

RESULTS BASED ACCOUNTABILITY (RBA SCHEMATIC)

ENDS

What we want for our children and families?



All Windsor children ages birth through 8 will come to **school ready**, willing and able to **succeed** as **caring, capable and confident learners**.

Result

Headline Indicators

Secondary Indicators

Percent of babies enrolled in HUSKY at birth who are still enrolled at 15 months of age **(50.5%)***

Percent of children who were at the satisfactory level on BOEHM test upon entry to Kindergarten **(42%)***

% of Windsor children 'at goal' or above on the 3rd grade CMT in reading **(38%)***

% of kids K-3 suspended for behavioral issues (in-, out- and bus-suspensions) **(5.1%)***

% of 4th grade Windsor kids who pass all 4 of the physical fitness tests given in 4th grade. **(21.4%)***

- % of births to mothers with non-adequate prenatal care **(33.8%** vs. 19.8% for CT)* where non-adequate = less than 80% of prenatal visits.
- Percent of children ages 2-5 years (with HUSKY) receiving at least 1 well-child visit per year. **(71.7%)***
- % of low birth weight babies **(10.9%** vs 8.6% CT)*
- % of babies born that are enrolled in HUSKY the month of birth (2005 = **29.9%)***
- % of babies continuously enrolled with HUSKY for 15 months receiving regular well-child visits. **(79.2%)***
- % of babies getting developmental screening before age 3 (DDA)

- % gap between minority and non-minority kindergarten students who are assessed at satisfactory level on BOEHM. **(14% gap)***
- % of Kindergarten students who attended preschool, nursery school or Head Start **(82%)***
- % of parents reading to their kids daily **(72%)***
- % of Kindergarteners who are at level 3 or higher on DRA **(59%)***
- % of children in top two quartiles of K. Inventory for each of the 6 dimensions

- % of Windsor children 'at goal' or above on the 3rd grade CMT in math **(45%)***
- % of Windsor children tested 'at goal' or above on the 3rd grade CMT for each subcategory (**% is going down** across all subcategories in both reading & math)
- % gap between 3rd graders at goal in math who are on free/reduced lunch and those who are not **(26%)***
- % of births to mothers with education less than or equal to H.S. **(24.4%)***

- Number of incidences of behavioral issues in K-3 **(109)***
- % of Windsor Children Eligible for Free & Reduced Price Meal (eligible at 185% of poverty line) **(25%)***
- Number of children under 8 with substantiated cases of abuse & neglect **(39 in 2008)***
- Number of miles of streets with no sidewalk within 1 mile of schools **(61 miles)**

- % of children ages 3-5 (with HUSKY) receiving some kind of dental care at least once a year **(49.2%)***
- % of children ages 6-8 (with HUSKY) receiving some kind of dental care at least once a year **(64.4%)***
- % difference between the highest and lowest performing schools on the 4th grade physical fitness test **(37%)***
- % of Kindergarteners who are obese (DDA)
- % of children with health or developmental issues (DDA)
- % of children walking to school who are within walking distance (DDA)

Early Wellness

School Readiness

School Success

Emotional Wellbeing & Safety

Physical Health

*All numerical figures listed represent only the most recent year of available data. The project team recognizes that trend data is important, so these figures are listed simply to give the reader a quick feeling for how our children are doing.

Early Wellness

Provide early care and intervention for expectant mothers & parents with babies.

- Identify barriers to prenatal care and regular well-child care
- Provide education on healthy pregnancy and healthy infants through personal visits
- Reduce risky behavior among pregnant women

Facilitate timely developmental screening of all children ages 0-3

School Readiness

Increase access to affordable preschool

- Provide preschool scholarships that are funded by the community
- Increase awareness about available preschool spaces

School Success

Increase Family Literacy

- Increase family participation in language & literacy activities
- Increase parent attendance at GED and ESL classes
- Make personal visits available to all families to guide age appropriate literacy activities.

Emotional Wellbeing & Safety

Increase Family Supports

- Establish an outreach process that connects families to early childhood resources
- Increase family and community events that reflect Windsor's cultural diversity
- Develop information centers/hubs
- Implement stress reduction program to reduce the stress level of children in school

Physical Health

Increase health services available to Windsor Families

- Improve access to dental health services
- Connect families with health information in new ways (e.g. health help line)
- Connect pediatricians to local resources for young children including: fitness, recreation, behavioral health providers and support groups
- Create a rewards program for families who make healthy lifestyle changes

Priority Strategies & Sub-strategies

How do we make progress?

Year 1 actions*

- Conduct research to fully understand who is doing what type of assessment now
- Develop relationships with Birth to Three, DSS, pediatricians and other key partners
- Set up a childcare director roundtable to work towards consistent use of a chosen developmental assessments
- Mail information and application for Help me Grow to all Windsor families with new babies
- Develop action plan and system development measures
- Report on progress

See Appendix B for complete actions for years 1 through 5

Year 1 actions*

- Continue current age specific family literacy programming that occurs through library and family resource centers.
- Regularly visit home-day care center to read stories and model to caregivers best practices for language and literacy enhancement
- Establish an adult literacy program for those who want to improve their reading skills
- Work with School Action Teams to integrate family literacy components into their activities.

See Appendix B for complete actions for years 1 through 5

Year 1 actions*

- Establish a committee of partners to determine purpose, target audience and requirements for hub
- Select place or places for physical information hub
- Identify what virtual information center would be useful
- Identify funding sponsors
- Gather items/information to be available in hub
- Consider development of 'Resource Guide'

See Appendix B for complete actions for years 1 through 2

Note:
The highlighted circles show where we'll begin. These were chosen as feasible places to start where there is existing synergy and no-cost/low cost steps that can be taken.

Action steps to begin implementation

* For more complete action steps for Years 1 through 5, please see full report Windsor Connecticut: Community Agenda for Early Childhood

Partners: Parents, guardians, home day-care providers, center-based daycare administrators and staff, preschool directors and staff, pediatricians, library, Department of Social Services (DSS), Department of Families and Children (DFC), state legislators, Help Me Grow staff, Birth to Three staff, PAT trainers, Family Resource Center Staff, Windsor Early Childhood Council Staff, Windsor Recreation Department, Northwest Park administration, GED and ELL teachers and administration, Public and Private School administration and teachers.

Sample Cross Program System Measures

- Percent of literacy programs that are cross generational
- Percent of children receiving a developmental screening by age 3
- Percent of families who report that they know where to go for early childhood information

Sample System Measures

- Number of workgroups that are formed and active
- Number of key resource owners actively engaged either at physical or virtual table through liaison or direct discussion
- Percentage of people from ECC and TC2 physical and virtual tables who continue to participate in moving Windsor’s early childhood agenda forward.
- Percentage of funding for strategies that is derived from a local source
- Number of organizations that visibly support Windsor’s Early Childhood Initiative (e.g. posting sticker saying “I support Windsor’s Early Childhood Plan”)

Facilitate timely developmental screening of all children ages 0-3

How much are we doing?	How well are we doing it?
<ul style="list-style-type: none"> - Number of providers conducting developmental screenings - Number of screenings completed by age 	<ul style="list-style-type: none"> - Percentage of children screened - Percentage of providers using the same screening tool - Percentage of screenings done in child’s native language - Percentage of screeners who have been through training on the tool
Is anyone better off?	
<ul style="list-style-type: none"> - Percent of children who appropriately referred - Percent of children assessed as having developmental issues who are receiving services for that need. 	

Increase family participation in language & literacy activities

How much are we doing?	How well are we doing it?
<ul style="list-style-type: none"> - Number of literacy programs offered that have a inter-generational component - Number of providers who offer family literacy activities - Number of parents and children who are participating 	<ul style="list-style-type: none"> - Cost per family literacy programming - Percent of families served who are at risk - Percent of families receiving services through XX agency(ies) who are also participating in a family literacy program
Is anyone better off?	
<ul style="list-style-type: none"> - Percent of children in families served that are ready for Kindergarten - Percent of parents reporting that they read to their child daily - Percent of parents attending ELL or GED classes who complete programming 	

Develop information centers/hubs

How much are we doing?	How well are we doing it?
<ul style="list-style-type: none"> - Number information hubs - Types of information hubs (physical vs virtual) - Location of hubs - Number of partners regularly putting information into or at the information hub 	<ul style="list-style-type: none"> - Percent of partners that have information to share at the information hub - Percent of families who are aware of where to go for early childhood related information - Availability of staff to answer questions at each hub
Is anyone better off?	
<ul style="list-style-type: none"> - Percent of families who report that they feel connected to and supported by town - Percent of users who find a resource or answer they need 	

