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APPROPRIATIONS COMMITTEE  
RBA PILOT PROJECT, PHASE IV  
EARLY CHILDHOOD CABINET REPORT CARDS

March 2, 2009





**Appropriations Committee  
RBA Pilot Project, Phase IV  
Early Childhood Cabinet Report Cards**

March 2, 2009

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**INTRODUCTION**



## Introduction to the Early Childhood Education Cabinet's 2009 RBA Report to the Connecticut General Assembly

On behalf of the Early Childhood Cabinet and its member agencies and programs, we are pleased to present our 4th annual RBA report to the Connecticut General Assembly. Along with a Long Island Sound water quality program in the Department of Environmental Protection, the Cabinet's early childhood system development is one of the two original pilot projects for the Appropriations Committee's use of RBA in the budget process.

We deeply appreciate this extraordinary opportunity to promote the well-being, school readiness and early school success of Connecticut's young children using RBA for both public accountability and program improvement. The number of Cabinet programs using RBA has grown from three in 2005 to over 25 in 2009, and we are now working with 18 communities as they apply an RBA framework to their own local B-9 strategic plans.

In prior years, we presented RBA *templates* which – taken together – yielded a rather lengthy package. This year, at the request of the Appropriations Committee, we are piloting the use of short *Report Cards*. While we have found the condensed format challenging, we think we have been able to tell a simple and effective story about where Connecticut stands in achieving the result of “all children ready by five and fine by nine,” how well the early childhood system and its member programs are delivering its services, and whether the customers of those services – primarily the young children of Connecticut and their families – are better off as a result of those services.

We cannot tell you everything you (or we) need or want to know, nor do we yet have the data we need to manage this crucial endeavor as well as we know we should. Under your sponsorship, however, we have made great strides in the last four years, and we hope we may be afforded the opportunity to continue in this vital work with you.

As a final note, we are proud to inform you that Connecticut's early childhood RBA work has been identified by the National Governors Association as an exciting new practice, and we recently presented the RBA framework and our findings at an NGA convening of 30 states working intensively on improving their own early childhood outcomes.

Dr. Mark McQuillan, Commissioner of the State Department of Education  
Dr. Janice Gruendel, Governor's Senior Policy Advisor, Children & Youth  
Co-Chairs, Connecticut Early Childhood Education Cabinet  
March 2, 2009





**TAB 2**

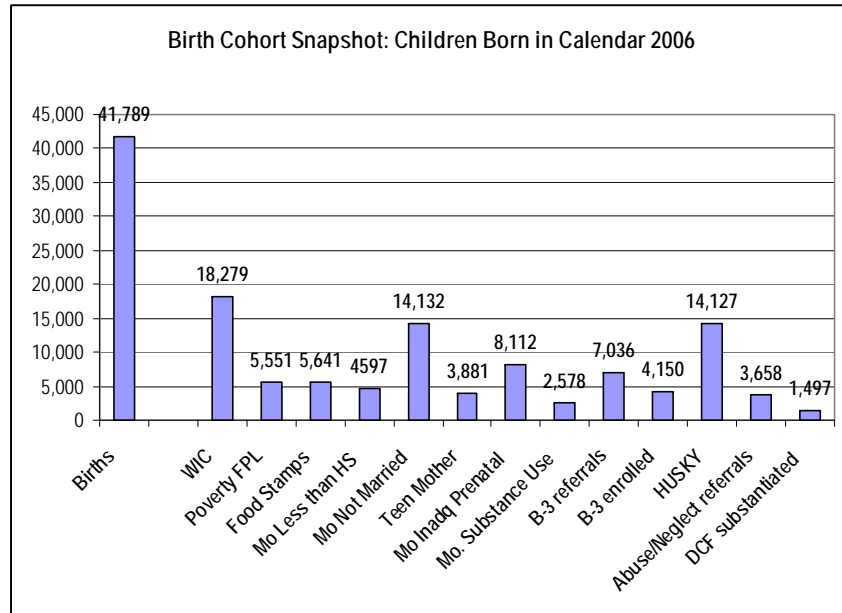
**EC CABINET, GOAL 1: READY BY FIVE**



## Population Report Card: Early Childhood Cabinet

*Quality of Life Result #1: Ready by Five and Fine by Nine:* All Connecticut children are healthy and ready for school success at age 5, contributing to a reduction over time in Connecticut's achievement gap at Grade 4.

### Indicator 1: Cabinet's 1<sup>st</sup> Birth Cohort -- Babies Born in 2006 (NEW)



**Story Behind the Baseline:** Chronic exposure to multiple risks (especially without the buffering effect of a nurturing and capable parent or caregiver) during children's first three years impacts negatively on early brain structure and processing. This indicator presents data across risk categories for the Cabinet's first birth cohort: babies born in 2006 who will generally enter preschool in 2009 or 2010, kindergarten in 2011 and 4<sup>th</sup> grade in 2015. Note that 44% of babies born in 2006 (over 18,000 of the 41,789 births) lived in families at or below 185% of the Federal Poverty Level, more than are reflected in current Free and Reduced Meal Program data at the K-12 level.

Due to systemic data challenges reported later in this document, we cannot determine how many of these children are experiencing sustained multiple risks likely to lead to early developmental, health and learning challenges.

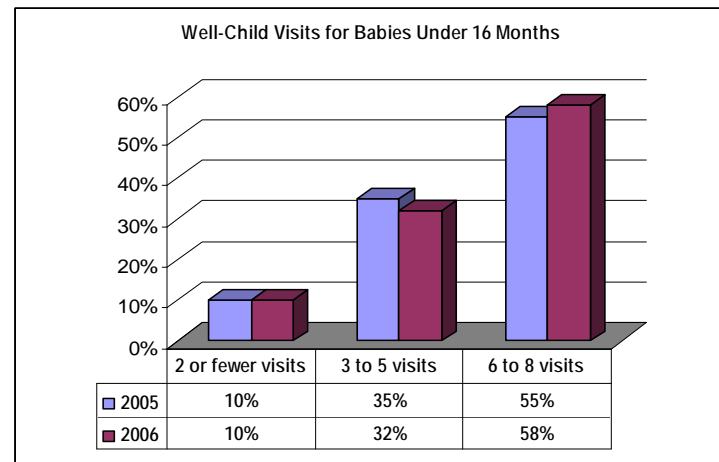
#### Proposed actions to turn the curve:

- As reported under the Cabinet's Goal I Systems Report Card, CT needs to assign unique child identifiers at birth, to be carried across state service agencies. This action will: (a) promote early identification of vulnerable young children, (b) assure

that families receive all services for which they are eligible, and (c) coordinate service delivery to children and families with multiple risks. Secure federal stimulus funding to enable continued data development, interoperability and reporting.

- Coordinate the use of federal stimulus funds coming to CT for Early Head Start and Child Care (CCDBG) to ensure attention to these most vulnerable young children.
- Target pregnant women and new mothers to: (a) address poverty, low education level and substance use/abuse and (b) ensure adequate prenatal care.
- Given the number of mothers without HS degrees or with other literacy and cognitive challenges, coordinate state agency outreach to ensure that all at risk families receive child development and parenting materials appropriate to their reading levels.
- Since children of divorce, domestic violence and abuse/neglect will likely be involved with the judicial system, formalize a partnership with the CT Judicial Branch to provide professional development on the neuroscience of early brain development.

### Indicator 2: Well-Child Health Care for Low Income Children



**Story behind the baseline:** The failure to obtain regular well-child health care and developmental screening can result in lost opportunities to identify and address early development challenges that may impair brain architecture as well as cognitive, language and even social-emotional development. According to federal EPSDT standards, well-

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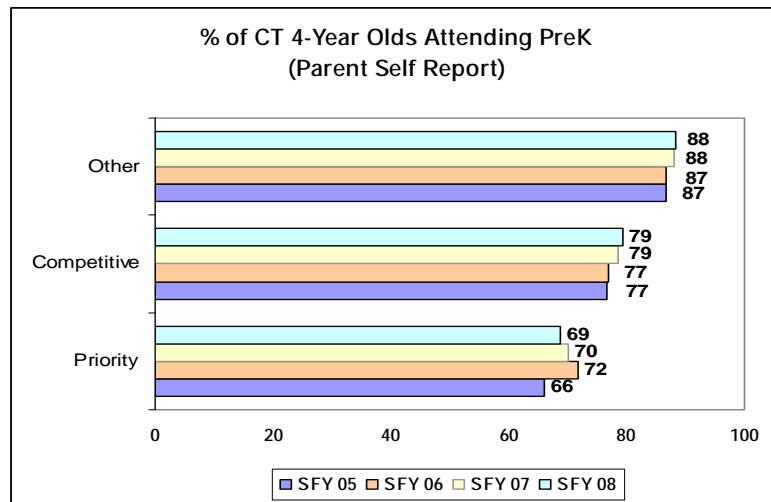
child visits should occur at 2-4 days, at 2 weeks, then at 2, 4, 6, 9, 12, 15 and 18 months of life.

In 2006, 42% of CT infants continuously enrolled in HUSKY did not receive all required visits. Also in 2006, just 58 infants had a record of receiving a developmental screen. In 2007, HUSKY records indicate that just 48 of the 1635 infants continuously enrolled received a developmental screen. In 2007, 76% of children ages 2 to 5 years received at least one well child visit, but fewer than 2% had an encounter record for developmental testing. Among 3 to 5 year olds enrolled in HUSKY in 2006, only 20% received preventive dental care.

### Proposed actions to turn the curve:

- Several initiatives are being implemented to increase HUSKY utilization. SFY 07 data should be reviewed annually to track expected increases in well-child visits for very young children. If parents are required to cover additional costs of child health care in HUSKY, SFY 10 data should be quickly reviewed to determine if this serves as a disincentive to enrollment or participation.
- The Governor's proposed budget for SFY 10 and 11 eliminates funding for ongoing external HUSKY data analyses. State, philanthropic and/or federal funds should be examined as a way to restore HUSKY data analyses and reporting.

### Indicator 3: Trends in Preschool Attendance

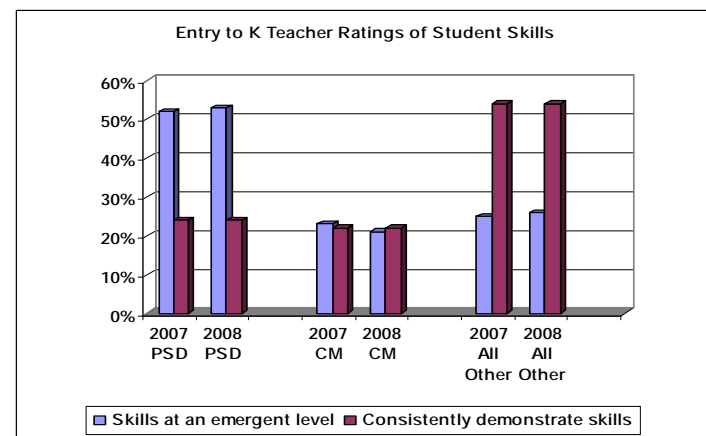


**Story behind the baseline:** This indicator for preschool attendance is based on parental reporting, includes only 4-year old children, does not differentiate among types of preschool experiences (e.g., full-day v. a two-hour play group), and is not verified for accuracy. Despite these challenges, this indicator confirms that a dramatic gap continues to exist in preschool attendance between children in our most economically challenged towns and those from more affluent towns. This indicator does NOT provide information on the effectiveness of the preschool programs these children attended.

### Proposed actions to turn the curve:

- The SDE Pre-Kindergarten Information System (PKIS) and Public School Information System (PSIS) are being examined to determine how they can carry more complete data on the specific preschool attended by entering kindergartners. This information should be extracted and analyzed as part of the Early Childhood Information System (ECIS).
- Work should continue, with consultation from the national Taking Stock Accountability Project, to determine the quality and effectiveness of preschool, beginning with the facilities currently receiving state funding of any kind.
- Next-stage development of the proposed Quality Rating and Improvement System (QRIS) for preschool and child care programs should continue and can be funded by federal stimulus funding available shortly.

### Indicator 4: 2007 and 2008 Skill Assessment of Entering Kindergartners



## Population Report Card: Early Childhood Cabinet

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**Story behind the baseline:** Kindergarten teachers continued their annual October assessment of student skills, according to one of three Performance Levels for each of six readiness domains (Creative; Physical/Motor; Personal/Social; Language; Numeracy; Literacy):

- **Performance Level 1 (PL1):** Students at this level demonstrate emerging skills in the specified domain and require a large degree of instructional support.
- **Performance Level 2 (PL2):** Students at this level inconsistently demonstrate the skills in the specified domain and require some instructional support.
- **Performance Level 3 (PL3):** Students at this level consistently demonstrate the skills in the specified domain and require minimal instructional support

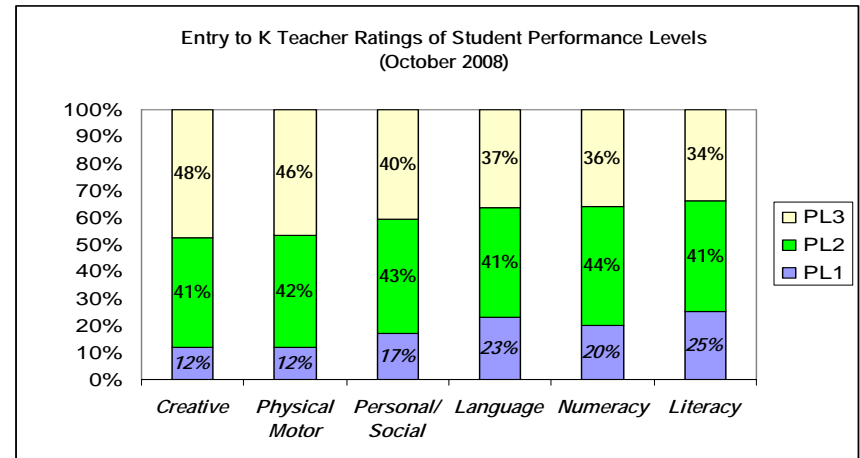
Results from this fall's 2008 Entry to K Inventory show no change from 2007 scores reported in the Cabinet's prior RBA presentation. Within Priority School Districts, just over 50% of entering kindergartners were rated at the lowest skill level. Conversely, just over 50% of students in 110 more affluent districts consistently demonstrated expected skills across the domains. NOTE: Nearly 5,000 entering kindergartners from the Priority and Competitive districts DO demonstrate consistently high skill levels at entry to K.

### Proposed actions to turn the curve:

- Since there will likely be no new funding through the state School Readiness funding Program in the coming biennium, effort must focus on parents to inform them of the knowledge, skills and behaviors expected of entering kindergartners. Partner with: (a) all state agencies now serving vulnerable families; (b) family support and literacy projects reaching parents across the state; and (c) sectors from which parents "naturally" obtain information, specifically the pediatric and faith communities.
- The Cabinet will work with SDE to obtain and analyze data on those children from vulnerable circumstances who do demonstrate higher skill levels at entry to K.
- SDE will specify those commercial curricula already available that correlate with the CT Preschool Curriculum Frameworks and provide that information annually to all preschool programs receiving any state or federal funds.
- The Cabinet, or other early childhood coordinating and accountability entity, will continue to focus effort on assuring age-appropriate development of children from birth to three years such that children *do not enter preschool* with delays, especially in language development

- Work with SDE, DHE and other early education stakeholders *and* TA from the national Taking Stock Initiative to (a) establish the validity and reliability of the current Entry to K Inventory or (b) propose more appropriate child assessment tools for use beginning in the fall of 2010.

### Indicator 5: Snapshot of Entry to K Teacher Ratings by Domain (NEW)



**Story behind the baseline:** In the normal course of development, student skill levels will vary across readiness domains in the first five years of life. However, the fall 2008 Entry to K teacher assessment indicates that just over one third of public school kindergartners consistently demonstrated the expected skills (PL3) in the critical domains of language and literacy. Just four in ten consistently demonstrated personal/social skills such that only minimal kindergarten teacher classroom support would be required. Language, literacy and numeracy were the three domains in which teachers found between 20% and 25% of students at the most basic level of skill.

### Proposed action to turn the curve:

- The skills measured by the Entry to K Inventory are taken from the CT Preschool Curriculum Framework. SDE will establish a formal professional development plan for preschool teachers anchored in developmentally-appropriate pedagogy and based upon this Framework. This plan will focus first on the development of language, literacy and numeracy knowledge and skill development.

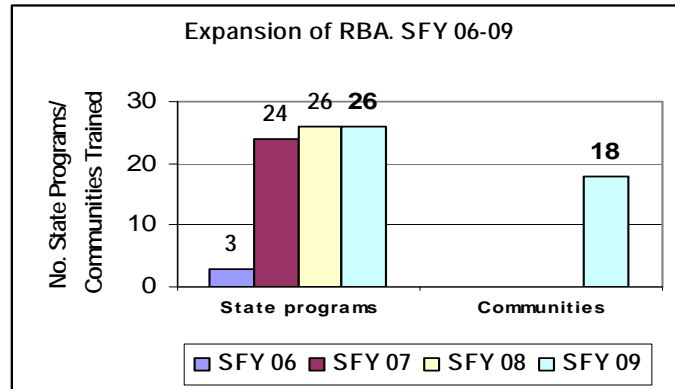


## System Report Card: Early Childhood Cabinet

**System Purpose:** Improve coordination within and across agencies serving children between the ages of birth to five, expand interagency access to essential information, and increase public accountability for existing expenditures and new investment.

**Contributes to Population Quality of Life Result:** All children healthy and ready for school success at entry to K

### Performance Measure 1: RBA Expansion

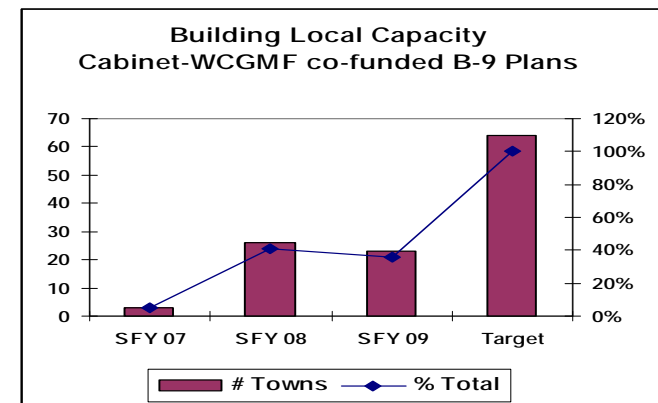


**Story Behind Measure 1:** Use of RBA was chosen as indicator because it reflects the Cabinet co-chairs' continued commitment to the expansion of a results-driven policy approach. In our 1<sup>st</sup> three years, we expanded RBA use 8-fold among Cabinet agencies. This year, our expansion took a different tact. As co-chair of the Cabinet, the SDE Commissioner has implemented RBA throughout the entire agency (increasing the "depth" of RBA penetration). With private funds from the Graustein Memorial Fund, 18 communities were trained intensively in RBA use for the preparation of their own B-9 community strategic plans. This increases the "breadth" of RBA penetration and supports both state-local data-based strategic planning and budgetary decision-making. In addition, we have presented on CT's RBA progress at a national early childhood state convening hosted by the National Governors Association

#### Proposed actions to turn the curve:

- Continuation of funding for the Cabinet's RBA TA is a lower-cost item (\$100,000). With restoration of these RBA funds or the identification of federal stimulus funds for this purpose, we will be able to continue state agency RBA technical assistance.
- Seek a continued partnership with the Graustein Memorial Fund to offer RBA training to the additional 36 communities in the Cabinet's B-9 at risk community cohort.

### Performance Measure 2: Investing and Supporting Local Capacity



**Story Behind Measure 2:** Acting alone, the state cannot "turn the curve" on young vulnerable children's age-appropriate health, development and learning. Sixty-four (64) CT towns have now been identified by SDE as experiencing lower levels of student achievement (19 Priority School Districts & 45 Competitive Municipalities). In a nationally recognized public-private partnership with the Graustein Memorial Fund and the CT Children's Fund, the Cabinet has co-invested state and foundation funds to support community development of B-9 strategic local plans. Selected by a competitive process but limited to the 64 towns identified above, 23 of the 26 communities who began the planning process in 2008 will publish a local B-9 plan by December of 2009. 18 of these communities received the RBA training noted in Measure #1.

#### Proposed actions to turn the curve:

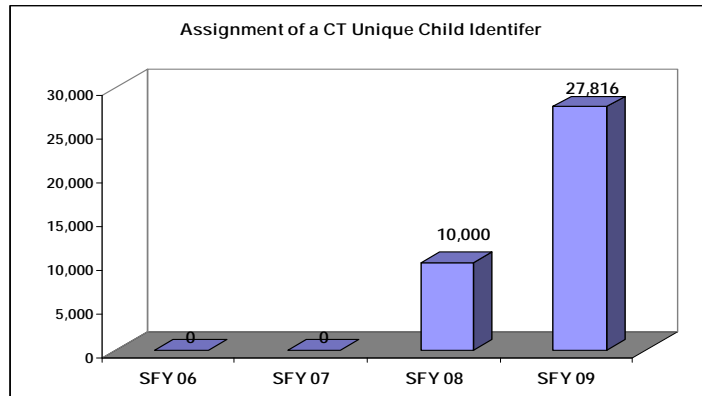
- Of the 15 communities on the SDE Needs Improvement List (Ansonia, Bridgeport, Danbury, East Hartford, Hartford, Meriden, Middletown, New Britain, New Haven, New London, Norwich, Stamford, Waterbury and Windham) **all but two** (Ansonia, and New London) have B-9 strategic plans in development. If SDE funding and/or federal education stimulus funds become available for these towns, it should be possible to build school improvement strategies off these emerging B-9 plans.

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### Performance Measure 3: Data Development



**Story Behind Measure 3:** We chose this measure because it is impossible to make sound public policy without a base of systematic, valid and reliable data. Our 2008 RBA presentation documented systemic but remediable challenges in CT's early childhood data development, interoperability and reporting capability. Over the past 18 months, we have moved forward to build an Early Childhood Information System (ECIS) that crosses state agencies and that can provide desperately needed local data by town. One of the three core components in the ECIS is the assignment of unique child identifiers as early as possible in the lives of young children. In 2008, SDE began to assign its randomly generated unique student id process (SASIDs) to young children enrolled in state-supported preschool programs. In SFY 08, 10,000 SASIDs were assigned to three- and four-year olds. In SFY 09, the total number of preschoolers with unique IDs in SDE databases totaled just over 27,800 (33% of all preschool-aged children in CT). Note: SDE also assigns SASIDs for infants and toddlers enrolled in the Department of Developmental Services B-3 Program. These data are not reported here.

#### Proposed actions to turn the curve:

- Work with the Department of Children and Families to have SASIDs assigned to all young children receiving services provided or funded by DCF. No cost
- Work with the Department of Public Health to develop a MOU with SDE to generate the SASID for all births in Connecticut, beginning on or before January 2, 2010. No or low cost to SDE

- Modify current Cabinet agency data forms to carry the SASID number for children receiving state funded services (DSS, DPH, DDS, DCF and SDE), once it is determined that these B-5 data are not covered by FERPA regulations. Low cost.
- Secure federal funding to continue development of the ECIS through money from the education and information technology categories of the federal stimulus bill. In addition to child id expansion, continue to support the ECE Workforce Data Registry and finish development of unique program identifiers.
- Secure TA the national Data Quality Campaign as one of several states that incorporate B-5 data as part of evolving (and mandated) state K-12 and K-20 longitudinal education data systems
- Secure state, federal or philanthropic support (\$100,000 per year) for CT's continued participation in the University of Massachusetts' data reporting software project. This project has 7 national partners and one state partner, Connecticut. Web-enabled, open software data reporting tools will begin to be available to Connecticut's Early Childhood Investment Initiative in the spring of 2009.
- Based on the Cabinet's 1<sup>st</sup> born cohort study, continue to track the health, development and learning of Cabinet's first target birth cohort, children born in 2006 who will enter K in 2011 and 4<sup>th</sup> grade in 2015.

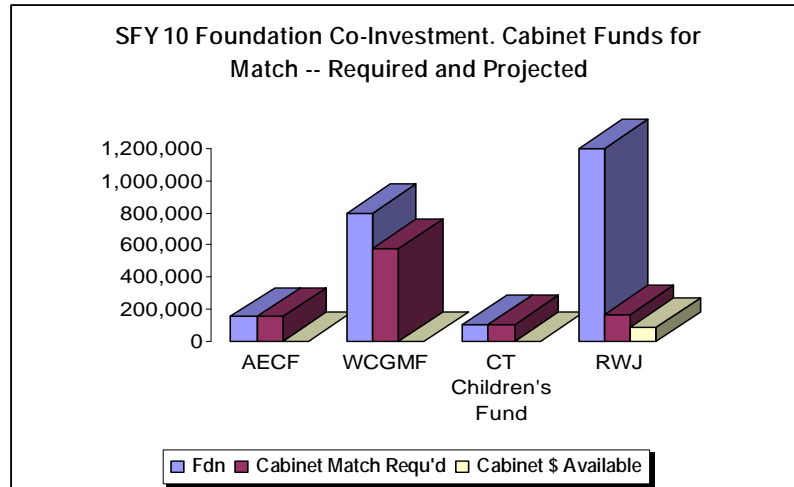


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### Performance Measure 4: Foundation Co-Investment with the Cabinet

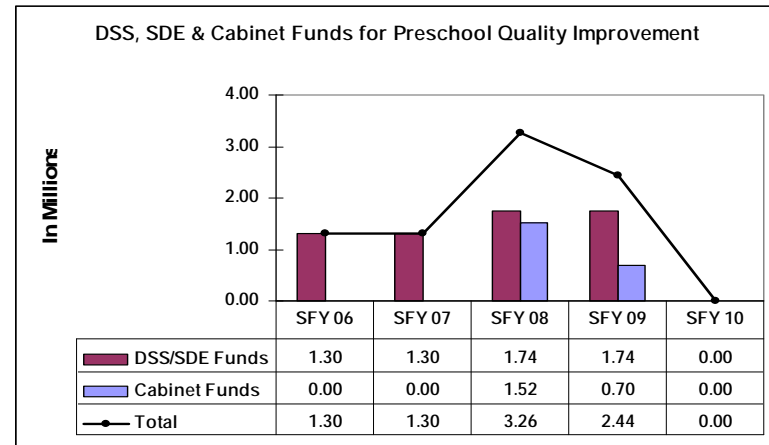


**Story Behind Measure 6:** This measure is important because it reflects our commitment to public-private partnership in children's development and outcomes, through supports to families, communities and the service system. Two national and two CT Foundations seek to partner with the Cabinet for co-investment in the coming biennium: (a) the Parent Trust Fund; (b) Community B-9 plan implementation; (c) Early literacy; (d) Replication of Child FIRST. For SFY 10, \$2.2 million in foundation funds are available. This requires Cabinet matching funds of \$990,000; however, just \$85,000 in SFY 10 cabinet funds will be available (and this is from SFY 09 funds that will roll forward).

#### Proposed actions to turn the curve:

- The Early Childhood Cabinet should identify any funds likely to be unused in SFY 09 and propose legislative authorization to roll them forward into SFY 10.
- Cabinet funding for SFY 10 and 11 should be restored by the amount necessary to secure this private foundation funding. NOTE: This would not require new funds, only that SFY 09 funds be continued.
- A review of federal stimulus funds should be conducted to determine whether dollars could be allocated as state match to these various foundation offers.

### Performance Measure 4: Preschool Quality Improvements



**Story Behind Measure 4:** All of the national research tells us that poor quality preschool programs do not advance early development among vulnerable young children and may even impede or harm that development. The Harvard Center on the Developing Child goes further, advising that we stop funding poor quality programs.

In SFY 08 and 09, the Cabinet invested a total of \$2.2 million in preschool quality improvement. Cabinet funds were utilized to (a) develop ECE workforce and QRIS (quality) plans, (b) conduct ECERS assessments of preschool classrooms receiving new state slots; (c) award quality improvement or enhancements grants directly to local programs; and (d) secure expert assistance in analyzing results. Across all classrooms rated through the SFY 08 and SFY 09 ECERS process, just over 50% were rated as below "good" on the ECERS (5.0 on a scale of 7.0) but many of these were between 4.0 and 4.9. Classrooms were eligible to receive grants of up to \$5,000 based on their ECERS score. Post-award ratings are being conducted now; resulting data is analyzed by Dr. Walter Gilliam, Yale University. Initial results based on as yet small group of classrooms do show a statistically significant increase in ratings (0.7 points).

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**Proposed actions to turn the curve:**

- Secure continued quality improvement through (a) education, CCDBG or Head start federal stimulus funds and/or (b) a reallocation by DSS and SDE of existing slot funds to increase funds for quality improvement
- As required by statute, a Quality Rating & Improvement Systems proposal was developed. Some work to further develop this proposal may be possible by existing agency staff and provider volunteers.

**Performance Measure 6: Results Accountability & Knowledge Development Cabinet Funds Uses and Results**

This final measure attempts to summarize an admittedly complex set of legislative results-accountability mandates and the Cabinet's investments, accomplishments and continued challenges in meeting them. PA 07-03 added a specific set of planning and investment responsibilities to the original legislation establishing the Cabinet in 2005. It also increased funding for the Cabinet from \$400,000 in SFY 05 and 06 to \$4 million in SFY 08 and \$3.55 in SFY 09.

	RBA & Mandated Plans Done	Data Development & Systems	Research & Evaluation	Strategic Communications
SFY 07	50,000	0	0	0
SFY 08	132,000	250,000	-580,000	110,000
SFY 09	150,000	250,000	-430,000	100,000
SFY 08 & 09 Biennial Results	<ul style="list-style-type: none"> <li>• RBA</li> <li>• Acct Report</li> <li>• Workforce Plan</li> <li>• Facility Plan</li> <li>• QRIS Plan</li> <li>• Preschool Reports</li> </ul>	<ul style="list-style-type: none"> <li>• Birth cohort study</li> <li>• ECE workforce registry</li> <li>• Data-flow studies</li> <li>• MicoViz UMASS project</li> <li>• MOA analyses</li> <li>• Project LAUNCH MOA</li> </ul>	Funding cut each year  Studies not done: PreK-K outcomes; Short term ROI; ECE industry study	<ul style="list-style-type: none"> <li>• Strategic Plan</li> <li>• New Website</li> <li>• Parent Initiative</li> </ul>
SFY 10	Funding eliminated	Funding eliminated	Funding eliminated	Funding eliminated

- **Story Behind Measure 6** The lion's share of Cabinet funds in each year was allocated to (a) community and family co-investment, reported earlier; (b) preschool expansion and quality improvement (reported earlier); and (c) the four core components of a results-based accountability and knowledge system: RBA, data development, research and strategic communication. Specific use of funds for results purposes is shown above. The short story behind this measure is that the Cabinet has completed virtually all of its required plans, initiated significant data systems development, and is implementing a strategic communications framework. The major mandate not accomplished was a PreK-K outcomes study, due to repeated cuts in SFY 09 funding. For SFY 10 and 11, the Cabinet's total funding is proposed to be reduced from \$3.55 million to \$210,000 (a 95% reduction). Few if any of these functions can continue without resources.

**Proposed actions to turn the curve:**

- In June 2008, state agencies on the Cabinet adopted a MOU defining actions to support development of a comprehensive B-8 child development system. As a collaborative working body, the Cabinet could move forward to implement this MOU within existing resources.
- Federal stimulus funds from (a) education, (b) Head Start and Early Head Start, (c) CCDBG and (d) Information Technology development coming to CT must be examined for allocation to support these vital accountability functions if state funds are not restored.

**TAB 3**

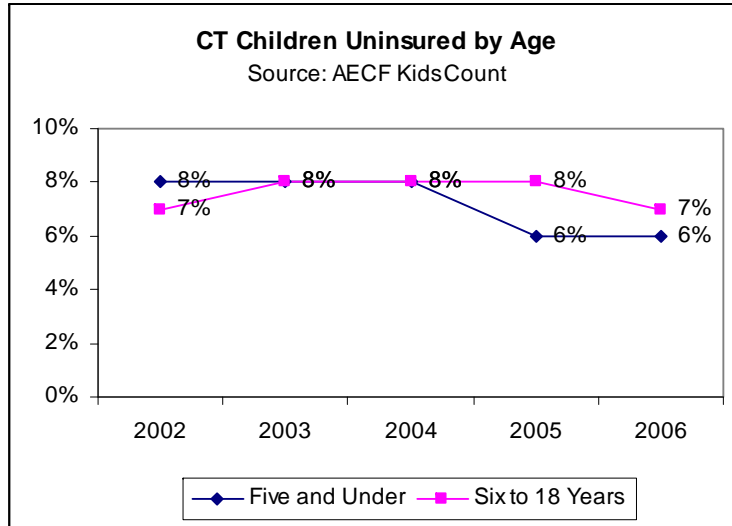
**EC CABINET, GOAL 2: FINE BY NINE**



## Population Report Card: Early Childhood Cabinet

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### Indicator 1: Children's Health Status



#### Story behind the baseline:

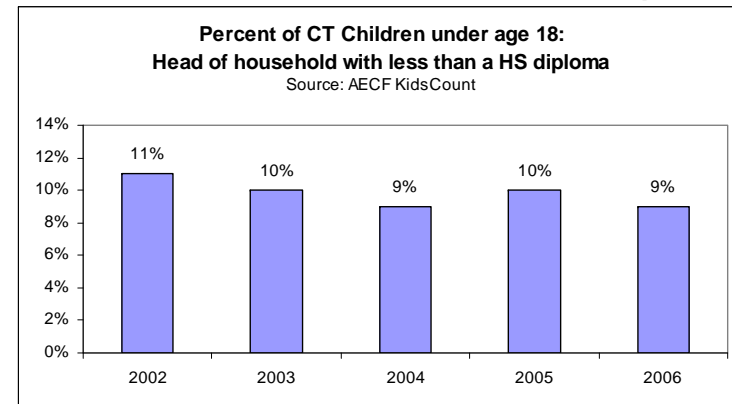
The health of young children demonstrably impacts their ability to learn effectively in school. In some cases, it even prevents them from coming to school. As one example, asthma represents a key challenge for some children, especially in the state's districts with high numbers of urban poor children. At the present time, the Cabinet does not have access to precise data on uninsured children in kindergarten through Grade 3. However, as shown above, it appears that about seven percent of the state's children ages 6 to 18 are uninsured. The estimate of the number of uninsured children in Connecticut is 60,000 youngsters under age 18 (AECF Kids Count Data 2008).

#### Proposed actions to turn the curve:

- Collaborate with state agencies, schools, child advocacy groups and other stakeholders to implement a Coordinated School Health approach, based on the *Guidelines for a Coordinated Approach to School Health*, to address the health and safety needs of children, which includes ensuring that all schools provide access to school and community-based health and mental health services and inform families about HUSKY.

- Explore implementation of comprehensive health care services within schools where children are at-risk that include school-based health and dental centers and adequate school and mental health providers.
- Within available resources, develop a system for collecting and reporting student health data at the local level. The system would be used by schools to track and address the health needs of children and would allow critical data to be reported at the state level.

### Indicator 2: Maternal Education Less than a HS Diploma



#### Story behind the baseline:

The Cabinet's K-3 System Framework indicates that maternal education is one of the best predictors of a child's educational success. Children living with mothers who have less than a high school (HS) diploma have markedly lower school success. The percentage of all children with the head of household with less than a HS diploma declined from 11 percent in 2002 to nine percent in 2006. The number of children (under age 18) in these families has been estimated at 74,000 in Connecticut in 2006 (AECF Kids Count Data 2008).

Connecticut's adult education system enables adults, including mothers, to complete secondary school and attain a HS diploma. This system is mandated in State Statute to be provided through local and regional boards of education and is supported by the State Department of Education. Connecticut is one of few states that offer three pathways for adult learners to attain a HS diploma. The data demonstrate that, for a wide variety of reasons (e.g., program design,

## Population Report Card: Early Childhood Cabinet

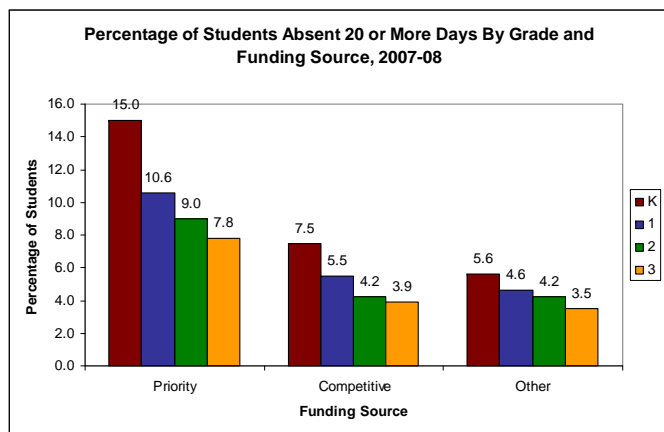
*Quality of Life Result #1: Ready by Five and Fine by Nine:* All Connecticut children are healthy and ready for school success at age 5, contributing to a reduction over time in Connecticut’s achievement gap at Grade 4.

persistence supports), learners in the Adult High School Credit Diploma Program and the National External Diploma Program reflect higher graduation and persistence rates than those in the GED preparation program.

### Proposed actions to turn the curve:

- Based on available resources, expand the Even Start Family Literacy Program, which has shown promising results in improving the educational outcomes for both children and parents. Reference the RBA Even Start Report Card.
- Implement actions delineated within the Adult Education RBA Report Card that will expand secondary school completion pathways and online learning opportunities in order to increase the HS diploma attainment rate of mothers who are enrolled in all secondary school completion programs.

### Indicator 3: K-3 Attendance



### Story behind the baseline:

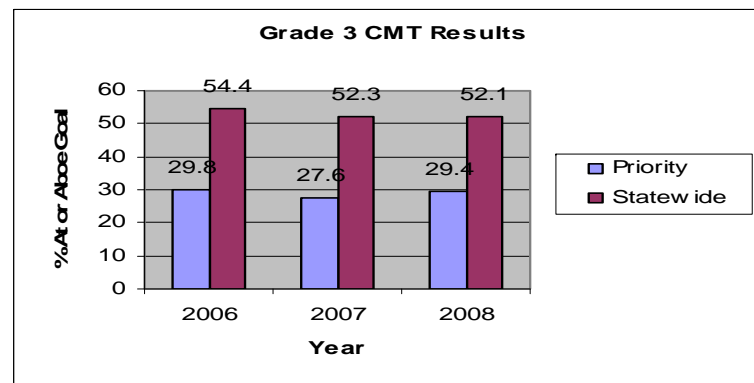
Children need to be in school to participate in and benefit from school instruction. The percentage of students absent 20 or more days is a good indicator of how much time is lost due to multiple absences. Starting with the 2008-09 school year, the State Department of Education implemented a standard definition of what it means to be “in attendance.” This new definition will enable the comparability of attendance data across districts. Note that the data presented in the chart are for 2007-08 and are not based on the standard definition.

The 2007-08 data show that there are considerable differences in the attendance rates among Priority School Districts (PSD), Competitive Grant Municipalities and the rest of the state. There are also substantial differences between grade levels. In the 2007-08 school year, 15 percent of kindergartners in PSD’s were absent 20 or more days, compared to 5.6 percent of kindergartners in Other Districts. PSD’s have the highest rate of absenteeism compared to other districts.

### Proposed actions to turn the curve:

- Re-evaluate attendance patterns across priority, competitive and other districts based on data that are collected using the new standard definition of attendance in order to assist districts in identifying:
  - the causes of chronic absenteeism; and
  - the strategies and practices that can be implemented to increase student attendance in kindergarten through Grade 3.

### Indicator 4: Grade 3 CMT Results



### Story behind the baseline:

The Connecticut Mastery Test (CMT) Reading results were chosen as an indicator because national research has shown that strong reading performance at third grade is a good predictor of later school and life success. Students who are not reading well in the third grade are often on a pathway that includes later school failure, dropping out, teen pregnancy, welfare and prison involvement.

## Population Report Card: Early Childhood Cabinet

*Quality of Life Result #1: Ready by Five and Fine by Nine:* All Connecticut children are healthy and ready for school success at age 5, contributing to a reduction over time in Connecticut's achievement gap at Grade 4.

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Connecticut began Grade 3 CMT assessments in 2007. Statewide, the performance of Grade 3 students stayed consistent with 52 percent performing in the Goal range. Reading achievement by Priority School District Grade 3 students increased in 2008, but they remain out performed by their peers by almost 25 percent.

### **Proposed actions to turn the curve:**

- Conduct site visits of all Priority School Districts as part of the State Department of Education's accountability plan.
- Implement a comprehensive reading test for new elementary school teachers as a condition of certification. The test will become a condition of certification in the summer of 2009.
- Include expectations and indicators of early literacy achievement in the district and school improvement plans.



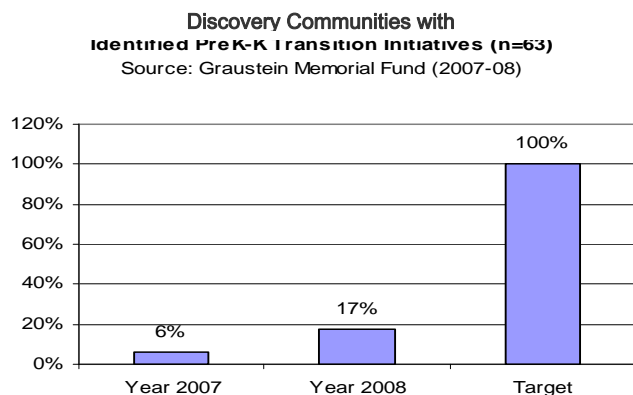


## System Report Card: Early Childhood Cabinet

*System Purpose:* Improve coordination within and across agencies serving children over the kindergarten through third grade years, expand interagency access to essential information, and increase public accountability for existing expenditures and new investment.

*Contributes to Population Quality of Life Result #2:* Fine by Nine: All Children Healthy and Achieving School Success by Age 9

### Performance Measure 1: PreK-3rd Grade Transitions and Alignment



#### Story behind the baseline:

The desired performance measure is the number of preschools and elementary schools in School Readiness Program districts with formal prekindergarten (PreK-K) transition activities. Since this is not available, the proxy measure here is communities with formal publications/activities to aid parents in the transition for their children from preschool to kindergarten.

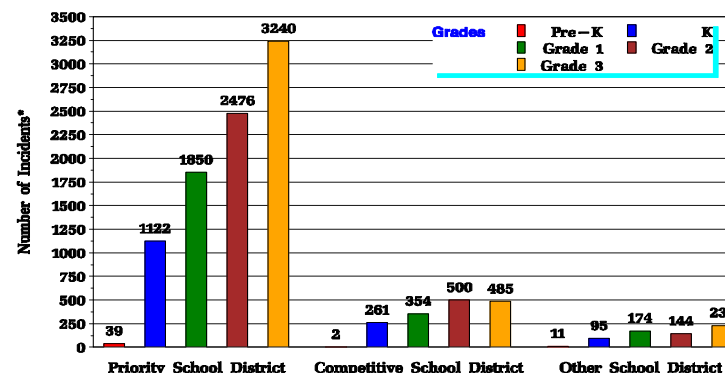
The transition between preschool and kindergarten requires specific and careful attention of educators and families. For the purpose of curriculum alignment and inclusion of parents in the school lives of their children, each district needs a PreK-K transition plan and program.

#### Proposed actions to turn the curve:

- The State Department of Education (SDE) will develop a strategy to collect and review PreK-K transition plans from all school readiness programs in order to improve the alignment of preschool and kindergarten curriculum and performance outcomes.
- The SDE will develop for adoption by the State Board of Education, a Position Statement on Early Childhood, Preschool and Kindergarten. This position statement will address issues of transition and will provide direction to the field. The goal is to maximize children's learning from preschool through the kindergarten years.

### Performance Measure 2: School Climate

Figure 1. Comparison of the Number of Incidents for school year 2007-08 by grade across type of District



\* Duplicated Student Count

#### Story behind the baseline:

Young children must be connected to and engaged in their initial years of schooling as a precondition for any level of academic and social success. The climate in which they go to school determines their level of attention and participation. Children who are not physically or emotionally present cannot learn. We cannot yet report a meaningful measure for school climate. The best proxy measure is the number of disciplinary incidents committed by students in kindergarten through Grade 3 that resulted in an in-school suspension, out of school suspension, or expulsion. Incidences reported range from minor school policy violations to serious infractions such as possession of weapons.

In the 2007-08 school year, 39,889 kindergarteners were enrolled in Connecticut's public schools. SDE data on disciplinary offenses reveal 1,478 incidents (duplicated count) of inappropriate behavior by kindergarten students. When the data are disaggregated by Priority School Districts (PSD), Competitive Grant Municipalities and Other Districts, it is evident that there are many more disciplinary incidents in PSDs than in the rest of the state. The kindergarten incident rate for PSDs was 7.7 percent, compared to 2.8 percent in the competitive grant districts, and 0.5 percent in all other districts. These differences may in part be a result of varying school discipline policies. Given the high incidence rate at the kindergarten level and the evident increases through Grade 3, it is clear that if not addressed, these behaviors escalate. Early intervention is critical.

## System Report Card: Early Childhood Cabinet

*System Purpose:* Improve coordination within and across agencies serving children over the kindergarten through third grade years, expand interagency access to essential information, and increase public accountability for existing expenditures and new investment.

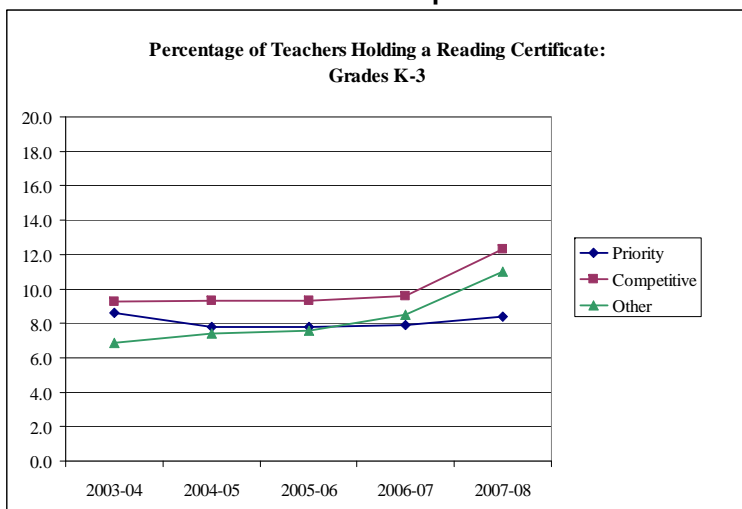
*Contributes to Population Quality of Life Result #2: Fine by Nine: All Children Healthy and Achieving School Success by Age 9*

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### Proposed actions to turn the curve:

- The SDE will include expectations for positive school climate in districts and school improvement plans through statewide assessments of the quality of the school climate.
- Within available resources, the SDE will work with schools in the implementation of Connecticut General Statutes Section 10-222d, *An Act Concerning School Learning Environments*. Activities required by the Public Act include implementation of strategies that improve school climate by providing intervention and prevention strategies for the wider school community including staff, parents and students, and utilization of school surveys for determining school site safety, as well as student, parent and staff perceptions to assess the quality of the school climate.
- Within available resources, the SDE will work to widen the reach of existing school climate improvement professional development opportunities in evidence-based models for safe school climate under the Connecticut Accountability for Learning Initiative (CALI) currently targeting Title I schools and districts not meeting Adequate Yearly Progress (AYP) under No Child Left Behind (NCLB).

### Performance Measure 3: Teacher Competence



### Story behind the baseline:

These data reflect the percentage of teachers in kindergarten through Grade 3 elementary classrooms and reading specialists who hold a reading certificate. This certificate indicates that the individual has obtained additional skills to teach reading.

The graph shows an increase during 2007-08 in the percentage of teachers holding a reading certificate in each category (200 more teachers obtained an additional reading certificate). In addition, just over eight percent of teachers in the PSDs hold a reading certificate compared to just over 12 percent in the competitive school districts.

While there is no ready explanation for the 200 additional kindergarten through Grade 3 teachers obtaining a reading certificate, content knowledge alone does not ensure quality instruction. SDE continues to address the continuing gap in reading through its accountability plan detailed in the RBA template for the Early Reading Success Program. Note that a more appropriate measure of teacher competence will be developed.

### Proposed actions to turn the curve:

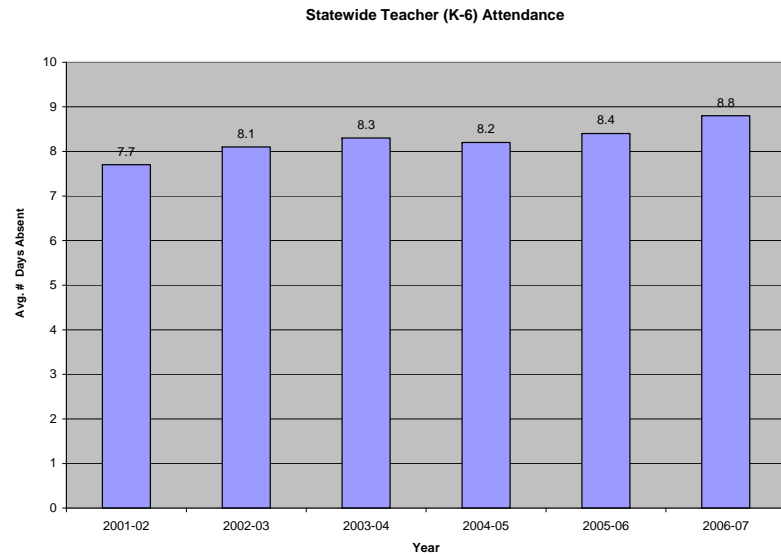
- The SDE will implement a comprehensive reading test for new elementary school teachers as a condition of certification. The test will become a condition of certification in the summer of 2009.
- The SDE will include expectations and indicators of early literacy achievement in the District Improvement Plans and School Improvement Plans.

## System Report Card: Early Childhood Cabinet

*System Purpose:* Improve coordination within and across agencies serving children over the kindergarten through third grade years, expand interagency access to essential information, and increase public accountability for existing expenditures and new investment.

*Contributes to Population Quality of Life Result #2:* Fine by Nine: All Children Healthy and Achieving School Success by Age 9

### Performance Measure 4: Principal Leadership



#### Story behind the baseline:

The best single measure of leadership in creating a professional learning community is whether principals have the autonomy they need in a variety of areas that have been proven to enhance student performance, including hiring and assignment of staff and control over resources. The best proxy measure we can currently report is the average number of days absent per teacher. A more appropriate measure will be developed to better address principal leadership. Effective leadership creates teachers who are empowered, engaged and rarely absent.

Ensuring academic success for all students by the fourth grade will require schools to embrace a new and powerful role as professional learning communities that can deliver results for all children, regardless of the challenges they bring with them to school.

#### Proposed actions to turn the curve:

- The SDE will in partnership with Connecticut Association of Schools continue to facilitate the Principals' Institute which serves to focus on leadership tools needed by principals in today's climate of accountability and reform.
- Within available resources, the SDE will continue to promote and advance training opportunities for school principals and other leaders through the Connecticut Accountability for Learning Initiative (CALI). The training modules include: "Classroom Data: Feedback, Follow-up and Follow Through;" "Leading Change and Getting Everyone on Board;" and "School Climate."
- The SDE will in partnership with Connecticut Association of Schools, continue the annual fall conference addressing current trends around effective schools.
- The SDE will conduct training for Higher Education on incorporating CALI modules in pre-service and education leadership coursework.
- The SDE will collaborate with Connecticut Association of Boards of Education in providing training on roles and responsibilities of boards in an era of accountability.
- The SDE will partner with Connecticut Association of Schools to place additional executive coaches in schools. Currently there are 61 coaches working with principals in 61 Connecticut schools.



**TAB 4**

**DCF PROGRAM REPORT CARDS**



## Program Report Card: Early Childhood Consultation Partnership (ECCP)/DCF

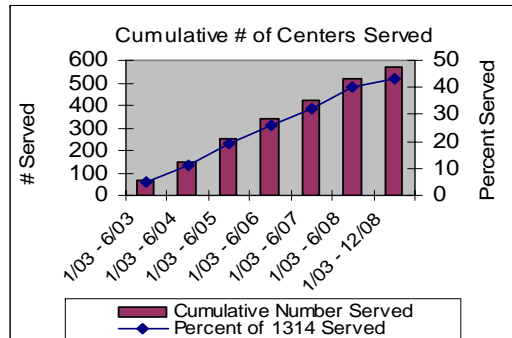
**Program Purpose:** ECCP is prevention and early detection program designed to reduce risk factors associated with suspension and expulsion of preschool children in early childhood care and education settings, thus maintaining the continuity of their early care and education environments/opportunities.

**Contributes to Population Quality of Life Result:** Ready by Five and Fine by Nine: All Connecticut children are healthy and ready for school success at age 5, contributing to a reduction over time in Connecticut's achievement gap at Grade 4.

**National Contributions:** 2007 Walter Gilliam of Yale Child Study conducted a rigorous, randomized-controlled evaluation of ECCP. Results demonstrated statistically significant and meaningful decreases in teacher-rated externalizing or acting-out behavior problems in the classroom, as a result of ECCP services. 2008 ECCP was selected as one of 6 programs across the country to be involved in a Georgetown University Study: Early Childhood Mental Health Consultation as an Evidenced-Based Practice (Publication will be available summer 2009).

### Performance Measure 1:

Percent of unduplicated publicly funded early care and education centers receiving ECCP services.



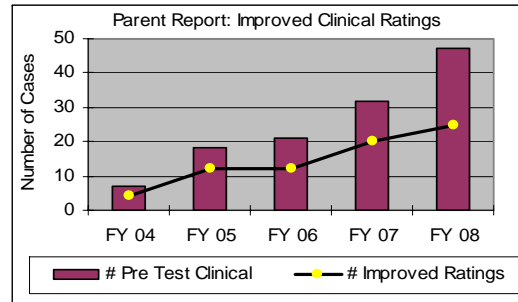
#### Story Behind the Baseline:

There are 1,314 centers in Connecticut that are eligible (serving children age's birth to five) for ECCP services. The graph shows unduplicated centers served cumulatively by fiscal year, and demonstrates a clear measure of ECCP progress toward serving 100% of all eligible centers. To date, ECCP has served 567 (43%) of the eligible centers.

**Proposed Actions to Turn the Curve:** ECCP will continue to focus recruitment efforts on previously unserved centers. In addition, when ECCP does receive referrals from previously served center, emphasis will be placed on systemic change at the level of the director and center policy.

### Performance Measure 2:

Parent Report: Clinical Ratings (CBCL).



#### Story Behind the Baseline:

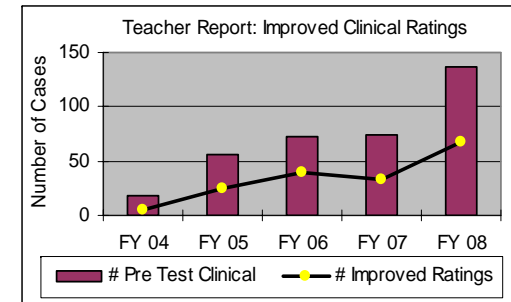
The CBCL is a clinical tool on which clinical intervention is often based. While ECCP is a prevention program, it is evident that parental pre test ratings of clinical symptoms indicate an increasing number of children scoring within the clinical -borderline clinical range on the CBCL from FY04 to FY08. In spite of the severity of children's ratings a significant number of children moved from the clinical to improved ratings. However, rating improvement percentages did not show a consistent trend, but rather a fluctuation between 53% and 67%. This, coupled with the increases in children scoring in the clinical ranges on pre test demonstrates the need for more intensive treatment opportunities for these children and their families.

#### Proposed Actions to Turn the Curve:

ECCP will work closely with families to integrate more intensive Child Actions Plans within both the home & early care/education programs. Through these plans ECCP will increase their focus on referrals to clinically based treatment programs to match the high clinical need evident in many of these children and where their needs go beyond the prevention scope of the ECCP.

### Performance Measure 3:

Teacher Report: Clinical Ratings (CTR-F)



#### Story Behind the Baseline:

Changes in children's behavior based on teacher report are measured by pre/post administration of the CTR-F. Increasingly, children are rated by teachers in the clinical & borderline clinical range on pretest. The percentage of children scoring in these ranges on pre test that had improved ratings, following ECCP services fall within the 40% to 50% range, with percentages improving from FY04 to FY08, an impressive finding since ECCP is a prevention and not clinical program. Given the severity of behaviors teachers are reporting in these children, and based on the results of the rigorous evaluation by Yale, these percentages indicate ECCP has a significant & meaningful impact upon the children they serve.

#### Proposed Actions to Turn the Curve:

ECCP will continue to maintain at or above this baseline, as the ECCP has been deemed an evidenced-based, best practice program through the significant & meaningful results demonstrated by Gilliam's rigorous evaluation and as reflected in the improvement percentages of the CTR-F.

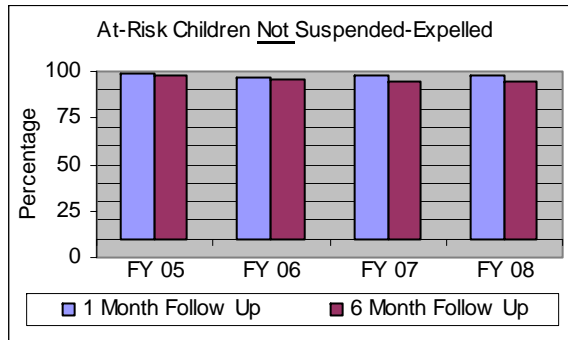
## Program Report Card: Early Childhood Consultation Partnership (ECCP)

**Program Purpose:** ECCP is prevention and early detection program designed to reduce risk factors associated with suspension and expulsion of preschool children in early childhood care and education settings, thus maintaining the continuity of their early care and education environments/opportunities.

**Contributes to Population Quality of Life Result:** Ready by Five and Fine by Nine: All Connecticut children are healthy and ready for school success at age 5, contributing to a reduction over time in Connecticut's achievement gap at Grade 4.

### Performance Measure 4:

Percent of children not suspended or expelled following participation



**Story Behind the Baseline:** The preschool expulsion rate in CT was 12.48 per every 1000 children, the 9<sup>th</sup> highest rating in the country (Gilliam 2005). Children are referred to ECCP because they are at risk of suspension-expulsion. At 1 month follow-up, an average of 98% of children who received ECCP services were **not** suspended/expelled from their early care and education setting. At 6 month follow-up, an average of 96% were not suspended or expelled. The chart above represents a break down of percentages by fiscal year where 1 and 6 month follow up data were available.

### Proposed Actions to Turn the Curve:

ECCP is called in to work with children who are at risk of suspension/expulsion. Despite the severity of the behaviors and social-emotional problems these children present with, ECCP continues to increase the likelihood that the child will be maintained in his/her childcare setting. ECCP will continue to increase the capacity of teachers to better manage at risk children.

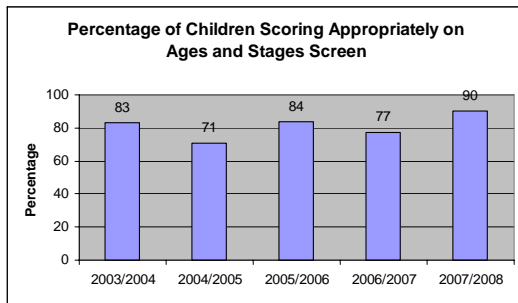


## Program Report Card: Parents in Partnership/Department of Children and Families

*Program Purpose:* The Parents in Partnership program is an early intervention program for designed for families of young children with the goal of providing for the health, safety and permanency of children at risk of abuse, neglect and/or maltreatment.

*Contributes to Population Quality of Life Result:* Ready by Five and Fine by Nine: All Connecticut children are healthy and ready for school success at age 5, contributing to a reduction over time in Connecticut's achievement gap at Grade 4.

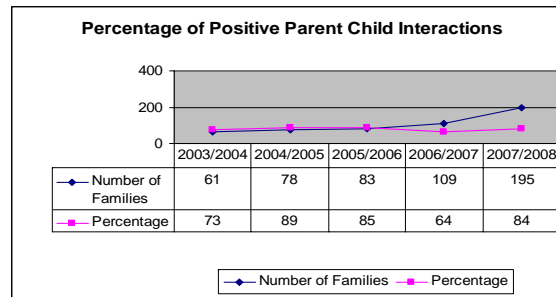
**Performance Measure 1:** Percent of children achieving developmentally appropriate growth.



**Story behind the baseline:** 180 children were served. 132 children completed the Ages and Stages Screening (73%) The remaining 48 children (27%) were in process of screening. 119 (90%) children displayed typical development while 13 children (10%) were referred for additional evaluation to either Birth to 3 or the Local Education Agency (age 3 and over). 100% of referred children were enrolled in B-3 or LEA programs.

**Proposed actions to turn the curve:** PIP programs will continue to document 100% of the children served using the Ages and Stage Screening.

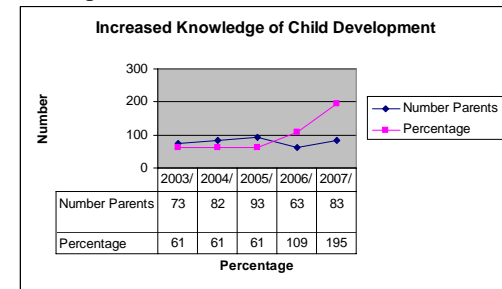
**Performance Measure 2:** Percent of parents engaged in positive interactions with their children.



**Story behind the baseline:** Data indicate that 163 of the 195 parents (84%) made significant improvement maintaining positive interactions with their children as measured by the HOME Scale. Interactions were characterized by more episodes of positive behavior management, less commanding, and increased parental engagement in mutually enjoyable interactions with children.

**Proposed actions to turn the curve:** The HOME scale will be **replaced** and PIP programs will use the Parent/Child Interaction Tool (PCIT) as a more accurate and robust measure of interactions.

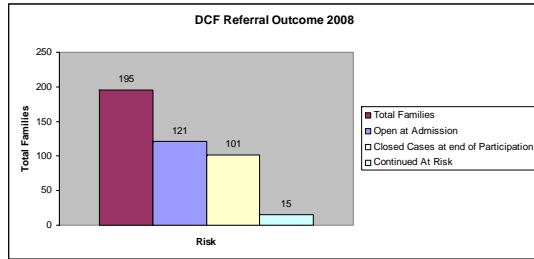
**Performance Measure 3:** Percentage of parents with increased knowledge of their child's development.



**Story behind the baseline:** 195 parents were served. 161 (83%) demonstrated significant increase in their knowledge of child development. Measurement was determined by their ability to identify their child's next major milestone in the areas of Cognition, Language, Motor Development and Social/Emotional growth and select activities that would promote growth.

**Proposed actions to turn the curve:** 90% of the parents served will be able to correctly identify at least one major milestone according to their unique child and identify activities which support the development of the child.

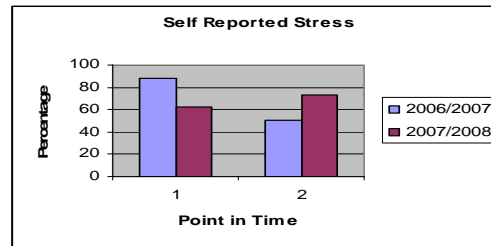
**Performance Measure 4:** Percent Children experiencing increased safety and stability.



**Story behind the baseline:** 195 parents were referred to PIP in 2008. 121 parents had open DCF cases. As a result of participation in PIP 101, (83%) parents successfully closed their DCF case. Successful completion of goals involved maintaining a safe and stable home, no re-referral to DCF, improved interactions with their children, and an elimination of abusive and neglectful behavior. An additional 15 parents continued to receive DCF services.

**Proposed actions to turn the curve:** 90% of parents with an open DCF case will successfully have their case closed.

**Performance Measure 5:** Percent of parents experiencing a decrease in stress.



**Story behind the baseline:** The graph above demonstrates data for two years. During 2006/2007, 101 parents participated. At entry (point 1), 88% demonstrated high levels of stress. Six months later (point 2), 55% of those parents with initial high levels of stress reported a significant reduction in stress. Data from 2007/2008 indicate that of the 195 parent who entered (point 1), 62% reported high levels of stress. After six months (point 2), 74 % of these parents reported a significant reduction in stress.

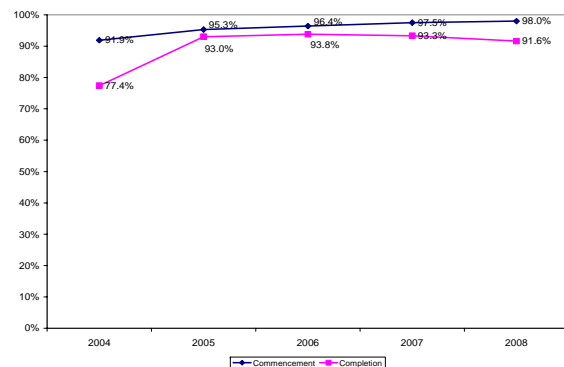
**Proposed actions to turn the curve:** 75% of parents reporting high levels of stress will experience a significant reduction of stress at six months.

# Program Report Card: Child Protection and Foster Care - Department of Children and Families

**Program Purpose:** To provide for the health, safety, permanency and development of children involved in Connecticut's child protection system, particularly those in out-of-home care and away from their birth families.

**Contributes to Population Quality of Life Result:** Services and interventions result in children 0-5 years of age reaching developmentally appropriate milestones needed for success.

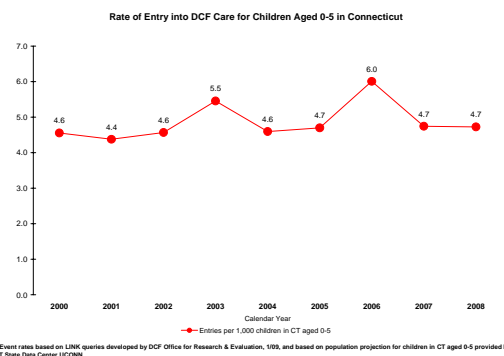
## Performance Measure 1: Timeliness of Investigations



**Story behind measure:** These measures of commencing and completing investigations are important because investigations are the fact-finding process that gathers information, beginning at the report-taking phase of allegations of child abuse or neglect at the Hotline, and culminating in a documented determination of substantiation, non-substantiation, or regulatory violation. The crucial step in protecting children is the initial assessment of danger to the child; therefore, timely response to allegations is imperative.

**Proposed actions to turn the curve:** The Department has improved its performance in commencing and completing investigations over time. Although recorded is a slight drop in the number of cases completed on time, the variation is not significant enough to warrant additional action steps. These measures are routinely viewed and are explicit Outcome Measures under the *Juan F. Exit Plan*. Success in improving and sustaining performance with our investigations is due to focused management attention and supervision at the local DCF Offices, and the increase of social work staff over the last few years. Maintaining the right level of staff dedicated to this function is imperative.

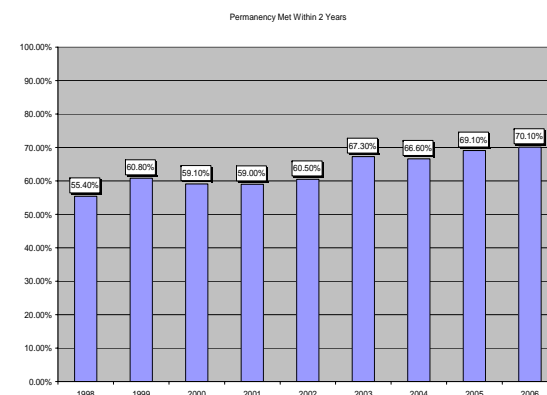
## Performance Measure 2: Entry into Care Incidence Rate of Entry - Children age <5 years at entry



**Story behind measure:** This graph shows the incidence rate of entry into care for children 0 to 5. This is important because a safe and permanent family is the best place for children to grow up. Child Protection Services should only intervene when parents request assistance or are unable to meet their children's basic needs. CPS should focus on family strengths providing parents with the assistance needed to keep their children safe and the family together. Furthermore, reducing entry into care will ensure that the relatively scarce out-of-home care resources can be used for those children who cannot safely or appropriately remain at home.

**Proposed actions to turn the curve:** While the Department's overall entry rate has declined, for younger children there has been little change over seven years. We do not believe that this raises an issue with the baseline. Rather, safety issues are heightened with our youngest and most vulnerable population, a practice concern in line with all child welfare jurisdictions. Still, the Department will continue to aggressively focus on this issue through prevention means, most notably the introduction of an alternative response to accepted reports of low and moderate risk cases.

## Performance Measure 3: Permanency in Two Years - Children Aged 0-5 at Entry



**Story behind measure:** This chart shows the Department's performance in achieving permanency for children age 0-5. Timely permanency and assuring it is achieved for all children/youth in care is a central outcome measure in child welfare. To best protect a child's overall well-being, agencies want to assure that children move to permanency as quickly as possible.

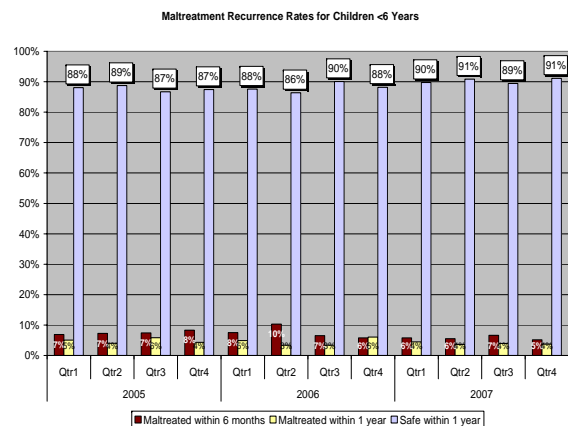
**Proposed actions to turn the curve:** The chart depicts steady improvement. Achieving timely permanency for all children in care is one of the Department's greatest challenges. Despite gains, there remain many in care who remain in foster settings for long periods of time. Key to continuing improvements in this area, the Department has committed to: 1) improving concurrent planning practice; 2) establishing a higher threshold for non-preferred permanency plans, and; 3) conducting special reviews of targeted cohorts of children in care that have not achieved permanency have case markers that suggest additional efforts and attention are needed to be successful.

# Program Report Card: Child Protection and Foster Care - Department of Children and Families

**Program Purpose:** To provide for the health, safety, permanency and development of children involved in Connecticut's child protection system, particularly those in out-of-home care and away from their birth families.

**Contributes to Population Quality of Life Result:** Services and interventions result in children 0-5 years of age reaching developmentally appropriate milestones needed for success.

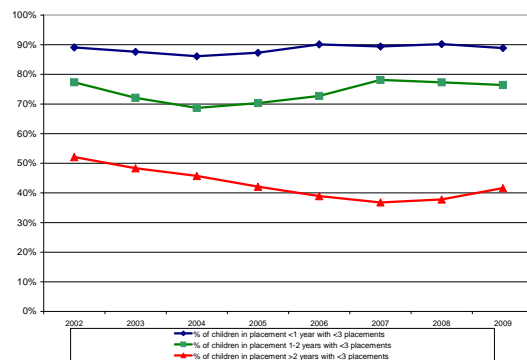
## Performance Measure 4: Repeat Maltreatment - Recurrence Rates for Children Age 0-5



**Story Behind Measure 4:** This table depicts the rate of maltreatment for children age 0-5 involved in an active protective services case. The rate of repeat maltreatment is a widely-used indicator of quality of child welfare practice. As more data becomes available, we will present it from an annual perspective.

**Proposed actions to turn the curve:** Studies have repeatedly shown that when child welfare agencies have caseworkers who visit with families frequently (2 or more time per month) they are better positioned to assess children's risk for harm. Further, they are better able to work with families and their changing needs, as well as determine the effectiveness of the goals and outcomes established in the current case plan. Prior to January 2004, DCF caseworkers did not routinely visit with families on a routine basis. Success in improving and sustaining performance with our investigations is due to focused management attention and supervision and the increase of social work staff over the last few years.

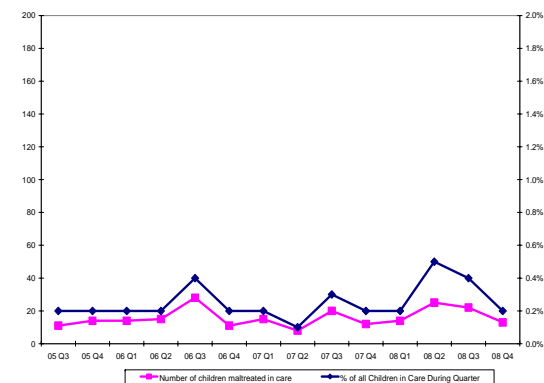
## Performance Measure 5: Placement Stability



**Story Behind Measure 5:** This table depicts the percentage of children birth to five experiencing three or fewer placements in foster care across three ribbons of time, depending how long they remain in care. Young children birth to five require stable, nurturing environments that assure their health, safety and permanent attachments in order to reach their full developmental potential and be ready for school.

**Proposed actions to turn the curve:** As can be seen, children placed in foster care for shorter periods of time experience the greatest stability. For those who face multiple placements generally have more intensive needs and at times those needs may not be met in a family-based setting. DCF is addressing this challenge by first focusing on reducing entry into care (i.e. trying to avert placement in the first instance). Second, DCF's focus on achieving timely permanency will assure that the time spent in foster care will be lessened. Thirdly, DCF is aggressively recruiting, training and supporting foster families so that more children in care can be placed in family-based settings, especially kinship care, which are more stable placements).

## Performance Measure 6: Maltreatment in Care



**Story Behind Measure 6:** The graph above depicts the incidents of maltreatment against a child in DCF's care by a substitute caregiver (i.e. an individual or individuals within DCF's foster care system, including its employees). Although the graph suggests a consistently relatively low number and rate of maltreatment in care, the ultimate aim of our work is to eliminate maltreatment of children altogether.

**Proposed actions to turn the curve:** DCF continues to focus on its prevention of child abuse and neglect activities, reducing entry into care and improved decision-making around appropriateness of placement. These focus areas, in combination with achieving more timely permanency (i.e. children spending less time in care) will improve performance on this measure. In addition, key training enhancements for foster parents, and a system-wide focus on improving the competencies of direct care staff within our private provider community will assure Connecticut has one of the lowest rates - although percentages nationwide are quite small.

**TAB 5**

**DSS PROGRAM REPORT CARDS**

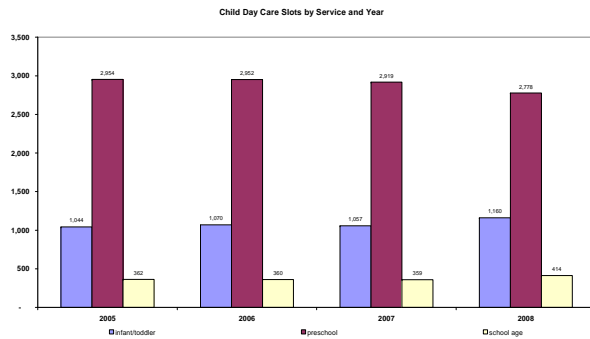


## Program Report Card: Child Day Care Program

**Program Purpose:** To allow parents to work and/or participate in employability preparation programs. Allow for parent-child development and a system of family supports to address health, mental health, emotional and social well-being, cognitive development, language development and economic support.

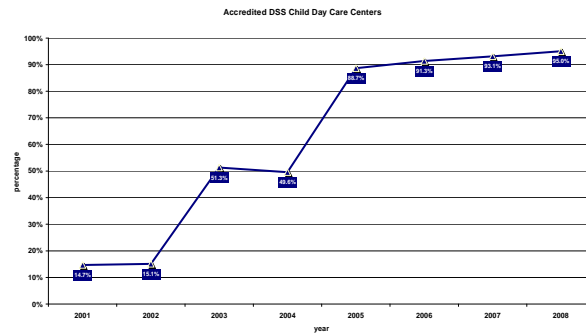
**Quality of Life Result:** All participating children begin their public education healthy and ready for school success within their development potential.

### Performance Measure 1: Number of infant/toddler, preschool and school-age funded spaces.



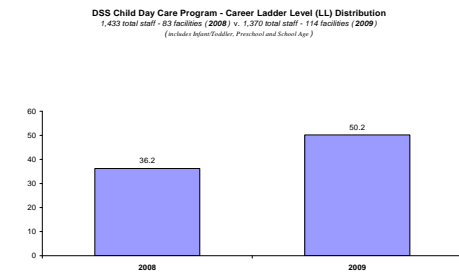
**Story behind the baseline:** The DSS Child Day Center Program provides opportunities for eligible working families with children under age 13 to secure early care and education services. The DSS contracted programs work within their communities to determine family needs and determine the care categories (*infant/toddler, preschool, school-age*) they will serve within available funding. This is a true community needs assessment process and is limited only by allocated funds. Since 2000, infant-toddlers have increased from 21.3% to 26.7% of the total children served while preschool children served have decreased from 69.7% to 63.8%.

### Performance Measure 2: Number and percentage of accredited sites.



**Story behind the baseline:** The DSS Child Day Care Center Program made a policy decision to require all contracted programs to be accredited by the National Association for the Education of Young Children (NAEYC) in 2001. This decision complements the school readiness requirement that school readiness programs be accredited. In 2008, 95.0% of all DSS funded centers that provide infant/toddler or preschool services are accredited.

### Performance Measure 3: Number and percentage of qualified staff



**Story behind the baseline:** As of **January 16, 2009**, 50.2% of the classroom employees in the DSS Child Day Care program have a minimum of a CDA and twelve Early Childhood Education credits as reported to the department by the CT Professional Development Registry on January 13, 2009. This is an increase of 14% over the percentage in **January 16, 2008** when 36.2% of the classroom employees in the DSS Child Day Care program had a minimum of a CDA and twelve Early Childhood Education credits as reported to the department by the CT Professional Development Registry.

### Turning the Curves: What do you propose to do over the next two years and why?

1. We will work with contractors with 2009 and 2010 NAEYC re-accreditation end dates to support them in successfully achieving re-accreditation.\*<sup>1</sup>

<sup>1</sup> - Indicates, low-cost, no-cost action steps, including reallocation of existing resources

## Program Report Card: Child Day Care Program

*Program Purpose:* To allow parents to work and/or participate in employability preparation programs. Allow for parent-child development and a system of family supports to address health, mental health, emotional and social well-being, cognitive development, language development and economic support.

*Quality of Life Result:* All participating children begin their public education healthy and ready for school success within their development potential.

2. We will provide support to those contractors experiencing problems with NAEYC accreditation or re-accreditation by referring them to the Statewide Accreditation Facilities Program.\*
3. We will support the collection of data for classroom employee education and training levels in the CT Charts-A-Course Professional Development Registry and expand efforts, within available appropriations, to support training opportunities.\*

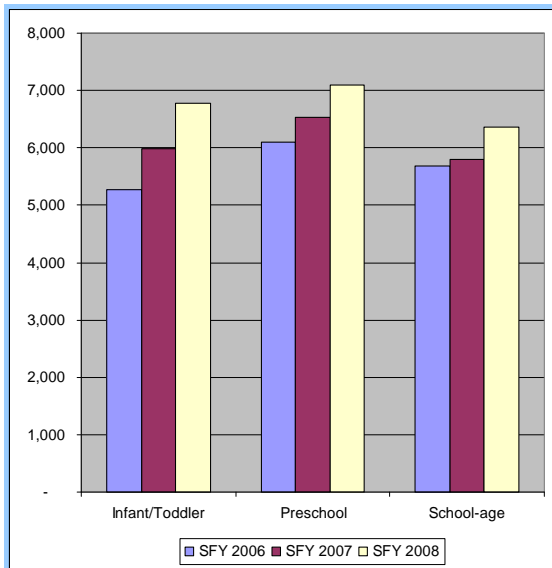


## Program Report Card: Care 4 Kids Program

**Program Purpose:** To provide eligible parents on family assistance access to child care financial assistance in order to work and/or participate in employability preparation programs in order to transition from public assistance and to provide eligible low-income working parents access to child care financial assistance in order to work.

**Quality of Life Result:** All Connecticut children begin kindergarten healthy and ready for school success within their development potential.

**Performance Measure 1: Number of Child Recipients** – monthly average number of children receiving financial support by age group.



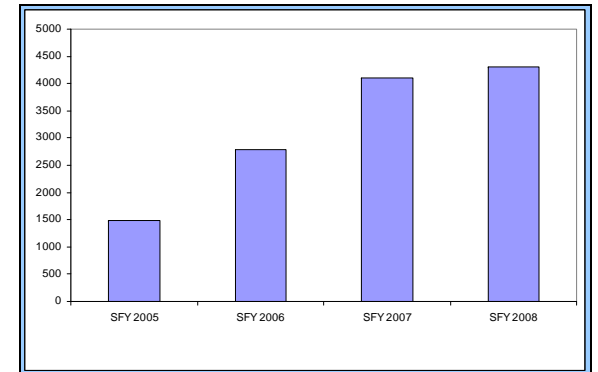
**Story behind the baseline:** Priorities for service eligibility are established via state law and regulation. Currently, our priorities support families receiving and transitioning from public assistance, teen parents completing high school and low-income working families that meet a certain economic threshold.

**Performance Measure 2: Number of Employed Families** – monthly average number of families receiving services due to employment.

**Story behind the baseline:** 96 % of all families served in SFY 2008 were working parents. The remaining 4% of participants are Temporary Family Assistance recipients in training or job related activities. Working parents contribute economic security for their families and thus, children are less inclined to remain in poverty situations. Research indicates that children in non-poverty situations have better outcomes.

**Proposed actions for all 3 performance measures to turn the curve:** We will continue with fraud prevention processes to prevent improper payments and ineligible families from participating. This will allow more eligible families to participate. We will offer orientation sessions to new child care providers and consumers in order to help them better understand the program rules. We will continue to encourage accredited programs to enroll children who are eligible for Care 4 Kids reimbursement.

**Performance Measure 3: Children in accredited Programs** – monthly average number of children enrolled in care programs that have achieved nationally recognized accreditation standards.



**Story behind the baseline:** There has been a steady increase in the number of Care 4 Kids children in programs that are eligible to receive the C4K Accreditation. The monthly average number of children equaled 1,487 in SFY2005 to 4,304 in SFY2008



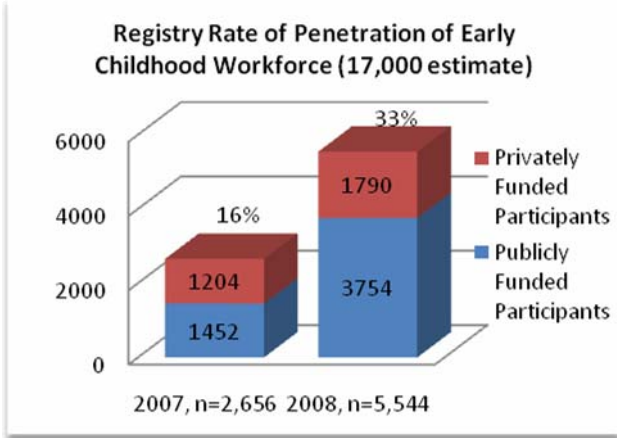
Program Report Card: Connecticut Charts-A-Course (CCAC)

**Program Purpose:** To provide a coordinated and comprehensive system of early childhood professional development and program improvement.

**Contributes to Population Quality of Life Result:** Ready by Five and Fine by Nine: All Connecticut children are healthy and ready for school success at age 5, by promoting a qualified and highly skilled early childhood workforce and quality program environments.

**Performance Measure 1: Professional Registry**

Percentage of the early care and education workforce enrolled in the Registry.

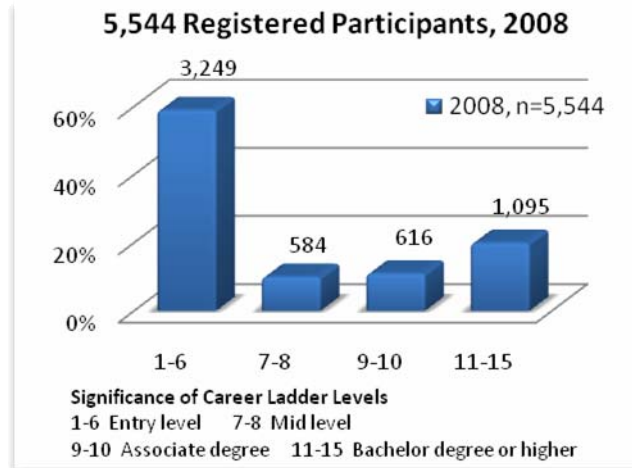


**Story behind the baseline:** This measure shows a penetration rate by the Registry of 33% of the total estimated early care and education workforce of 17,000. The growth in participants is a direct result of mandatory enrollment of all DSS and SDE funded program staff and the CCAC outreach effort. The 2008 data shows that participants from these publicly funded programs represent 22% of the total estimated workforce and privately funded staff captured by the Registry are 11% of the total estimated workforce.

**Proposed actions to turn the curve:** Increase the Registry's rate of penetration of the total workforce by enrolling additional publicly funded programs from Head Start into the Registry, working with 211 ChildCare and Care4Kids to enroll family child care home providers and encouraging staff of privately funded programs to register.

**Performance Measure 2: Career Ladder Levels of Workforce Enrolled in the Registry**

Distribution of educational levels of early childhood workforce enrolled in the Registry.

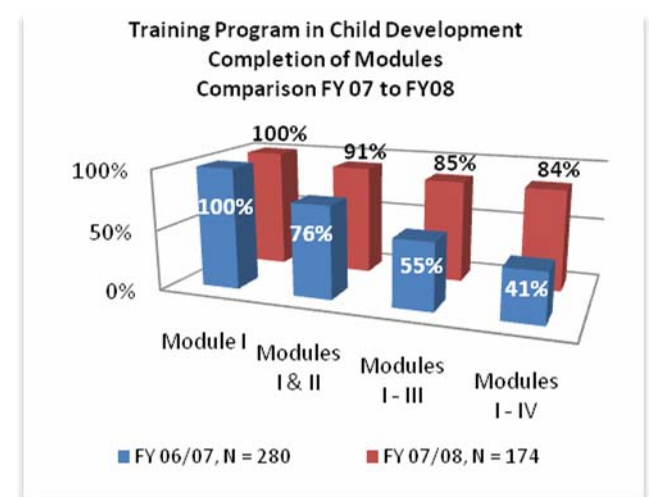


**Story behind the baseline:** The Registry is in the early stage of establishing a baseline of the qualifications of the early care and education workforce. The 2008 data show that 41% of Registry participants are at level 7 on the career ladder or above and 20% of participants have Bachelor degrees (11 and above). More than half of the workforce enrolled in the Registry have entry level qualifications. Note that participation in the Registry is heavily weighted toward staff of publicly funded programs and that the Registry is inclusive of the professionals in all settings, all roles, and some in the field who are not directly working with children.

**Proposed actions to turn the curve:** Advance early childhood workforce up the Career Ladder with targeted training, scholarships, and professional development planning efforts.

**Performance Measure 3: Training Program in Child Development and START Education Bonus**

Percent of participants who complete modules in the Training Program in Child Development, 2007-2008.



**Story behind the baseline:** The graph represents the percentages of participants in the TPCD who completed each module. Significant increases occurred in FY08, in modules II, III, and IV compared to FY07. Of particular note is the 84% completion rate of Module IV participants. This is a direct outcome of START Educational Bonuses that are given at completion of Module II and then again when the person completes Module IV and obtains a CDA credential. The decrease in participants resulted from a reduction in funding.

**Proposed actions to turn the curve:** Within available resources, offer the TPCD and continue to administer and track the use of the START Bonus as an incentive for participants to complete the modules and obtain a CDA.

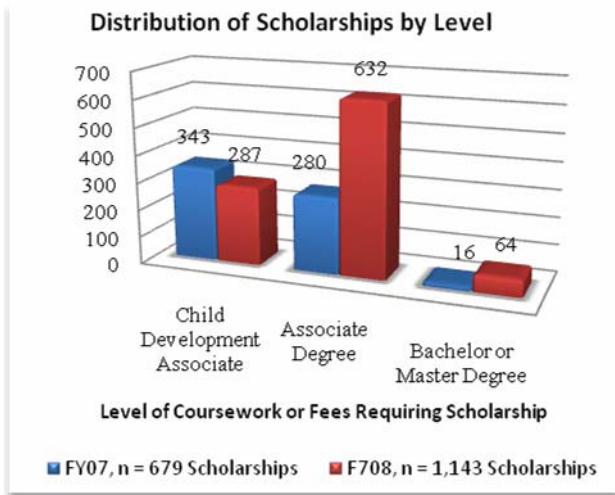
Program Report Card: Connecticut Charts-A-Course (CCAC)

*Program Purpose:* To provide a coordinated and comprehensive system of early childhood professional development and program improvement.

*Contributes to Population Quality of Life Result:* Ready by Five and Fine by Nine: All Connecticut children are healthy and ready for school success at age 5, by promoting a qualified and highly skilled early childhood workforce and quality program environments.

**Performance Measure 4: Scholarship Assistance Program**

Distribution of scholarships leading to various educational levels.

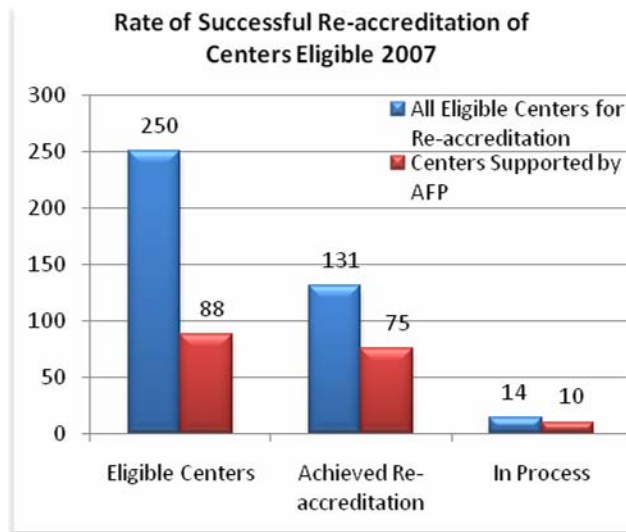


**Story behind the baseline:** This measure shows the distribution of scholarship recipients by the educational level they are seeking to achieve. Scholarships are available to staff of publicly funded programs within established priorities. They increased by 68% from the previous year. The distribution of scholarships shifted from entry level training to more associate degree coursework as professionals in these targeted programs persisted in pursuing their education and took advantage of the scholarship program.

**Proposed actions to turn the curve:** Continue to target staff in publically funded programs in order to meet teacher requirement and compliance with state law and NAEYC accreditation.

**Performance Measure 5: Accreditation Facilitation Project**

Rate of successful re-accreditation by NAEYC of centers eligible in 2007.

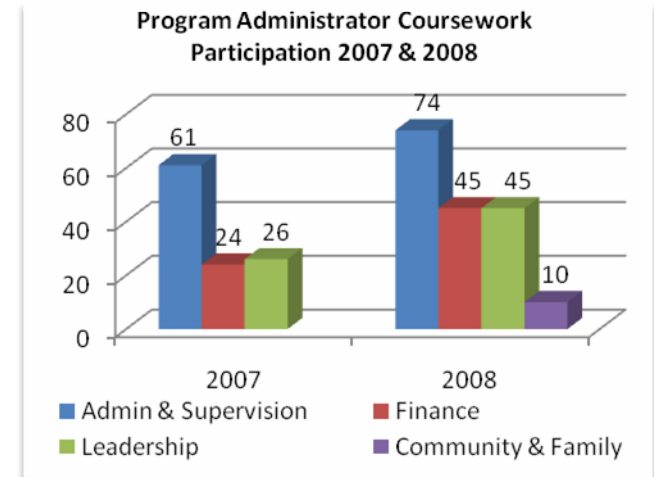


**Story behind the baseline:** This measure tracks the rate of success of centers eligible for re-accreditation from NAEYC over the two year period of 2007-2008. Centers enrolled and supported by the CCAC Accreditation Facilitation Project (AFP) achieved re-accreditation at a rate of 85% compared with 52% of all eligible Connecticut programs. In addition to the 75 AFP centers that have attained the re-accreditation, 10 more sites are still in the process. Connecticut has 411 accredited programs, one of the highest rates in the nation.

**Proposed actions to turn the curve:** Within available resources, continue to support sites including the 89 sites eligible for re-accreditation in 2008.

**Performance Measure 6: Administrator Course Participation**

The number of early childhood administrators who participated in AFP sponsored course work, 2007-2008.



**Story behind the baseline:** This measure shows the number of participants in CCAC/AFP sponsored courses for program administrators. The number of participants increased 57% from 111 in FY07 to 174 in FY08. The graph also shows an increase in participation in each course. The completion rate for 2008 was 99%. There is substantial demand potential for these courses since there is at least one program administrator in each of the over 1,700 licensed centers and additional administrators in school-based programs. There have been 631 participants since courses began in 2000.

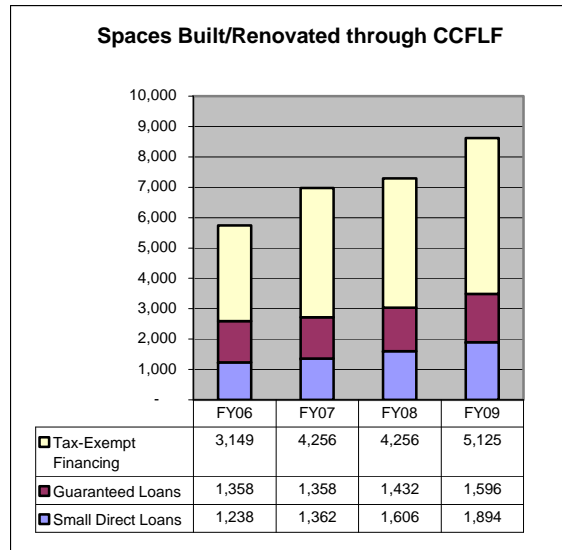
**Proposed actions to turn the curve:** Within resources, increase the number of class offerings to accommodate more participants. Target administrators whose programs are being accredited or re-accredited by NAEYC.

## Program Report Card: Child Care Facility Loan Fund (CCFLF) Program

**Program Purpose:** The CCFLF was created through Public Act 97-259, establishing three separate programs to finance the construction of child care facilities: The Tax-Exempt Financing Program, Guaranteed Loan Program and Small Direct Loan Program. Each is managed by the Department of Social Services and State Department of Education, and administered through CHEFA.

**Contributes to Population Quality of Life Result:** The CCFLF provides resources to early care providers to build and renovate facilities, so more children can have access to safe, quality early education programs.

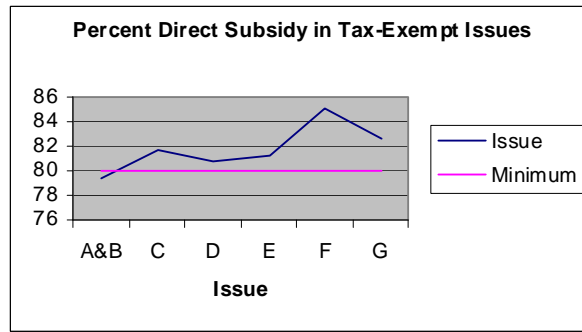
### Performance Measure 1: Spaces Built/Renovated through CCFLF



**Story behind the baseline:** The CCFLF has steadily increased the inventory of early education space in Connecticut, adding an average of about 800 spaces per year. Funding for the Tax-Exempt Financing Program in the previous biennium will result in approximately 4,000 additional spaces, 870 of which are currently in production.

**Proposed actions to turn the curve:** CHEFA, in collaboration with DSS and SDE has developed a list of qualified architects. We anticipate that the list will contribute to a faster predevelopment process, and potentially lead to cost savings.

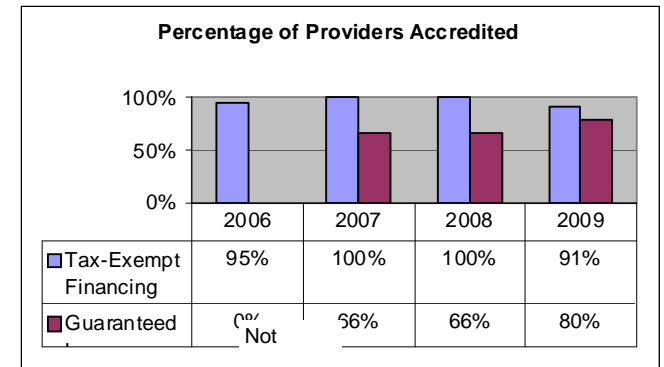
### Performance Measure 2: Direct Subsidy Utilized for Tax Exempt Financing Development



**Story behind the baseline:** Tax-Exempt Financing is available only to not-for-profit early education providers, municipalities, local boards of ed., and regional educational service centers (RESCs). An 80% minimum subsidy is required by the bond insurer, and providers have received an average 82% subsidy. The rise in subsidy for Issue F was due to one of the original providers, with a low rate of subsidy, opting out of that issue. Lower average subsidies imply lower cost to the state for projects developed.

**Proposed actions to turn the curve:** Direct technical support and zero-interest loan funds provided through the Early Childhood Cabinet help child care providers develop more cost effective designs, and reduce development delays that would otherwise lead to higher cost. CHEFA is determining the feasibility of managing development directly as a low-cost alternative to reduce subsidy needs.

### Performance Measure 3: Percentage of Child Care Providers Accredited



#### Care Providers Accredited

**Story behind the baseline:** The most desired outcome arising from the development of early education space is the readiness of children for school. Accreditation through the National Association for the Education of Young Children (NAEYC) is considered to be critical for the achievement of that goal. The Tax-Exempt Financing Program and Guaranteed Loan Programs require that early education programs maintain NAEYC accreditation or risk default. Three borrowers in the Guaranteed Loan Program have allowed their accreditation to lapse, but should be in compliance in the next year.

**Proposed actions to turn the curve:** CHEFA is implementing enhanced compliance monitoring systems for child care providers.



**TAB 6**

**CHILDREN'S TRUST FUND REPORT CARDS**





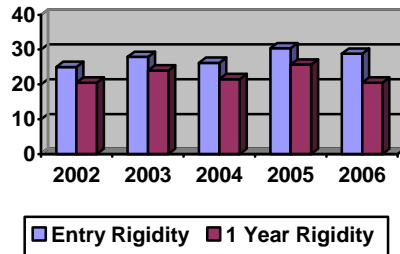
## Program Report Card: Nurturing Families Network

*Program Purpose:* The Nurturing Families Network is a statewide system of continuous care designed to promote positive parenting and reduce incidences of child maltreatment.

*Contributes to Population Quality of Life Result:* Young children in Connecticut will have quality parental care that meet their needs and will be healthy, developmentally on track, and ready to learn.

### **Performance Measure 1: Positive change in mothers' expectations as measured by the Child Abuse Potential Inventory (CAPI) Rigidity subscale.**

Entry and 1 Year Outcome Data on the Capi by Year Family Entered NFN



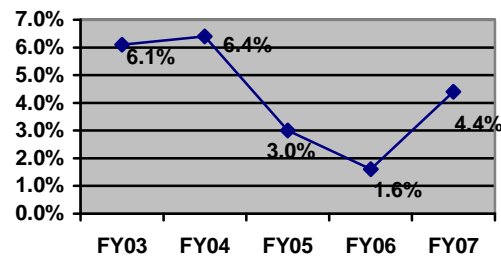
**Story Behind Measure 1:** Families participating in NFN home visiting show significant reductions on the rigidity subscale of the CAPI within 1 year of program participation. These data indicate that families have less rigid parenting attitudes and are less likely to treat their children forcefully.

**Proposed actions to turn the curve:** Program services focus on improving parenting attitudes and behavior, promoting child development, and decreasing the likelihood of child maltreatment using curricula that focuses

on positive parenting practices and education. We expect to see significant changes on the CAPI rigidity subscale.

### **Performance Measure 2: Rates of substantiated maltreatment among program participants.**

Rates of Child Maltreatment in the NFN Program



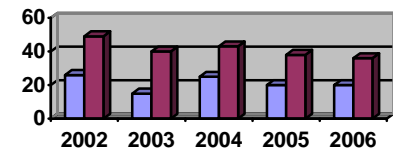
**Story Behind Measure 2:** The above graph shows the annualized rates of maltreatment rates for the past 5 years. Rates of substantiated abuse increased in 2007 as compared with the previous two years but are still low when compared with rates of 20-25% reported in studies with similarly high-risk mothers who did not receive home visitation services.

**Proposed actions to turn the curve:** NFN home visitation model uses the most recent science on child development and

parenting practices with an infrastructure for recruiting high-risk families and ensuring quality and consistent program implementation. We expect to continue to see low rates of child maltreatment.

### **Performance Measure 3: Change in rates of employment and educational attainment after one year of program involvement.**

Percentage of Mothers Employed By Year Family Started Program



■ Employment Entry ■ Employment 1 Year

Percentage of Mothers with a High School Education by Year Family Started Program



■ Education Entry ■ Education 1 Year

## Program Report Card: Nurturing Families Network

*Program Purpose:* The Nurturing Families Network is a statewide system of continuous care designed to promote positive parenting and reduce incidences of child maltreatment.

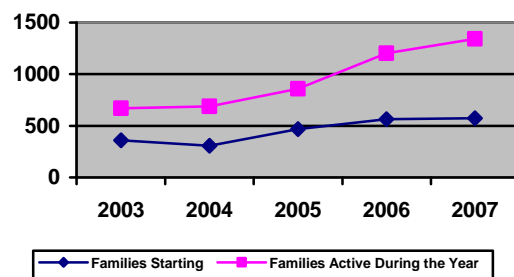
*Contributes to Population Quality of Life Result:* Young children in Connecticut will have quality parental care that meet their needs and will be healthy, developmentally on track, and ready to learn.

**Story Behind Measure 3:** The employment and education data above shows the program entry and 1 year rates for families entering the program for the past 5 years. Families show significant change in employment and education within their first year of program participation. For 2007, 36% of mothers were employed compared with 20% at program entry. In addition, 55% of these mothers had at least a high school education compared with 48% at program entry. These outcomes suggest that home visitors are helping families to build more assets and become more self-sufficient.

**Proposed actions to turn the curve:** Because many of the NFN parents are constantly faced with unemployment and underemployment, as well as social, cultural and sometimes language barriers, home visitors use a two generation approach: they emphasize support for the mothers' developmental trajectory as well as the children's. We expect to continue to see significant change in the areas of employment and education.

**Performance Measure 4:**  
**Participation and retention rates in NFN home visiting program.**

Participation in NFN Home Visiting Program Since 1998



**Story Behind Measure 4:**

There has been a 50% increase in the percentage of families served in the NFN home visiting program from 2003 to 2007. The increase was more pronounced in 2005 and 2006 due to the Hartford expansion. At the end of 2007, there was another increase due to the expansion in New Haven. In addition, families at program sites that have provided services since at least 2003 (the maximum five-year program time) have participated in home visitation on average for 22 months.

**Proposed actions to turn the curve:** The Nurturing Families Network is operating out of all 29 birthing hospitals and thus has the infrastructure for going

to scale in Connecticut. Even as the program has expanded and the number of families served has substantially increased, program evaluation continues to show many positive program aspects and outcomes. The positive impact is related to: the population being served (low SES, often young, first-time mothers with low coping skills at program entry); the onset of services (prenatal or at birth); the combination of services (case management and curricula that targets specific issues and outcomes); and the intensity of services (ability to consistently and frequently engage mothers and families). Once families are screened and recruited, NFN is well-equipped in terms of facilitative administrative support, performance monitoring to ensure fidelity to the model, and home visitation staff training and supervising to address risk factors. In addition, we are in the process of strengthening the program's focus on recruiting fathers, and will also be implementing a pilot program to test the efficacy of in-home depression treatment to complement NFN home visiting.

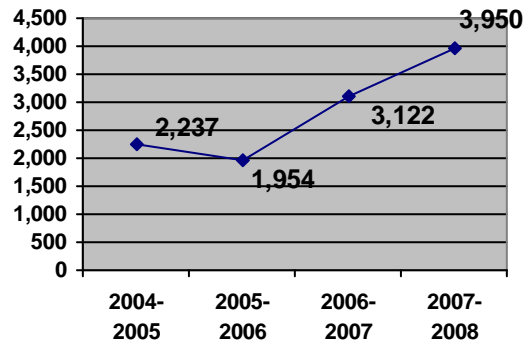
Program Report Card: Help Me Grow

*Program Purpose:* Children who are facing behavioral, learning, and other developmental difficulties are connected to local programs.

*Contributes to Population Quality of Life Result:* All Connecticut children will be healthy, developmentally on track, and meet their full potential.

**Performance Measure 1: Number of referrals to programs on behalf of families.**

Referrals on behalf of HMG Families

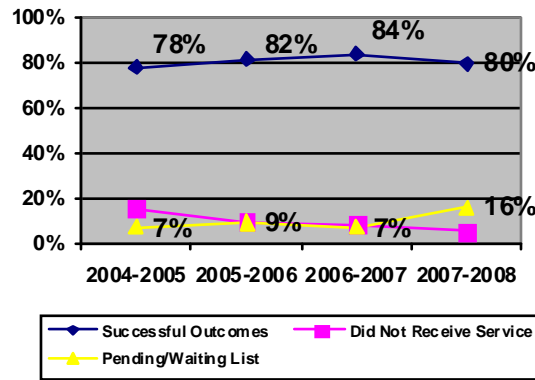


**Story behind the baseline:** *Help Me Grow* care coordinators increased the number of referrals to programs on behalf of families by 27% from last year. This increase, and the positive trend over the past 4 years, indicates *Help Me Grow* staff are becoming more adept at finding resources for families.

**Proposed actions to turn the curve:** Continue with training and supervision of care coordination, community networking activities, and updating the Child Development Infoline database on program services and information throughout the State.

**Performance Measure 2: Outcomes of family referrals for services and program information.**

Help Me Grow Outcomes

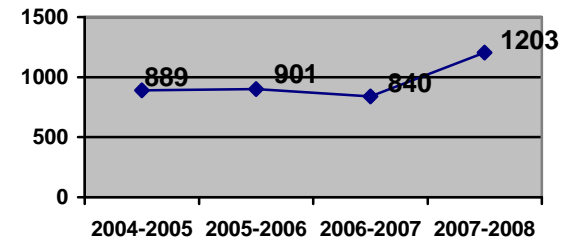


**Story behind the baseline:** Rates of successfully connecting families to needed services are high. Eighty percent of service needs were addressed for the 2007-2008 year. The slight decrease in successful outcomes (from 84% in previous year to 80% in past year) is balanced by the increase in outcomes that are pending (from 7% in the previous year to 16% in past year). The majority of pending outcomes are for situations where families are seeking an evaluation for their child (29%) or for children with special health care needs (48%).

**Proposed actions to turn the curve:** A systematic process for identifying and tracking gaps and barriers in services was established during the past year. At the end of the program year, these data will be analyzed for the different communities within Connecticut and presented for review by all interested stakeholders.

**Performance Measure 3: Number of families entering the Ages and Stages monitoring system.**

Active Ages & Stages Monitoring: Number of families entering each year



**Story behind the baseline:** There was a dramatic 43% increase in the number of families entering the program in the past year from 840 families in the former year to 1,203 families. This increase is explained by the increase in outreach and training to pediatricians. The majority of these referrals to Ages and Stages have

## Program Report Card: Help Me Grow

*Program Purpose:* Children who are facing behavioral, learning, and other developmental difficulties are connected to local programs.

*Contributes to Population Quality of Life Result:* All Connecticut children will be healthy, developmentally on track, and meet their full potential.

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come from several new pediatrician practices with one practice in particular, in the Bristol area, referring a large number of families to the monitoring program.

**Proposed actions to turn the curve:**

Continue outreach and efforts to raise awareness on Ages & Stages monitoring program through ongoing trainings for pediatricians, other child care providers, and social service agencies. As much as possible, identify and track where training has occurred, who is utilizing the program, and where training is most needed. Current and future program capacity issues also need to be taken into consideration as part of efforts and planning for increased utilization of the program.

**TAB 7**

**DEPARTMENT OF HIGHER EDUCATION REPORT CARDS**

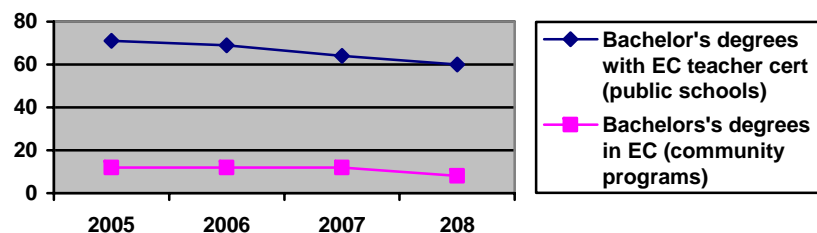


## Program Report Card: DHE/Connecticut Higher Education agencies, central offices and institutions

*Program Purpose:* To prepare an early childhood workforce that can provide quality educational experiences for young children in preschool programs in Connecticut.

*Contributes to Population Quality of Life Result:* Quality educational experiences for children in the state's preschool programs provided by qualified workers will prepare children for school success when they enter kindergarten at age 5. (Ready by Five and Fine by Nine: All Connecticut children are ready for school success at age 5.)

**Performance Measure 1:** The number of EC teachers prepared each year in Connecticut at the bachelor's level to teach in public school preschools and community-based EC programs.



### Story behind the baseline:

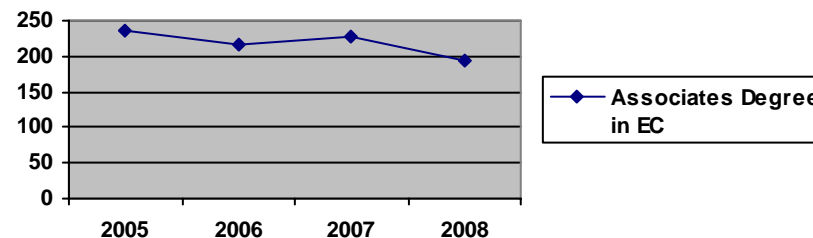
- The number of EC certified teachers prepared by CT colleges has declined slightly in past 2 years.
- Only one college specifically prepares bachelor's graduates to teach in community programs.
- Teachers in community programs are currently not required to have a bachelor's degree.
- It is not clear if there are significant salary advantages for community teachers to have bachelor's degrees. There are bonuses for teachers who obtain degrees but only in some programs.

### Proposed actions to turn the curve:

- New ARC programs will increase the number of EC graduates with teacher certification in the future.
- New bachelor's programs in EC related fields will increase these graduates in the future.
- Also see proposed actions for performance measure 2.

January 9, 2009

**Performance Measure 2:** The number of EC teachers prepared each year in Connecticut at the associate's degree level.



### Story behind the baseline:

- This measure is declining slightly despite the fact that the number of associate's degrees awarded in CT is increasing. In 2005 4.7% of CT associate's degrees were in EC; in 2008 3.8% were in EC.
- Teachers in community programs are currently not required to have an associate's degree.
- It is unclear if there are significant salary advantages for teachers with associate's degrees. There are bonuses for teachers who obtain degrees but only in some programs.

### Proposed actions to turn the curve:

- The most important efforts to turn the curve on measures 1 and 2 will involve requiring teachers to have a degree, increasing compensation, and improving access to higher education programs.





**TAB 8**

**STATE DEPARTMENT OF EDUCATION PROGRAM REPORT CARDS**



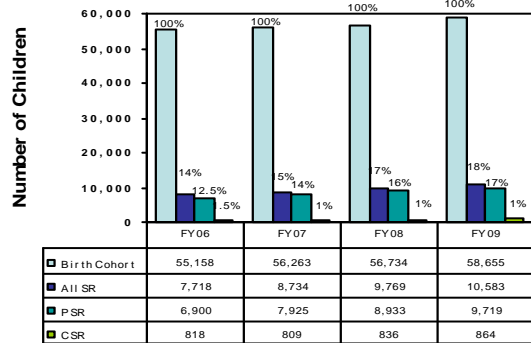
## Program Report Card: State Department of Education / School Readiness Program

*Program Purpose:* To provide access to high-quality early childhood programs for all 3- and 4-year-olds in eligible municipalities.

*Contributes to Population Quality of Life Result:* The School Readiness Program contributes to the Early Childhood Education Cabinet's *Ready by 5, Fine by 9* investment plan to achieve the following goal: to begin kindergarten with the knowledge, skills and behaviors needed for success in school.

**Quality early childhood programs ameliorate the risk factors that lead to achievement gaps. Two components that contribute to program quality are: teachers with early childhood specific training; and systematic monitoring across multiple program components.**

**Performance Measure 1:** Access to quality early childhood programs in eligible municipalities.



**Story behind the baseline:**

This graph shows a comparison of the School Readiness-funded space capacity over the past four years in relation to the birth cohorts, for eligible 3 and 4 year olds, in the 64 School Readiness Municipalities. The Priority School Readiness (PSR) Districts have increased access by 4.5 percent, whereas, Competitive School Readiness (CSR) Municipalities have remained stagnant at one percent. Level funding for the CSR Municipalities hinders the capability for further expansion to provide access to School Readiness programming.

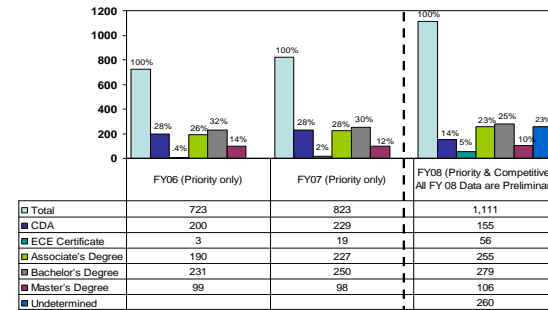
**Proposed actions to turn the curve:**

- Assist communities to identify their preschool needs and adjust the School Readiness program policies to better address those needs.

- Allow formula adjustments to re-allocate funding bringing parity to PSR Districts and CSR Municipalities.

**Performance Measure 2:** Progress toward teacher qualifications.

**Performance Measure 2: Progress of Teacher Qualifications Toward Baccalaureate Degree in School Readiness Programs**



**Story behind the baseline:**

The State Department of Education (SDE) now relies on the new Early Childhood Professional Development Registry for this measure. All data for FY 08 are preliminary, and data for FY 06 and FY 07 are not comparable to FY 08 because the collection method changed. Factoring out the "undetermined" category in FY 08, there does not seem to be significant progress toward attaining higher level teacher qualifications. The additional category labeled "undetermined" represents the number of remaining teacher files currently being disaggregated. It is expected that most of those files will represent qualified teachers; however some will represent teachers who do not meet the minimum qualifications.

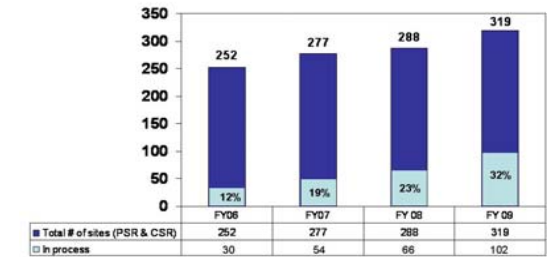
**Proposed actions to turn the curve:**

- Develop legislative language, in collaboration with the Department of Higher Education (DHE) and higher education institutions, to design and require a new Early Childhood Teacher

Credential (at the AA or BA level) as a means to raise teacher qualifications.

- Expand program participation by 20 percent over the next biennium in SDE's professional development initiative that addresses the connections between standards-based instruction and assessment using systematic processes that inform intentional teaching.

**Performance Measure 3:** Monitoring progress toward quality standards.



**Story behind the baseline:**

There are 319 School Readiness programs in Connecticut, 300 of these programs are participating in the National Association for the Education of Young Children (NAEYC) accreditation system; 62 percent of which hold accreditation and 32 percent are in process of achieving such status. There are 12 programs that hold Head Start status and seven that hold New England Association of Schools and Colleges (NEASC) approval. The NAEYC and Head Start systems align with the School Readiness quality components and are therefore adopted as the School Readiness quality monitoring system. These systems address multiple program quality components such as health, curriculum, family, assessment, physical environment, teaching, leadership, and community partnerships.

## Program Report Card: State Department of Education / School Readiness Program

*Program Purpose:* To provide access to high-quality early childhood programs for all 3- and 4-year-olds in eligible municipalities.

*Contributes to Population Quality of Life Result:* The School Readiness Program contributes to the Early Childhood Education Cabinet's *Ready by 5, Fine by 9* investment plan to achieve the following goal: to begin kindergarten with the knowledge, skills and behaviors needed for success in school.

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### **Proposed actions to turn the curve:**

- Within available appropriation, conduct a longitudinal study on the effectiveness of the School Readiness program.
- The Connecticut Early Childhood Education Cabinet, SDE and DHE have begun work with the Council of Chief State School Officers (CCSSO) in the development of a state early childhood accountability system to improve the effectiveness and outcomes of diverse forms of early education programs.

## Program Report Card: State Department of Education / Family Resource Center Program (FRC)

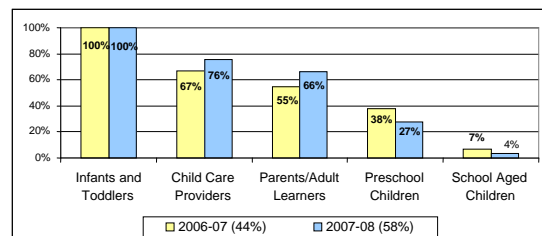
**Program Purpose:** The overarching goal of the State's Family Resource Center (FRC) Program is to provide families and caregivers with information about child development, school readiness, and parenting strategies leading to developmental success.

**Contributes to Population Quality of Life Result:** The FRC Program is a positive contributor to the *Ready by 5, Fine by 9* investment plan given the population it serves and its unique position with respect to disseminating information to families and caregivers. FRCs provide programs and support services designed to enhance child development and school performance through parent education and preschool development screening.

FRCs customize their services based on community needs, therefore, it has been a challenge to tell a coherent story on outcomes. However, the Department has made great strides over the past two years in establishing measures as outlined. To further augment the development of additional performance measures to capture relevant outcome data, the Department will utilize the results of the Yale Evaluation Study. The study, which will be completed in May 2009, examines the effectiveness and the impact of FRCs. Preliminary emerging themes from this study are:

- FRCs expand a school's capacity to communicate with non-English speaking children and their families. More than 100+ FRC staff speak at least two languages and overall are fluent in 15 different languages. Two-thirds of the multilingual FRC staff speak Spanish;
- FRCs are a vital link between families and the services that they need. FRCs provide more than 32,000 resource and referral contacts each year; and
- FRCs leverage their funding by using volunteers. FRC volunteers provided 2,771 hours of service in just one month.

**Performance Measure 1:** The percentage of FRC participants receiving Parents as Teachers (PAT) services.



### Story behind the baseline:

In 2007-2008, 58 percent of all FRC enrolled families actively participated in PAT activities compared to 44 percent in 2006-2007, a 14 percentage point increase. PAT is a nationally recognized family-in-training program model that provides high quality parent education and family support.

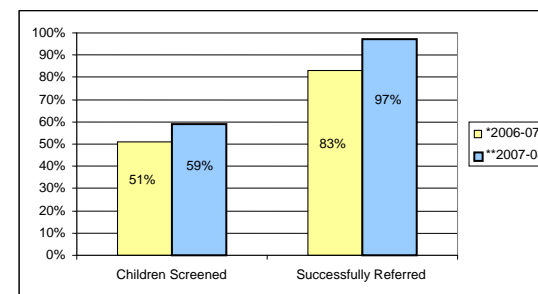
This increase is largely attributed to the systemic alignment of PAT services throughout all FRCs implemented in July 2007 when all SDE funded FRCs were required to administer PAT as a "Priority Service Delivery Model." Comparison data show the ongoing efforts of FRCs to connect parents/adults and children with a comprehensive array of services/supports targeting the healthy growth and development of children.

### Proposed actions to turn the curve:

- Remain constant in regular monitoring of programs to ensure the appropriate alignment of services administered as PAT.
- Continue to subscribe the use of both state and national PAT technical assistance, professional development and training to effectively ensure fidelity to the PAT logic model.

While the Yale study findings are not expected until spring 2009, emerging trends support FRCs as instrumental in connecting families and childcare providers with resources that support healthy child development. Study outcomes are expected to have impact on future FRC policy and/or program development.

**Performance Measure 2:** Percent of young children screened with the Ages and Stages Questionnaire (ASQ) and the percent of subsequent, successful referrals as a results of screening.



### Story behind the baseline:

Universal developmental screening is a goal in many Connecticut communities and FRCs are helping to achieve this goal.

Comparison data show an increase in the percentage of infants, toddlers and preschoolers enrolled in FRCs who are receiving appropriate developmental screenings (51% in 2006-2007 compared to 59% in 2007-2008). Furthermore, the data show an increase in the percent of children who were successfully referred and connected with appropriate diagnostic testing and/or an intervention service provider (83% in 2006-2007 compared to 97% in 2007-2008).

FRCs play a central role in early identification and intervention for children at risk of learning or other developmental challenges. (Note: two separate, but comparable data sources were used for FRC data; \*06-07 CONNPAT data source and \*\*07-08 SDE data source.)

## Program Report Card: State Department of Education / Family Resource Center Program (FRC)

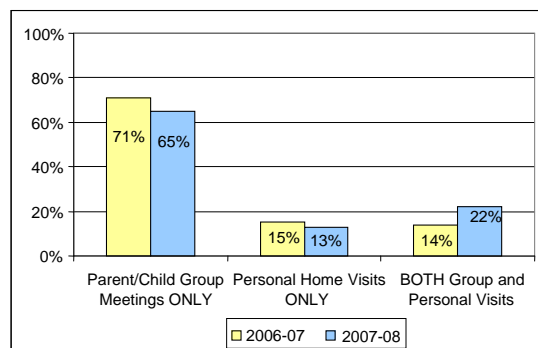
**Program Purpose:** The overarching goal of the State's Family Resource Center (FRC) Program is to provide families and caregivers with information about child development, school readiness, and parenting strategies leading to developmental success.

**Contributes to Population Quality of Life Result:** The FRC Program is a positive contributor to the *Ready by 5, Fine by 9* investment plan given the population it serves and its unique position with respect to disseminating information to families and caregivers. FRCs provide programs and support services designed to enhance child development and school performance through parent education and preschool development screening.

### Proposed actions to turn the curve:

- Develop individual program reports that review program data and provide technical assistance in improving program outcomes related to successful referrals.
- Work with PAT consultants to provide regular training on the appropriate use of the ASQ screening tool and develop procedures that will increase the numbers of young children who regularly receive age appropriate developmental screenings.

**Performance Measure 3:** The percentage of group meetings and home visits with families delivered as part of the Parents as Teachers services offered through FRCs.



### Story behind the baseline:

The primary focus of the PAT model is the use of personal/home visits with families. The literature reports that frequent personal home visits are a critical method to deliver child development information to families. These visits are also recognized as the most effective way for parent educators to engage parents in learning to observe

their child's development, address concerns, and provide activities that provide meaningful parent/child interaction.

Comparison data show that among the increased number of FRC families participating in PAT programs/activities, there are more families receiving personal/home visits. In 2007-2008, 35 percent (13% and 22% combined) received personal/home visits compared to 29 percent in the previous year. The six percent increase in home visitations is attributed to the FRC program requirement to administer PAT as a Priority Service Delivery Model.

### Proposed actions to turn the curve:

- Continue to emphasize and expand the use of home/personal visits with FRC families as an effective way to improve the knowledge of parenting skills and developmental milestones for children.
- Investigate existing state program models that institute similar home visitation programs and explore the potential of merging resources to increase the frequency of personal/home visits.

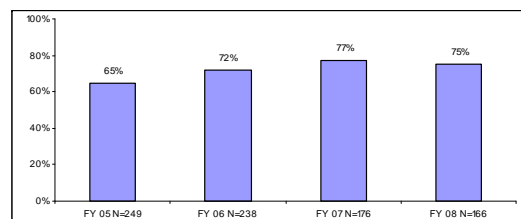
## Program Report Card: State Department of Education / Even Start Family Literacy Program

**Program Purpose:** Even Start (Title I, Part II, federal initiative) helps break the cycle of poverty and illiteracy by improving the educational opportunities of families most in need by combining early childhood education, adult literacy or adult basic education and parenting education into a unified family literacy program.

**Contributes to Population Quality of Life Result:** Even Start contributes to the population goal of ensuring that all children are healthy and ready to learn by age 5 by simultaneously providing services for parents and young children to help parents improve their literacy or basic educational skills; to help parents become full partners in educating their children; to assist children in reaching their full potential as learners; and to assist families in moving toward self-sufficiency and out of poverty.

**Although we see solid gains in Even Start, the number of participants continues to decrease due to federal budget cuts. The state's federal allocation has decreased 70 percent from \$1,615,000 in 2005-06 to \$472,241 in 2008-09. Level federal funding is anticipated for 2009-10. In order to accommodate rising program costs and maintain fidelity to the federal program requirements, the number of participants will continue to decline in 2009-2010.**

**Performance Measure 1:** Percent of Even Start children meeting standards in reading/reading readiness skills.



### Story behind the baseline:

Even Start program performance data show that between 65 percent to 77 percent of the children met or exceeded standards in reading readiness for their age group (ages birth to 7). The trend in program performance is relatively stable. Reading/reading readiness skills are assessed with the following measures, depending on the child's age: the Ages and Stages Questionnaire, the CT Preschool Assessment Framework, the Phonological Awareness Literacy Screening (PALS), the Peabody Picture Vocabulary Test (PPVT), grade promotion, Concepts About Print, and the Developmental Reading Assessment.

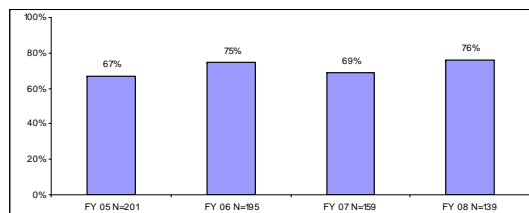
Although research data are not available for Connecticut, research from other states indicates that children who receive Even Start services outperform children who do not participate in Even Start. These

studies suggest that Even Start children score significantly higher on measures of reading readiness, and are twice as likely as non-Even Start children to be reading at or above grade level.<sup>i</sup>

### Proposed actions to turn the curve:

Through state technical assistance, the early childhood classrooms will be reviewed using either the Early Childhood Environment Rating Scale or Infant/Toddler Environment Rating Scale, as appropriate. In order to continue to improve quality, the State Department of Education (SDE) will ensure that each program uses the results to develop a quality maintenance and improvement plan.

**Performance Measure 2:** Percent of Even Start parents showing significant learning gains or earning a high school diploma.



### Story behind the baseline:

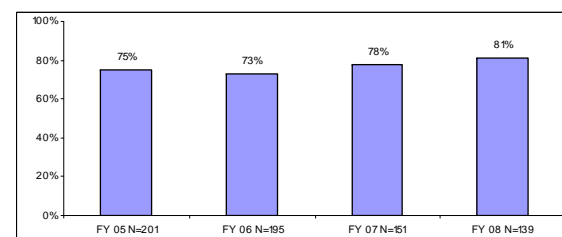
Over the past four years, adults in Even Start have consistently made significant gains. Compared to the entire population of adult education students, Even Start participants make impressive gains on measures of high school completion and English language acquisition. The percent of Even Start parents attaining a measurable educational outcome has been significantly greater than that of all adult education participants statewide by about 25 percentage points annually.<sup>ii</sup>

### Proposed actions to turn the curve:

SDE will continue to increase the percentage of Even Start children and adults meeting the performance

measure by reviewing and revising the standard to ensure that it is challenging; continued monitoring (compliance reviews, local evaluations, state performance indicator monitoring, etc.); and professional development.

**Performance Measure 3:** Percent of Even Start parents demonstrating gains in family literacy skills.



### Story behind the baseline:

Results show that in the past four years, three-quarters or more of the parents were observed to learn and apply parenting skills related to family literacy in all areas. The trend is improving in that 75 percent met the standard in FY 2005 and 81 percent met the standard in 2008. Programs have focused their parenting classes more purposefully on literacy development.

### Proposed actions to turn the curve:

SDE will provide professional development for all Even Start staff to strengthen parenting and interactive literacy across all program components. In addition, the 2008-09 state evaluation will focus on local practices in this area.

<sup>i</sup> Link, D. E. and Weirauch, D. M. (2005). Questioning the validity of the evidence against family literacy programming: A critical analysis of the National Even Start Evaluations. Literacy Harvest/Family Literacy Forum, 12, 33-38. New York: Literacy Assistance Center.

<sup>ii</sup> Source: Connecticut Adult Reporting System (CARS)

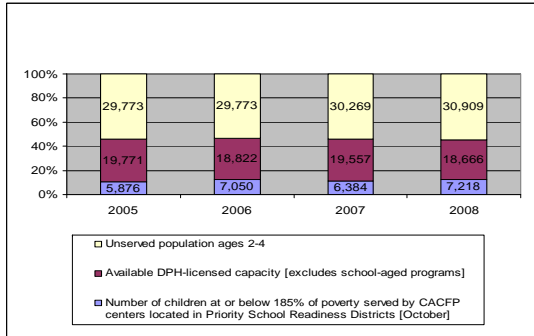




**Program Purpose:** The Child and Adult Care Food Program provides reimbursement for nutritious meals and snacks served to children enrolled in child care settings.

**Contributes to Population Quality of Life Result:** The Child and Adult Care Food Program (Federal U.S. Department of Agriculture initiative) contributes to the population goal of ensuring that all children are healthy and ready to learn by age 5 by simultaneously ensuring good nutrition and improving the quality of child care. Good nutrition provides the energy and nutrients essential to sustain life and promote the physical, social, emotional and cognitive development of young children.

**Performance Measure 1:** Number of children in Priority School Readiness Centers as compared to available licensed capacity and unserved population.



**Story behind the baseline:**

Approximately 55,800 children between 2 and 4 years of age reside in the 19 Priority School Districts, the target of the state School Readiness initiative. Annually, about 12 percent of the children who are enrolled in childcare settings that participate in the CACFP are at or below 185 percent of the federal poverty level. While the number of children between 2 and 4 years of age has remained relatively stable, there has been a slight decrease in the number of available Department of Public Health (DPH) licensed slots and only a slight increase in the number of children served by CACFP centers in these Priority School Districts. The slow growth in participation is of concern since good nutrition

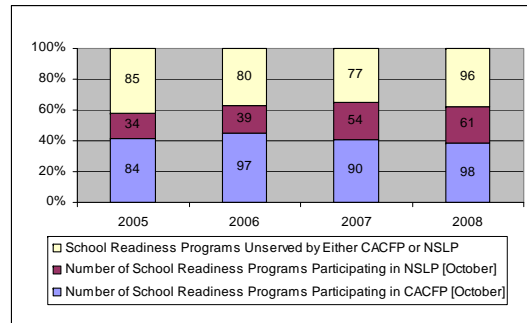
is essential for cognitive and academic development.

**Proposed actions to turn the curve:**

Regional information sessions which were aimed at outreach and recruitment to target unserved School Readiness programs for CACFP participation yielded only slight gains in the number of children participating in CACFP.

- New actions will include more intensive efforts targeting individual centers. Activities will consist of targeted promotional mailings to nonparticipating centers and face-to-face technical assistance and support to eligible programs that will address specific barriers to participation.

**Performance Measure 2:** Number of priority School Readiness Centers participating in the Child and Adult Care Food Program (CACFP) and the National School Lunch Program (NSLP).



**Story behind the baseline:**

The data indicate a steady increase in the number of School Readiness Programs in Priority School Districts over the past four years (203 programs in 2005 compared to 255 programs in 2008). At the same time, there has been an increase in the number of programs participating in CACFP and NSLP combined (118 programs in 2005 compared to 159 in 2008). Of the programs participating, a decrease in CACFP participation and corresponding increase in NSLP participation is noted, suggesting a trend toward funding more school readiness slots in local school district programs instead of in traditional child care centers.

Connecticut State Department of Education's (CSDE) challenge to increase substantially the number of licensed centers participating in CACFP and NSLP continues.

**Proposed actions to turn the curve:**

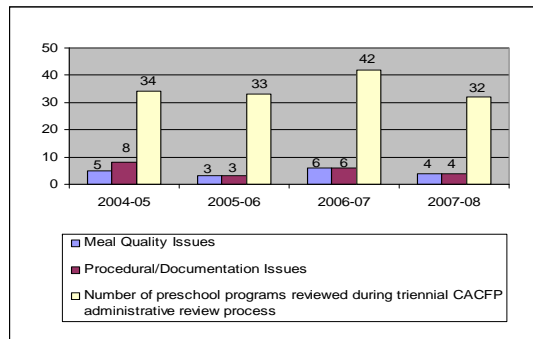
- Partnerships with School Readiness liaisons and providers to identify the most underserved areas for targeted outreach will continue.
- In addition to efforts identified under performance measure 1, a survey will be conducted to determine barriers to participation. The results will lead to more focused intervention strategies.
- The annual income and expenditure report shows a gap exists between CACFP and NSLP reimbursements and actual costs. If the

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survey indicates funding is the identified barrier, policy development regarding the addition of state funding would need to be addressed.

**Performance Measure 3:** Number of preschool programs with quality meal/menu issues identified during triennial CACFP administrative review process.



**Story behind the baseline:**

The CSDE’s administrative review system is a needed accountability process that uncovers meal quality issues in CACFP centers. The number of reviews each year fluctuates due to the federal requirement to review each program every three years. Over a four-year period, agency staff found that 9-15 percent of reviewed centers experienced meal quality issues. These findings are either procedural in nature (e.g., lack of documentation on file or insufficient data), or

they may involve more substantive issues that impact meal quality. This data has remained relatively stable over the past four years, indicating that overall meal quality generally meets regulatory requirements. Since meal quality is based on a number of standards, it is imperative to identify if there is a specific area causing these centers to encounter deficiencies in the quality of meals served.

**Proposed actions to turn the curve:**

- Examine administrative review data to identify the trends concerning meal quality and implement strategies and training to improve these meal quality issues for all sponsors.
- Use the data and findings from the administrative reviews to customize technical assistance and trainings to individual sponsors.

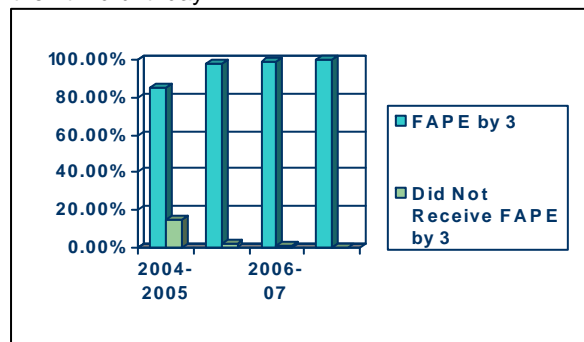
## Program Report Card: State Department of Education / Early Childhood Special Education

**Program Purpose:** To provide a free appropriate public education by delivering individually designed special education and related services to eligible children ages 3 through 5 who have significant developmental delays or disabilities in accordance with state and federal law.

**Contributes to Population Quality of Life Result:** Early childhood special education contributes to the population result of the *Ready by Five, Fine by Nine* state investment plan. It allows for the provision of a free appropriate public education to children with significant developmental delays or disabilities beginning by a child's third birthday to address children's individual needs such that children make developmental and functional progress over time as a result of receiving services through an Individualized Education Program (IEP).

**The performance measures for the Early Childhood Special Education Program are identified to: (1) ensure continuity of services for children with disabilities; (2) provide a profile of impact; and (3) identify the location of services for children with disabilities, if the data is available.**

**Performance Measure 1:** The percent of children referred by the Connecticut Birth-to-Three System who have an IEP developed and implemented by their third birthday.



**Story behind the baseline:**

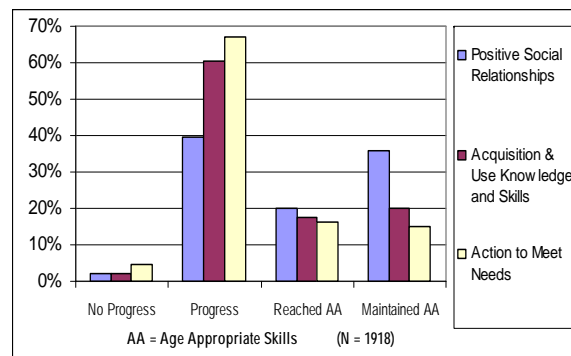
Performance Measure 1 indicates whether children who exit the Connecticut Birth-to-Three System at age 3 begin receiving their special education and related services by their third birthday (not including the summer unless the child qualifies for extended school year services). The goal is to ensure that a free appropriate public education is provided by the third birthday of a child and that a child receives, to the extent appropriate, uninterrupted services and supports designed to address their individual needs. Trend data indicates that over the four year reporting period, data went from 85.4 percent in 2004-05 to 99.8 percent in 2007-08. Early childhood special education has made annual progress towards

meeting the expectation of 100 percent. The Department's annual monitoring and data reporting have had a significant impact on this performance result.

**Proposed actions to turn the curve:**

- Ensure that the state data captures the activities of the field to ensure accurate and valid reporting.
- Provide technical assistance and support to ensure the reliability and timeliness of the data used for analysis and reporting.
- Monitor school districts.
- Provide targeted technical assistance in response to data regarding the provision of special education by age 3 for children coming from the Connecticut Birth-to-Three System.

**Performance Measure 2:** The percent of preschool children with an IEP who demonstrate progress in: positive social-emotional skills (including social relationships); acquisition and use of knowledge and skills (including early language/communication and early literacy); and use of appropriate behaviors to meet their needs.



**Story behind the baseline:**

Performance Measure 2 identifies data on the developmental and functional progress of children who receive special education and related services in the preschool grade. The Department of Education (SDE) requires school districts to utilize one assessment instrument to collect individual child assessment data. Children are given an assessment when they enter preschool special education and again when they exit preschool special education. The data represent the three learning areas of individual children: social skill development; acquisition and use of knowledge and skills; and the ability to meet individual needs. Data from 2007-08 identify that the majority of children receiving special education made growth over the course of time that they were receiving special education in the preschool grade. Child progress is indicated by demonstrating: (a) general progress as measured by the learning of new skills and behaviors; (b) significant growth by which a child attains skills at an age appropriate level; and (c) the maintenance of skills commensurate with their age over time. No progress in areas is also reported.

This initiative is known as the "Early Childhood Outcome" (ECO) requirement. This collection and reporting of child information on a state and national level is new. There is currently no national framework of progress data expectations at the preschool level for which states can benchmark their progress data. The 2007-08 data includes 1918 children. National standards provide guidance to states that establishing targets for improvement is not appropriate. Rather, individual yearly data is to be reported. Initial data collection and reporting on a small sample began in 2006-07. In accordance with national guidance, school years are not comparable.

## Program Report Card: State Department of Education / Early Childhood Special Education

*Program Purpose:* To provide a free appropriate public education by delivering individually designed special education and related services to eligible children ages 3 through 5 who have significant developmental delays or disabilities in accordance with state and federal law.

*Contributes to Population Quality of Life Result:* Early childhood special education contributes to the population result of the *Ready by Five, Fine by Nine* state investment plan. It allows for the provision of a free appropriate public education to children with significant developmental delays or disabilities beginning by a child's third birthday to address children's individual needs such that children make developmental and functional progress over time as a result of receiving services through an Individualized Education Program (IEP).

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### **Proposed actions to turn the curve:**

- Ensure that the state data captures the activities of the field in order to ensure accurate and valid reporting.
- Integrate this data collection with other Department data collections for use in analysis.
- Ensure the provision of training and technical assistance in response to data collection and analysis.
- Utilize the data to design and implement professional development and policy guidance for the field.

**Performance Measure 3:** The percent of preschool children with IEPs who receive special education and related services in settings with typically developing peers.

### Data Unavailable

This measure examines the amount of time that a child receiving special education spends in a least restrictive environment. It would reflect the amount of time that a child with a disability is receiving services with typically developing children of the same age. The measure continues to be relevant to the work of the Department's accountability.

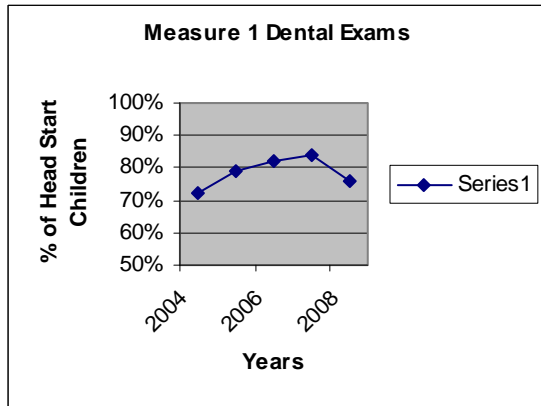
However, the data collection for this measure changed in the 2006-07 school year with the implementation of a new data system and is yet to be reinstated due to resources, staffing and federal public policy data definitions. It remains on the data development agenda for implementation in 2009-10.

## Program Report Card: Head Start

*Program Purpose:* To provide comprehensive services to low income children and their families, including health, education, social services, nutrition and parent involvement

*Contributes to Population Quality of Life Result:* Ready by Five and Fine by Nine: Head Start helps to ensure that all children are healthy and ready for school success by age 5

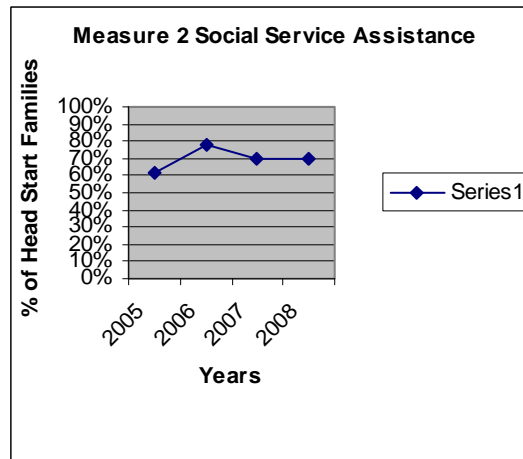
**Performance Measure 1:** The percentage of children enrolled in the Head Start program who have had a dental exam within the prior 12 months of the closing of the program year.



**Story behind the baseline:** Providing dental services to poor children is critically important but very difficult to achieve because so few dentist accept the low reimbursement rate. The decrease in the percentage of Head Start children who have had a dental exam may be attributed to the fact that programs are no longer “counting” children who have had a screening done by a dental hygienist as having had an exam. Head Start requires children to be seen by a dentist and not a dental hygienist.

**Proposed actions to turn the curve:** Individual Head Start programs will work with local dental associations, seeking pro bono dental work for their children.

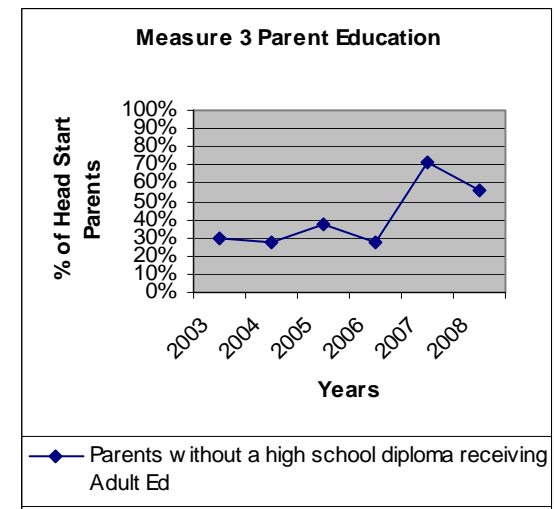
**Performance Measure 2:** The number of families determined through the Family Partnership Agreement process to be in need of services who were referred to and received social service assistance during the Head Start program year.



**Story behind the baseline:** Head Start programs were able to stop the trend line’s downward spiral. This may be due in part to the infusion of \$1 million of State money into the Head Start programs.

**Proposed actions to turn the curve:** Head Start programs will work to educate their Congressional Representatives on the impact the lack funding increases for Head Start has had on the programs’ ability to deliver services to their families. If funding is not increased, programs will request a reduction in funded enrollment while maintaining their current funding level.

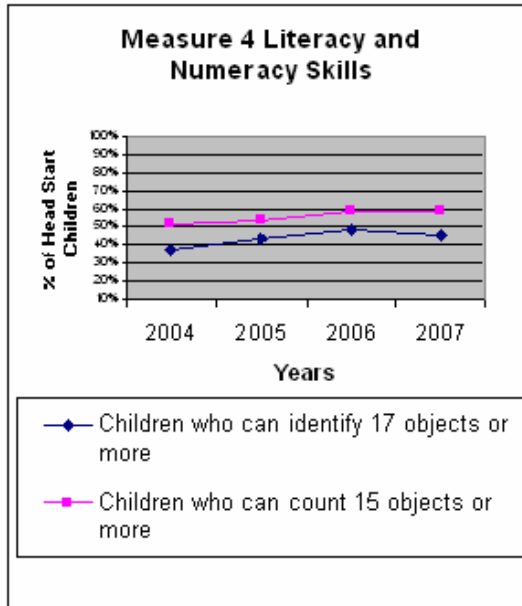
**Performance Measure 3:** The percentage of Head Start parents lacking a high school diploma who received Adult Basic Education Services.



**Story behind the baseline:** The number of Head Start parents who lack a high school diploma increased from 21% in 2007 to 29% in 2008. Head Start programs have found it necessary to decrease their Family Service staff in order to balance their program budgets. This decrease in Family Service staff has made it difficult for programs to meet the needs of all of their families

**Proposed actions to turn the curve:** Head Start programs will work to educate their Congressional Representatives regarding the relationship between Head Start funding and manageable caseloads for FSWs.

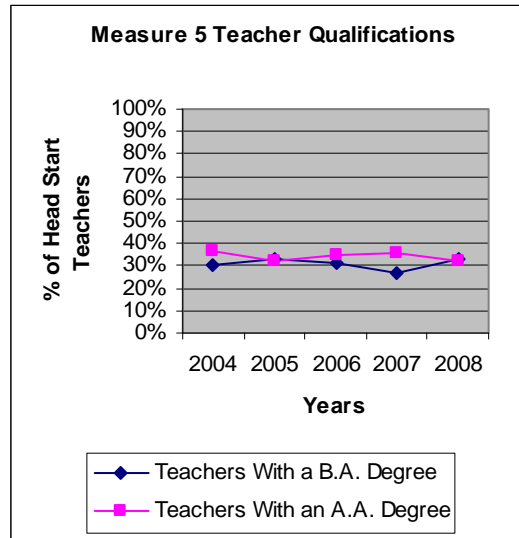
**Performance Measure 4:** The percentage of children who upon entering kindergarten can identify at least 17 letters of the alphabet and count 15 objects.



**Story behind the baseline:** The Improving Head Start for School Readiness Act of 2007 suspended the use of the National Report System to assess children; therefore, no data is available for 2008.

**Proposed actions to turn the curve:** A study on the Developmental Outcomes and Assessments for Young Children is being conducted by the National Academy of Sciences. Once the study is completed, the Secretary of the U.S. Department of Health and Human Services will integrate the results of the study into each assessment used in Head Start programs.

**Performance Measure 5:** The percentage of Head Start teachers who have an Associate's Degree or higher.



**Story behind the baseline:** Head Start tracks data on teachers who have a B.A. or an A.A. degree in ECE or a related field only. The Head Start Act of 2007 states that no later than September 30, 2013, at least 50 percent of Head Start teachers nationwide have a B.A. or advanced degree in ECE. In light of this requirement, Head Start programs are providing their staff with tuition reimbursement in order to help cover the cost of furthering their education. Programs have difficulty in recruiting teachers with a B.A. in ECE because their starting salaries cannot compete with the starting salaries of the public schools.

**Proposed actions to turn the curve:** In order to continue this upward trend in teacher qualifications, funds on both the state and federal level need to be made available to Head Start programs to use for tuition reimbursement. The majority of Connecticut's Head Start teaching staff have been entered in the Workforce Registry. Head Start programs are in the process of registering the remaining teaching staff.

## Program Report Card: State Department of Education / Early Reading Success (ERS)

*Program Purpose:* To provide access to high-quality literacy programs for all students in Grades Kindergarten through Grade 3, inclusive, in all Priority School Districts (PSDs).

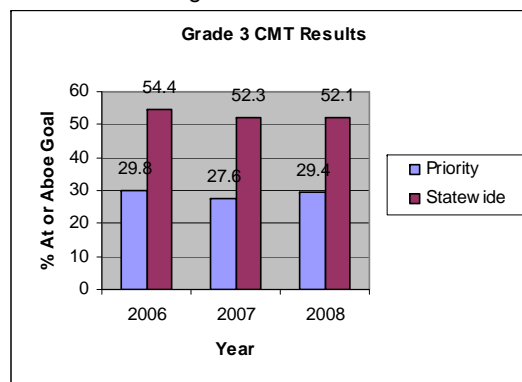
*Contributes to Population Quality of Life Result:* Early Reading Success contributes to the population goal of ensuring that all students are healthy, safe and successful in school by age 9 and will have access to high quality literacy programs that support the students' reading achievement, skills and knowledge in order to enter Grade 4 reading at or above grade level.

Despite the lack of ERS funding over the past year the State Department of Education (SDE) and the Priority School Districts (PSDs) have continued to focus on reading achievement. Focused strategies included:

- Implementation of a comprehensive reading test for new elementary school teachers as a condition of certification. The test will become a condition of certification in the summer of 2009.
- Creation of a diagnostic survey on knowledge of evidenced-based reading instruction for raising student achievement through targeted professional development.
- Requirement for professional development for all primary teachers, coaches and administrators in order to ensure that they are highly skilled in designing, implementing and monitoring Individual Reading Plans (IRP).
- Creation of a standard electronic version of the IRP to be used by all literacy coaches when assisting classroom teachers in the development of a student's IRP.
- Creation of the CT Walkthrough Protocol Guide for use by building principals and the literacy team to monitor student IRPs and student progress.

As of FY 08-09, ERS funding was eliminated. Therefore, proposed actions specified in this report card are contingent upon the availability of other funds. Other funds may include, but are not limited to Priority School District, Title I, and Reading First.

**Performance Measure 1:** Percentage of students in Grade 3 reading at or above Goal.



**Story behind the baseline:**

Statewide, the performance of Grade 3 students stayed consistent with 52 percent performing in the Goal range. Reading achievement by Priority School District (PSD) Grade 3 students increased in 2008, but they remain out performed by their peers by almost 25 percent.

**Proposed actions to turn the curve:**

- Conduct site visits of all PSDs as part of the State Department of Education's accountability plan.
- Include expectations and indicators of early literacy achievement in the District Improvement Plans and School Improvement Plans.
- Utilize results of the diagnostic survey on knowledge of evidenced-based reading instruction to plan professional development.
- Use result of the piloting of the electronic IRPs to make modifications if appropriate and implement in all PSDs in 2009-10.
- Deliver CT Walkthrough Protocol Guide training to districts as needed.

**Performance Measure 2:** Percentage of students reading at proficiency as indicated by the National Assessment of Educational Progress (NAEP).

NAEP Grade 4 Reading Proficiency Rates

	2002	2003	2005	2007
National Public	30*	30*	30*	32
<b>CONNECTICUT</b>				
All Students	43	43	38	41
White	52	54	47	52
Black	17	12	12	15
Hispanic	15	18	15	16
Not Eligible	51	53	48*	53
Eligible	21*	18	14	13

\* Value is significantly different from the value for the same jurisdiction in 2007.

**Story behind the baseline:**

The most current NAEP data is from 2007. The Grade 4 NAEP reading data indicates that Connecticut has one of the largest differences in academic achievement between low-income and higher-income students. Other factors that contribute to the early reading difficulties of Connecticut's students include: poverty, entering school as an English Language Learner (ELL); no experience in preschool; and/or parents or guardians who are not literate themselves.

**Proposed actions to turn the curve:**

- Conduct site visits of all PSDs as part of SDE's accountability plan.
- Coordinate and conduct ELL professional development for all PSDs for 2009-10 school year.
- Include expectations and indicators of early literacy achievement in the District Improvement Plans and School Improvement Plans.

## Program Report Card: State Department of Education / Early Reading Success (ERS)

*Program Purpose:* To provide access to high-quality literacy programs for all students in Grades Kindergarten through Grade 3, inclusive, in all Priority School Districts (PSDs).

*Contributes to Population Quality of Life Result:* Early Reading Success contributes to the population goal of ensuring that all students are healthy, safe and successful in school by age 9 and will have access to high quality literacy programs that support the students' reading achievement, skills and knowledge in order to enter Grade 4 reading at or above grade level.

**Performance Measure 3:** Ratio of Literacy Coaches to K – 3 teachers in Priority School Districts.

District	Ratio of Literacy Coaches to K-3 Teachers	
	07-08	08-09
Ansonia	1:21	1:21
Bloomfield	1:10	NA
Bridgeport	1:21	1:23
Bristol	1:14	1:18
Danbury	1:14	1:17
East Hartford	1:10	1:13
Hartford	1:29	1:37
Meriden	1:16	1:18
New Britain	1:14	1:15
New Haven	1:23	1:38
New London	1:15	1:12
Norwalk	1:13	1:16
Norwich	1:16	1:19
Stamford	1:11	1:25
Waterbury	1:30	1:39
Windham	1:22	1:19
<b>PSD Average</b>	<b>1:16</b>	<b>1:22</b>

**Story behind the baseline:**

The chart above indicates the ratio of literacy coaches to elementary classroom teachers (K-3) by PSD. The data suggest that among the PSDs there is a large variation in the number of literacy coaches to K-3 teachers. Additionally, there are differences between FY 07 and FY 08. These differences may be due to the size of the school or the source or manner in which funds were spent. The data do not indicate how many coaches are new to their positions. Bloomfield is no longer in PSD status and is therefore listed as NA for FY 08.

This measure is directly linked to ERS funding and may need to be reviewed in the future due to the elimination of this funding source. Many PSDs are

considering the elimination of literacy coaches for 2009-10.

**Proposed actions to turn the curve:**

- Provide professional development for PSD literacy coaches so that they remain current with evidenced-based reading practices.
- Conduct site visits of all PSDs as part of SDE's accountability plan and monitor coaching logs.
- Develop certification regulations which clearly define the qualifications and roles of coaches.

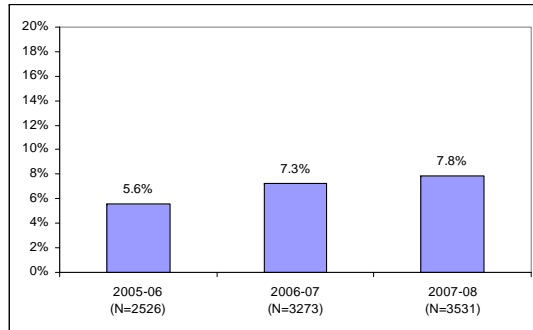


Program Report Card: State Department of Education / Adult Education Program (*Mothers of Young Children*)

**Program Purpose:** To assist adults in obtaining the knowledge and skills necessary for employment, self-sufficiency, secondary school completion and citizenship. Programs also serve to assist parents in obtaining the knowledge and skills necessary to become more effectively involved with their children’s education.

**Contributes to Population Quality of Life Result:** A mother’s education level is one of the greatest predictors of children’s school success. Adult education programs contribute to the population goal of ensuring that all children are healthy and fully successful in school by age 9 since mothers who enroll in adult education to improve their literacy abilities and/or achieve a high school diploma are: prepared to be more effectively involved in their children’s education; better prepared to enter employment or postsecondary education; and better equipped to move out of poverty and provide a healthier and safer future for their children.

**Performance Measure 1:** Percent of mothers without a high school diploma who are enrolled in adult education and have children 10 years of age and younger.



**Story behind the baseline:**

It is estimated that there are approximately 45,000 mothers of young children, annually, who can benefit from adult education services (source: DPH). The data suggest that fewer than eight percent of these mothers are enrolled in adult education programs. This “penetration” rate is similar to that for the statewide adult education enrollment relative to the overall need.

While the State statutes that govern adult education do not list specific population subgroups as target audiences, local adult education programs have welcomed all residents most in need of adult education services, including mothers of young children. The Connecticut State Department of Education (CSDE) has utilized federal dollars to reach out to this critical audience through some of the following initiatives:

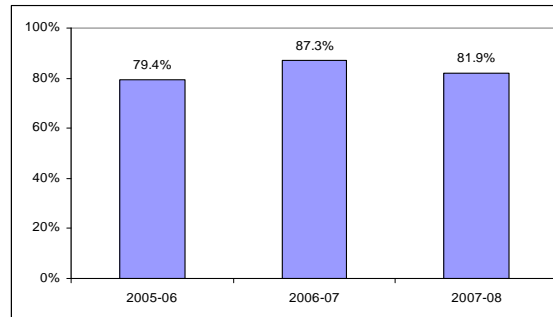
- a) Family literacy grants provide adult education services to parents; age-appropriate education for children; parenting education; and interactive literacy activities between parents and children.
- b) Family Learning Curriculum Connections projects build collaborations between adult education programs and elementary schools to help families understand the curriculum expectations for their children.

In light of such efforts, the increase in the enrollment of mothers with young children is promising. The total number of family literacy grants awarded has also increased from 11 in 2007-08 to 17 in 2008-09. Despite these accomplishments, the ongoing cap on the state adult education appropriation limits substantial growth.

**Proposed actions to turn the curve:**

- Continue a federal adult education grant priority that promotes family literacy activities.
- Promote increased interagency collaborations with Departments of Social Services and Labor, Family Resource Centers, elementary schools and School Readiness and Head Start programs to recruit more mothers in need of adult education.

**Performance Measure 2:** Percent of mothers in adult basic education who demonstrate progress from pre- to post-assessments.



**Story behind the baseline:**

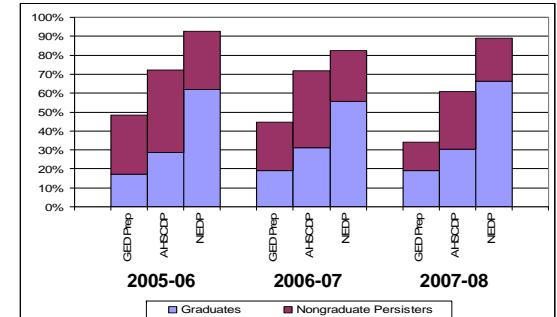
Adult basic education (ABE) programs serve learners who are functioning below the secondary school level. These learners demonstrate severe deficiencies in the basic skill areas of reading, writing and mathematics. In 2007-08, of the approximately 485 learners in ABE programs, 64 percent took standardized pre- and post-tests. The data illustrate that vast majorities of learners who were administered pre- and post-assessments achieve progress in their basic skill abilities.

In a system where learner participation is voluntary, learner persistence is a strong predictor of student success. Some barriers to persistence include the limited availability of class offerings; instructional hours per week; and support services such as counseling, childcare and transportation.

**Proposed actions to turn the curve:**

- Within available resources increase intensity and duration of class offerings.
- Convene adult education directors with the co-chairs of the school readiness councils to ensure that links are strengthened with community organizations able to provide local support services to learners.

**Performance Measure 3:** Percent of mothers in secondary completion programs who graduate in the fiscal year or persist in a future fiscal year.



**Story behind the baseline:**

Secondary completion programs serve learners who are functioning at higher levels of basic skills ability and are available to learners who wish to achieve a high school diploma. Connecticut offers three pathways for adult learners to attain a high school diploma. In addition to preparing for the General Educational Development (GED) test, learners in Connecticut can earn credits toward an adult high school diploma (AHSCDP) or demonstrate their high school level abilities in real life tasks through the National External

Program Report Card: State Department of Education / Adult Education Program (*Mothers of Young Children*)

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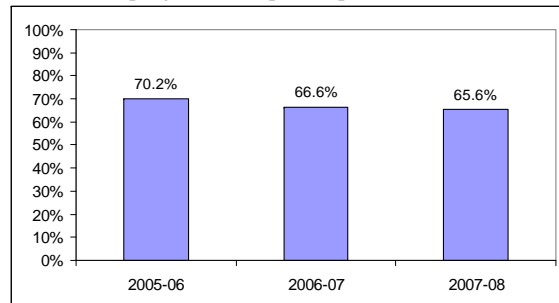
Diploma Program (NEDP) assessments. The annual enrollment of mothers in these three program areas during 2007-08 is as follows: GED preparation 583; AHSCDP 525; NEDP 74.

These three pathways are fundamentally different approaches. The data demonstrate that for a wide variety of reasons (e.g., program design, persistence supports), learners in the AHSCDP and the NEDP reflect higher graduation and persistence rates than those in the GED preparation program. The CSDE strongly believes that offering these three pathways is critical to ensuring that learners are referred to the program that offers the greatest likelihood of success.

**Proposed actions to turn the curve:**

- Continue the expansion of NEDP opportunities. During fiscal year 2008-09, 11 providers were awarded grants to establish new NEDP offerings while four regional providers received grants to expand NEDP to new locations.
- Expand online AHSCDP and GED offerings to increase learner persistence and success.
- Implement within the GED preparation program a common orientation that outlines the components of the GED test.

**Performance Measure 4:** Percent of mothers in English-as-a-Second Language (ESL) programs who demonstrate progress from pre- to post-assessments.



**Story behind the baseline:**

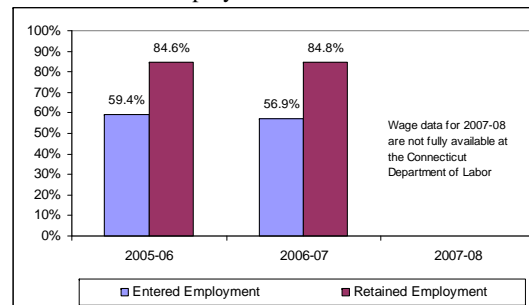
ESL programs assist individuals with limited English proficiency to improve their English skills (listening, speaking, reading and writing) in order to find or maintain employment, attain citizenship, become more involved with their children’s schooling, and make greater use of community resources. The data illustrate that a majority of learners with pre- and post-assessments achieve progress in their English language abilities.

A slight downward trend in performance is occurring. In a system where learner participation is voluntary, learner persistence is a strong predictor of student success. While the number of mothers in ESL programs has increased each year, their average hours attended has decreased each year.

**Proposed actions to turn the curve:**

- Within available resources increase intensity and duration of program hours.
- Provide training to teachers using evidence-based approaches to strengthen the alignment of curriculum, assessment and instruction.

**Performance Measure 5:** Percent of learners who enter and retain employment.



**Story behind the baseline:**

Adult education is an educational program that assists adults in obtaining knowledge and skills to achieve both

education and employment goals. The employment outcomes demonstrate that large numbers of mothers who exit from adult education attain employment outcomes. Adult education programs **do not** offer job placement and job retention services; they rely on the One-Stop Centers/workforce system for these supports. While the retained employment rate remained steady, the entered employment rate saw a slight decline. It is anticipated that the current economic climate and the increasing unemployment rate may adversely impact the employment outcomes in future years.

**Proposed actions to turn the curve:**

- Strengthen partnerships between the adult education and workforce systems; and
- Increase awareness of career pathways, especially among adult education workforce grant recipients.

**Performance Measure 6:** Percent of adult secondary graduates who enter postsecondary education/training.

**Story behind the baseline:**

The CSDE sends a postsecondary survey only to those graduates who had the goal of entering a postsecondary program. In 2007-08, 52 mothers were surveyed but 32 responded; 25 of the respondents indicated having entered a postsecondary education/training program. In prior years, these numbers were even smaller; therefore, no graph is presented for this measure. The Department is in the process of negotiating an agreement with the National Student Clearinghouse (NSC) to conduct a data match on the postsecondary enrollment status of **all** adult education graduates.

**Proposed actions to turn the curve:**

- Negotiate agreement with the NSC.
- Continue a federal adult education grant priority to promote transition for learners from adult education to postsecondary education/training.

**TAB 9**

**DEPARTMENT OF DEVELOPMENAL SERVICES PROGRAM REPORT CARDS**

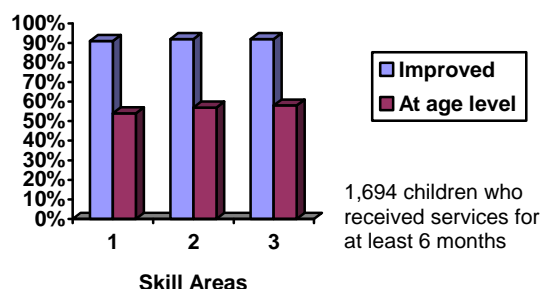


## Program Report Card: Birth to Three System, Department of Developmental Services

*Program Purpose:* To strengthen the capacity of Connecticut's families to meet the developmental and health-related needs of their infants and toddlers who have delays or disabilities, thereby ensuring that more of these children are ready for Kindergarten.

*Contributes to Population Quality of Life Result:* Ready by Five and Fine by Nine: All Connecticut children are healthy and ready for school success at age 5, contributing to a reduction over time in Connecticut's achievement gap at Grade 4

**Performance Measure 1:** Percentage of Infants and toddlers with disabilities or developmental delays who improve so that they function at or closer to children their same age in three skill areas.

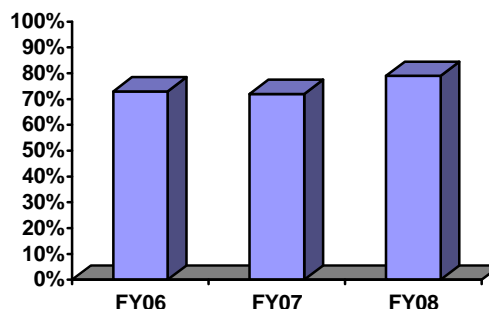


**Story behind the baseline:** The three skill areas on the above graph are: (1) social/emotional; (2) acquisition and use of knowledge (including early language and literacy); and (3) use of appropriate behavior to meet their needs

The blue bar in each skill includes the percentage of children who "improved to age level" as well as those who "improved to be closer to age level" The violet bar in each skill represents only the percentage of children who "improved to age level". In looking only at those children who improved to age level across the three skill areas, there was an increase from 43%, 38%, and 35% in FY07 to 54%, 57%, and 58% in FY08 which shows the program's effectiveness for children.

**Proposed actions to turn the curve:** Increased and individually targeted training based on exit scores will be used to increase the numbers of children who reach age level in each skill area.

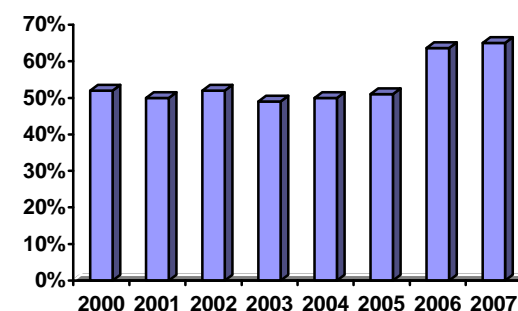
**Performance Measure 2:** Percentage of families who report that, as a result of receiving services from the Birth to Three System, they are better able to help their children develop and learn



**Story behind the baseline:** The blue bars on the above graph shows the percentage of families who strongly or very strongly agreed with the statement: "Birth to Three has helped me to help my child develop and learn." The trend in this positive family response has increased from 73% to 79% in the past three years, which shows the programs effectiveness in achieving its mission of helping families to facilitate their children's development.

**Proposed actions to turn the curve:** Piloting use of an approach called the "Routines-Based Interview" in which a lengthy interview with each family prior to writing their plan leads to a more functional approach for the family, resulting in the services increasing the likelihood that the family will be able to help their child's development in everyday situations. This greatly increases the amount of "practice time" that each child receives everyday.

**Performance Measure 3:** Percentage of children who have received Birth to Three services who do not require special education services in Kindergarten.



**Story behind the baseline:** The blue bars on the above graph shows the percentage of children who had received Birth to Three services and were enrolled in Kindergarten as of December 1 of each year and who were *not* receiving special education services. The trend shows an increased percentage, from 49% in 2000 to 65% in 2007, which shows an increased savings in special education costs to the state and municipalities.

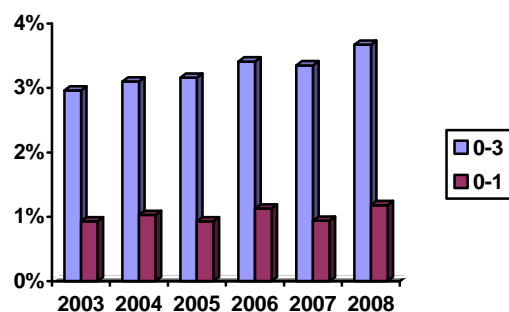
**Proposed actions to turn the curve:** Improvement on Measures #1 and #2 should also result in improvement on Measure #3 which is only collected two years after children have exited from Birth to Three. If a higher percentage of children attain age-level by the time they leave Birth to Three and parents are confident that they can help their child continue to learn and develop, there should be fewer receiving special education two years later.

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*Contributes to Population Quality of Life Result:* Ready by Five and Fine by Nine: All Connecticut children are healthy and ready for school success at age 5, contributing to a reduction over time in Connecticut's achievement gap at Grade 4

**Performance Measure 4:** Percentage of children under the age of three and under the age of 1 receiving services from the Birth to Three System.



**Story behind the baseline:** The blue bar on the above graph represents the percentage of all Connecticut children from birth to age three enrolled as of December 1 of each year. The violet bar represents the percentage of all Connecticut children under the age of twelve months enrolled as of December 1 of each year. The increase, from 3.16% in 2003 to 3.67% in 2008 demonstrates that the system is serving more children, but there are significant financial ramifications.

**Proposed actions to turn the curve:** Changes in eligibility that began 7/1/07 are reflected in the December 1, 2008 data. Beyond that, there are no proposed eligibility changes due to the current dire economic conditions and a projected \$8.7m FY09 shortfall. Looking at aggregate numbers, there was a 6% increase in eligible children served from

FY07 to FY08 (8,591 to 9,112). DDS is in the process of developing an MOU with the Dept. of Public Health to gain direct access to the addresses of families with extremely premature newborns (less than 2.2lbs at birth or born at 28 weeks gestation or less). This would directly notify the family that their child is automatically eligible for Birth to Three services if they choose to make a referral. Also, as a result of Public Act 07-02 which amends §19a-110(d) C.G.S., as of January, 2009, local directors of public health will be giving all families of children with elevated lead levels information on potential eligibility for Birth to Three. This may lead to some additional increase in referrals.