists.

E. Resources about Fade-Out Effect

- a. How do we combat this idea of fade-out?
 - i. One workgroup member read a blog that said to stop looking at preschool in isolation. We don't ask, "Does 3rd grade work?".
 1. It's not something that just some should have.
 - ii. Idea to create slides instead of having people read another research paper. Refer to evidence in the slides.
 1. Doesn't know of ready-made stuff which is available for other topics.
 2. More usable.
 - iii. Next steps: Karen and Megan will do background work to move forward.

F. 2018 Workgroup Schedule

- a. The October is cancelled. Neither co-chair can make it.
- b. Last meeting for 2018 will be November 30th.



Action Items

1. Karen and Megan will clean up ACEs documents and update workgroup on when it will be submitted.
2. Karen and Megan will start constructing a slide deck on fade out effect.
3. Karen will send bullet indicators for ACEs call out box.

Next Meeting

Friday, September 28, 2018 | 10:00am-12:00pm | Video Call