

Minn-LlnK Child Welfare Special Topic Report No. 9

Strong Beginnings: Establishing a Baseline of Intermediate Outcomes to Support Long-term Study

> Anita Larson, Shweta Singh

Center for Advanced Studies in Child Welfare

© 2010 by the Board of Regents of the University of Minnesota. All rights reserved.

The University of Minnesota is committed to the policy that all persons shall have equal access to its programs, facilities, and employment without regard to race, color, creed, religion, national origin, sex, age, marital status, disability, public assistance status, veteran status, or sexual orientation.

This publication can be made available in alternative formats for people with disabilities. Contact Scotty Daniels at 612-624-7242, CASCW, 205 Peters Hall, 1404 Gortner Avenue, Saint Paul, MN 55108.

Acknowledgements

Thank you to Crystal Lewis, Graduate Research Assistant volunteer, for editing and comments on this report and to Carol Miller and Karen Miller, Hennepin County Research, Planning, and Development Department for their support for this study. Thank you to the Minnesota Departments of Human Services and Education for their ongoing support of the Minn-LInK Project and provision of data and to Scotty Daniels, for layout, graphics, and printing of this report.

Minn-LlnK

The Minn-LInK project at the Center for Advanced Studies in Child Welfare at the University of Minnesota School of Social Work relies on secondary administrative data obtained from statewide public programs. Minn-LInK provides a unique collaborative, university-based research environment with the express purpose of studying child and family well-being in Minnesota. The administrative data sets used in this descriptive analysis originate in the Minnesota Department of Human Services (utilizing the Social Services Information System, or SSIS) which oversees the state child protection system in Minnesota and student public school education records from the Minnesota Department of Education. All data use has been within the guidelines set by strict legal agreements between these agencies and the University of Minnesota that protect personal privacy.

Human service programs collect data for multiple purposes: program administration, compliance with federal and state reporting, fiscal management, and local outcome measures. Policy and practice research has rarely been the focus of either automated system development or data collection. While these realities do not prohibit the successful design, implementation, and completion of research, it does present researchers with unique challenges related to study design and time-frames for study group selection that do not occur when collecting and working with primary data. Instances in which data system conditions drove the structure of this study have been noted in this report.

COLLEGE OF EDUCATION + HUMAN DEVELOPMENT

School of Social Work
Leadership for a just and caring society

Table of Contents.

Background	1
Benefits of Early Care and Education	1
Attributes of Quality Early Care	2
Strong Beginnings	2
Need for Feasibility Study for Longitudinal Foundation	5
Data	6
Results	7
Discussion and Future Research	9
References	12
Appendix A – Strong Beginnings Program Guidelines	
Appendix B – Strong Beginnings Report Card/Evaluation	
Appendix C – Matched and Unmatched Records	29

Background

This study explored the feasibility of using local agency administrative data and statewide administrative data to examine long-term outcomes for children whose families participated in an intensive early care and education program in one Midwestern county. Because long-term, qualitative studies are labor-intensive and expensive to conduct, findings from this work informs future planning for undertaking this type of important longitudinal work, using administrative data.

Benefits of Early Care & Education

The Importance of Early Care & Education

Over the past three decades, increased scholarly attention has been given to the degree to which programs intended to prepare young children for school are successful. As communities have recognized the long-term benefits to children entering school ready to learn, they have chosen to invest in broad-based school readiness programming focused on improving the readiness of children, particularly children who are vulnerable to school failure because of family circumstances or economics.

Quality Early Care & Education

High quality early care is often costly and communities and parents seek evidence of their investments. At the stage of both implementation and evaluation, local government jurisdictions must have an understanding of what can be expected of programs intended to boost school readiness as an intermediate and primary outcome with improved adult outcomes as a long-term goal.

Longitudinal studies have shown that children receiving high quality care in early years have better cognitive, language, and behavior skills in later school years that last into adulthood (Peisner-Feinberg, et al., 1999; Campbell, Ramey, Pungello, Sparling, & Miller-Johnson, 2002; Schweinhart, 2004). Other studies have shown that formal, more highly regulated care has been associated with improved cognitive outcomes (Yoshikawa, 1999). In an examination of the protective nature of child care for high-risk, low income children, high quality child care was consistently found to produce good child outcomes while poor quality care led directly to poor outcomes (Shonkoff & Phillips, 2000). More recent research has shown an interactive effect between the quality of the child care and home environments suggesting that both the home and the care environment need to be supportive and stimulating to facilitate socio-emotional development. (Votruba-Drazl, Levine Coley, & Chase-Lansdale, 2004).

Meta-analyses summarizing the results of multiple studies show that the academic lags that are present in the earliest grades in school persist and even widen over time, potentially affecting long-term educational and adult outcomes (Karoly, Kilburn, & Cannon, 2005). The ground-breaking Abecedarian project provided high quality educational care to children between infancy and five years of age from low-income families. These interventions were modified to cater to the needs of different children and evaluation of the children at 12, 15 and 21 years of age have shown a number of improved outcomes (cognitive test scores and academic achievement) for former program participants (The Carolina Abecedarian Project, 2007 as cited in Fergusan, Bovaird & Mueller, 2007).

Attributes of Quality Early Care

In spite of multiple evaluations on the long-term effectiveness of early care programs (for instance, Abecedarian, Perry Preschool, and Chicago Parent-Child Centers) Karoly and colleague's (2005) examination of experimental and quasi-experimental evaluations revealed only a handful of program attributes that were consistently associated with better child outcomes: highly trained caregivers, small child-to-staff ratios, and service intensity. The training levels of caregivers believed to be most effective include lead teachers with at least a college degree and the involvement of registered nurses as opposed to paraprofessionals for home visiting programs. (Olds, Robinson, O'Brien, Luckey, Pettit, & Henderson, 2002). Smaller staff-to-child ratios are also related to positive long-term outcomes. The National Resource Center for Health and Safety in Child Care (2009) recommends a 3:1 child-tostaff ratio for infants, 4:1 for toddlers up to 30 months, and no more than 8:1 for preschoolers. The Chicago Parent Child Program recommends a preschool ratio of 17:2 and in kindergarten, 25 students to 2 staff. (Campbell, et al., 2002; Reynolds, Temple, Robertson, & Mann, 2001). The National Association of Elementary School Principals [1990] (as cited in Helm, 1997) recommends a ratio of 20:2 for three- to five-year-olds; 15:1 for six- to eight-year-olds; and no more than 15:1 for at-risk children. More intensive programs have better outcomes than less intensive ones, yet the exact nature of that intensity remains somewhat unclear (i.e. service hours, combining program services with home visiting or only two of these services combined, etc.) (Karoly et al., 2005).

Other important program attributes include nutrition, health screening and assessments. The Chicago Parent Child Program incorporates referral and follow-up services for students with detected health problems such as visual or hearing impairments and speech problems. Each child undergoes a complete health check up before entering the program (Mueller Siegfried, 1974).

Strong Beginnings

Strong Beginnings (SB) programs have been in place in Hennepin County, Minnesota, since 1992. SB program care rates are higher than the market rate for similar accredited centers in the county and participating families are usually eligible for the Child Care Assistance Program (CCAP) which helps parents meet child care costs. SB centers must have an enrollment of at least 65% low income families (as determined by the United States Department of Agriculture guidelines) or county-designated special needs children (children with developmental delays and disabilities) (Hennepin County, 2001). CCAP does not cover the full cost of child care and parents with earned income are required to pay a portion of their costs to the center directly in the form of parent fees. The county then reimburses the center for the balance of care. Because SB programs have higher than market rates, the county requested and received a waiver from the Minnesota Department of Human Services to allow these programs to be eligible for CCAP payments although their rates were outside the accepted norm. There are currently 11 SB centers throughout Hennepin County, most of which are located in lowincome communities, with a range of program existence of between four and 17 years.

Staff: Child Ratios

SB programs maintain low child to staff ratios and teach in small groups. Centers must maintain ratios of at least 1:3 for infants and 1:12 for school-age children (Hennepin County, 2001).

Staff receive training in early literacy and other specialized services. Center teachers must meet one of the following three credential requirements: 1) baccalaureate degree from an accredited college or university, with preference given to candidates having degrees in child development or human services; 2) licensing from the Minnesota Department of Education for elementary education without kindergarten endorsement; or, 3) licensing from the Minnesota Department of Education for prekindergarten/nursery or elementary education without kindergarten endorsement (Hennepin County, 2001). Centers must either have national accreditation status or reach national status within one to two years after award of Strong Beginnings contract.

Parent Engagement, Curriculum, and Supportive Services

Relationship-based practices like System to Enhance Educational Performance (STEEP) and Reflective Supervision are used in the course of curriculum development and all staff supervision. Child Services Coordinators (the number of which are based on enrollment) are on site and teachers conduct regular child developmental screenings and assessments which support the individualized learning plans for all children. These plans help staff at all levels (child and family services coordinators and teachers) to adapt the program to meet the needs of individual children and families. When needed and as the result of screening, children are referred to other services such as early intervention services. Center staff monitor child health, immunizations, nutrition, lead exposure, dental health, emotional and behavioral health, and prevention of unintentional injury. Family plans are developed as a result of screening, and goals are established that include parental engagement and involvement in their children's care and development.

Every attempt is made to create a welcoming environment for families. When engaging families in center activities, staff avoid the use of potentially threatening language such as "parent/teacher conferences" and instead describe gatherings as "Family Fun Nights" where parents are encouraged to participate in certain center decisions such as aspects of curriculum development and planning. Program teachers make an effort to personally greet parents each day. These approaches are in alignment with other programs that seek to normalize the educational involvement of parents. The Family Stories Project initiated by the Clinton Kelly Elementary School in Portland, Oregon helps improve parent reading and writing skills by developing their own oral and written family histories and sharing them with their children. The school has even published two volumes of Family Stories, which have been shared with parents and teachers. Teachers incorporate these materials into their curricula whenever possible. (Families Involvement in Children's Education, 1997)

Collaboration, Continuous Improvement, and Advocacy

The importance of collaboration and networking is reinforced by regular annual SB provider meetings to identify shared opportunities, services, and provide informal support to one another. Collaboration with school districts is also an important part of this network. As children reach kindergarten age, a transition plan is developed for parents and children that will provide continuity between early care and elementary school. Preschool screening, conducted by school districts, becomes an important part of this. The Minnesota Department of Education emphasizes the need for screening children for health, socio-emotional and developmental problems and provides an opportunity for parents to access a wide variety of services, promoting the parent's understanding of their child's

educational, emotional, health and developmental needs. Developmental screening (screening for cognitive, motor, social emotional delays), socio-emotional and mental health screenings are done to identify any delays that may interfere with the expected growth and learning abilities of the child. This is important to ensure that the children get needed help before starting school. Screenings are conducted on site at SB programs in collaboration with school district staff. This approach is consistent with the screening component associated with Head Start Programs where all the children entering Head Start are screened for any kind of vision and hearing impairment, developmental delays such as cognitive, fine and gross motor delays, language impairment and other socio-emotional problems. Children also undergo a physical examination and are checked for immunization status.

SB programs strive for continuous improvement, incorporating findings from site visits into annual Report Cards (see Appendix B), training presentations, and using survey results to identify areas of improvements in programs. At annual site visits, county staff—verify that class size and staff ratios are maintained, the low-income enrollment proportion is preserved, accreditation status is up-to-date (as are all staff licenses), and that each center is completing and complying with their Kindergarten Transition Activities checklist. In addition, county staff annually conduct one classroom observation using the Early Language & Literacy Classroom Observation (ELLCO) checklist, gather information from the center on their most recent Early Childhood Environmental Rating Scale—R (ECERS-R) assessment, make sure all Child Services and Family Services positions are filled, and review all child records to assure that ASQs are being completed at regular intervals.

SB agencies also facilitate relationships with policymakers and inform state and local elected officials of the progress of their programs and the results they see. The advocacy of these program leaders is helpful in terms of providing testimony at legislative hearings as to the value of early childhood programming for vulnerable children (Hennepin County, 2001). SB political advocacy activities are consistent with the direction of some recent national policy changes such as the Student Aid and Fiscal Responsibility Act of 2009 passed by the US House of Representatives. Title IV of the Act addresses investing \$1 billion per year for eight years in challenge grants for states to build high quality early learning systems for children from birth to five years (Children Defense Fund, 2009). Building an early childhood workforce, promoting best practices in the classroom, promoting parent and family involvement, funding quality initiatives and implementing quality standard reforms are the activities recommended by the bill for the states (Children Defense Fund, 2009), including early care programs. The bill has been referred to Senate Committee for their approval before it can become a law. The bill has been endorsed by President Obama and has widespread support from Children Defense Fund and other children's advocacy and policy organizations (Children Defense Fund, 2009).

Intermediate Outcomes

Intermediate outcomes lay the foundations for assessing future success into adulthood (Shonkoff & Philips, 2000). Longer-term outcomes for families and children are expected to occur seven to ten years after program participation and include families experiencing fewer mandated, involuntary interventions related to child or educational neglect, or truancy. Within this timeframe programs also expect that children and families are engaged in education and display increasing and stable school attendance which maintain the important connections to school that protect children against certain risk factors.

SB programs serve children in preschool years, and consequently the elementary status of children is relatively unknown. The County has been able to obtain kindergarten assessment scores on some former SB participant children, but only for those who enter the Minneapolis school district. Expected intermediate outcomes of the SB program are intended to influence measurable changes in child behavior, performance and knowledge within one to six years after program services are delivered. Specific intermediate outcomes include: children entering kindergarten with the early literacy skills needed for future reading success (as measured by their scores on beginning kindergarten assessments conducted in schools by kindergarten teachers); parent report of improvements in skills, knowledge and self-confidence as they learn how to respond to age-appropriate behavior of children; and children meeting or exceeding the Minnesota Comprehensive Assessment II for math and reading in third grade. To begin to assess the contribution of SB programs towards these goals for children, it is important to find ways to obtain information on many more former participants as they enter school. Finally, the overarching intent of SB programs is that children will successfully graduate from high school and go on to pursue technical or post-secondary education.

Need for Feasibility Study for Longitudinal Foundation

Programs that serve preschool children intended to boost school readiness are often challenged to engage in the kind of long-term follow-up study necessary to validate their programs' efforts towards complex outcomes such as a successful adulthood. First, many programs lose touch with their young graduates early on as they move or enter public school systems. Complicating this is the fact that not all state's education data systems begin with the preschool years (although a number of states have already launched, or intend to launch data systems that span beyond the K-12 years, often referred to as "P-16" or "P-20" systems) (McKinsey & Company, 2008).

When researchers and policymakers are interested in the relationships between program costs, efficiency, and benefits, a longitudinal study is almost always needed. Evaluations that are shorter-term, measuring only the performance of early care programs until just a few years into school after entry, cannot necessarily measure outcomes that are most likely associated with large public dollar benefits. Only longer-term studies that have followed children into youth and young adulthood, that are able to measure the benefits of reduced involvement with delinquency and crime, high school graduation, and increased earnings, can boost the confidence of policymakers that savings are substantial (Karoly et al., 2005).

Long-term follow-up of low income and highly mobile families is usually expensive, and unless a study is well-funded, programs administered by local government agencies must approach the prospect of longitudinal study with care (or not at all). In spite of increased pressure to be accountable to the public, many government agencies cannot afford to conduct these analyses on their own (Rossi, Lipsey, & Freeman, 2004). In the absence of the ability to track individual families by hand over time through the use of traditional follow-up procedures, contact information, and consents, secondary data systems may be an option. In the case of this study, a critical first step that precedes actual longitudinal study is the exploration of whether and to what degree children who participated in the SB programs can be located in secondary data systems years after their participation. The statewide data systems used here are from child welfare and public education housed at the University of Minnesota Minn-LInK Project in the Center for Advanced Studies in Child Welfare at the School of Social Work.

Feasibility Goals

To support longitudinal follow-up using secondary administrative data, a number of things must be in place. First, there must be a sufficient number of child records that can be located in other systems at later points in time. The ability to locate records across systems is enhanced by data availability and quality. The education and child welfare systems both assign a unique identifier at the time of contact (although the identifiers are not shared across these systems). The need to match a majority of SB children in other systems is not isolated to those receiving these services but will also apply to the comparison group of children who did not participate in SB. Finally, attrition is always a concern, particularly in the case of low-income populations with high mobility. A strength of using data at the Minn-LInK project is that it is statewide, so as long as study subjects remain in the state, their records should be available.

The primary goal, therefore, was to have a clear understanding of the ability to locate children's records over time across the education and child welfare systems to assess the likelihood of following SB children. In the event a significant number of children could be matched to these systems, a secondary, but equally important goal was to describe how SB children were faring along a number of intermediate-term attributes compared to a group of their non-participating peers. Findings were intended to inform next steps in this specific research initiative as well as advise others who would undertake similar analyses.

Specific Intermediate Measures

The children in this feasibility study attended SB programs as three to five year-olds between 2002 and 2005, participating for an average of 18 months to two years, and entered kindergarten in the fall of 2005, 2006, and 2007. Therefore, the majority of children were no older than second grade by the year of analysis (2009) and the outcomes that can be examined reflect only intermediate measures. These measures included grade retention, meal eligibility, special education participation, disability type, residential stability, school enrollment disruptions, child welfare involvement (reports, determined maltreatment, and out-of-home placement), school attendance, and standardized academic test scores for older children. Together, these measures provided an indication of the feasibility of longer-term study as well as school engagement, access to and participation in supportive services (such as special education or free and reduced-price meals), and family functioning.

Data

The county provided a dataset containing child-level data on 1,155 children. These records comprised two groups of children: those who participated in SB during 2002-2005 and a stratified random sample of children of the same ages and from the same geographic communities who did not (comparison children). Records for two children were discarded because they were in both SB and comparison pools for a total of 1,153 study children: 238 SB children; and 915 comparison children. Comparison children were selected from CCAP records by provider type (by excluding children being cared for in SB settings). As a result, these comparison children were very similar to SB children in

terms of income, race, and geography. All analyses were completed using Statistical Package for the Social Sciences, version 17.0.

Education Data

Education data was available for the 2006, 2007, and 2008 school years and contained students' attendance ratios for the entire school year (perfect attendance = 1.0), special education participation, meal program participation, disability type, disruptions to school enrollment (includes leaving school for treatment programs, leaving for financial reasons, changing schools, or leaving for unknown reasons, etc.), and changes to records that suggest residential mobility. Student residential addresses are not available in the education data but can be inferred from changes in residential district number (the district in which the child lives) that are substantiated by status codes that indicate moves (out of state, district, or country). Together, these codes provide a reasonable, but conservative, indication of student mobility.¹

Child Welfare Data

Child welfare data was available for multiple years (roughly 2000 through 2009) and contained information on reports of neglect or maltreatment to child welfare agencies as well as determined (investigated and verified) maltreatments and foster care placements. For most children, this child welfare data spanned their lifetimes. In the data, it is possible to quantify the total number of contacts as well as dummy-code whether or not children experienced any of these types of contacts (a dichotomous variable of Yes or No). No differentiation of when child welfare contacts occurred (e.g., either before or after CB participation) was made, only whether or not children had those contacts over the entire time period.

Results

Upon matching both datasets (SB and comparison) to statewide education and child welfare data, a significant match rate was obtained (86%). There were no significant differences observed between the attributes of children whose records matched compared to those whose did not (Appendix C). Many unmatched children had likely not yet entered kindergarten or had moved from the state. Because study children entered kindergarten at different points in time, it was necessary to capture attributes from the kindergarten year only and temporarily assign kindergarten entry cohorts. For instance, a child may have been estimated to enter kindergarten in the fall of 2005 based on birth date but in the 2005-2006 education record, they may in fact have only been enrolled in a part-time, public early childhood program and consequently did not appear in kindergarten until fall 2006. Data on kindergarten entry was gathered only from the 2006-2007 school year for that child. Table 1 shows the comparisons of kindergarten attributes of SB and comparison children.

Strong Beginnings

¹ Estimates are conservative because they do not capture residential moves that occur within a given school district.

Table 1. Strong Beginnings and Comparison Children by Attributes

Table 1. Strong beginnings and Compa		Beginnings		parison
	N	Perc. or	N	Perc. or
	- '	Mean		Mean
Grade Retention, ns				
No grade retention	111	76.6	408	82.4
Grade retention	34	23.4	87	17.6
	•			1
Meal Eligibility/Participation , $\chi^2 = 52.925$, ₁ , $p = .000$				
Ineligible	73	35.6	107	13.6
Eligible (Free or Reduced Price)	132	64.4	679	86.4
Special Education Eligibility/Participation, ns				
No participation	173	84.4	689	87.8
Participation	32	15.6	96	12.2
Tuttoputon	32	13.0	70	12.2
Disability Type, ns				
No disability	174	84.9	677	89.3
Developmental delay	8	3.9	20	2.6
Speech/Language Impairments	5	2.4	14	1.8
Emotional/Behavioral Disorders	7	3.4	10	1.3
Autism Spectrum Disorders	2	1.0	10	1.3
All Others	2	1.0	15	1.1
D '1 '1 IM (E1 4') 2 (604 0)		T		
Residential Moves (Education) , $\chi^2 = 6.694$, $_1$, $_p = .01$	102	99.0	(22	90.2
No Yes	183 25	88.0 12.0	632 156	80.2 19.8
168	23	12.0	130	17.0
Disruptions (Education), ns				
No	99	48.3	429	54.7
Yes	106	51.7	355	45.3
		1		· I
Child Maltreatment Reports , $\chi^2 = 5.397$, ₁ , $p = .02$				
No	189	78.8	775	85.0
Yes	51	21.3	137	15.0
Child Welfare Determined Maltreatment, $\chi^2 = 3.446$				
₁ , p=.063	206	85.8	821	90.0
Yes	34	14.2	91	10.0
103	31	11.2	71	10.0
Child Welfare Placements, $\chi^2 = 8.041$ ₁ , $p = .005$				
No	215	89.6	863	94.6
Yes	25	10.4	49	5.4
Attendance in Kindergarten, ns	185	.9311	702	.9310
ACCAMP W G (ord C		05451	4 - 4	04.555
MCAII Reading Score (3 rd Grade), F=2.849, ₁ ,	54	351.74	164	346.35
p=.093				
MCAII Math Score (3 rd Grade), ns	49	351.32	135	349.37
MICHII Maui Beore (5 Grave), 118	+ 2	331.34	133	343.31

Significant group differences are observed for meal eligibility, residential moves, child welfare involvement (all types), and third grade reading scores (only for students who were old enough to take

the Minnesota Comprehensive Assessment in April, 2009). In these results, comparison children were significantly poorer than SB children. Further, SB children were much less likely to have experienced residential moves during their school year (i.e., they were much more stable) and had higher mean reading scores on the MCAII. On the other hand, SB children were more likely to experience child welfare involvement overall, compared to comparison children.

Discussion and Future Research

This exploration successfully matched 86% of the education and child welfare data of children who were served by an intensive, family-based early childhood program two to three years prior without the expensive, by-hand follow-up that is typical of most longitudinal studies. As entry into the public education system represents an opportunity for longer-term tracking of educational progress, this initial matching is an important milestone if administrative data is to be used. These match results suggest that it should be feasible to follow these particular children as well as other upcoming SB cohorts as they enter education systems.

A second objective of this project was to describe group differences between children who participated in SB with comparison children who did not. Although SB children were less likely to be disabled than were comparison children (85% non-disabled versus 89% non-disabled, respectively) and participating in special education, differences were not statistically significant. Future research might examine disability status and special education participation in later grades as children have more long-term attendance and needs are likely to be more fully assessed.

SB children had slightly higher incidences of disruptions to school attendance (52%) compared to comparison children (45%) but again, these differences were not statistically significant and it is unclear as to why this might be so. Further analysis might reveal whether there are patterns to the types of disruptions these children experienced to determine the nature of group differences. Mean attendance ratios were nearly identical in kindergarten for children in both groups, at 91% overall. Kindergarten attendance may be less meaningful to longer-term school engagement than attendance in first or second grade, or attendance trajectories over time. For instance, an ancillary analysis of children whose education records could be matched for at least two education years (2006 and 2007) revealed that SB children tended to have stable or improving attendance over these two years than their comparison peers. This type of analysis may be more useful than the attendance patterns of children in kindergarten where schedules are usually part-day, or part-week.

While grade retention (defined here as a child being in kindergarten more than one consecutive year) is an important measure of school readiness, variation in school practices in coding grade levels makes the utility of grade retention data questionable. Some schools reportedly assign grade levels in the administrative data according to student age rather than academic progress. In this instance, if children of one group are more likely to be enrolled in certain schools (possible in community school models), grade retention differences may reflect nothing more than local grade coding practice. Other sources of grade retention information may be needed if this measure is deemed a critically important intermediate outcome to follow, longer-term.

Significant differences emerged between the groups in terms of poverty, with SB children much less likely to be participating in free and reduced meal programs (64%) than comparison children (86%). Given the similarities of children's income levels (known because of their eligibility for the

CCAP which is means-tested), the differences in meal program receipt by the time children entered kindergarten may be reflective of an unknown difference in family income status some years after children left SB, or school coding practice. For instance, perhaps parents are less likely to complete the free and reduced-price eligibility meal forms for their kindergarteners since their children will not eat meals at school, or school practice may not impress upon parents the importance of form completion regardless of meal use. While this situation admittedly affects all children (both SB and comparison children) it may again reflect a local school practice that happened to have affected SB children disproportionately. As is the case with school attendance, meal program participation may be more useful if examined in later grades and some suggestion of the possible influence of individual school policies may be detected if data is examined at the school level.

SB children experienced comparatively fewer residential moves as reflected in the education data (12% versus 20%). County staff expected this outcome because SB program staff have among their program goals the development of strong relationships with families. It was the hope that families who felt they were part of the SB program community would be more likely to retain their connections to programs. SB services, which include referrals to housing or financial services, may have enhanced the ability of families to maintain housing in communities where programs were located. Only additional process evaluation of this interaction between programs and families would uncover what, specifically, programs are doing to promote this marked residential stability.

With regard to child welfare involvement, the greater surveillance to which SB families are subjected may in part explain higher proportional maltreatment reports (21% versus 15%), determined maltreatments (14% versus 10%), and out-of-home placements (10% versus 5%) compared to comparison children. Because this study data did not differentiate child welfare contacts that occurred during program participation versus pre- or post-program participation periods, it is impossible to know whether these contacts reflect the additional surveillance in place while families and children were participating in SB. Literature suggests that surveillance is much more likely to occur only when individuals are actively participating in public programs and that this surveillance ends shortly after program participation ends (Chaffin & Bard, 2006). While on the surface these higher rates of child welfare involvement seem to suggest that these families are experiencing greater stress than comparison families, it may in fact be a reflection of families receiving needed services as problems are identified. Families whose children are cared for in other types of child care settings may be experiencing similar rates of maltreatment and neglect, but these events may be undetected by county systems. Although all formal child care providers are mandated reporters, there may be variation in providers' understanding of this role, the process by which to make a report, and what types of incidents to report. Or, perhaps families do not stay with other types of early care providers long enough for providers to observe reportable child welfare issues. Determining the origins of these comparatively higher rates of child welfare involvement would require a more intensive process evaluation of program services.

Summary standardized test results for the subjects of math and reading were available for a subset of children who were old enough to be in third grade in early 2009 and to whom the Minnesota Comprehensive Assessment II was administered. By scaled scores in math, SB children had higher proportions of combined Meets or Exceeds Standards (57%) compared to comparison children (49%) but differences were not statistically significant. This was also the case for mean actual math scores where SB children had mean scores of 351 versus 349. However, differences observed for reading

scores suggests a possible effect of the early literacy emphasis of SB curricula. Scaled scores for reading showed no significant differences between SB and comparison children (56% versus 45% at either Meets or Exceeds Standards) but mean actual reading scores were significantly higher for SB children (352 versus 346).

The benefits of stable school attendance and engagement are well documented in the literature and although group differences in kindergarten attendance were not detected, it is possible that they would be apparent in later grades and over time. This feasibility study reveals some important results of community child care programming administered by local government that are not often studied in early childhood literature, namely, residential stability and higher third grade reading scores. Given the substantial match rates achieved here (86%) and the fact that non-matched children were not significantly different from matched children, additional longitudinal follow-up has merit. In other similar studies undertaken by the Minn-LInK project, there is a typical year-to-year loss of about 10% of any given study subject pool. In examining the number of children whose records were matched in 2006 to those whose records also matched in 2007, there was a loss of approximately 17% (N=78). Given a year-to-year attrition rate of between 10-17%, it may be possible to follow a significant proportion of these children through approximately 6th grade, the point at which the original study group would be reduced to just over 50%. This would allow for another MCAII assessment (at 5th grade) and a revisiting of a number of the variables that are more meaningful in later school years such as attendance patterns and disability identification. Given the growing body of knowledge on achievement and engagement that holds third grade as a pivotal year for children and longer term outcomes, the county may decide to follow SB children through only the third grade for substantial payoffs in knowledge.

The county would benefit from the incorporation of data on the specific program components that are hypothesized to have a direct impact on the positive outcomes observed here. Gathering additional observational data on program practice would allow for an association between quantified program attributes (e.g. hours of program participation, number of family contacts, participation in parenting classes and how many, and others) and could accommodate a more rigorous analysis of exactly which program effects are more influential on child outcomes. Right now, without the ability to analytically associate specific program attributes or intensity with outcomes, it is only possible to say that children who participated generally looked better, but we cannot say precisely what specific activities in these programs produced these results. As has been the case with public health home visiting practice evaluation, linking specific aspects of practice (such as number of home visits, length of home visits, the credential of the nurse, and the quality of the nurse-client relationship, etc.), to results has strengthened the claim that the practice is effective. Drawing these relationships between program practice and results would not only lend strength to the claim that SB is effective, articulating in what specific ways, but it could provide greater rigor to the program contracting process, as well as aid in the decision-making for the allocation and cost-effectiveness of scarce resources. Finally, the agency may want to consider the incorporation of community and environmental factors, as part of a longitudinal design of human outcomes (Shulruf, Morton, Goodyear-Smtih, O'Loughlin, & Dixon, 2007) to enhance the unique nature of this study of educational attainment.

References

- Campbell, F., Ramey, C., Pungello, E., Sparling, J., Miller-Johnson, S. (2002) Early Childhood Education: Young Adult Outcomes from the Abecedarian Project. Applied Developmental Science, (6), 42-57.
- Chaffin, M., & Bard, D. (2006). Impact of intervention surveillance bias on analysis of child welfare report outcomes. Child Maltreatment, 11(4), 301-312.
- Children's Defense Fund. (2009). Legislative Update. Retrieved on October 21, 2009 from http://www.childrensdefense.org/helping-americas-children/early-childhood-education-childcare/legislative-update.html
- Families Involvement in Children's Education. (1997). Bridging School- Family Differences. Retrieved on October 20, 2009 from http://www.ed.gov/pubs/FamInvolve/local5.html
- Fergusan, H.B., Bovaird, S., Mueller, M.P. (2007). The Impact of Poverty on Educational Outcomes for Children. *Paediatr Child Health 12(8)*, pp. 701-706.
- Helm, J.H. (1997). Critical Issue: Organizing for Effective Early Childhood Programs and Practices. Retrieved on October 20, 2009 from http://www.ncrel.org/sdrs/areas/issues/students/earlycld/ea100.htm
- Hennepin County Human Services & Public Health Department. (2001). Strong Beginnings Program Guidelines. Minneapolis, MN.
- Karoly, L., Kilburn, R., Cannon, J. (2005) Early Childhood Interventions Proven Results, Future Promise. RAND Corporation, Labor and Population. Retrieved on November 13, 2006 from http://www.rand.org/pubs/monographs/2005/RAND MG341.pdf
- McKinsey & Company. (2008). Framework for a Comprehensive Data System in California. December. Retrieved on October 2, 2009 from http://www.cde.ca.gov/eo/in/pc/mckinseycontents.asp?print=yes.
- Mueller, Seigfried & Others. (1974). The Chicago Child Parent Centers: A Systematic Program of Effective Compensatory Education. The University of Connecticut Technical Paper. Retrieved on October 12, 2009 from http://www.eric.ed.gov/ERICDocs/data/ericdocs2sql/content_storage_01/0000019b/80/31/57/c 0.pdf.
- National Resource Center for Health and Safety in Child Care. Health Kids, Healthy Care: Child:Staff Ratios. Retrieved on October 12th 2009 from http://www.healthykids.us/chapters/ratios_pf.htm
- Olds, D., Robinson, J., O'Brien, R., Luckey, D., Pettitt, L., Hendersen, et al. (2002). Home visiting by paraprofessionals and by nurses: A randomized, controlled trial. *Pediatrics*, 110(3), 486-496.
- Peisner-Feinberg, E., Burchinal, M., Clifford, R., Yazejian, N., Culkin, M., Zelazo, J., Howes, C.,

- Byler, P., Kagan, S., Rustici, J. (1999) *The Children of the Cost, Quality, and Outcomes Study go to School.* Retrieved on November 10, 2006 from http://www.fpg.unc.edu/~ncedl/PDFs/CQO-es.pdf
- Reynolds, A., Temple, J., Robertson, D., & Mann, E. (2001). Long-term effects of an early childhood intervention on educational achievement and juvenile arrest. *Journal of the American Medical Association*, 285(18), 2339-2347.
- Rossi, P.H., Lipsey, M. W., & Freeman, H. E. (2004). Evaluation, A systematic approach, 7th Ed. Sage: Thousand Oaks, CA.
- Schweinhart, L., (2004) *The High/Scope Perry Preschool Study Through Age 40*. Summary, Conclusions, and Frequently Asked Questions. Retrieved on December 10, 2006 from http://www.highscope.org/Research/PerryProject/perrymain.htm
- Shonkoff, J., Phillips, D. (2000) From Neurons to Neighborhoods: The Science of Early Childhood Development. Committee on Integrating the Science of Early Childhood Development, Board on Children, Youth, and Families. *National Academies Press, Institute of Medicine*. [electronic book version] Retrieved December 10, 2006 from http://www.nap.edu/books/0309069882/html/
- Shulruf, B., Morton, S., Goodyear-Smith, F., O'Loughlin, C., & Dixon, R. (2007). Designing multidisciplinary studies of human development: Analyzing past research to inform methodology. *Evaluation & Health Professions*, 30(3), 207-228.
- Votruba-Drazl, E., Levine Coley, R., Chase-Lansdale, L. (2004) Child Care and Low-Income Children's Development: Direct and Moderated Effects. *Child Development* (75) 1, 296-
- Yoshikawa, H. (1999). Welfare Dynamics, Support Services, Mother's Earnings, and Child Cognitive Development: Implications for Contemporary Welfare Reform. *Child Development* (70) 3, 779-801.

Appendix A

Strong Beginnings Program Guidelines (Revised June 2001)

1. Centers must have an enrollment of at least 65% low income (as determined by USDA reimbursement guideline) or County-designated Special Needs children.

Rationale: Research shows that children with "at risk" factors, particularly low-income children, benefit most from the positive influences of quality child care, gaining school readiness skills that they might not acquire elsewhere.

2. Centers must give assurance that private pay parents will also be charged the higher Strong Beginnings rate.

Rationale: State of Minnesota policies require that private pay parents be charged the same rates as the rates paid by the Child Care Assistance Fund.

3. Centers must have State recognized accreditation for early childhood services or become accredited within one year.

Rationale: The study, "Cost, Quality and Child Outcomes" found that children who attended higher quality child care programs scored higher on cognitive and social skills. These gains were carried forward as the children transitioned into school settings. In a review of studies looking at accreditation, accredited programs consistently demonstrated higher quality for children. However, recent evaluations of accreditation have also found that accreditation alone does not ensure quality unless combined with higher wages and continued training.

- Centers must maintain staff/child ratios of at least
 - 1:3 for infants
 - 1:5 for toddlers
 - 1:7 for preschoolers
 - 1:10 for kindergartners
 - 1:12 for school age

Agencies should plan their staffing to ensure that appropriate child to staff ratios are maintained at all times of the day and in all locations, and that staff are allowed adequate time for planning, record-keeping and training.

Rationale: Research shows that classroom staff patterns have a powerful effect on program quality. Low child to staff ratios are associated with more positive outcomes for young children and generate more positive social interactions with peers.

5. Centers must maintain rooms with group sizes no more than:

9 infants per group

10 toddlers per group

14 preschoolers per group

24 school age per group

Rationale: Even the most qualified teacher cannot individualize instruction and adequately supervise too large a group of young children. Younger children require more individualized attention and smaller group size is needed. NAEYC recommends that all groups have at least two teachers.

6. Centers must have a program curriculum and environment which is unique to each age group and which supports the physical, cognitive, and social and emotional well being of each individual child. Each of

these is an important element of school readiness. Curriculum should have a strong emphasis on promoting literacy by supporting rich language and emergent literacy skills

Rationale: Quality child care help children engage in complex play, socialize comfortably with adults and other children, and develop important physical, language, and cognitive skills. These positive effects contribute to children's increased cognitive abilities, positive classroom learning behaviors, long-term school success, and improved likelihood of long-term social and economic self-sufficiency. (Not by Chance: Creating an Early Care and Education System for America's Children. The Quality 2000 Initiative.)

Learning to read is essential for success in school and in life. Research shows that the process of learning to read is a lengthy one that begins very early in life. Teachers need to be knowledgeable about the research foundations of reading. Parents and caregivers should spend time in one-on-one conversation with young children, read books with them, provide writing materials, support dramatic play that might incorporate literacy activities, demonstrate the uses of literacy, and maintain a joyful, playful atmosphere around literacy activities. (Preventing Reading Difficulties in Young Children. National Research Council.)

- 7. Centers must provide a healthy, safe environment for children and develop relationships with parents to monitor the following child health factors:
 - a.) Health in the early years
 - b.) Immunizations
 - c.) Nutrition
 - d.) Unintentional Injury (such as car crashes, accidents, or fires)
 - e.) Lead exposure
 - f.) Dental health
 - g.) Childhood emotional behavioral problems.

Rationale: Children who are healthy can more readily focus on learning. Problems with health or physical development may impede the learning process by resulting in absences from child care, discomfort, or the need to make special accommodations.

- 8. Centers must use an early childhood assessment instrument approved by Hennepin County to measure growth and development of individual children. Assessments should include the physical and social and emotional well being of each individual child, and not focus solely on cognitive skills. The assessments should:
 - a) promote children's learning and development in order to shape instruction for individual children by identifying what they already know and what they need more help with;
 - b) identify children who may need health or other special services (to determine whether or not followup testing is needed, not for diagnosis);
 - c) monitor trends and evaluate programs and services in order to inform aggregate decisions; and
 - d) assess academic achievement to hold individual students, teachers and schools accountable for desired learning outcomes. (Child Trends School Readiness Report)

Rationale: Used properly, assessment tools can help educators design and deliver the appropriate services for individual children and can facilitate community-wide or statewide tracking of children's status at kindergarten entry and later on.

Centers must work with parents and public schools to develop a transition plan for preschoolers who will
be attending kindergarten to ease the transition, and to provide continuity between the child care
program and the elementary school.

Rationale: A smooth transition into kindergarten and formal schooling can help set young children on a course for academic achievement and success. Contact between the child care program and the school

can facilitate planning for individual students, provide a sense of continuity for children and parents, and allow a better alignment of philosophy, expectations and curriculum across institutions and the community.

10. Centers must provide staff compensation to attract qualified competent staff and to help retain experienced staff. The following wage recommendations are based on the 2001 study, "Staff Recruiting and Retention in Early Childhood Care and Education and School-Age Care" by the Wilder Research Center for the Department of Children, Families & Learning. The study compares the highest hourly wage now paid for child care staff with the highest hourly wage paid for Head Start and ECFE.

Director \$16 - 20/hr **Head Teacher** \$13 - 15/hr **Assistant Teacher** \$10 - 12/hr Child care Aide \$8 - 9/hr

Rationale: The Cost, Quality and Child Outcomes Study found that training, compensation and continuity of employment are linked to improved outcomes for children.

11. Centers must provide health coverage, paid vacation and sick days, and paid time for preparation, meetings, and training.

Rationale: Based on the results from the "Staff Recruitment and Retention Study" (Wilder Research Center) providing health coverage and other benefits are successful strategies for reducing staff turnover.

12. Centers must employ teachers meeting DHS top credential options #7, #8, or #9 as stated below:

#7) Baccalaureate degree from an accredited college or university

in any field

Experience: 1.040 hours as assistant teacher, aide, or student intern

Education: 18 quarter credits

For Strong Beginnings teachers meeting qualification #7, preference should be given to degrees in child development or human services.

#8) License from the Minnesota Department of Children, Families, and Learning for elementary education without kindergarten

endorsement

Experience: 520 hours as assistant teacher. aide, or student intern if teaching children under school age

#9) License from the Minnesota Department of Children, Families, and Learning for prekindergarten/nursery or a license from the Minnesota

Department of Children,

Families, and Learning for elementary education with a kindergarten endorsement

Experience: no additional

requirements

Education: no additional

requirements

Centers must provide regular opportunities for staff to participate in ongoing professional development to improve skills in working with children and families or to prepare them to assume more responsible positions.

Centers must provide additional training for all teaching staff (beyond licensing requirements) with focus on working with multi-cultural children and families, intervention strategies for helping children with special physical, emotional, behavioral, & developmental needs, and empowering parents to become full partners in their child's early education through kindergarten program.

Rationale: The quality of the staff is the most important determinant of the quality of an early childhood program. Research has found that teachers' level of formal education and professional preparation in child development and/or early childhood education is related to positive outcomes for children such as increased social interaction with adults, development of pro-social behaviors, and improved language and cognitive development.

13. The policies and practices of the center support the active involvement of families and provides family support services that can help parents enhance their competence and confidence in providing responsive and sensitive care by addressing factors that underlie the caregiver's ability to nurture her/his child. The center supports the belief that parents are a child's first teacher and provide training and support to parents in early childhood education and parenting.

Rationale: The recent NICHD (2000) study of children in child care found that maternal care giving, specifically the quality of the relationship between the mother and child, was the single most important predictor of child cognitive competence and a moderate predictor of social competence. Continuity for children and their families is strengthened when families are an integral part of the home/child care partnership and are the primary decision makers concerning their children's care and education. Parent involvement should be sought and encouraged so that parents know what their children are learning and are able to extend early education into their homes.

14. Centers must provide culturally responsive care that helps children develop a strong sense of personal identity and the requisite social attitudes and skills to live in a diverse society. Some components of culturally responsive child care practices include: 1) the child's home culture is reflected in the care giving; 2) representative staffing is provided at all times; 3) the child's home language is used; 4) the physical environment is culturally relevant; and 5) children are exposed o a wide variety of cultural beliefs, values and practices.

Rationale: Cultural responsiveness is an important component of quality child care. Culture is a fundamental aspect of a young child's healthy development, influencing identity and self-esteem. According to the National Association for the Education of Young Children (NAEYC) quality care includes care giving that affirms the legitimacy of children's home language, respects and values the home culture, and promotes and encourages the active involvement and support of families.

Classroom staff members and home visitors who speak a child's home language provide reassurance to the child, support the child's development of a strong sense of identity, and show respect for the values and beliefs of the family.

15. Centers must have an <u>early childhood specialist</u> (also known as Child Services Coordinator, Child Development Specialist, Education Coordinator) to direct the educational portion of the program and monitor the developmental gains of each child. Minimum expectations:

Over 50 children enrolled in the center: 1 FTE 30-50 children enrolled in the center 2/3 FTE Less than 30 children enrolled in the center 1/3 FTE

Taking guidance from the National Association for the Education of Young Children (NAEYC), only "early childhood professionals" (persons who have acquired some professional knowledge and are on a professional path) may fill the Child Services Coordinator position.

The child development coordinator's time will be devoted to directing the educational portion of the program, directing child assessment, monitoring developmental gains, service coordination, and planning activities that engage parents in their child's development. The child development coordinator will participate in the development of a network of information and sharing by professionals involved in the project. Job responsibilities include the following:

- Ensure that the center has written curriculum plans based on knowledge of child development and learning, and assessment of individual needs and interests. The learning environment and activities for children should reflect the center's philosophy and goals.
- Assist teachers in their development of goals for individual children that guide curriculum planning. Assist teachers in the use of child assessment tools to assess the skills and progress of each child in the program.
- Coordinate the process of assessing children, including initial screenings, ongoing developmental, and specialized assessments, to determine if a disability exists;
- Work with an interdisciplinary team of staff and parents to develop and implement an Individualized Education Program (IEP) or Individualized Family Services Plan (IFSP) for each child with disabilities;
- Consult regularly with parents and staff on the progress of disabilities services and of the children with disabilities who are enrolled;
- Work closely with local school districts to ensure the coordination of services.
- 16. Centers must have the services of a <u>family coordinator</u> available to all families in the program. Minimum expectations:

Over 50 children enrolled in the center: 1 FTE 30-50 children enrolled in the center 2/3 FTE Less than 30 children enrolled in the center 1/3 FTE

The family coordinator's job description must include referrals to social services such as employment services, family literacy programs, substance abuse services, domestic abuse services and others. It also must include parent education programming including engaging parents to take part in their child's development, arranging social events which include time for parenting discussions, scheduling speakers on parenting topics, and maintaining a link with schools to aid in the transition of the child to school. Job responsibilities include the following:

- Plan and develop with the parents an individualized program for the family, including establishing a
 caring professional relationship and a climate of mutual trust and respect for the parents; set family
 goals.
- Work with parents to strengthen the family's knowledge of child development, including assisting
 parents to understand how children grow and learn, and planning and conducting child education
 activities with the parents which meet the child's intellectual, physical, emotional, and social needs;
- Assist parents in strengthening the families' knowledge of health and nutrition, including integrating
 health and nutrition education into the program, coordinating with other staff and parents regarding
 health screenings for family members, and providing information and referrals, if necessary; and
- Assist parents to strengthen their knowledge of community resources and support parents in problem solving.

Make referrals to appropriate social service programs as needed.

HENNEPIN COUNTY RESEARCH, PLANNING AND DEVELOPMENT DEPARTMENT STRONG BEGINNINGS PROGRAM EVALUATION FORM

(Revised: December 2005, May 2009)

Program Name:	ogram Name: XXXXXXXX			Parent Organia	zation:	xxxxxxx				
Audit Date:	06/15/09		Audit Time	: 9 a.m.		Unannounc	ed Visit: Yes			
Program Director	r:		XX	xxxxx	Р	hone:	612-XXX-XXXX			
Who from Program Accompanied RP Staff:		ied RPD	XXX	Wanda, XXXXXXX, Early Childhood Ed.		hone:	612-XXX-XXXX			
Program Evaluat	or:				Р	hone:				
Program Contrac	t Manager:				Р	hone:				
Contract Admini	strator:				Р	hone:				

Class Size (1 Point) and Child to Staff Ratios (1 Point)

Classroom	Number of Children	Number of Staff	Staff Name
Infant I (1:3 – 9 max)	7 (8 enrolled)	3	Group size and ratio met
Infant II	NA	NA	
Toddler I (1:5 – 10 max)	6 (10 enrolled)	2	Group size and ratio met
Toddler II	6 (10 enrolled)	2	Group size and ratio met
Preschool I (1:7 – 14 max)	11 (14 enrolled)	2	Group size and ratio met
Preschool II (1:7 – 14 max)	8 (14 enrolled)	2	Group size and ratio met
School Age I (1:12 – 24	24 (none present)	NA	

max)								
SCORE: 2 / 2 Low-Income Requi	rement (1 Pc	oint)						
Documentation of			×	Yes		No		
			_			•		
				94%				
Source of Docume	ntation:	е		ed; 63 eligible				ancour, ECE Accountant: 84 and 16 eligible for reduced
SCORE: 1 / 1								
Private Pay Policy	•		<u> </u>	Waa		No.		
Documentation of	Private Pay i	Folicy:	⊠ '	res		No		
Source of Docume	ntation:		_	12, YWCA of leen's Center Fa		_	_	Childhood Education
SCORE: 1 / 1								
Accreditation Requ	uirement (1 P	oint)						
Documentation of			× .	Yes		No No		
Re-accreditation D	ate:		NAEYC through 02/28/2011					
SCORE: 1 / 1								
License Status (1	Point)							
Date of Last Licen	se Review:	09/24/20	07	Negative Lice	nsi	ng Acti	ons:	Fine
							1	
Areas Out of Con			. ,					Corrected
Failure to conduct teacher working a	alone in class	sroom.					10/	18/2007
Failure to document first aid training was completed by s Failure to secure a current physical examination report or						18/2007		
children admitted								
Paint chipped in secured to floor in Crib brand name to document annothe U.S. Consum unsafe cribs; failu	n school age and model no ual check on er Product Sa	classroom umber not o crib name afety Comr	docu bran nissi	mented (2 crib d and number on website for	s); aga listi	failure inst ing of	10/	18/2007

cribs.
SCORE: 0 / 1

Strong Beginnings Program Evaluation Form Page 3

Current Environmental Rating Scale Scores for ECERS-R (2 Points) ²

Subscale Item	Subscale Score / Overall ECERS-R Score: 4.46
Space & Furnishings	4.38
Personal Care Routines	2.17
Language - Reasoning	5.00
Activities	4.70
Interaction	6.60
Program Structure	4.25
Parents & Staff	NA

SCORE: 1 / 2 (Conducted by Allyson XXXXX)

Early Language & Literacy Classroom Observation (ELLCO) (40 Points)

Literacy Environment Checklist - Preschool "Walrus Room" reviewed

Book Area	Score 2 / 3
Is an area set aside just for book reading? If this area is used for other activities, such as for circle time or as a block area, score this item NO.	⊠ Yes □ No
Is the area where books are located orderly and inviting? Are the books displayed on a bookshelf or bookcase? Are they oriented properly (front covers or spines facing out and right side up)? Are they neatly organized?	☐ Yes ⊠ No
Does the area where books are located have soft materials? Are there pillows, cushions, or comfortable furniture (e.g., couch) in the area so that children can look at books comfortable?	⊠ Yes □ No
Book Selection	Score 7 / 8

Strong Beginnings

² One point awarded for completing a self-administered ECERS-R; one point for achieving a minimum overall ECERS-R score of 4.7.

Do the books in the classroom range in difficulty level?

This item refers to all books that are accessible to children, not only those books in the book area. Do some books have no words or very few words per page, whereas others have one or two paragraphs per page? Do some books include simple language whereas others incorporate more sophisticated vocabulary?

\boxtimes	Yes	No

Strong Beginnings Program Evaluation Form Page 4

Early Language & Literacy Classroom Observation (ELLCO)

Literacy Environment Checklist	
Book Selection - continued	
How many books are easily available to children? Count all books that are accessible to children, not only those in book area.	 ☐ 1 (Fewer than 15) ☐ 2 (16 to 25) ☑ 3 (26+)
How many books convey factual information? Count all books that are accessible to children, not only those in book area. Include science or math related books and social studies books or books about other cultures, as well as health related books.	□ 0 □ 1-2 □ 3-5 □ 6+ □ 0 1 2 3 NA
Are there three or more books related to the current theme? The current theme should be evident through classroom displays, activities, and teacher conversations with children. If you are unsure about the current theme, ask the classroom teacher.	☐ Yes No □ NA
Book Use	Score 8 / 9
How many books are available in the science area?	□ 0 □ 1-3 □ 4+ □ NA 0 1 2
How many books are available in the dramatic play area?	□ 0 □ 1-3 ⊠ 4+ □ NA 0 1 2
How many books are available in the block area?	□ 0 ⊠ 1-3 □ 4+ □ NA 0 1 2
How many books are available in other areas (not including the book area)? List other areas: Computer/Math area	□ 0 □ 1-3 ⊠ 4+ □ NA 0 1 2
Is there a place for children to listen to recorded books/stories? The listening center does not have to be a permanent area in the classroom. However, it must be in working order and available to children without adult assistance on the day of your observation.	⊠ Yes □ No

Writing Materials	Score 8 / 8
Is an alphabet visible? Must be at children's eye level or readily used by children.	⊠ Yes □ No
Are there word cards with names or familiar words?	⊠ Yes □ No
Are there templates or tools to help children form letters?	⊠ Yes □ No □ NA

Strong Beginnings Program Evaluation Form Page 5

Early Language & Literacy Classroom Observation (ELLCO)

Literacy Environment Checklist Writing Materials - continued □ 1-2 **3**+ How many varieties of paper are available for writing? Are there construction paper, white-lined and unlined paper, NΑ 2 tracing paper, etc? 0 1 How many varieties of writing tools are available? **1-2 ⊠** 3+ Are there pens, pencils, markers, crayons, colored pencils, NA magnetic letters, a chalkboard, a whiteboard, a typewriter, 2 0 1 rubber stamps, etc.? Is a distinct area set up and functioning for writing? In order to score this item YES, the area must be used only for ☐ No ■ NA writing. It cannot be combined with an art area, book area or any other area. Writing Around the Room Score 7 / 12 ☐ 1-2 **⊠** 3-5 How many varieties of teacher dictation are on display in the 6+classroom? 0 1 2 3 How many charts, big books, or other evidence of full-group □ 0 **□** 1-2 3-5 literacy are there in the classroom? 6 +Include teacher created charts that show evidence of group 0 1 2 3 discussion (My Favorite Trip, Our Trip to the Aquarium). □ 0 □ 1-2 3-5 How many varieties of children's writing are on display in the 6+classroom? 3 0 1 2 Includes work from one-time, teacher-led activity completed by

all children as well as unique and spo child.	ntaneous work from e	ach					
Are there writing tools in the dramatic	c play or block area?		⊠ Ye	es 🗌	No	□ NA	1
Are there props that prompt children play or block area? If there are no writing tools in the dra (above scored NO) then score this qu clipboards, telephones, menus, etc.	ımatic play or block ar	ea	⊠ Ye	es 🗌	No	□ NA	
Are there alphabet puzzles available f Puzzles must include all letters of the without adult assistance.		able	⊠ Ye	es 🗌	No	□ NA	1
Are there puzzles with words available for children's use? Puzzles must include several short words and meanings must be clearly indicated by pictures. Puzzles must be available without adult assistance.				es 🗌	No	□ NA	,
SCORE: 32 / 40 (80%) Strong Beginnings Program Evaluation	Form Page 6						
Child Services Coordinator Requiremen	nt (1 Point)						
1 FTE if Over 50 Children Enrolled:	Xes / Applies		Yes / N			No / Not	Meet
		Ailie	aliua Fi	illips			
2/3 FTE if 30 to 50 Children Enrolled:	Yes / Applies		Yes / N	/leets		No / Not	Meet
1/3 FTE if Less Than 30 Children Enrolled:	Yes / Applies		Yes / N	/leets		No / Not	Meet
SCORE: 1 / 1							
Family Services Coordinator Requirement	ent (1 Point)						
1 FTE if Over 50 Children Enrolled:			Yes / N			No / Not	Meet
		Jen	nifer M	urphy			
2/3 FTE if 30 to 50 Children Enrolled:	Yes / Applies		Yes / N	/leets		No / Not	Meet
1/3 FTE if Less Than 30 Children Enrolled:	☐ Yes / Applies		Yes / N	/leets		No / Not	Meet

SCORE: 1 / 1

Strong Beginnings Program Evaluation Form Page 7

Kindergarten Transition Activities (1 Point)³

Transition Activity	Activity Off	ered
Preschool children visited a kindergarten classroom.	☐ Yes	□ No
2. Preschool children visited the specific kindergarten class they are anticipated to attend this fall.	☐ Yes	□ No
2. I visited the kindergarten classroom.		
Take parents to visit schools as needed.	⊠ Yes	□ No
4. A kindergarten teacher visited my preschool classroom.	☐ Yes	□ No
5. Elementary school children visited my preschool classroom.	☐ Yes	□ No
6. Preschool children attended a spring orientation about kindergarten.	☐ Yes	□ No
7. Parents of preschool children attended a spring orientation about kindergarten.	⊠ Yes	□ No
8. Preschool children participated in an elementary school-wide activity (e.g., assemblies, spring programs).	☐ Yes	□ No
9. I had an individual meeting with parent(s) of a preschool child about kindergarten issues.	☐ Yes	□ No
10. I shared written records of children's preschool experience and status with elementary school personnel.		
Kindergarten readiness packet is constructed; decision to share the information is left to the parent.	⊠ Yes	□ No
11. I met with kindergarten teachers about the curriculum.	☐ Yes	□ No
12. I contacted kindergarten teachers about specific children.		
Have been contacted by kindergarten teacher regarding individual child.	⊠ Yes	□ No
13. Other activities (please specify):	│ │	□ No
Parent dinner with MPS representative speaking to parents about kindergarten entry.	res	
MPS conducted preschool assessments in two preschool classrooms.		

SCORE: 1 / 1

Strong Beginnings Program Evaluation Form Page 8

Child ASQ Records Review (3 Points)⁴

³ One point awarded if answer YES to four activities.
⁴ One point awarded for a correct response to developmental screen results: referred if one or more points below cutoff in on or more one point awarded for a correct response to developmental screen results: referred if one or more points below cutoff in on or more points awarded for a correct response to developmental screen results: referred if one or more points below cutoff in on or more points awarded for a correct response to developmental screen results: referred if one or more points below cutoff in on or more points awarded for a correct response to developmental screen results: referred if one or more points below cutoff in on or more points awarded for a correct response to developmental screen results: referred if one or more points below cutoff in on or more points awarded for a correct response to developmental screen results: referred if one or more points below cutoff in on or more points awarded for a correct response to developmental screen results: referred if one or more points below cutoff in on or more points awarded for a correct response to developmental screen results: referred if one or more points awarded for a correct response to developmental screen results. domains; no action if children score above cutoff points in all 5 domains (okay if children receiving individual attention or special services); receive additional individualized attention in classroom if at or near cutoff point in one or more domains.

Number Child Records Reviewed			
The state of the s	40 (100%)	Number Children ELL	1 (3%)
Number Children with Diagnosed Medical/Physical Handicap	1 (3%)	Number Children with Diagnosed Developmental Disability	0 (0%)
Number Children with Observed Developmental Challenges	5 (13%)	Number Children with No Disability or Challenge	33 (83%)
Number Children Black/African American	24 (60%)	Number Children White/Caucasian	3 (8%)
Number Children American Indian	4 (10%)	Number Children Southeast Asian	0 (0%)
Number Children Hispanic/Latino	4 (10%)	Number Children Race / Ethnicity Not Reported	5 (13%)
Number Children Missing ASQ Sequence	0	Number Children On Sequence	40 (100%)
Number of Children Scoring Below Cut domains:	off Points (1 or	more points below) in one or more	10(25%)
	Numb	er Referred for Further Assessment	2 (20%)
Number Receiving Additional Individualized Attention in the Classroom		NR (%)	
Number Receiving Special Services			NR (%)
Number with Parents Unwilling to	Authorize Furt	her Assessment or Special Services	1 (10%)
Number of Children Scoring Above Cur		•	1 (10%)
-	toff Points (1 or	•	
Number of Children Scoring Above Curdomains:	toff Points (1 or Numb	more points above) in all 5	28 (70%)
Number of Children Scoring Above Curdomains:	toff Points (1 or Numb	more points above) in all 5 er Referred for Further Assessment	28 (70%) NA
Number of Children Scoring Above Curdomains: Number Receiving	toff Points (1 or Numb Additional Indivi	more points above) in all 5 er Referred for Further Assessment dualized Attention in the Classroom	28 (70%) NA NA
Number of Children Scoring Above Curdomains: Number Receiving	toff Points (1 or Numb Additional Individo D Authorize Furt	more points above) in all 5 er Referred for Further Assessment dualized Attention in the Classroom Number Receiving Special Services her Assessment or Special Services	28 (70%) NA NA NA
Number of Children Scoring Above Curdomains: Number Receiving Above Curdomains: Number Receiving Above Curdomains: Number Receiving Above Curdomains:	Numb Additional Individual Authorize Furth	more points above) in all 5 er Referred for Further Assessment dualized Attention in the Classroom Number Receiving Special Services her Assessment or Special Services	28 (70%) NA NA NA
Number of Children Scoring Above Curdomains: Number Receiving Above Curdomains: Number Receiving Above Curdomains: Number Receiving Above Curdomains:	Numb Additional Individual Authorize Furtle Cutoff Points (a	more points above) in all 5 per Referred for Further Assessment dualized Attention in the Classroom Number Receiving Special Services her Assessment or Special Services at or less than 0.5 points above or	28 (70%) NA NA NA NA 2 (5%)
Number of Children Scoring Above Curdomains: Number Receiving Above Curdomains: Number Receiving Above Curdomains: Number Receiving Above Curdomains:	Numb Additional Individual Authorize Furtle Cutoff Points (a	more points above) in all 5 er Referred for Further Assessment dualized Attention in the Classroom Number Receiving Special Services her Assessment or Special Services at or less than 0.5 points above or er Referred for Further Assessment	28 (70%) NA NA NA NA NA NA NA NA

SCORE: 1.5 / 3

TOTAL POINTS: 42.5 / 54 (79%)

Auditor's Signature	Date	!

- 1. Comparing children whose data matched education records for any year
 - a. Percentage of kids whose data matched any education records

	Frequency	Percent
No	156	13.5
Yes	997	86.5
Total	1153	100

156 children were not found in the education records in all the three years.

b. Comparison of children whose data matched education records for any years by sex

Sex	Did child education reco		
	No	Total	
Male	86 (55.1)	577 (57.9)	663 (57.5)
Female	69 (44.2)	415 (41.6)	484 (42)
Missing	1 (0.6)	5 (0.5)	6 (0.5)
Total	156 (100)	997 (100)	1153 (100)

c. Comparison of children whose data matched education records for any year by race

Race	Did child education red		
	No	Yes	Total
White Caucasian	2 (1.3)	49 (4.9)	51 (4.4)
Black, African American	23 (14.7)	131 (13.1)	154 (13.4)
American Indian, Alaskan Native	4 (2.6)	48 (4.8)	52 (4.5)
Hispanic Latino	3 (1.9)	17 (1.7)	20 (1.7)
Asian, Pacific Islander	0 (0)	4 (0.4)	4 (0.3)
9	124 (79.5)	748 (75.0)	872 (75.6)
Total	156 (100)	997 (100)	1153 (100)

d. Comparison of children whose data matched education records for any year and income and program eligibility

Program and Income	Did child education records i		
Eligibility	No	Yes	Total
Not eligible for CCAP	3 (1.9)	18 (1.8)	21 (1.8)
BSF eligible	41 (26.3)	297 (29.8)	338 (29.3)
MFIP eligible	75 (48.1)	450 (45.1)	525 (45.5)
Transition year eligible	30 (19.2)	165 (16.5)	195 (16.9)
Diversionary work program	2 (1.3)	50 (5)	52 (4.5)
eligible			
Special needs eligible	0 (0)	5 (0.5)	5 (0.4)
County funds eligible	2 (1.3)	1 (0.1)	3 (0.3)
Missing	3 (1.9)	11 (1.1)	14 (1.2)
Total	156 (100)	997 (100)	1153 (100)

e. Comparison of children whose data matched education records for any years and disability (treatment only)

Disability status	Was child education records matched for any years		
	No	Yes	Total
No disability	15 (46.9)	112 (53.8)	127 (52.9)
Observed developmental challenge	8 (25)	40 (19.2)	48 (20)
Diagnosed developmental disability	3 (9.4)	31 (14.9)	34 (14.2)
Missing	6 (18.8)	25 (12)	31 (12.9)
Total	32 (100)	208 (100)	240 (100)

- 2. Comparing the children who matched education records any year with the Child Protection data
- a. Children who did not matched education record any year but matched the Child Welfare Data

Did child matched the child welfare record	Was child education records matched for any years		
	No	Yes	Total
No	119 (76.3)	764 (76.6)	883 (76.2)
Yes	37 (23.7)*	237 (23.8)	274 (23.8)
Total	156 (100)	997 (100)	1153
			(100)

^{*}Out of 156 children whose records did not match in the education data, 37 were found in the Child Welfare/ protection data. These kids are born between the year 1999 and 2003. Majority are born in 2001 and 2002.

For calculating the age I went into Compute variable and came up with ID new that = ID and included cases only if MatchEd=0 and MatchCW=1. Once I got the IDs of these kids, I pulled out their DOB.

b. Allegation code and child whose data matched education records matched any year

Allegation code (most recent)	Was child education records matched for any years		
	No	Yes	Total
% within was child education record matched for	119 (76.3)	764 (76.6)	883 (76.2)
any years			
Neglect (food, clothing, shelter)	6 (3.8)	25 (2.5)	31 (2.7)
Physical abuse	1 (0.6)	39 (3.9)	40 (3.5)
Threatened physical abuse	0	2 (0.2)	2 (0.2)
Sexual abuse	0	6 (0.6)	6 (0.5)
Threatened sexual abuse	0	4 (0.4)	4 (0.3)
Mental injury	0	1 (0.1)	1 (0.1)
Prenatal exposure	1 (0.6)	1 (0.1)	2 (0.2)
Infant med neglecting- withholding nutrition,	0	1 (0.1)	1 (0.1)
hydration, treatment			
Endangerment	20 (12.8)	107 (10.7)	127 (11)
Inadequate supervision	7 (4.5)	36 (3.6)	43 (3.7)
Education neglect	0	4 (0.4)	4 (0.3)
Medical neglect	0	4 (0.4)	4 (0.3)
Chronic and severe use of alcohol controlled	1 (0.6)	0	1 (0.1)
substance			
Abandonment	1 (0.6)	3 (0.3)	4 (0.3)
Total	156 (100)	997 (100)	1153 (100)

c. 'Maltreatment disposition code and children whose education records matched any year

Was any Maltreatment determined for the child	Was child education records matched for any years		
	No	Yes	Total
No	21 (56.8)	128 (54)	149 (54.4)
Yes	16 (43.2)	109 (46.0)	125 (45.6)
Total	37 (100)	237 (100)	274 (100)