The Head Start Reauthorization Act of 2007 called for states to create Early Childhood Advisory Councils (ECACs), and such councils in 45 states and five territories received funding under the American Recovery and Reinvestment Act. This webinar, sponsored by the Statewide Longitudinal Data Systems (SLDS) Grant Program, focused on the role of ECACs and how these councils interface with the collection and publication of early childhood (EC) data. Rachel Demma from the National Governors Association (NGA) discussed state activities around data and how these efforts align with State ECACs, Elliot Regenstein of EducationCounsel LLC talked about some of Illinois’s Early Childhood Data Projects and their work with their State ECAC, and Debra Andersen of Smart Start Oklahoma discussed her state’s progress in incorporating health data into its EC data efforts.

Early Childhood Advisory Councils: An Overview

The webinar began with a summary of the charge and role of ECACs. Councils ideally function as strategic planning bodies that serve first and foremost in an advisory capacity within a state. The NGA also sees councils as “occupying multiple positions on a full continuum of governance, roles, and actions,” from serving in an advisory capacity, to a more administrative role in terms of streamlining and integrating state services and programs, to making decisions and recommendations about policy development and funding.

The charge of the councils, as laid out in the 2007 Head Start Reauthorization Act, is to:

• “conduct a periodic statewide needs assessment concerning the quality and availability of early childhood education and development programs and services for children from birth to school entry...;”
• identify opportunities for, and barriers to, collaboration and coordination among Federally-funded and State-funded child development, child care, and early childhood education programs and services...; “
• develop recommendations for increasing the overall participation of children in existing Federal, State, and local child care and early childhood education programs...;”
• develop recommendations regarding the establishment of a unified data collection system for public early childhood education and development programs and services throughout the State;
• develop recommendations regarding statewide professional development and career advancement plans for early childhood educators in the State;
• assess the capacity and effectiveness of 2- and 4-year public and private institutions of higher education in the State toward supporting the development of early childhood educators...; and

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For more information on the IES SLDS Grant Program or for support with system development, please visit http://nces.ed.gov/programs/SLDS.
- make recommendations for improvements in State early learning standards and undertake efforts to develop high-quality comprehensive early learning standards, as appropriate.”

Ultimately, the role of ECACs centers around their ability to articulate each state’s strategic plan for the development of a comprehensive, high quality EC system, as well as to create an actionable plan around identifying the outcomes that a state wants to achieve for its young children. The governor’s vision is critical in developing this plan, as is the involvement of a diverse group of stakeholders.

An ECAC can effectively fulfill its role by following what the NGA calls the “Three Cs”:

- Fulfill their coordination role by developing recommendations to promote system building.
- Promote collaboration and shared ownership of results and accountability.
- Communication is key. The essential role of an ECAC is to coordinate and collaborate around building a birth-to-five data system in states; clear communication of needs and resources is particularly required when extending this role to consider how to link birth-to-five data with the state’s K12 data.

ECACs face unique challenges when it comes to the development of EC systems, as evidenced by the Early Childhood Data Collaborative’s (ECDC) analysis of state’s EC education programs. Takeaways from the ECDC 50-state survey included:

1. Every state collects ECE data on individual children, program sites and/or members of the ECE workforce.
2. Data are uncoordinated as almost every state cannot link data across the ECE programs at the child-, program site-, and ECE workforce-levels.
3. Data gaps remain for ECE workforce-level data and child-level development data.
4. Governance matters and is needed to establish better coordination across agencies in support of data use. Currently, data linkages are most likely to occur between data systems located within the same state agency (data silos), and because federal reporting requirements drive many agencies’ data collection efforts—circumstances that, ideally, data linkages should transcend.
5. States cannot answer basic questions about the state’s ECE systems.

The NGA would like to see ECACs continue to lead and drive data system development and linkages between states based on the following ECDC goals:

- Articulate the critical policy questions that will drive the development and use of coordinated state ECE data systems.
- Evaluate current and future data collection and linkage needs (i.e., what data are needed and what agencies have these data?) based on the state’s critical policy questions.
- Strategically govern data collection and use, including ensuring the privacy, security, and confidentiality of ECE data.

**Early Childhood Advisory Councils and Data Collection in Illinois**

Next, the webinar looked at one way the “Three Cs” are being implemented in Illinois: the Illinois Early Childhood Asset Map (IECAM). Because Illinois’s primary state funding stream for early EC is a competitive grant and not a formula grant, the Illinois State Board of Education wanted to ensure that grant money was reaching the communities with the greatest need. The Illinois Early Learning Council (the state’s ECAC) called for a concerted effort to develop an interactive, web-based tool that could map where a service was being provided against where needs existed.

The development of IECAM involved support from both private foundations and public entities. IECAM maps EC services and community demographics (population distribution, family income, and language spoken at home), showing how early childhood assets relate to community need (for example, IECAM may show that a particular neighborhood has a high percentage of non-English speaking families, but very few EC programs to address that need). The IECAM website currently includes data on licensed and license-exempt center-based care; licensed family child care; Head Start, Early Head Start, and Migrant Head Start; the Early Childhood Block Grant; and infant and toddler programs (including programs funded through the Early Childhood Block Grant). Data are available in map or tabular form, and can be sorted by county, state or federal legislative district, municipality, zip code, or other regional boundaries.

IECAM is now part of the fabric of larger state policy discussions. Representatives from the Early Learning Council and the advocacy community serve on its technical advisory committee, and IECAM continues to play an active role in the Council and its data work group. IECAM also works to maintain a close relationship with the Illinois State Board of Education, which uses its data to inform Early Childhood Block Grant awards. (See Figure 1, next page, for a screenshot of IECAM).
Finally, the webinar presented an overview of Oklahoma’s ECAC. In 2010, the Oklahoma Partnership for School Readiness (OPSR, created in 2003) was established as the State ECAC. The OPSR had already named a unified data system as a top priority; however, after participating in a Children’s Defense Fund Data Driven Decisions meeting, which featured a presentation from a Health Commissioner, the OPSR set its sights on integrating health data with EC data.

Key EC data were already being housed at the Oklahoma State Department of Health, including data for Child Guidance; the Office of Child Abuse Prevention; Early Intervention – Part C; and Children First (Oklahoma’s Nurse Family Partnership). Collaboration with the Department of Health was made even easier by the inclusion of four health representatives on the OPSR board: a Medicaid representative, a representative from the Department of Health, and two pediatricians.

The OPSR began the planning process by identifying key stakeholders—those with a key interest in learning more from a unified data system—and convening a data roundtable, where stakeholders (about 25% of whom were from the health sector) identified key issues to be addressed:

### Information About Children

- Improve basic child enrollment information by a) getting an unduplicated count, b) improving coordination for children between programs, and c) determining where children are not receiving services.
- Establish connections to service with follow-up to health and developmental screening services.
- Develop a dashboard of indicators to facilitate longitudinal tracking of key information to measure developmental progress.

### Specific Health Questions

- Women, Infants and Children (WIC) program enrollment
- Birth certificate information (e.g., age of mother, education level of mother)
- Developmental screening
- Mother’s prenatal health and care
- Prematurity or genetic conditions
- Breastfeeding history
- Medical home
- Immunizations
- Nutrition, including obesity
- Longitudinal linking of health and educational outcomes
- Birth weight and Apgar Score

1Medical home refers to when a pediatric care team works with a child and the child’s family to assure that all of the medical and non-medical needs of the patient are met.
As OPSR continues to develop its unified data plan, the council works to stay in sync with the state’s data environment by identifying key opportunities to integrate data. For example, the Oklahoma State Department of Health is exploring the integration of data systems internally; Part C data are split between the Departments of Health and Education, making it a clear area for data linking; and some effort has been made to match Medicaid data to data with the Departments of Health and Mental Health. Such opportunities represent “low-hanging fruit” in the OPSR’s overall efforts to link EC and health data.

The OPSR is also currently researching what EC data are being collected across the state, as well as how those data are being used. In addition, the OPSR is researching where it can find some data elements that would answer the key questions raised in its report. The next steps include developing a request for proposals for unified data system design; expanding stakeholders to include more technical, “nuts and bolts” experts; and identifying diverse funding opportunities (see the SLDS Best Practices Brief, *Alternative Sources of Support for SLDS Work*, for more information).

**Resources**

- National Governors Association Center for Best Practices: [http://www.nga.org/cms/center](http://www.nga.org/cms/center)
- ECDC’s Inaugural State ECE Analysis: [http://www.ecedata.org/state-ece-analysis](http://www.ecedata.org/state-ece-analysis)
- Education Counsel LLC: [http://www.educationcounsel.com](http://www.educationcounsel.com)
- Illinois Early Childhood Asset Map: [http://iecam.crc.uiuc.edu](http://iecam.crc.uiuc.edu)
- Smart Start Oklahoma/Oklahoma Partnership for School Readiness: [http://www.smartstartok.org](http://www.smartstartok.org)
- Oklahoma State Department of Health: [http://www.ok.gov/health](http://www.ok.gov/health)