



**2015 HEALTH & EARLY LEARNING FORUM
WORLD CAFÉ
PROJECT PACKET**

**November 16, 2015
Oregon Convention Center
Portland, OR**

Lane Early Learning Alliance

3171 Gateway Loop
Springfield, OR 97477
tel 541.741.6000
fax 541.726.4150

earlylearningalliance.org



LaneKids and Trillium Partnerships

LaneKids, Lane County's Parenting Education Hub, is a network of parenting education providers and stakeholders convened to strengthen and coordinate our community's parenting education system. LaneKids is committed to improving access to an array of evidence-based parenting education opportunities and activities for all families.

LaneKids mission, that parents have the knowledge, tools, and support systems to nurture their child's optimal development and school readiness, is a key strategy in helping to reach the goals of the Lane Early Learning Alliance (ELA) and Trillium CCO.

Trillium CCO is committed to collaborating with the ELA in finding ways to work together to improve the health of families. Because parenting education is seen as a critical prevention strategy, Trillium CCO partners with LaneKids on the following initiatives:

Expanded Community Based Parenting Education

Trillium provided financial support to sustain and expand the offering of evidence-based parenting education and support programs in under-served areas in Lane County for approximately 200 families. Funding was also provided for additional training and curricula to help fill gaps in communities where there are limited qualified teachers of evidence-based parenting curricula.

Positive Parenting Program (Triple P)

Triple P is one of the most extensively researched and evaluated parenting education and support programs worldwide. The program has been shown to prevent social, emotional, behavioral, and developmental problems in children by working with parents to improve their skills and confidence. Trillium is providing funding to implement three levels of the Triple P: Level 1: Universal Communication Campaign, Level 2: Brief Intervention in Primary Care, and Level 4: On-line Parenting Education. LaneKids will be the central access point for the on-line portal and public face of the communications campaign.

Pediatric Advisory Committee

Representative pediatricians from each of the provider clinics meet regularly to serve in an advisory role for Trillium and the ELA on the implementation of several important childhood health initiatives, particularly those aimed at improving shared metrics. Pediatricians support LaneKids' central role as being the primary access point for parents to get connected to parenting education, family events, and community based resources.



WELLNESS TO LEARN

McMinnville School District and Yamhill Community Care Partnership



WHAT IS A CCO?

- A Coordinated Care Organization (CCO) is a network of all types of healthcare providers who work together to serve people who receive coverage under the Oregon Health Plan (Medicaid)
- YCCO serves people of Yamhill County and others in bordering counties
- CCOs are accountable to achieving the Triple Aim: better health, better care, lower cost

Background:

The Elementary school teachers and staff often encounter students who fall behind in learning due to unmet physical, behavioral, and/or dental conditions. Teachers and staff encounter barriers and lack the time and resources to connect students to care they need to be successful. Staff from McMinnville School District and Yamhill Community Care came together to think creatively about how to address this disparity.

Goals of our Partnership:

Throughout the school year, students with identified unmet health needs are referred to the Community Hub and they and their family are engaged in appropriate services to increase their capacity to learn in school without barriers.

The purpose of this program is to:

1. Ensure staff have the resources and knowledge to get children the healthcare they need to be successful
2. Children and families receive seamless care coordination and support in accessing needs healthcare services
3. Remove barriers that get in the way of student learning though receiving needed health services

How it works

- ◆ Identify a child with a health-related need that is affecting the child's ability to learn.
- ◆ Inform the site supervisor and outreach to the family about a referral.
- ◆ Complete the referral form and obtain the Release of Information (ROI) from the parent or guardian and fax both to 503-857-0767.
- ◆ Speak with a Community Health Worker (CHW) about any known details of the child's situation.
- ◆ Receive periodic updates on progress and status of the child/ family services provided and resolution of issues and/or needs.

What you will need

YCCO Community Health Hub Referral form
Release of Information (ROI) signed by parent or guardian

Criteria:

Any child is eligible to be referred regardless of insurance status (uninsured, CCO, private) with an identified health related need that presents barriers to their learning

What you can expect

- ◆ To receive notice of receipt within two business days of sending a referral
- ◆ Notice of the status of the referral and if child/family engaged
- ◆ On-going communication from assigned CHW until case is closed

Contact Us:

*Jennifer Jackson,
Member Engagement
Coordinator
503-376-7426
jjackson@yamhillcco.org*



THE BUS IS US!

Southern Oregon Early Learning Services (SOELS) Gets Creative about Kindergarten Readiness

A majority of preschool children receiving child care services in Jackson County are enrolled in small child care settings with family, friends, and/or relatives, or in small in-home preschools. These caregivers often care for their children eight to 10 hours a day with no other adult to offer respite. They have little opportunity to participate in professional development of any kind. Southern Oregon Early Learning Services (SOELS), the regional Early Learning Hub, started creatively strategizing with their partners about ways to offer support to these providers, better prepare their young children for kindergarten, and provide professional development opportunities in the process.

The idea of a bus that could transport children from family child care homes to special places where they could experience growth-enhancing activities began to emerge. The idea was shared with one of the regions CCOs, Jackson Care Connect and the possibility of a special bus for children began to take shape. The shared commitment of SOELS and Jackson Care Connect to the health and well-being of the region's smallest and most vulnerable citizens was a natural fit.

Local CCO and bus partner, Jackson Care Connect, has donated the funds to purchase the bus, which will transport young children from "hotspot" (or priority) areas to KidTime Children's Museum for a variety of weekly learning experiences; literacy, art, music, tumbling, etc. In the process the provider, who accompanies the children will be mentored by the highly trained and experienced KidTime teachers and instructors. The opportunity to observe quality early education classes and activities provides ideas and materials that the provider can take back to her home setting. In addition to classes and special group experiences, children will be able to take advantage of the rich and developmentally appropriate play environment, which houses exhibits and multiple objects for play and learning.

This project is a 'Win- Win' for all the stakeholders, but most importantly, a 'Win' for the young children, who will be enthusiastically preparing for their successful passage into kindergarten! As Sunny Spicer, KidTime's Executive Director shared; "We're able to deliver really high quality preschool experiences for kids....our biggest challenge was getting them to our door!" That challenge has been resolved, thanks to Jackson Care Connect and SOELS.

Mary-Curtis Gramley
SOELS Director
541-858-6731
mary-curts_gramley@soesd.k12.or.us

Heidi Hill
Community Engagement
Program manager
503-702-1370
hillh@careoregon.org

Sunny Spicer
Executive Director
Kid Time
541-944-6206
sunspicer@gmail.com

What is Vroom?

Vroom is a national early learning initiative that empowers parents to turn everyday activities into brain building moments with their children. Based on the latest science and designed to fit into parents' existing routines, Vroom can be accessed via its Smartphone app or other free materials in both English and Spanish. Learn more at the Vroom website:

www.joinvroom.org

How is Oregon Involved in Vroom?

The Oregon Department of Education's Early Learning Division has partnered with the Bezos Family Foundation to launch Vroom in Oregon. Currently, there are 16 pilot sites spread across the state promoting Vroom in their communities. These include Early Learning Hubs, community organizations, Head Start programs, and others. These groups are working hard to ensure that all Oregon parents with children ages 0-5 have access to Vroom. If you are interested in contacting the pilot site in your area, please visit the Vroom page on the Early Learning Division's website for more information:

www.oregonearlylearning.com/vroom

Vroom Pilot Sites

- Marion and Polk Early Learning Hub, Inc.
- North Central Education Service District Early Education
- Southern Oregon Early Learning Services
- Wellness and Education Board of Central Oregon
- Black Parent Initiative
- Early Learning Washington County
- Insights Teen Parent Services
- Lane Early Learning Alliance
- Klamath Tribes/Chiloquin Early Literacy Project
- Frontier Early Learning Hub
- South-Central Early Learning Hub
- Yamhill CCO/Early Learning Hub
- Clackamas ESD Oregon Head Start Prekindergarten Program
- Wallowa County Cradle to Career
- Malheur County Cradle to Career
- Healthy Beginnings



Questions? Requests?

Contact Ari Wubbold, Vroom Coordinator

ari.wubbold@state.or.us and 503.947-2572



Spotlight on Vroom Communities

Marion & Polk Early Learning Hub, Inc.



Marion & Polk Early Learning Hub, Inc. is proud to bring Vroom into our hub region. Vroom is being embraced by over 23 organizations who are incorporating Vroom in a way that makes sense for the organization. Vroom is part of an overall strategy to support and empower parents as their child's first teacher and as a brain builder.

Community organizations are incorporating Vroom in a variety of ways. Strategies include putting information in waiting areas, at community events, as part of orientation or registration. It is also being included as part of group therapy sessions, home visiting, parent education and more. To ensure Vroom was connected with our community, MPELH developed co-branded materials, including bookmarks and posters, to connect Vroom with our community. These featured photos of children in our community. In addition, broader communication tools such as billboards, Facebook and social media campaigns are occurring and planned.

Contact: Lisa Harnisch, lharnisch@earlylearninghub.org

South-Central Oregon Early Learning Hub

Vroom is quickly becoming an integral part in many of our programs in Douglas, Lake and Klamath Counties. We are currently a part of two separate Vroom pilot sites: one that spans the entirety of the three counties, and one that focused on the Klamath Tribe and Chiloquin community. In the Chiloquin area, our big push with Vroom came on September 16th, 2015 during a community celebration. As of September 24th, 963 Vroom items and materials have been distributed to families in the Chiloquin area. Our continued plan to distribute Vroom materials and increase overall Vroom awareness in the Chiloquin area is to make items available at all home basketball games, as well as parent teacher conferences and other community events in the area. In our broader Vroom pilot project, in April of 2015 we handed out more than 300 Vroom materials at a Community Baby Shower and a Celebrate Children event, along with speaking to countless parents and caregivers about the app. In October of 2015, we shared information and distributed over 300 items to attendees at an Early Childhood Education Conference. We are also sharing VROOM in the Parenting Hub parent education classes and in the Kindergarten Readiness Partnership and Innovation Services. Our key partners for the two projects include the Early Learning Hub, the Parenting Hub, area schools, KPI project leaders, area tribes, local libraries, the Department of Human Services, and more.

Contacts: Gillian Wesenberg, Gillian.wesenberg@douglasesd.k12.or.us & Kat Wolcott, Kat.wolcott@douglasesd.k12.or.us

Southern Oregon Early Learning Services (SOELS)

The Daily Vroom Mobile App www.joinvroom.com, Vroom Tip Cards, and additional materials put brain-building tools into parent and caregivers' hands throughout their day. Southern Oregon Early Learning Services, in collaboration with our anchor partners is currently working to embed these tools into the homes of children and families. We are planning a region wide Vroom launch in March to ensure every parent and caregiver knows **they have what it takes to be a brain builder!**



Contact: Teresa Slater, teresa_slater@soesd.k12.or.us

Comprehensive Oral Health Program PreK-8th grade

**Blue Mountain Early Learning Hub
Eastern Oregon Coordinated Care Organization**

**Contact: Cathy Wamsley, Program Coordinator
InterMountain ESD
cathywamsley@gmail.com**

InterMountain Education Service District, co-lead of the Blue Mountain Early Learning Hub, received a planning grant from the Oregon Community Foundation to implement a Comprehensive School Based Dental Health Program for grades K-8. Through collaboration with the Dental Care Organization, Advantage Dental, and the Coordinated Care Organization, Eastern Oregon CCO, we have extended this project to include early childhood education.

The Dental Learning Lab, created by Mercy Foundation's Healthy Kids Outreach Program, is a major component of the dental education portion of our project. This will consist of developing resources for a dental learning lab featuring:

PreK-3rd grade (Brushing, Flossing, Fluoride, Sugar Bugs, Food that Sticks, Dental Office, and Sealants)

4th – 6th grade (Clean or Dirty, Tobacco and Cancer, Mouth Guards, Tobacco Ball, Anatomy of a Tooth, and Sugar Shockers)

7th – 8th grade (Anatomy of a Tooth, Smokeless Tobacco, Dental Careers, Oral Safety, Orthodontics, and Acids)

All will include a Dental Station that will help alleviate anxiety on going to the dentist.

The dental education program will be utilized in the classroom and at Health Fairs and other gatherings as a dental health education program for parents of children 3 -14. It will partner well with other training/activities utilized such as First Tooth, What to do for Healthy Teeth, and screening and fluoride varnish by Advantage Dental and the State Sealant Program. The focus population will be all children and parents of children ages 3-14, with special emphasis on those living at or below 200% of poverty.

****A Train the Trainer by Mercy Foundation was offered October 22 & 23 free of charge to over thirty people who wanted to be trained in the Dental Health Education Lab. This training was made possible through donations from Kiwanis, Umatilla County Commissioners, GOBHI, and IMESD.**

The Comprehensive Dental Health Program helps improve the basic health of children in two ways

- **HEALTHY EDUCATION** --Provides comprehensive health education at early childhood center, public schools, and other community health fairs on teaching children and parents how to stay healthy and make healthy choices.
- **CONNECTION TO CARE** – The Dental Health Program provides connection to appropriate community health care resources for children and families, removing barriers that many of families face.

The goal of this program is to improve the oral health outcomes of children 0 – 18

Children's Health Assessment (Ages 0-11)

Blue Mountain Early Learning Hub

Eastern Oregon Coordinated Care Organization

Contact: Cathy Wamsley

cathywamsley@gmail.com

Union, Morrow, and Umatilla Counties are conducting their community health assessment through the Hospital Council of Northwest Ohio. In working on this assessment it became clear that it is primarily an adult survey and only 6 questions under Parenting assessed Children's Health.

Through discussion with several members of the local CCO county advisory councils, a subcommittee was formed to address the need for a comprehensive children's assessment as well. The committee received a copy of a Children's Health Assessment (Ages 0-11) from the Hospital Council, met, and developed an assessment consisting of 80 questions. The assessment will consist of a mailing to parents of children in this age group and a convenience assessment in person to families utilizing WIC, Head Start, Healthy Families, and other home visiting programs.

The cost of this assessment by the Hospital Council of Ohio will be \$26,200. To date we have commitments to pay for this assessment from Umatilla County (\$6,000); Blue Mountain Early Learning Hub (\$5,000), Morrow County Court, and the Oregon Community Foundation Grant (\$2,500) – which brings us to \$14,500.

3 Hubs (Clackamas, Multnomah, Washington) + 2 CCOs (FamilyCare, Health Share) = 1 Plan

Relationship building investment decreases over time

Task accomplishment investment increases over time

HOW TO BUILD A STRATEGIC PARTNERSHIP from a business perspective

1. FILTER

- Filter candidates based on your pre-selected factors such as existing relationships, size, strategic relevance, or complexity.
- Select a potential partner by looking at the potential strategic value to be had and the emotional and cultural fit between the organizations.
- Define a first-pass business case to test how likely it is that the expected value will materialize and what it will take to reach the partnership destination.

2. PREPARE

- Select a Strategic Partnership Manager who will lead the nascent partnership and be the point of contact in your own shop and between your organization and the target partner.
- Manage the target as a strategic partner so that your whole organization learns of the new joint mission and behaves in sync with the objective of the partnership.
- Agree internally on the partnership strategy by articulating the “story” of why the organizations should partner, the potential value to be drawn from the alliance, the cooperation plan and the key navigation milestones for the partnership. Odd though it may seem, for it to be successful, this step must be conducted without interacting formally with your potential partner.

3. ENGAGE

- Engage with the partner now that all of your background work is done. You can be confident going forward because you’ve learned much about them, understand and believe in the mutual value you’ll generate and know to a great extent how you will proceed.
- Deepen your understanding of what aspects or processes this partnership are most appealing to your potential partner.
- Jointly define and agree on a strategic cooperation framework, the step when both organizations will declare being strategic partners.

4. BUILD

- Syndicate the cooperation by formalizing the arrangement and broadly informing internally and externally.
- Select the remainder of the team so that the strategic partnership has adequate levels of human capacity and capability.
- Set up the joint workstreams with the active involvement of the business areas most crucial to the partnership’s mission.

5. TRANSFORM

- Execute together, with the teams from both organizations working closely together on the workstreams set up earlier.
- Deliver “transformational” value, the original destination for the partnership which is strategically important, at scale and cutting-edge to the partners. A well ran strategic partnership will deliver consistently much more value than expected.
- Expand to new areas as new possibilities and ambitions emerge from the established partnership the mutual trust and track record.

3 Hubs (Clackamas, Multnomah, Washington) + 2 CCOs (FamilyCare, Health Share) = 1 Plan

Relationship building investment decreases over time

Task accomplishment investment increases over time

HOW TO BUILD A STRATEGIC PARTNERSHIP from our experience

1. FILTER

We each knew we needed to partner with each other so that part was easy. Inside each of the 5 partner organizations we thought about what we could gain from working together and what we needed to do to get there. And we sort of circled each other wondering how to get started. We used that time to get to know a bit about each other—how the culture and organizational hierarchy worked, what the vision and mission was, hopes and fears, working styles, etc. We knew we liked and respected each other’s work, which was important.

2. PREPARE

The hubs got together and compiled a list of all they were working on, thinking about areas that might be of mutual interest to the CCOs. The CCOs met with hubs individually to find out what they were doing and to see where there was overlap. It was hard to grasp the full story of each of the partners. We didn’t all speak the same jargon and our definitions of problems didn’t always line up. We made sure the potential partnership matched core aspects of the work done by each partner. We each had our own stories of how this would work and benefit us and we all had the strong idea that we would do better if we worked together. We asked our respective facilitators (OHA and ELD) to broker a connection for all five of us.

3. ENGAGE

All five partners met together. A member of the group volunteered to facilitate and the group agreed to share the meeting work load. We met several times and built a list of all the things we could do together then prioritized them by whether we could drive change in the next 18 months or 2-5 years and selected two to start with: increase developmental screening rates and on-time kindergarten registration. In the process we learned more about how each partner works and what they value. And we got more excited about what we could do together.

4. BUILD

We’ve picked two ambitious, complex goals. We’ve added people to the team who have expertise and capacity around these goals. The hubs wrote the partnership work into their strategic plans. The CCOs are including the work in their larger thinking. We keep looping back to learn more about each other as new facets of the common work unfold. The business pros recommend to “Set up the joint workstreams with the active involvement of the business areas most crucial to the partnership’s mission” and this is where we are going.

5. TRANSFORM

Check back with us on this! We’re looking forward to this stage but are wisely working our way there. It’s tempting to jump straight to action but we have been around the block and know the value of “going slow to go fast” as they say in collective impact world.

Our Region	The Early Learning Hub of Linn, Benton & Lincoln Counties mirrors the service areas of DHS, LBL ESD, and IHN-CCO to maximize opportunities for the integration of early learning services.
The History	Linn-Benton Community College was selected to be the backbone agency for our hub because of their long history of offering family supports in the community. LBCC is also the fiscal agent for our CCR&R and our OPEC Hub. Together with the Early Learning Hub, these three programs make up the Family Resources and Education Center at LBCC. This allows for ongoing communication, planning, and leveraging of resources to provide quality programs and services in Linn, Benton and Lincoln Counties.
Our Governing Board	The Early Learning Hub of Linn, Benton & Lincoln Counties Governing Board includes cross sector representation from decision-makers in all three counties. Our board of 23 members includes sector representation from parents, early childhood, K-12, business, health, and social & human services. Each county has a representative for each sector and there are five standing seats for representatives from LBCC, DHS, the Confederated Tribes of Siletz Indians, LBL ESD, and IHN-CCO.
Back Bone Alliance	<p>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.</p> <p>Roles and Responsibilities of Backbone Alliance</p> <ul style="list-style-type: none"> • 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
The Need	Hospital leaders identified a need for centralizing the registration process for prenatal and sibling preparation classes for expectant parents. This request prompted interest in co-locating this function with the existing classes and resources offered by the region's Parenting Education Hub as well as the Early Learning Hub, allowing for more robust, comprehensive and on-going engagement of parents, starting with expectant parents.
The Project	<p>Design an integrated process for reaching out to all pregnant parents and families with newborns in order to assess needs for prenatal and parenting education, make appropriate referrals and enable the use and collection of ASQ screening. Leverage and align existing services to create county "hubs" for early learning resources. The development of this project has included gathering key partners (IHN-CCO, four Samaritan Medical Center, LBL Early Learning Hub, LBCC Parenting Education and Family Connections) to assess interest and potential next steps. A work plan was submitted to OHA to utilize transformation dollars to access facilitation for our process through Oregon Public Health Institute. Next steps include;</p> <ul style="list-style-type: none"> • Mapping current processes for prenatal and parenting class registration and delivery • Inventory of related programs and services for expectant and new parents • Design integrated process for prenatal and parenting education • Develop marketing materials to promote the program

ASQ-3 Developmental Screen Data Share Project

October 2015

Objective

Create a pathway to bring ASQ-3 developmental screen information from early learning providers to WVCH medical providers.

Project Summary

In recent years, the identification of children who are at risk for developmental, behavioral or social delays has emerged as a shared priority for early learning and primary care providers. While the increased emphasis on developmental screening has enhanced the number screens administered in the community, it has not always improved care coordination across systems. In some instances, families are being asked to complete duplicate screens in multiple locations with little indication of how this information is being used. Willamette Valley Community Health (WVCH) and the Marion & Polk Early Learning Hub (MPELH) recognize the burden this can place on families and have developed a mechanism to share screening information across systems.

Under this new initiative, early learning providers are able to share ASQ-3 results WVCH by inputting results directly into the primary care case management platform. This ensures that children do not receive duplicate screens and have appropriate follow-up if identified as bring at risk for developmental delay. Expanding access to this platform is the first step in creating a process that enables both early learning and medical providers to access information that is critical to supporting early childhood development. While future activities may focus on developing two-way communication, both WVCH and the MPELH agree that this initial development represents a significant step towards a more integrated system supporting children in Marion and Polk counties.

To support this initiative, early learning providers have modified their release of information to indicate that the ASQ-3 will be shared with WVCH primary care providers. Additional safeguards have been put in place to ensure HIPAA compliance, including comprehensive training for all staff accessing Personal Health Information (PHI) and confidentiality agreements between WVCH and all participating early learning providers. Collectively, these steps help ensure that privacy is adequately safeguarded and all families and participating organizations feel comfortable with the process.

A process that would enable participation by smaller early learning providers is also in the works. The current initiative focuses on larger organizations that have access to CIM and sufficient staffing to support the documentation of developmental screens.

Current Partners

Primary Early Learning Organizations conducting ASQ developmental screens

- Willamette Education Service District (WESD)
- Salem/Keizer Early Head Start/Head Start
- Community Action Early Head Start/Head Start
- Family Building Blocks (FBB)
- Oregon Child Development Coalition (OCDC)

Contact

For more information, contact:

Lisa Harnisch, MPELH Executive Director

Stuart Bradley, WVP Director of Quality and Operations



where great stories begin™

Reach Out and Read Oregon

ROR is an evidence-based program preparing our youngest children to succeed by partnering with medical providers to prescribe books and encouraging families to read together.

The Problem

- 40% of OR children enter Kindergarten without the necessary tools they need to learn to read.
- Oregon ranks 37th among 50 states for 4th grade reading standards.
- 40% of Oregon children live in low-income families.
- 60% of low-income families own no children's books.
- Children who hear fewer words during early childhood start school behind their peers and miss the opportunity to achieve their potential.

The Program

- Reach Out and Read medical providers teach parents about early literacy and the importance of reading aloud with their child.
- Reach Out and Read begins at birth, continuing through age five, with special emphasis on children in low-income communities.
- Developmentally appropriate books and guidance are given at each well-child visit.
- Healthcare providers can reach over 95% of children during the period of critical language development in the first three years of life, years before they enter the classroom.

Outcomes

- Reach Out and Read is a proven, **evidence-based intervention** supported by **15 independent published studies**.
- Reach Out and Read results in **improved early literacy and improved parent-child interaction**.
- Children served by ROR
 - perform up to **six months ahead** of their peers on language tests
 - enter Kindergarten with **larger vocabularies and stronger language skills**
 - have a home library of at least **10 children's books** where sometimes there were none
 - **read together more often** with their families
- Parents served by ROR
 - report **reading with their child as a favorite activity** more frequently and are **four times more likely to incorporate reading** aloud with their children into their daily routine (**10 times in families where English is not the primary language**)
 - learn new ways to **stimulate their children's literacy development** and are supported as their **children's first teachers**
- ROR **improves developmental milestones** and **increases readiness to succeed** in school.

THE ANNUAL IMPACT:

113 OREGON SITES. 69,000 CHILDREN AND FAMILIES SERVED. 139,000 WELL-CHILD VISITS AND BOOKS DISTRIBUTED. REACH OVER 26% OF OREGON CHILDREN AGES 0-5

Early Literacy in Oregon's Communities

Yamhill CCO & Early Learning Hub

In the Yamhill CCO/Early Learning Hub, we have engaged in several projects to support early literacy, including Read and Feed in several soup kitchens. In this program, volunteers read to children who come for a meal and give them a copy of the book to take home with them. We also invested in extended summer library hours in our public schools as well as in the SMART (Start Making a Reader Today) program, in which adult volunteers read to children within the schools. We also supported the Imagination Library, which sends one new book per month to the home of any child age 0-5 who requests it. We conducted a literacy program with Fostering Hope's Neighbor Connector, in which each child who enrolled got a new book once a week through the summer, in exchange for writing a short paragraph or doing a drawing about the story. And we currently have a partnership with Linfield College, in which an intern is setting the groundwork to establish lending libraries in high poverty apartment complexes.

We are also invested in Reach Out and Read. We have partnered with five clinics to implement this valuable program in our community.

Contact: Jenn Richter, Early Learning Coordinator, at jrichter@yamhillcco.org or call 503.376.7421. For a clinical perspective, contact Dr. Peg Miller at miller@PMCMAC.com.

Marion & Polk Early Learning Hub, Inc.



Marion & Polk Early Learning Hub, Inc. (MPELH) is partnering with 18 medical providers in the Marion and Polk County to bring Reach Out and Read to patients in the participating clinics. Reach Out and Read provides a unique way to connect kindergarten readiness with the health system. Doctors have an opportunity to share the love of reading with patients, as well as discuss the importance of dialogic reading. This provides another opportunity for medical providers to interact with the child and family and focus on developmental milestones in a unique way. Families are provided an age-appropriate book for the child.

MPELH worked with Marion Polk Medical Foundation in the initial recruitment and training of medical providers not already participating in the program. Marion & Polk Early Learning Hub is supporting the purchase of books for the clinics and continues to include this as a literacy and connections with health care strategy.

Contact: Lisa Harnisch, lharnisch@earlylearninghub.org

