

Year 3 Pediatric Obesity Mini-Collaborative Improvement & Innovation Network (Mini-CoIIN)

State Team Lead Interviews
Baseline Report
May, 2017

University of Washington
Center for Public Health Nutrition

Donna B. Johnson, PhD, RD
Mary Podrabsky, MPH, RD
Tori Bradford, MPH, CHES



Table of Contents

I. Purpose	3
II. Methods.....	3
III. Findings	3
State Projects and Teams.....	3
Potential Reach of Projects.....	8
Team Skills and Knowledge Levels.....	8
How Mini-CollN Acts as a Catalyst and/or Facilitator of Other ECE Work.....	10
Resources: Feedback about Information Packet	11
Barriers and Concerns.....	11
Other Thoughts.....	12
Summary.....	14
IV. APPENDIX.....	15
Interview Guide.....	15

I. Purpose

The purposes of the baseline interviews for the third year of the Pediatric Obesity Mini-CoIIN were to get a sense of reach and scale of state team projects; learn about the composition of and current knowledge and skills of state teams; understand initial plans for addressing the CDC Spectrum of Opportunities; understand how the Mini-CoIIN may facilitate other early care and education (ECE) work at the state level; learn more about new and existing partnerships; and learn about needed resources and challenges faced so far. The information gathered from this evaluation will help the Planning Committee design future training webinars, provide necessary support to states, and establish a baseline for this year’s efforts. The state work covered in this report is specific to the work done through participation in the Pediatric Obesity Mini-CoIIN and is not a comprehensive report on obesity prevention work done in ECE settings.

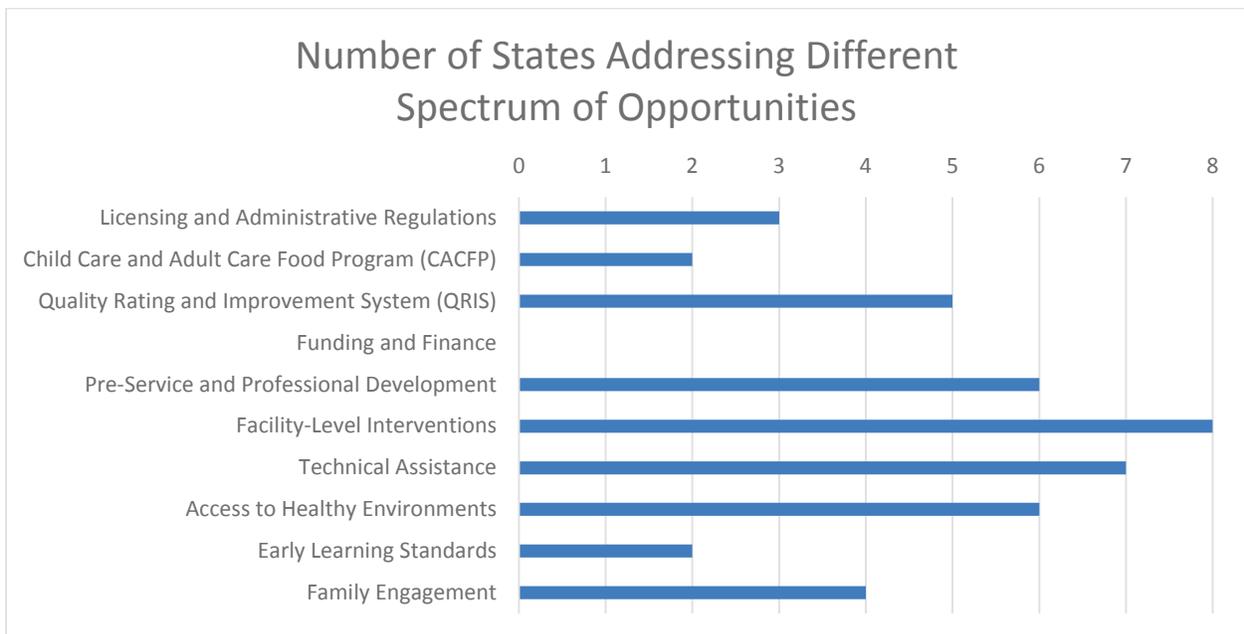
II. Methods

Telephone interviews were conducted with the ten state team leads March 27-April 3, 2017. The leads were provided with interview questions for review ahead of time. All ten leads were interviewed, with two co-leads from Ohio also joining in that interview. The duration of the interviews averaged 34 minutes and ranged from 20 minutes (LA and ND) to 55 minutes (AR). The three new states that are supported with funding from Nemours (IN, MO, and KY) were not included in this evaluation activity.

III. Findings

State Projects and Teams

Team leads were asked to describe their teams and to briefly describe their current plans to address the 10 Spectrum of Opportunities.



Ongoing Mini-CoIIN States

Arkansas

Arkansas plans to continue to revise and expand distribution of their curriculum kits, which encourage adoption of evidence and best-practice-based nutrition and physical activity strategies. A new focus area for them this year is the development of an evaluation plan for the kits. Spectrum of Opportunity areas to be addressed by Arkansas are:

- Pre-service and professional development
- Facility-level interventions
- Technical assistance
- Access to healthy environments

Arkansas Project Team

At the beginning of the project, all members were collaborating for the first time and except for one member who appeared at the same meetings from time to time, all members were new partners to the state team lead. Now entering year three of the Mini-CoIIN, Arkansas' team remains intact, with the exception of one member lost due to her taking another position. They gained two members that bring needed skills to their team. One member works with CACFP and is an expert in the area of child care food. The other new member is a professor at a local medical school who brings program evaluation experience to the project team.

California

This year, California is continuing to focus on revising and adding additional web-based training resources that help newly licensed child care staff meet requirements for nutrition training included under a new California law. Along with previously developed materials, these resources will be added to the web site that is used in their state to train instructors and child care providers. Spectrum of Opportunity areas to be addressed by California are:

- Licensing and Administrative Regulations
- Pre-service and professional development
- Technical assistance
- Access to healthy environments
- Family engagement

California State Team

Several of California's team members have expressed uncertainty about their ability to continue to participate, and members participate at various levels. Most still express interest in continuing to work with the state team in some capacity. California has a stable core team and two new partners who have goals to work with child care included in their Title V plans, have joined the team. The team lead worked with many of the members on past contracts and projects, and the Mini-CoIIN provided an opportunity for collaboration among all of them toward a common goal.

Louisiana

In their ongoing efforts to help early childhood centers implement strategies to meet screen time regulations, Louisiana is purchasing playground stencils to enhance existing toolkits. The stencils will be piloted and distributed to centers as a strategy to increase physical activity. Spectrum of Opportunity areas to be addressed by Louisiana are:

- Licensing and administrative regulations
- Facility-level interventions
- Technical assistance
- Access to healthy environments

Louisiana State Team

Louisiana lost one state member who took another position that did not align with Mini-CollN work. Once hired, the new person who replaces this member will likely join the team. They gained another member who is a researcher from a local research institution. While the team members previously worked with each other in different ways, the Mini-CollN brought them together as a group for the first time.

North Dakota

North Dakota's project focus this year is developing a train-the-trainer curriculum that is based on the companion guides they developed to address nutrition and physical activity-related learning guidelines. Spectrum of Opportunity areas to be addressed by North Dakota are:

- Pre-service and professional development
- Facility-level interventions

North Dakota State Team

North Dakota lost one team member due to a job change, but they gained three new members, including one new member who was their state 1305 coordinator. The team lead was new in her position when the Mini-CollN started so all of the members of the team were new partners to her. Some had worked together before, but others were also brand new to their positions and the Mini-CollN provided an opportunity to connect new people to a network of others working in ECE. Team members are all part of a state wide collaboration that focuses on nutrition and physical activity in early care settings. In addition to Mini-CollN work, the members work together on other projects that stem from this state wide collaboration.

Ohio

The Ohio team is focusing this year on developing recommendations to add obesity prevention standards to their state QRIS system. Spectrum of Opportunities addressed by Ohio are:

- Quality rating and improvement system
- Pre-service and professional development

- Facility-level interventions
- Access to healthy environments
- Family engagement

Ohio State Team

Ohio's team lost two members due to job changes but gained two members representing a local resource and referral agency and a public health associate assigned from CDC. Ohio's team members worked together before, but it was the Mini-ColIN that got them to connect with other agencies. They had no prior relationship with Child and Family Services before the formation of the Mini-ColIN.

Oregon

Oregon is continuing to identify non-CACFP participant centers and targeting training and outreach efforts to increase CACFP enrollment. Spectrum of Opportunities addressed by Oregon are:

- Licensing and administrative regulations
- Child care and adult care food program
- Technical assistance

Oregon's State Team

Oregon's team has gained new members within CACFP and the Early Learning Division. These members were added because of their specific skills that are valuable to the project. Oregon's team members had worked together before with the Department of Education and Early Learning Division on projects; during partnership meetings; and during regulation review.

Wisconsin

Wisconsin is focusing this year on dissemination of the modules they developed last year that address nutrition and physical activity, and are now included in the Active Early and Healthy Bites (AEHB) toolkits. They plan to utilize the library system as a vehicle for distribution. Spectrum of Opportunities addressed by Wisconsin are:

- Child care and adult care food program
- Quality rating and improvement system
- Facility-level interventions
- Family engagement

Wisconsin's State Team

Wisconsin gained two team members this year. One represents an initiative that focuses on collective impact principles for nutrition and physical activity, the other represents Wisconsin's SNAP-Ed program. Although specific members have changed, organizations have continued providing active representatives. The team's core members have been stable. The Wisconsin Early Childhood Obesity Prevention Initiative (WECOPI) is a 10-year old collaborative that includes state departments, child care organizations and medical professionals. The Mini-ColIN operates in effect as a sub-group of this larger

initiative and members have worked together on a variety of issues and initiatives including licensing and the development of resource documents and toolkits for ECE settings.

New Mini-CoIIN States

Iowa

Iowa aims to develop a web-based toolkit that promotes best practices in Farm to Early Care and Education. Spectrum of Opportunities addressed by Iowa are:

- Quality rating and improvement system
- Facility-level interventions
- Technical assistance
- Access to healthy environments

Iowa's State Team

Each of Iowa's team members serve on a farm to ECE advisory committee and the connections that each member has will help reach the project goal of developing and sharing the toolkit. Their farm to ECE partnership happened prior to the development of the Mini-CoIIN, but this work helps bring a cohesiveness to the efforts and keeps individuals from working in silos.

Oklahoma

Oklahoma is focusing efforts on integrating NAPSACC into existing technical assistance networks, including packaging training materials into train the trainer style modules and identifying or developing hybrid or online training activities. Spectrum of Opportunities addressed by Oklahoma are:

- Quality rating and improvement systems
- Pre-service and professional development
- Facility-level interventions
- Technical assistance
- Early learning standards
- Family engagement

Oklahoma's State Team

Oklahoma's team members include representatives of key agencies working in ECE who work in areas of technical assistance, training, licensing and others. Some have worked together in the past, but others are working together for the first time as a result of the Mini-CoIIN. The composition of the team provides the professional input needed for a well-rounded project and will help assure buy-in which will facilitate implementation.

Pennsylvania

The Pennsylvania team is working to enhance and broaden the utilization of a nutrition and physical activity-focused toolkit and promote its use among QRIS coaches for ECE providers participating in their QRIS program. Spectrum of Opportunities addressed by Pennsylvania are:

- Quality rating and improvement system
- Pre-service and professional development
- Facility-level interventions
- Technical assistance
- Access to healthy environments
- Early learning standards

Pennsylvania's State Team

Most team members have worked together and participate in a statewide workgroup that addresses nutrition and physical activity in ECE settings. Members represent Head Start, CACFP, QRIS and technical assistance. Member roles will include providing feedback on reach and how to best enhance the toolkit and provide the technical assistance to carry out their plan. Their QRIS system is currently under revision, and having QRIS representation at the table will help assure communication and partnership with the office of Child Development and Early Learning.

Potential Reach of Projects

Nine of the ten states were able to estimate the total number of licensed programs in their states. The numbers range from 1,400 to 7,600, with a total across all nine states estimated at more than 37,000 licensed programs.

Most states had difficulty providing a projected project reach: the number of programs they expected to reach within their state with their Mini-CoIIN project. Difficulty providing estimates usually was due to the nature of or the current stage of their project. Those that provided an estimated reach include:

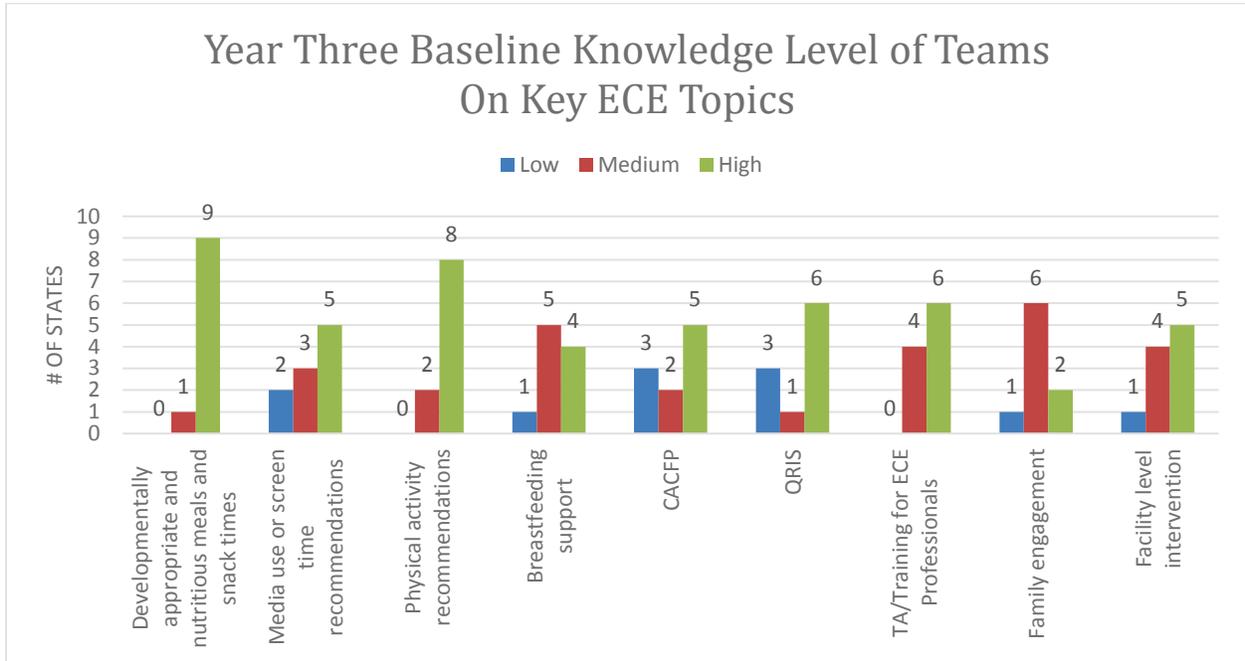
- Arkansas: Projected reach is 539 out of 2,300 programs, but they feel that this is likely an underestimate.
- Iowa: Projected reach is 30 out of 5,000 programs, with additional distribution of toolkit planned with Kellogg grant.
- Ohio: Projected reach is 1,600 programs during initial phase that focuses on licensed programs participating in QRIS. They anticipate reaching all 7,650 centers eventually.
- Oklahoma: Projected reach is 1,534 programs out of 3,343.
- Wisconsin: Projected reach is 400 out of 4,008 programs.

Team Skills and Knowledge Levels

Team leads were asked to state whether they felt that their team had high, medium or low levels of knowledge and skills for specific ECE topics. While not every member of the team had high levels of knowledge or skills regarding the specific topics, the members brought a variety of skills and knowledge and at least one team member was ranked as highly skilled or knowledgeable in each area.

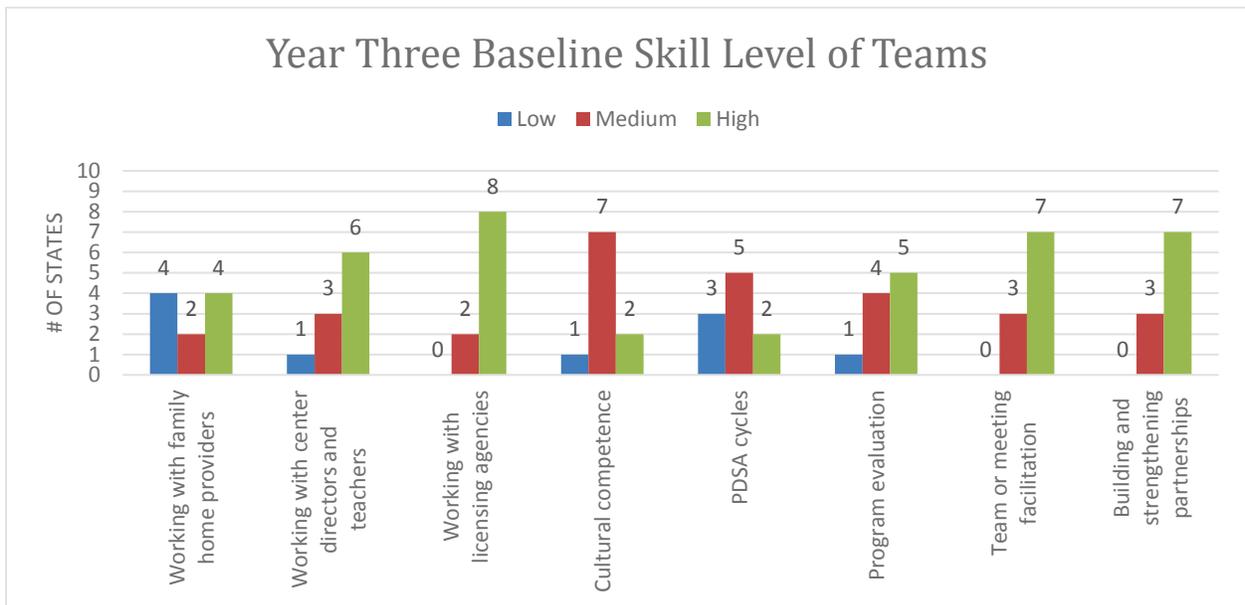
Knowledge

Most leads ranked their teams as highly knowledgeable about developmentally appropriate and nutritious meals and snack items; physical activity recommendations; QRIS and TA/Training for ECE professionals.



Skills

Most leads ranked their teams as highly skilled in the topics of working with center directors and teachers; working with licensing agencies; team or meeting facilitation and building and strengthening partnerships.



How Mini-CoIIN Acts as a Catalyst and/or Facilitator of Other ECE Work

State leads were asked to describe to what extent the Mini-CoIIN work serves as a catalyst or facilitator of other ECE-focused work in their state; a few common themes emerged.

Mini-CoIIN Strengthens and Builds Partnerships with Key ECE Players

Several states discussed how the Mini-CoIIN project helped them strengthen their existing partnerships, and many already have, or plan to make, new partnerships over the course of the project. States are currently working with a variety of other ECE players both on and beyond their core state teams, including Farm2School, universities and extension offices, non-governmental organizations, Head Start, county level government and health departments, coalitions and work groups, Accountable Communities of Health, CACFP sponsoring organizations, Child Care Resources and Referral Agencies, Early Learning Departments and licensing agencies.

Many states are starting or anticipate developing new partnerships this year because of the Mini-CoIIN projects. Some of these include new counties and local public health departments, CACFP programs and Team Nutrition, extension offices, Child Care Advisory Council and Children Hunger Alliance, a tribal child care association, the library system and oral health program, and Child Care Resources and Referral Agencies. A few states are also reaching out for new partners such as a web content designer, someone for storytelling support, a provider or community based person, and a facilitator.

State leads described how the Mini-CoIIN project helped them connect with partners and work outside of their silos. Often the same players are working together on other ECE related projects and the Mini-CoIIN helps them learn about each other and work together better. The three new states talked about how the application process itself and early work is already bringing people together and strengthening partnerships that will hopefully grow beyond the Mini-CoIIN project.

Mini-CoIIN Connects and Builds on Existing Work Happening Through CDC 1305, MCHB Title V Funding, and QRIS

Several states described how the Mini-CoIIN and other ECE work funded through 1305, Title V, or QRIS work, are mutually reinforcing. Sometimes these other projects provide the infrastructure and backbone that facilitates the Mini-CoIIN team functioning, while the Mini-CoIIN projects themselves often build on and expand the other projects in areas where they could not previously go. States also described how the focus on small quality improvement PDSA cycles allowed them flexibility and opportunities to work on activities would not have been able to pursue with just 1305 or Title V funds.

Mini-CoIIN Provides Opportunity to “Dive-In”, Improve, and Connect Work Happening in Different Agencies

In a similar fashion, states also described how the Mini-CoIIN project helped bring all of the various ECE projects and players together. It provided them an opportunity to identify areas where they were weak and connect work in different agencies to enhance everyone’s efforts. Specific examples include identifying where work is already successful (with NAP SACC or other state initiatives) and how to keep the momentum going. The Mini-CoIIN project provides a mechanism to communicate, bring people to the table, and build partnerships around physical activity and nutrition in ECE settings.

Mini-CoIIN Provides New Opportunities to Work with Partners, Leverage other Projects, and Apply for Funding

Some states described exciting opportunities they are now involved with because of their previous work in the Mini-CoIIN. These include deciding to write additional grants about playgrounds and policy work around screen-time, working with a 1305 expansion to go into family home programs, and providing input on state coalition priorities. Because of partnerships the Oregon team made with their licensing agency for the Mini-CoIIN, they were sought after to provide health focused input when their licensing and regulations were under review.

Resources: Feedback about Information Packet

State leads were asked about the most useful content in the Information Packet, and about additional items that should be included. Overall, states appreciated having all of the content in one place and were able to use the packet to help bring new team members up to speed, or when asking people to be involved. States that are now in their second or third year of the Mini-CoIIN commented on how they have not referenced the resources and materials as much this year, and use the packet mainly for important dates and updated information. Overall, states were pleased with the Information Packet.

Most Useful Content

- Other team information
- Team expectations and important dates
- Information on PDSA cycles
- Links to resources and research
- Examples of the Spectrum of Opportunities
- Driver diagram

Things to Add or Other Resources to Provide (or Keep Providing)

- Sample materials from other states
- CDC State Specific reports at the Face-to-Face meeting
- Examples of how other states have used Driver Diagrams
- Resources on Policy, Systems, and Environmental Changes; potentially Tom Frieden's Health Impact Pyramid
- More information on state expectations – where their project should be at what points during the year
- Evaluation resources, questionnaire surveys that are already developed or reasonable evaluation techniques to implement; Practical evaluation tools and techniques for getting feedback from participants
- Ways to communicate with and engage with providers and families

Barriers and Concerns

Team leads were asked to describe barriers encountered so far and any concerns about continuing participation in the Mini-CoIIN. The barriers and concerns mostly fell into a few similar categories: not

having enough time for the project, keeping team members engaged, and delays from needing to depend on other agencies.

Barriers:

- Other competing projects, having enough time to work on the Mini-COIN Project and keeping team members engaged (AR, OH, WI)
- Project-specific delays, often from needing work to be done in different agencies or lengthy bureaucratic requirements (AR, CA, OR)
- Project-specific difficulties, such as struggling with word choice and communication for recommendations (OH) or engaging with families and providers (WI)
- Challenges of putting together a new team, trying to get their rhythm and systems in place (OK, PA)
- No barriers yet (IA, LA, ND)

Other Concerns:

- Finding the time to do the Mini-COIN justice, not let it be squeezed out by other commitments (AR, OH, OK)
- Engaging everyone at the table, even when it isn't their area of expertise; motivating other team members to participate in Mini-COIN activities (OH, OR)
- Necessary steps for project are delayed and outside of their control (i.e. depending on different agency) (CA)
- Unclear of what team expectations are (PA)
- No concerns (IA, LA, ND, WI)

Other Thoughts

Team leads were asked how they plan to incorporate cultural competence into their work after being given this brief definition: "the ability to interact effectively with people of differing cultures." They were also asked if there was anything that we had not covered in the interview that they would like to bring up.

Cultural Competence

The state leads responded to this question in a range of ways, which probably reflects the varied perceptions of what "cultural competence" means. Some states talked about incorporating cultural competence in a very broad sense or regarding the cultural/racial/ethnic make-up of their team without talking specifically about their project. For instance, Louisiana described cultural competence as something that is very important to her agency and so for the team members from the Bureau of Family Health it is always at the forefront. Other states described ways they are considering different cultures in their specific project activities. Examples include:

- Identifying different cultures in communities they are working with
- Using images of different ethnicities and considering different cultures' food and customs in materials they create
- Making sure focus groups are representative of the state's different cultures

- Making tools and material appealing and sensitive to African American and Native populations
- Translating materials into different languages
- Using a family feedback form to gather information on their interests, passions, and needs and if any of the materials do not make sense based on culture or language abilities

A few states described cultural competence as an area where they felt they did not have much expertise or experience and would appreciate coaching on. They anticipate needing to make materials that are appropriate for different communities, but are not quite sure exactly what that will look like in their projects. Several states noted that cultural competence was important in creating communication materials and that they were not quite at this final stage yet in their projects.

States also seemed to have different levels of understanding on the breadth of potential applications for cultural competence. Some were very basic and simply described making sure images reflected different ethnicities and having materials in different languages. Others talked on a deeper level about the need to assure that translations make sense within a specific culture through field tests, careful use of suggestions, and culturally-appropriate examples. A few states brought up some interesting ideas to consider in moving forward with evaluating cultural competency:

- Culture is more than just race and ethnicity. Need to consider cultural differences between family homes and centers, low literacy levels, English as a second language, poverty, geographic regions within the state, rural vs urban etc.
- California uses “cultural sensitivity” because the meaning of attaining “competency” as applied to cultures is unclear.

Other Thoughts

A few states had further comments about the Mini-CollIN:

- It would be helpful to know more about future funding. One ongoing state indicated that they did not know there was going to be another year of funding and while they are happy about it, knowing about the possibility of funding for the next year or two would be helpful as they plan their projects.
- It would be helpful to have some kind of one-page summary of the project’s successes and accomplishments to show their leadership (as well as congress and CDC).
- Thinking about the future of the Mini-CollIN, some leads wondered if the project direction is to go wider (and include more states) or deeper (and provide existing states more money to get more things done)?
- One state expressed enthusiasm about the new partnership with Nemours, but wondered if it change the direction of the whole Mini-CollIN. Concerns were expressed about the potential of becoming divided based on who is funding them.
- State team meetings, when they get their group together, are the most meaningful times and when good dialogue happens among members. The webinars do not bring their teams together much and some are more helpful than others. They noted not getting much out of the state report webinars.

- State leads are excited to be involved and a part of this project and are looking forward to the months ahead.
- It has been helpful for state teams to say that they are part of this network, and to share with their state partners some of the information and skills they get from this Mini-CoIIN network.

Summary

- The Mini-CoIIN helps facilitate ECE state work by building and strengthening partnerships, connecting work done in various agencies and projects, and leads to new opportunities.
- State teams are working in a variety of areas from the Spectrum of Opportunities.
- Partnerships within state teams are a mix of new and previous partners. The Mini-CoIIN helps strengthen these partnerships.
- Altogether, the states touch more than 37,000 licensed ECE programs.
- State team members bring a variety of skills and knowledge.
- The major barriers state teams are facing right now are making sure they have enough time for this project, keeping team members engaged, and delays from depending on other agencies for parts of their work.
- Support for state teams that increases their knowledge and/or skills around the following areas through webinars, sharing on Basecamp, and other avenues would be useful:
 - Breastfeeding support
 - Family engagement
 - CACFP
 - PDSA cycles
 - Program evaluation
 - Working with family home providers
 - Cultural competence
- Continue providing resources like those included in the information packet, shared at the face-to-face meeting, and shared on Basecamp.

IV. APPENDIX

Interview Guide

Mini COLLN State Lead Interview #1 (Mar 2017)

This year we are doing our best to assess reach and impact of the state projects. Please be prepared to provide us with the following information during our interview. If you are unable to get these numbers by the time of our call, we can follow-up with you via email.

- A. How many licensed ECE programs are in your state?
 - a. Are you able to break this number down by type? (i.e. # of licensed Centers, # of licensed Family home Child Cares)
- B. How many (or what portion of) licensed ECE programs do you estimate you will reach with this project?

At the end of the year, we will be asking about actual reach. We realize that for some projects, we will just have to do our best to estimate reach. Please let us know if you have ideas on how to best estimate reach for your state or if there are barriers to getting these numbers for your state or project.

Interview Questions

For new states only

1. How did you choose your individual team members?
2. How do you hope these individuals will help you achieve your project goals?

Former states only

3. Have you gained or lost any state team members this year? Please explain.

All states

4. Please let us know if your team has a **High, Medium, or Low** level of knowledge for the following ECE topics.
 - a. Developmentally appropriate and nutritious meal and snack times
 - b. Media use recommendations for ECE settings and young children
 - c. Physical activity recommendations for ECE settings and young children
 - d. Breastfeeding support in ECE settings
 - e. CACFP

- f. QRIS
- g. Technical assistance/training for ECE professionals
- h. Family engagement
- i. Facility level interventions

Any comments about the level of ECE related knowledge of your team? Other topic areas?

5. Please let us know if your team has a **High, Medium, or Low** skill level in the following areas:
- a. Working with family home providers
 - b. Working with center directors and teachers
 - c. Working with licensing agencies
 - d. Cultural competence
 - e. PDSA cycles
 - f. Program evaluation
 - g. Team facilitation
 - h. Building and strengthening partnerships

Any comments about the skills of your team? Other skills?

6. Have you worked with your team members on past projects (besides the Mini-CollIN) or are these new partnerships for this project?
7. We would like to review the 10 Spectrum of Opportunities and ask you to briefly state whether or not you plan to address them this year. If you intend to address them, please briefly describe your plans to do so.

A) Licensing and Administrative Regulations (Some examples of this opportunity include: requiring that facilities meet specific obesity prevention related standards; incentivizing facilities to meet standards thru reduced licensing fees; requiring ECE providers to obtain training, CE or certification on obesity prevention; incorporating obesity prevention messages and standards into coursework, training and education requirements for providers; requiring facilities to meet CACFP standards even if not participating in program)

B) Child and Adult Care Food Program (CACFP) (Some examples of this opportunity include: providing CACFP training and TA focused on obesity prevention measures; enhancing state CACFP standards to align with other national nutrition guidelines; providing information on how to increase CACFP participation among facilities)

C) Quality Rating and Improvement Systems (QRIS) (Some examples of this opportunity include: design specific obesity prevention-related standards needed to reach higher quality rating; require participating providers to conduct systematic assessment of policies and practices-such as using NAP SACC); include obesity prevention TA activities in the set of materials and resources that programs participating in QRIS receive; incorporate obesity

prevention information into coursework training and education requirements for child care providers)

D) Funding and Finance (Some examples of this opportunity include: explore other funding sources that are over and above allocations received from federal government programs; set standards for federal fund receipt to enhance requirements for obesity prevention activities-or require parent engagement; use MCHBG or SNAP ED \$ to provide training and TA for ECE providers and to help implement obesity prevention interventions)

E) Pre-Service and Professional Development – also referred to as Certification and ongoing training for ECE providers... (Some examples of this opportunity include: Ensure that educators of ECE professionals are trained on obesity prevention approaches and that early childhood degree programs include this in coursework; offer optional coursework in obesity prevention for students interested in learning more about adult and child health; require that state certification and continuing education programs incorporate obesity prevention activities; offer optional training in obesity prevention for providers interested in going beyond minimum requirements)

F) Facility-Level Interventions (Some examples of this opportunity include: facility level interventions that take place directly in ECE facilities aimed at obesity prevention - for example Color Me Healthy; NAP SACC assessment; Eat Well, Play Hard in Child Care; Let's Move! They may seek to alter policies and practices in the facility or to support behavior change in children directly. May be a single component like a curriculum or multiple components that are mutually reinforcing).

G) Technical Assistance (Some examples of this opportunity include: expand opportunities to involve nutrition professionals, PA experts, child care health consultants, cooperative extension etc. in providing TA to ECE providers)

H) Access to Healthy Environments (Some examples of this opportunity include: kitchens, farm to preschool program, joint use agreements-shared resources such as property or facilities like a playground)

I) Early Learning Standards (Some examples of this opportunity include: integration of nutrition and PA requirements into early learning standards)

J.) Family Engagement (Some examples of this opportunity include: efforts to foster active collaboration and commitment between families and their ECE providers)

8. To what extent do you see your Mini-CoIIN work serving as a catalyst or facilitator of other ECE-focused work in your state, including 1305 ECE physical activity and nutrition efforts?
9. Who are some of the partners other than your team members you have or are currently working with on ECE related work? What new partnerships or collaborations do you anticipate making because of this project?
10. Cultural competence can simply be described as “the ability to interact effectively with people of differing cultures.” How will you incorporate cultural competence into your work?

Resources and Support

The purpose of the Information Packet is to provide an overview of the project, background materials, resources, tools and other information to support you and your team in planning and implementing the Mini-CoIIN. Over time, additional information will be provided as needs are identified by the Planning Committee and/or the State Team members.

11. Which content in the Information Packet has been most useful to you so far? Are there additional things that you think should be included?

Concerns/Issues

12. What, if any, barriers have you encountered so far?
13. What, if any, concerns do you have about participating in the Mini-CoIIN?
14. Is there anything that we haven't covered that you would like to discuss?