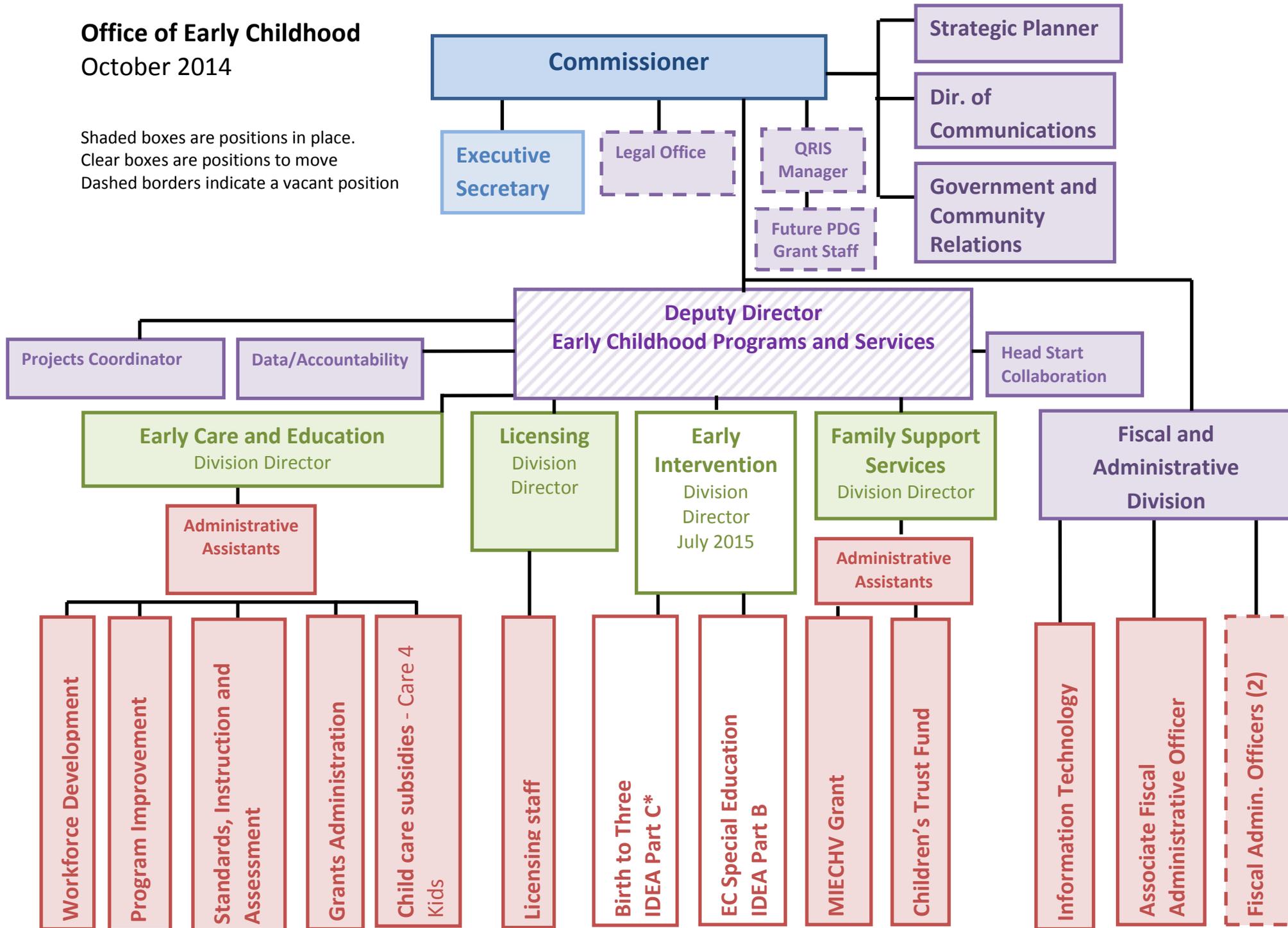


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Office of Early Childhood
October 2014

Shaded boxes are positions in place.
Clear boxes are positions to move
Dashed borders indicate a vacant position



CTELDS



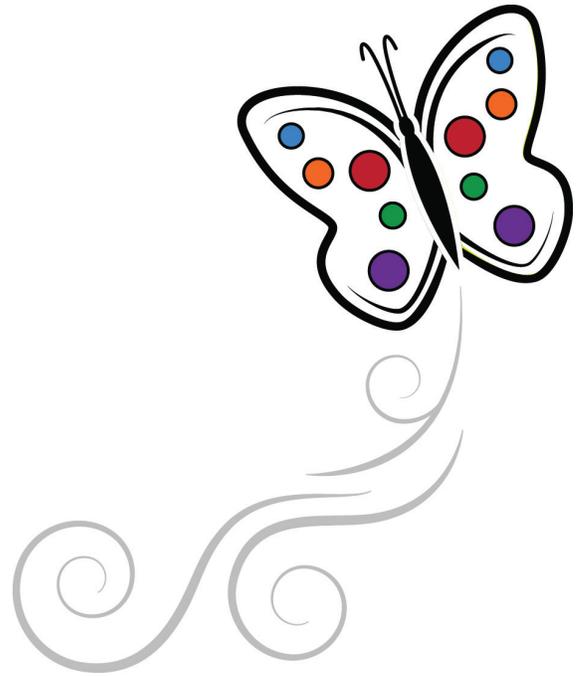
Connecticut Early Learning
and Development Standards



*What children, birth to five,
should know and be able to do*



*Connecticut's Early Learning and Development Standards
were developed to help families, communities and schools
work together to support children's early learning and growth.*



April 2014

Photos taken at the Connecticut Early Childhood Block Party in Hartford's Bushnell Park on August 24, 2013, courtesy of Leah Grenier (cover photo and pages 4, 5, 6 and 10)

CT ELDS logo design by Andrea Wadowski, Connecticut State Department of Education.

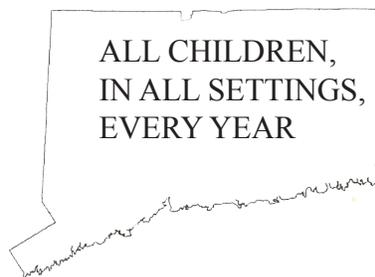
Document design and layout by EASTCONN Communications, Hampton, Connecticut.

I am pleased to introduce the Connecticut Early Learning and Development Standards (CT ELDS) which serve as the foundation for supporting ALL young children in Connecticut, no matter where they live, play and learn. The CT ELDS are statements of what children from birth to age five should know and be able to do across the earliest years of development.

The learning progressions within the Connecticut Early Learning and Development Standards promote:

- Equity for all children, through the setting of high, but appropriate, expectations;
- High-quality early learning experiences, by providing clear goals and trajectories of learning;
- Provision of individual support, based on each child's growth and development;
- Families' understanding of what their children are learning and how they can support them;
- Teachers' understanding of age-appropriate content and approaches to children's learning; and,
- Communication across sectors, based upon these common goals for children.

The CT ELDS were developed through the work of the Connecticut Early Childhood Education Cabinet and its Learning Standards Workgroup. In addition, over 100 state and national experts participated in some way during the development process, helping to ensure a strong and comprehensive set of learning standards.



Connecticut's vision is that all young children will have high-quality learning experiences, across all types of settings, and that children's growth and development will be supported across every year of their lives. The CT ELDS serve as a foundation for achieving this vision as they provide the basis for planning learning environments, supporting individual children and communicating around common goals.

A handwritten signature in black ink, appearing to read "Myra Jones-Taylor".

Myra Jones-Taylor, Ph.D.
Executive Director, Connecticut Office of Early Childhood

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Guiding Principles

All children benefit from rich learning environments in homes, communities and early care and education settings. Connecticut's Early Learning and Development Standards provide the basis for supporting children's growth and development across settings. The following principles guided the work on the early learning and development standards.

The guiding principles are grouped into four broad categories: Young Children, Families, Early Learning Environments and Communities. The first category, Young Children, addresses what is known about young children's learning and development. The other categories address the roles and responsibilities of families, early childhood environments and communities in supporting children's health, learning and development.

These principles must be considered when this document is used to support children in any early learning environment. Although this document articulates learning standards for children from birth to age 5, these same principles apply throughout the early elementary years.

Young Children:

- **Are capable and competent.** All children are capable of achieving positive early learning and developmental outcomes. There should be high expectations for all young children, regardless of their background, experience, language or developmental status.
- **Learn best when their basic needs are met.** Basic needs of young children include health (physical, mental and oral), safe and nurturing environments, positive social relationships, a sense of belonging and sound nutrition. If these basic needs are not met, a child's growth and development will be affected.
- **Are unique in their growth and development.** Each child will demonstrate knowledge, skills and abilities within a broad

range at any point in time. All children within an age range should not be expected to gain a particular skill at the same time. Variation in the growth and development of skills and competencies applies to all young children regardless of age, ability, developmental status or special health care needs. Respect and support for individual differences in achieving learning outcomes should be a cornerstone of early learning.

- **Develop and learn within the context of their family and culture.** Each child's family and culture lays the foundation of who they are and how they learn and grow.



Families:

- **Are the primary caregivers and educators of young children.** Families lay the foundation for their children's success, through their relationship with their children and by providing experiences that are critical for their children's growth and development.
- **Are critical partners in all early learning environments.** It is important for families to be actively engaged with their child's early care and education. Ongoing communication and an active partnership are necessary to ensure positive outcomes; therefore, families must be supported as partners in all early learning environments.



Early Learning Environments:

- **Support young children to learn in the context of relationships.** Positive interactions and sustained relationships with family members, caregivers, teachers and other children provide the foundation for learning. Every child, including those with social, emotional or behavioral challenges, should be provided the supports and services necessary to promote ongoing positive relationships with peers and adults.
- **Reinforce the importance of the cultural context of young children, families and communities.** Cultural context influences behavioral expectations, personal preferences, relationships and sense of self. It is imperative that each child's culture be respected and honored.
- **Provide opportunities for active exploration.** Young children construct their own understanding of the world around them through exploration and engagement with a variety of materials, experiences and interactions with both peers and adults. Every child should be provided the opportunity to actively explore, engage and interact by providing the supports necessary to ensure a child's full and active participation within an environment.
- **Provide meaningful inclusion of children with special needs.** Participation in these inclusive settings may require individualized modifications, adaptations and/or support services designed to provide each child with opportunities to benefit from inclusion in an early learning environment.

- **Provide experiences that are relevant and integrated across domains of development.** Developmental domains and content areas are highly interrelated. Children learn best when experiences incorporate multiple domains. Children with special health care needs, delays or disabilities should be provided the individualized supports needed to promote positive developmental outcomes in all areas.
- **Intentionally promote the development of skills and knowledge.** Planning and decision-making should be based upon research and best practices related to how young children grow and develop.
- **Provide opportunities for children to benefit from diversity.** Diversity (e.g., culture, ability, socioeconomic status, family constellation) provides opportunities for children to learn about the broader world.
- **Support children's language development in their primary language.** Children's success in their primary language supports their growth and development across all domains, including acquisition of a second language. Early learning environments may provide opportunities for children to use their primary language and should support families in speaking and reading to their children in the language(s) they prefer.

Communities:

- **Believe that all children deserve high-quality early learning experiences.** They value families and invest in systems that support young children, families and early learning environments.
- **Offer a variety of resources that support early growth and development.** Thriving communities provide supports for children and families, including medical, social and educational opportunities for children, families and caregivers.
- **Strategically plan to meet the needs of children and families.** They plan together using information relevant to the unique circumstances in their community. This includes facilitating smooth transitions within and between programs and settings.

Organization of the Document

Connecticut's Early Learning and Development Standards are statements of what children should know and be able to do from birth to age 5. These guidelines are intended to inform families, teachers, caregivers and other professionals about common developmental and learning progressions, so that they can work together to better support children's early learning and growth. These standards are intended to serve as a guide for considering the steps in children's development and to plan ways to support children in continued growth.

Domain Action Pages: What Can I Do to Support Early Learning and Development

For each area of development (domain) there is a general information page that includes a brief description of the domain and strategies to support infants and toddlers as well as preschoolers.

The Standards

The CT ELDS are organized by domain. There are eight domains in the document: Social and Emotional Development, Physical Health and Development, Language and Literacy, Creative Arts, Mathematics, Science, Cognition and Social Studies.

Domain: A general area of growth and development

Strand: Sub-categories within each domain

Learning Progressions: A series of skills and abilities that build upon each other as children grow and learn

Indicators: Examples of what children should know or be able to do at the end of each of the age ranges along the learning progression

Numbering: Each strand is assigned a letter designation within a domain. The indicators are numbered, using an abbreviation for the domain name, the number corresponding to the age in months at the end of the age range and the number of the indicators in sequence for that age range. For example, L.24.3 refers to 3rd indicator for the 18-24-month range in the Language and Literacy Domain.

Age Ranges

The CT ELDS are grouped into age ranges, with the examples representing skills, dispositions or knowledge typical for the end of the age range for each domain. However, children develop at varying rates and may not demonstrate every example included in the CT ELDS or may demonstrate them with some variation in timing. While a pattern of skills that is not consistent with a child's age may raise some questions, the CT ELDS is not a screening or assessment tool. Concerns about a child's development may suggest a referral for further assessment or possible support services; however, this document is not designed as a tool for identifying children for referrals, services, or to make decisions about appropriate programs or placements. Instead, this tool is designed to support caregivers and professionals as they consider precursors and next steps, and to determine the environmental supports, activities and adult strategies that will help children to grow and learn.



Creative Arts				
Age Range	0-6 months	6-12 months	12-18 Months	18-24 Months
Learning Progression	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>
Strand: Early learning experiences will support children to engage in and enjoy the arts.				
Music	CA.6.1 React to music by turning to a sound source, cooing in response, wiggling or moving, soothing one's self, etc.	CA.12.1 Show interest in singing, moving, and dancing, using their body	CA.18.1 Use instruments to explore rhythm and melody	CA.24.1 React to changes in music by joining in with more extended segments of familiar music, using voice, physical gestures and/or instruments

Integrated Learning

The domains and strands within the CT ELDS reflect common areas of research and evidence-based practices. Although you may see other documents or resources that break down what children should know and be able to do into categories different from the CT ELDS, the structure and content of these standards are consistent with what is known about child development.

Children do not learn skills in these domains, strands or learning progressions in isolation, but it is helpful to think about growth across these areas to make sure that support is provided for the wide variety of skills children are learning. When planning early learning experiences, families and early care and education professionals should consider what is meaningful and engaging for young children and how skills from a variety of areas can be integrated into children's play.

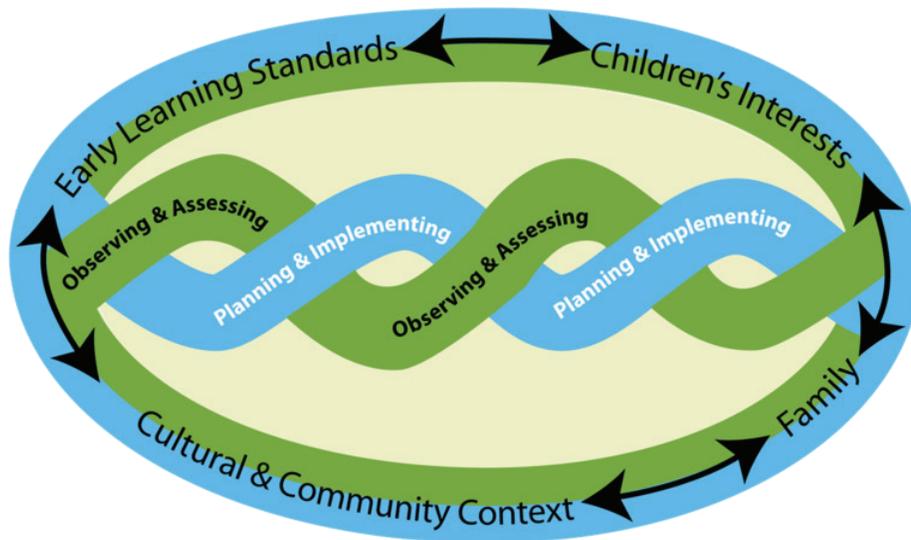
Supplemental Dual Language Development Framework

In addition to the information for each domain, this document includes a Supplemental Dual Language Development Framework for use in supporting children who are learning multiple languages. This supplement is not applicable to all children, but rather is designed to raise awareness of the typical stages of acquiring a second language.

Intentionally Supporting Growth and Development

The CT ELDS provide the basis for planning learning environments, supporting individual children and communicating around common goals. They do not exist in isolation and must be used in conjunction with guidance on effective strategies and/or appropriate assessment tools. A cycle of intentional teaching is composed of planning experiences to support children's development, gathering information about how they are progressing and adjusting what is being done to support them based upon this information.

The Cycle of Intentional Teaching



All adults who support young children are “teachers,” although their planning, observation and assessment may involve differing levels of detail. Teachers in a classroom environment might develop detailed learning experience plans and use formal assessment tools. A family is also engaging in a cycle of intentional teaching when they take their child to the playground to develop gross-motor skills, observe that she cannot yet climb the stairs to the slide and then help her learn this skill. By being intentional, adults can make sure that they are supporting children in meaningful ways.

Assessment

An assessment tool aligned to the CT ELDS should be used to determine how children are progressing across these domains of development. Two types of tools, with different purposes, are appropriate for use in conjunction with the CT ELDS:

Developmental Screenings are tools designed to be brief surveys of children’s abilities and are used to determine if further assessment is necessary. (Note: The Ages and Stages Child Monitoring Program offers a developmental screening process that can be accessed by calling the Child Development Infoline at 1-800-505-7000.)

Formative Assessments are tools designed to determine how children are progressing in the development of certain abilities, so that further support can be planned (e.g., curriculum, instruction, family activities and adult support).

The CT ELDS are not a screening or assessment tool.

Communication

Communication between all of the adults supporting children is critical. The CT ELDS provide a common language to communicate about children’s skills and progress and to plan supports. The Action Guides include general information about each area of development and evidence-based strategies to support infants and toddlers and preschoolers. The more detailed strands and learning progressions for each domain will support more in-depth discussion and planning.

By using these CT ELDS as part of a thoughtful process, families and early care and education professionals can work together to ensure that children are eager and ready to learn and grow.

Fostering Competent Learners: Essential Dispositions



Across all ages and domains, early learning experiences will support children to:

■ **Be creative**

Support young children's growth and development by encouraging creative thinking and novel approaches to solving problems. Children should have opportunities to create, express themselves in a variety of ways and approach problems from new perspectives. The focus of early learning experiences should be on the process instead of the product, promoting learning, exploring and thinking over achieving a specific result or answer.

■ **Be inquisitive**

Encourage children to explore, seek new information and ask questions. Children should feel comfortable questioning information, testing out new ideas and simply playing with materials

in new and unusual ways. Those supporting young children's growth and development should create safe environments in which children can explore and experiment.

■ **Be flexible**

Foster children's ability to adapt to new situations, to be flexible in their responses and to actively engage in new environments. Exposure to new ideas, environments and situations in meaningful ways can promote resilience.

■ **Be critical thinkers**

Encourage children to use critical thinking skills to help them organize and use the great amount of information available today. Those supporting young children's growth and development should promote an understanding of the concepts behind specific skills (e.g., understanding quantity as well as learning the sequence of counting), provide opportunities to engage in higher-order thinking skills and encourage children to question the accuracy of information they receive.

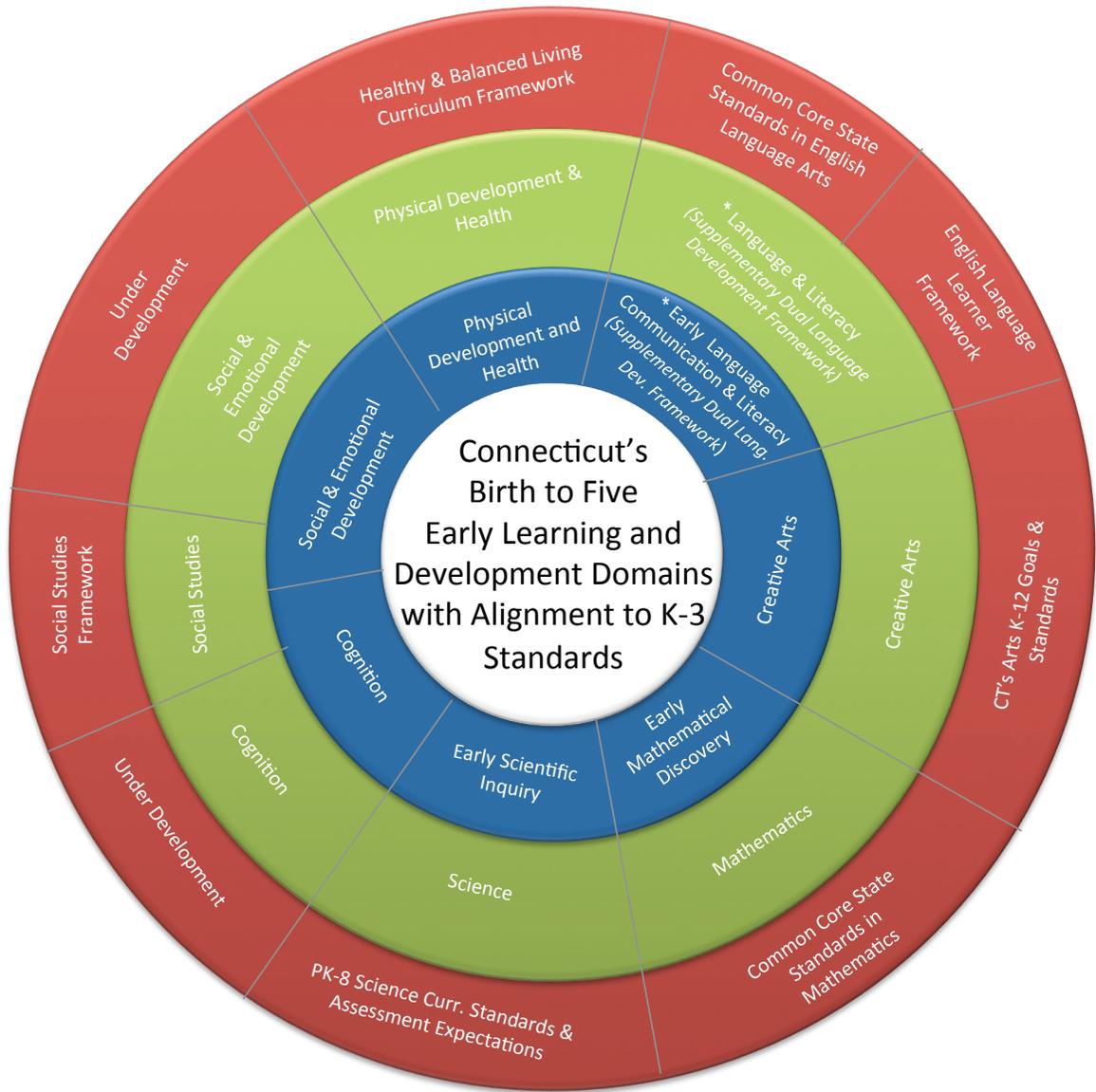
■ **Be purposeful and reflective**

Promote children's engagement in purposeful action. Very young children should be actively involved in play and will benefit from reminders of the results of their actions. Three- and four-year-olds should play an active role in planning experiences, setting goals and celebrating accomplishments. They should be encouraged to be reflective and to learn from mistakes.

■ **Be social learners**

Social interactions form the basis for children's learning. Encourage children to interact with adults and peers, ask questions and jointly solve problems. Those supporting young children's growth and development should provide opportunities to learn through cooperative experiences with adults and children.

Domain Wheel



*The supplemental Dual Language Development Framework applies to children learning multiple languages. Early learning environments must respect family language preference and honor children's development in their primary language and promote continued bi-lingual development.

**Action Guides:
What Can I Do
To Support
Early Learning
and Development?**



Cognition

Making sense of the world, staying with something and working hard to solve problems



What adults can do...

Encourage

- Exploring
- Asking Questions and Making Choices
- Pretending and Having Fun
- Remembering
- Trying New and Difficult Things



Infants and Toddlers

Pretend with your child. Pretend a banana is a phone or feed a doll.

Give your child choices. Let your child choose a snack or what to wear.

Give your child lots of different experiences. Explore your neighborhood parks, libraries and museums. Play with things that are used in different ways (to make sounds, build, etc.)

Show your baby how things work. “Look at how the car rolls.”

Play games that involve back-and-forth. As your child gets older, help them wait for a short time.

Preschoolers

Use everyday routines to notice patterns. Point out familiar routines (first we wash hands, then we eat).

Sort and categorize throughout the day. Picking up toys and laundry are great sorting activities.

Wonder with your child. “I wonder if it’s going to rain today.” Encourage your child to ask questions.

Point out and use symbols. Encourage your child to recognize and name signs and symbols.

Support your child to finish things they start. Help them plan and stick with things for longer periods of time.

Social & Emotional Development

Understanding yourself, your feelings and how to play with other people



What adults can do...

- Encourage**
- Caring
 - Affection
 - Relationships
 - Safety and Security

Infants and Toddlers

Spend time holding, talking and playing with your baby. Caring contact builds a strong relationship.

Comfort your baby when he cries. This helps your baby feel secure and learn how to calm down.

Talk about your baby’s actions, feelings and body. This will help your baby learn about themselves.

Have family routines. Routines help babies feel safe.

Preschoolers

Let your child do some things on their own. Support them to do new things and solve problems.

Talk to your child about feelings. Help them find ways to calm themselves.

Help your child understand routines. Be sure to say goodbye when you leave your child.

Make time to play with other children. Go to the park, have playdates or join a playgroup.



Physical Health & Development

Learning to take care of yourself and to do things with your body and hands so that you grow strong and healthy



What adults can do...

Encourage

- Healthy Eating
- Physical Activity
- Helping with Self-care

Infants and Toddlers

Lay your baby on their tummy while they are awake. “Tummy time” helps build strong muscles.

Talk while you take care of them. Have them be a part of healthy routines such as waking up, eating and dressing.

Encourage exploring objects with their hands. Give them small, but safe, items to use with their hands.

Make sure they are healthy. Children who get enough rest and healthy food learn better.

Preschoolers

Find a time and place for your child to run and play. Running, jumping and climbing help build strong muscles and bones.

Have your child take part in self-care. Talk to them about why being clean is important; show them how to use buttons and zippers, etc.

Offer your child healthy food choices. Talk about healthy food and eating a variety of good things.

Make sure they get enough rest. Preschoolers need 11-13 hours of sleep each day to stay healthy and learn.



Language & Literacy

Communicating using your body, language, signs and written communication



What adults can do...

Encourage

- Interacting with people
- Gesturing, making noise and talking
- Enjoying books, songs and writing
- Expressing ideas, needs and feelings
- Writing

Infants and Toddlers

Share books everyday. Read stories at bedtime or when riding on the bus.

Talk and sing with your baby.
Encourage them to “sing” and “talk” too.

Respond to your baby’s noises.
Repeat the noises they make or comment, “You sound happy.”

Help them learn new words by naming and describing what you see. “I see a shiny, silver mirror.”

**Read books to your child
EVERY DAY!**

Preschoolers

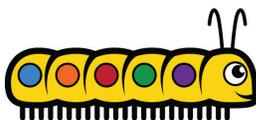
Show interest in what your child is saying. Look at them when they talk and comment on what they’re saying.

Ask questions that make them think.
When reading a story ask, “What do you think will happen next?”

Talk to your child about what happens during the day. Talk about what you do together and ask about what happens when you are apart.

Let them practice “writing.” Ask them to draw a picture or make a list, even if they use shapes instead of letters.

**Read books to your child
EVERY DAY!**



Creative Arts

Enjoying music, dance and art and expressing yourself in these ways



What adults can do...

Encourage

- Listening and dancing to music
- Describing art and music
 - Looking at pictures
 - Being creative
- Making music and art

Infants and Toddlers

Play music for your child. Describe the music and how it makes you feel.

Sing to your child. Move to the music while you're singing.

Show your child pictures. Talk about the picture, what's in it, its colors, the shapes...

Encourage your child to create. Give children art supplies that are appropriate and safe.

Preschoolers

Display your child's art work. Talk about what they did to make it.

Give your child space to move to music. Play music with different beats and styles.

Encourage your child to be creative. Don't worry about what the project looks like.

Expose them to the arts. Watch dancing, look at paintings, listen to music, read books about art, theater and music.



Mathematics

Understanding numbers and how to use them,
counting, patterns, measuring and shapes



What adults can do...

Encourage

- Counting
- Measuring
- Comparing

Infants and Toddlers

Use words that describe how much.

Talk about wanting more or having one or two of something.

Talk about shapes. Describe everyday things such as food, toys, or household items, saying things like, “Your plate is a circle.”

Compare sizes. Use words such as big, little, long and short.

Use math words. Talk about adding one, taking away, dividing something.

Preschoolers

Count things. Count how many steps it takes to get somewhere, how many pieces of fruit you buy at the store, etc.

Cook together. Let your child help measure and count what goes into the recipe.

Sort and match. Match clothes, sort silverware, play with shape sorters.

Compare size, shape and position. Talk to your child about where things are, measure and compare sizes and talk about the shape of everyday items.



Science

Understanding the world around us,
including living things, the earth and space and energy



What adults can do...

Encourage

- Exploring
- Experimenting
- Investigating
- Learning about Living Things

Infants and Toddlers

Be excited about their discoveries.

Point out the things they see, hear or feel. “You saw the bird fly down from the nest to get food for its babies! Wasn’t that exciting?”

Answer their questions. Encourage them to ask about things they want to know.

Make sure they have many different kinds of experiences. Find opportunities to explore new places, see nature and investigate.

Preschoolers

Give them toys that they can use to explore. Boxes, balls, ramps, bubbles, magnets, containers, magnifying glasses, etc.

Grow things. Plant seeds and talk about what will happen and what seeds need to grow.

Go outside. Look at the sky, trees, plants, animals...collect things and talk about them.

Ask questions. “What do you think will happen next?” “What do you see?”



Social Studies

Understanding the world and knowing about the people in it. This starts with knowing about your family, then the community and world.



What adults can do...

Encourage

- Understanding family
- Hearing stories about the past
- Recognizing how people are the same and different

Infants and Toddlers

Help them learn about themselves.

Children need to learn about their own bodies, their family and their feelings so they can learn about others.

Talk about family. Talk about who is a part of your family and about other people's families.

Talk about the places you go. Children will learn about the community when you talk about the store, the library, the park, etc.

Preschoolers

Point out where things are in the community. Draw maps of your home or school.

Talk about how people are the same and different. Help your child to appreciate people who are different from them.

Talk about when you were little. Children love to hear stories and can begin to learn about time and history.

Play "store." Children can learn about buying and selling through play.



Early Learning & Development Standards



Cognition

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Learning Progression	<p>Indicators: This is evident, for example, when children:</p>	<p>Indicators: This is evident, for example, when children:</p>	<p>Indicators: This is evident, for example, when children:</p>	<p>Indicators: This is evident, for example, when children:</p>	<p>Indicators: This is evident, for example, when children:</p>	<p>Indicators: This is evident, for example, when children:</p>	<p>Indicators: This is evident, for example, when children:</p>
Strand A: Early learning experiences will support children to develop effective approaches to learning.							
Curiosity and Initiative	C.6.1 Use senses to explore immediate environment	C.12.1 Seek familiar people and/or objects that are not there	C.18.1 Use senses to actively investigate and explore the effects of new actions on objects	C.24.1 Explore objects, activities and environments	C.36.1 Ask questions and seek answers from a variety of sources	C.48.1 Explore and investigate a variety of experiences and topics using different materials	C.60.1 Investigate ways to make something happen
Engagement with Environment, People and Objects	C.6.2 Orient to source of sound or movement and vocalize in response to sights and sounds in the immediate environment	C.12.2 Show interest in a wider variety of sights and sounds with greater purpose, often in shared experiences with adults	C.18.2 Focus attention on interesting sights or sounds, often in shared experiences with adults	C.24.2 Engage in interactions and self-selected activities for increasing lengths of time	C.36.2 Maintain interest in self-selected activities and may seek to engage others or ask questions	C.48.2 Maintain interest in exploring specific topics over time	C.60.2 Express interest in learning about a specific topic over time
	C.6.3 Laugh, babble, increase movement, and engage in repetition of a learning activity	C.12.3 Seek out new materials and experiences	C.18.3 Explore new ways to use objects and observe results	C.24.3 Demonstrate a desire to accomplish a new skill. May look to others for approval and congratulations	C.36.3 Demonstrate enthusiasm for new learning (may be within familiar contexts)	C.48.3 Seek out new challenges and novel experiences	C.60.3 Engage in preferred and some non-preferred activities for longer periods of time. Remain with some high interest activities 15 minutes or longer
Eagerness to Learn	C.6.3 Laugh, babble, increase movement, and engage in repetition of a learning activity	C.12.3 Seek out new materials and experiences	C.18.3 Explore new ways to use objects and observe results	C.24.3 Demonstrate a desire to accomplish a new skill. May look to others for approval and congratulations	C.36.3 Demonstrate enthusiasm for new learning (may be within familiar contexts)	C.48.3 Seek out new challenges and novel experiences	C.60.4 Show pride in accomplishment when reaching mastery of a skill and share experiences with others
Cooperation with Peers in Learning Experiences						C.48.4 Engage in and complete learning activities with peers	C.60.5 Plan and complete learning activity with a peer
						C.48.5 Help and cooperate in group	C.60.6 Model or teach peers how to use materials or complete a task

Strand B: Early learning experiences will support children to use logic and reasoning.

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Cause and Effect	C.6.4 Show interest in the results of their actions and "accidental" discoveries	C.12.4 Recognize effect of actions on object - cause and effect (e.g., shake a rattle and it makes a sound)	C.18.4 Learn by observing or listening to others and repeating their actions or verbalizations	C.24.4 Repeat actions over and over and notice results	C.36.4 Vary actions to observe different results (e.g., hit lever harder to see if result changes)	C.48.6 Manipulate materials and communicate about the impact of own actions	C.60.7 Try multiple uses of same materials and observe differing results
Attributes, Sorting and Patterns	C.6.5 Recognize familiar people or objects in the immediate environment (e.g., notice differences between various people and objects)	C.12.5 Respond to new or novel objects with interest, recognizing differences	C.18.5 Match objects that are the same (simple categorizing)	C.24.5 Sort objects by type (e.g., cars and blocks) and put some objects in order (e.g., lines up three objects from smallest to biggest)	C.36.5 Identify differences between objects across multiple characteristics (e.g., texture, color, shape, size)	C.48.7 Identify similarities and differences in objects, people, events, sounds based on one attribute (e.g., same or different colors, loud or soft sound)	C.60.8 Compare relative attributes of objects, people, events, sounds (e.g., louder, more, less)
						C.48.8 Recognize patterns in routines, objects and/or sounds and replicate sequence using objects or language	C.60.9 Use familiar patterns to solve problems and reason (e.g., if we go to the library every other day and we went yesterday, today we will...)
							C.60.10 Begin to question accuracy of information and sources as evidenced by sharing conflicting information from another source (e.g., when the teacher shares information with class, says, "But my dad says...")

Strand B: Early learning experiences will support children to use logic and reasoning (continued).

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Problem Solving	C.6.6 Sometimes will show they can solve problems by reaching for desired toys or blanket	C.12.6 Use a variety of actions to obtain desired objects C.12.7 Solve simple manipulative challenges through observation and imitation (e.g., putting something "into a bucket")	C.18.6 Purposefully experiment with the effects of new actions upon objects C.18.7 Utilize shapes and sorting boxes. May use trial and error to fit objects together	C.24.6 Try a successful strategy in a new situation (e.g., tugging or prying on something that is stuck) C.24.7 Take things apart and try to put them back together	C.36.6 Use objects in new and unexpected ways to solve problems through trial and error C.36.7 Use spatial relationships to solve problems (e.g., fit pieces into puzzle)	C.48.9 Think of and try an alternative strategy when a first attempt at solving a problem is unsuccessful	C.60.11 Try multiple strategies to solve a problem and draw on multiple resources (e.g., look at what a peer is doing for ideas)
Symbolic Representation			C.18.8 Use dolls and stuffed animals as if they were real (e.g., rocks doll, pets stuffed dog) C.18.9 Engage in pretend play with realistic objects (e.g., uses a play phone to pretend to make a phone call)	C.24.8 Play with dolls or stuffed animals and realistic props together (e.g., use a play spoon to feed a doll) C.24.9 Act out familiar functions in play (e.g., sweeping floor, pouring milk)	C.36.8 Use a similar object to represent another object in play (e.g., pretend a pencil is a spoon) C.36.9 Act out relational roles in play (e.g., mom or dad with baby)	C.48.10 Use or make a prop to represent an object (e.g., build a telephone) C.48.11 Act out actions or scenarios involving familiar roles (e.g., teacher, doctor, firefighter)	C.60.12 Use dissimilar objects to represent other objects in play or perform an action with an imaginary object (e.g., use stirring action without anything in hand) C.60.13 Engage in extended pretend play scenarios and display recognition of the difference between pretend or fantasy situations and reality
						C.48.12 Represent people, places or things through simple drawings, movements and three-dimensional construction	C.60.14 Represent people, places or things through drawings, movements and/or three-dimensional constructions that are increasingly abstract (e.g., may draw a map that includes an "X" that marks the location of the treasure)

Strand C: Early learning experiences will support children to strengthen executive function.

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Choosing and Planning		C.12.8 Indicate preferences nonverbally	C.18.10 Indicate preferences by pointing and using one or two words	C.24.10 Indicate preferences using simple language	C.36.10 Make choices based on preferences	C.48.13 With adult assistance, choose activities and plan what to do	C.60.15 Make a plan, follow through and review plan based on what they actually did. Indicate reasons for choice, set goals and follow plan
Task Persistence	C.6.7 Repeat actions to obtain similar results	C.12.9 Practice an activity many times until successful	C.18.11 Complete simple activities	C.24.11 Complete simple activities despite frustration	C.36.11 Complete self-selected short-term activities many times to gain mastery	C.48.14 Continue working through moderately difficult activities, despite some frustration	C.60.16 Complete longer term and more complex tasks with a focus on the goal, despite frustration
Cognitive Flexibility		C.18.12 Use objects in new and unexpected ways	C.24.12 Purposefully try multiple ways of using the same objects	C.36.12 Realize when something is not working and with adult assistance can try another approach	C.48.15 With adult assistance, stop and consider alternatives when encountering a problem	C.60.17 Generate or seek out multiple solutions to a problem	
Working Memory			C.24.13 Hold in mind a simple task long enough to complete it (e.g., wiping a table, walking across the room to throw something in the garbage)	C.36.13 Remember where recently used objects were placed	C.48.16 Engage in games that involve remembering (e.g., memory)	LR.60.18 Hold in mind the topic of group discussion and contribute personal experience (e.g., when talking about something that is broken says, "My mom used a screwdriver to fix our shelf.")	
Regulation of Attention and Impulses			C.24.14 Engage in interactions and self-selected activities for increasing length of time	C.36.14 Maintain focus on high-interest activities in the face of routine distractions	C.48.17 Maintain focus on high-interest activities in the face of minor social or sensory distractions	C.60.19 Engage in preferred and some non-preferred activities for longer periods of time. Remain with some high-interest activities 15 minutes or longer	
				C.36.15 With adult support, resist impulses in structured settings for brief, but increasing periods of time	C.48.18 With adult reminders can briefly inhibit initial response (e.g., stop imitating inappropriate behaviors of peers, wait turn to respond to question or prompt in group setting)	C.60.20 Typically resists impulses and can wait longer to respond in more structured settings (e.g., at a restaurant, in circle time in preschool)	

Social and Emotional Development

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Learning Progression	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>
Strand A: Early learning experiences will support children to develop trusting healthy attachments and relationships with primary caregivers.							
Trusting Relationships	SE.6.1 Attend and respond to familiar adults and are able to be soothed when distressed	SE.12.1 Prefer primary caregiver(s) to others and usually accept guidance from trusted adults	SE.18.1 Look to trusted caregivers for cues about how to respond to their environment for comfort and support	SE.24.1 Use familiar adults as secure base through behaviors such as glancing back at caregiver while playing	SE.36.1 Approach caregivers for support and comfort, particularly during stressful or frustrating situations	SE.48.1 Engage in interactions with less familiar adults	SE.60.1 Seek help and approval from a wider array of adults in trusted roles
Managing Separation	SE.6.2 Show recognition of familiar faces and awareness if someone is a stranger	SE.12.2 Display preference for trusted adults which may include exhibiting fear and protesting at separation	SE.18.2 Display attachment to trusted adults and feelings of security which may include a fear of strangers and new and unfamiliar places	SE.24.2 Manage routine separations from caregivers with little distress and calm quickly after a separation	SE.36.2 Manage most separations without distress and adjust to new settings with support from a trusted adult	SE.48.2 Manage most separations without distress and adjust to new settings in the presence of trusted adult	SE.60.2 Through expanding relationships with adults (e.g., teacher, play group leader, friends' caregivers), exhibit comfort in exploring more new settings, although they may need to periodically check-in with a familiar adult
Strand B: Early learning experiences will support children to develop self-regulation.							
Regulation of Emotions and Behavior	SE.6.3 In addition to being comforted by familiar adult, can also get comfort from sucking thumb, fist, or pacifier	SE.12.3 Have ways to comfort self, which may involve items such as a stuffed animal or a special blanket that help them feel safe and secure	SE.18.3 Show increasing regulation through daily routines, activities and familiar adults	SE.24.3 With adult assistance, find comfort in rituals and routines. May use special comfort object to self-soothe (especially at nap time)	SE.36.3 With adult support, use self-soothing techniques to calm	SE.48.3 Use strategies to self-soothe with limited adult support	SE.60.3 Use strategies to self-soothe across situations with minimal prompting and share strategies with peers or family SE.60.4 Demonstrate increased ability to consider the social standards of the environment when responding to their emotional state

Strand B: Early learning experiences will support children to develop self-regulation (continued)

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Regulation of Impulses and Behavior	SE.6.4 Respond to having needs met (e.g., is comforted by being picked up or fed)	SE.12.4 Respond to adult interactions, including tone of voice, expression and gestures (e.g., shaking head and frowning)	SE.18.4 Respond to adult guidance to accept an alternative to initial desire or impulse (e.g., a truck from the shelf vs. one another child has, food choices)	SE.24.4 Accept some redirection from adults	SE.36.4 Begin to control behavior by responding to choice and limits provided by an adult	SE.48.4 With adult guidance and support, wait for short period of time to get something wanted (e.g., waiting for turn with a toy or waiting for next step in daily routine)	SE.60.5 Tolerate small levels of frustration and disappointment, displaying appropriate behavior with adult prompting and support
		SE.12.5 Show anticipation and respond to familiar routines in their lives	SE.18.5 Within the context of a responsive adult relationship, will begin to tolerate a brief wait for needs to be met SE.18.6 Show anticipation of next step in daily routine (e.g., reaches or signs for bib when placed in high chair)	SE.24.5 Is aware of typical routine and shows some understanding of rules, but may need adult support	SE.36.5 Make transitions and follow basic routines and rules with adult supervision	SE.48.5 Make transitions and follow basic schedule, routines and rules with occasional reminders	SE.60.6 Initiate previously taught strategies to help delay gratification (e.g., sets up turn-taking with a peer, finds a book to read while waiting for a special activity) SE.60.7 Recall and follow daily routines with little support, including adapting to changes in rules and routines

Strand C: Early learning experiences will support children to develop, express, recognize and respond to emotions.

Emotional Expression	SE.6.5 Display varied responses (e.g., will smile or kick when a caregiver interacts with them. May stiffen when something displeases them, or may turn away from something they dislike)	SE.12.6 Express basic emotions (e.g., sadness, frustration, anger) through facial expressions, movements, crying, smiling, laughing	SE.18.7 Express emotions through physical means such as hugging, throwing. May be cooperative or uncooperative and look to adult for reaction	SE.24.6 Express more complex emotions (e.g., excitement, embarrassment, pride, sadness) and begin to communicate feelings (although this remains an emerging skill which is only partially effective)	SE.36.6 Begin to communicate about feelings, including the cause and reaction to these feelings (e.g., "I miss my mommy. I sad," "He mad you took his toy." "I sad so Papa hug me.")	SE.48.6 Express emotions experienced in typical daily routines (e.g., frustration at waiting, excitement about a favored activity, pride) through language and gesturing rather than physical ways	SE.60.8 Describe emotions and feelings to trusted adults and peers
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Strand C: Early learning experiences will support children to develop, express, recognize and respond to emotions (continued).

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Recognition and Response to Emotions in Others	SE.6.6 React to different emotions of familiar adults (e.g., smile and coo at smiling faces, turn away from sad faces)	SE.12.7 Notice feelings of others. (e.g., may frown when another baby is crying or be upset if hears yelling)	SE.18.8 Recognize basic feelings in self and others SE.18.9 Begin to respond to others' feelings and show interest in them. Show awareness of when an adult is pleased or upset with behavior	SE.24.7 Recognize and respond to basic feelings in others (e.g., gives item to peer who is upset)	SE.36.7 Label a variety of emotions in pictures and others' expressions SE.36.8 Show awareness of appropriate responses to the emotional state of others (e.g., may occasionally comfort someone who is upset or may nurture a doll during dramatic play)	SE.48.7 Recognize, label and respond to a wide variety of emotions in others	SE.60.9 Recognize and show acknowledgement of the feelings, needs and rights of others through behavior (e.g., say "thank you," share with others, notice issues of fairness) SE.60.10 Begin to understand that different people may have different emotional reactions

Strand D: Early learning experiences will support children to develop self-awareness, self-concept and competence.

Sense of self	SE.6.7 React when hearing their own name through movement or expressions	SE.12.8 Consistently respond to their name	SE.18.10 Demonstrates self-awareness through response to name and use of "me" and "mine"	SE.24.8 Identify own family members by relationship and/or name	SE.36.9 Identify self, family members, teacher and some peers by name	SE.48.9 Refer to themselves by first and last name and identify some characteristics (e.g., gender, hair color, etc.) and skills	SE.60.11 Identify themselves as an individual and a part of a group by sharing individual characteristics and roles within the group (e.g., name family members and roles, name team members or classmates)
	SE.6.8 Begin to realize their hands and feet belong to them and explore them as well as face, eyes and mouth	SE.12.9 Show awareness of body parts of self and others	SE.18.11 Recognize self in mirror				
Personal Preferences	SE.6.9 Express preferences for familiar people and some objects. (e.g., stop crying more quickly with a familiar person; move their legs, arms and smile at a familiar person)	SE.12.10 Develop preferences for food, objects, textures. May reject non-preferred items (e.g., pushing them away)	SE.18.12 Begin to communicate own likes and dislikes	SE.24.9 Use words and/or gestures to express interests (e.g., points and says, "Look, airplane.")	SE.36.10 May want to keep what belongs to them close by and often will not want to share	SE.48.10 Recognize and describe themselves in terms of basic preferences	SE.60.12 Describe self by referring to preferences, thoughts and feelings

Strand D: Early learning experiences will support children to develop self-awareness, self-concept and competence (continued).

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Self-Concept and Competency		SE.12.11 Demonstrate anticipation of results from own actions (e.g., drops toy so adult will pick it up, repeats action that makes loud noise)	SE.18.13 Show confidence when supported to complete familiar tasks and will attempt new tasks with adult support	SE.24.10 Complete simple familiar tasks with confidence (e.g., puts on article of clothing). Engage in new experiences with support from a familiar adult	SE.36.11 Regularly engage in familiar tasks. Begin to show independence by frequently attempting to do things on their own even when tasks are difficult for them	SE.48.11 Demonstrate confidence in a range of activities, routines and tasks and take initiative in attempting unfamiliar tasks	SE.60.13 Demonstrate increased confidence and a willingness to take risks when attempting new tasks and making decisions regarding activities and materials
		SE.12.12 Respond to own actions with pleasure (e.g., coos, laughs)	SE.18.14 React positively (e.g., smiles, claps) to accomplishments		SE.36.12 Express feeling of pleasure over accomplishment and share this with others (e.g., "Look what I made.")		SE.60.14 Show pride in accomplishments and abilities

Strand E: Early learning experiences will support children to develop social relationships.

Adult Relationships (see note below)	SE.6.10 Respond differently to different people. Respond to familiar people by smiling, cooing and moving their body	SE.12.13 Engage in social interactions not connected to getting physical needs met (e.g., peek-a-boo, performing, copying others and babbling)	SE.18.15 Show affection or shared attention (e.g., pointing out something of interest) to an increasing number of familiar people	SE.24.11 Enjoy games and other social exchanges with familiar adults. May seek out repeated patterns of interaction	SE.36.13 Enjoy sharing new experiences with familiar adults	SE.48.12 Communicate with familiar adults and accept or request guidance	SE.60.15 Typically use socially appropriate behavior with adults, such as helping, responding to limits, etc.
	SE.6.11 Show interest in interacting with others. May gain an adult's attention and wait for a response	SE.12.14 Notice the activity of adults and other children and attend closely					

Note: Caregivers guide children during interactions with them, as well as other adults. Therefore, these markers of social relationships with adults are highly dependent upon child temperament, the adult temperament and the adult's guidance and regulation of the interplay.

Strand E: Early learning experiences will support children to develop social relationships (continued).

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Play/ Friendship	SE.6.12 Notice other children and may touch, smile or coo to them	SE.12.15 Watch actions of other children but does not join the play. May stay in proximity, make eye contact and babble	SE.18.16 Show interest in children who are playing nearby and may interact with them briefly	SE.24.12 Show interest in what other children are doing and play alongside them with similar materials	SE.36.14 Seek out other children and will interact with other children using common materials SE.36.15 Show preference for certain peers over time although these preferences may shift	SE.48.13 Interact with one or more children (including small groups) beginning to work together to build or complete a project SE.48.14 Interact with a variety of children in the program	SE.60.16 Cooperate with peers through sharing and taking turns SE.60.17 Show increasing investment in the responses and friendship of peers and modify behavior to enhance peer relationships SE.60.18 Seek help from peers and offer assistance when it is appropriate
Conflict Resolution						SE.48.15 Seek and accept adult help to solve conflicts with peers	SE.60.19 Engage in developing solutions and work to resolve conflict with peers

Physical Development and Health

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Learning Progression	<p>Indicators This is evident, for example, when children:</p>	<p>Indicators This is evident, for example, when children:</p>	<p>Indicators This is evident, for example, when children:</p>	<p>Indicators This is evident, for example, when children:</p>	<p>Indicators This is evident, for example, when children:</p>	<p>Indicators This is evident, for example, when children:</p>	<p>Indicators This is evident, for example, when children:</p>
Strand A: Early learning experiences will support children to develop gross motor skills.							
Mobility *Children may use adaptive equipment or an assistive device to achieve independence on these indicators	PH.6.1 Show head control when in any position and during transitional movement	PH.12.1 Get into sitting position on own and play while in this position	PH.18.1 Use walking as main means of mobility and pull toy when walking	PH.24.1 Walk with legs closer together and able to change directions smoothly and carry objects	PH.36.1 Walk and run on various surfaces and level changes with balance and control of speed	PH.48.1 Walk up and down stairs alternating feet while carrying an object	PH.60.1 Alternate direction while running and stop easily without losing balance
	PH.6.2 Roll over, usually from both directions PH.6.3 Reach, grasp and bat for objects overhead and eventually reach and play with feet when on back	PH.12.2 Move when on the floor by rolling, creeping, crawling with purpose	PH.18.2 Stand from a squat position using arms to push off floor	PH.24.2 Begin to run	PH.36.2 Walk up and down stairs alternating feet on steps with railing held		
	PH.6.4 Push up and support weight on forearms when on stomach	PH.12.3 Pull to stand, cruise along furniture and stand alone. May take a few steps independently or with help	PH.18.3 Creep up and down stairs	PH.24.3 Walk up and down steps holding onto rail, often leading with the same foot and negotiating one step at a time			
	PH.6.5 Sit with support						

Strand A: Early learning experiences will support children to develop gross motor skills (continued).

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Large Muscle Movement and Coordination			PH.18.4 Throw ball in forward direction	PH.24.4 Use more complicated series of movements such as climbing onto and down from furniture without help, propelling self on ride-on toys	PH.36.3 Catch and throw a playground ball with an adult short distance away PH.36.4 Jump with two feet	PH.48.2 Combine several gross motor skills in an organized way, such as moving through an obstacle course or participating in a creative movement activity following directives PH.48.3 Hop on one foot	PH.60.2 Coordinate more complex movements with increasing control, balance, and accuracy (e.g., climbing on playground equipment, pumping a swing, bending, twisting, playing hopscotch, riding tricycle)
				PH.24.5 Catch a large ball tossed from a short distance against their body using both arms	PH.36.5 Kick a ball in forward direction	PH.48.4 Kick ball at target a short distance away with accuracy and speed PH.48.5 Throw small ball overhand at target a short distance away with accuracy	

Strand B: Early learning experiences will support children to develop fine motor skills.

Visual Motor Integration	PH.6.6 Locate an object using vision or sound, reach and grasp the object	PH.12.4 Reach into containers or reach to activate a simple cause and effect toy	PH.18.5 Engage in play that requires using vision and hands such as building a tower or structure, with several blocks balanced on top of each other or placing a large peg in a pegboard base	PH.24.6 Orient pieces to match opening and complete a simple inset form board/puzzle or shape sorter	PH.36.6 Use common tools that require eye-hand coordination with precision and for their intended purpose (e.g., hammer peg, twist handle to open latch, put body parts on Mr. Potato)	PH.48.6 Use smaller objects with precision (e.g., put small pegs in light board, use large needle to sew, use scissors to cut on curved line, etc.)	PH.60.3 Use coordinated movements to manipulate materials, including cutting and drawing with control and using appropriate hand position to manipulate objects (e.g., thumb up position while using scissors)
	PH.6.7 Follow an object with eyes across body, crossing the middle	PH.12.5 Combine and separate toys (e.g., replace and remove large rings from post in any order)					

Strand B: Early learning experiences will support children to develop fine motor skills (continued).

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Small Muscle Movement and Coordination	PH.6.8 Use voluntary and purposeful movements to bring hands to mouth	PH.12.6 Move objects from one hand to another and combine items at center of body (e.g., banging two blocks together)	PH.18.6 Use both hands at the same time for different purposes (e.g., may stabilize tower with one hand and add an additional block with other hand)	PH.24.7 Use a writing tool to scribe purposefully and imitate vertical and horizontal stroke. May use a fist grasp	PH.36.7 Use writing tools or paint objects with some control and purpose	PH.48.7 Use writing/drawing tools with increased precision to draw simple shapes, pictures and/or letter. May have immature pencil grasp with 3-5 fingers on pencil shaft	PH.60.4 Have sufficient control of writing implements to copy simple forms or geometric shapes and write some letters (e.g., may write own name since these are most familiar)
	PH.6.9 Bring hands together while lying on back	PH.12.7 Use index finger to poke and grasp small objects between thumb and fingertips					PH.60.5 Use a mature pencil grasp with 3 fingers on writing implement

Strand C: Early learning experiences will support children to acquire adaptive skills.

Note: Consideration of cultural beliefs and preferences across these developmental progressions is critical.

Feeding Routines/ Nutrition	PH.6.10 Participate in feeding routines with consistent caregivers by holding onto bottle, and/or leaning forward in anticipation of food offered via bottle, breast or spoon	PH.12.8 Participate in feeding routines by holding cups or bottles, using fingers for self-feeding and/ or using eating utensils	PH.18.7 Demonstrate increased proficiency using eating utensils and cups. May begin to serve self some food, but spills are common	PH.24.8 Begin to serve self food (dishing out helpings and pouring liquids) with adult assistance	PH.36.8 Feed self with minimal spilling	PH.48.8 Pour liquid from a small pitcher	PH.60.6 Use butter knife to spread and cut. Open most containers to remove food
Safety and Responsibility		PH.18.8 Typically respond to adult requests to stop unsafe behavior	PH. 24.9 Show awareness of items that are unsafe and point them out to familiar adults (e.g., point out open gate above stairs, show them a knife that is left on counter)	PH.36.9 Tell several basic safety rules at home and in familiar settings (e.g., school, library and playground). Bring other children's rule-breaking to the attention of adults	PH.48.9 Understand basic safety rules at home and in familiar settings (e.g., school, library and playground). Generally follow rules and bring other children's rule-breaking to the attention of adults	PH.60.7 Understand the reason for most basic safety rules at home, in familiar settings and in the community	

Strand C: Early learning experiences will support children to acquire adaptive skills (continued).						
0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Dressing and Hygiene	PH.12.9 Participate in dressing, undressing and bathing by holding arms out, taking off socks, etc.	PH.18.9 Show interest in doing things for self including dressing. Put arm in sleeve, step out of pants, attempt to put on socks or shoes	PH.24.10 Engage in dressing and hygiene routines with increasing intention: pull pants up and down, take off jacket, dry own hands	PH.36.10 Attempt to complete basic self-care routines (e.g., dressing, undressing, toileting and washing) although may still need caregiver assistance	PH.48.10 Manage most aspects of dressing, toileting, hand washing and tooth brushing independently with minimal caregiver reminders to guide and support	PH.60.8 Typically manage own dressing, toileting and basic hygiene
Strand D: Early learning experiences will support children to maintain physical health status and well-being.						
Note: Consideration of cultural beliefs and preferences across these developmental progressions is critical.						
Physical Health Status	Children's physical health status impacts learning and development in all areas. Children who possess good overall health (including oral, visual and auditory) with any appropriate supports (such as glasses, hearing aids, or alternative communication systems) have a solid foundation to help them grow and learn. Maintaining good overall health status involves regular screenings, a lack of illness or preventable diseases, age appropriate amounts of sleep and rest and healthy growth patterns (e.g., height and weight).					
Physical Activity	PH.6.11 Interact with caregivers in daily physical activities that involve varying positions and promote development of movement skills	PH.12.10 Interact with caregivers in daily physical activities that involve exploration and movement	PH.18.10 Interact with caregivers in a variety of physical activity experiences	PH.24.11 Engage in physical activity in both indoor and outdoor environments that require use of large muscles	PH.36.11 Demonstrate increasing strength and endurance sufficient to actively engage in a total of 60 minutes of physical activity spread over the course of a day	PH.48.11 Demonstrate increasing strength and endurance sufficient to actively engage in 60 minutes of moderate to vigorous physical activity spread over the course of a day
Healthy Behaviors	Children participate in self-care routines, hygiene and nutrition with assistance and prompting from caregivers. These skills are addressed in the following strands: <ul style="list-style-type: none"> • Dressing and Hygiene • Feeding Routines/Nutrition 					
				PH.36.12 Discuss healthy practices including hygiene, nutrition and sleep	PH.48.12 Name examples of healthy practice including hygiene, nutrition and sleep	PH.60.10 Identify healthy practices including hygiene, nutrition and sleep

The language, communication, and literacy learning progressions included here are intended to represent common development of language skills in a child’s primary language or modes of communication. Children who are learning multiple languages or children who are learning to communicate in modes of communication different from that of their primary caregiver may demonstrate individual variation in their progress toward these language and literacy goals. Those supporting children who are learning multiple languages may also want to refer to the supplemental Dual Language Learner Framework to be used in conjunction with considering a child’s progress in their primary language or mode of communication through the use of this domain.

Early Language, Communication, and Literacy					Language and Literacy		
Learning Progression	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
	Indicators: This is evident, for example, when children:	Indicators: This is evident, for example, when children:	Indicators: This is evident, for example, when children:	Indicators: This is evident, for example, when children:	Indicators: This is evident, for example, when children:	Indicators: This is evident, for example, when children:	Indicators: This is evident, for example, when children:
Strand A: Early learning experiences will support children to understand language (receptive language).							
Word Comprehension	L.6.1 Respond to facial expressions or voices by changing own facial expression, crying or altering movements	L.12.1 Understand that words, gestures and/or signs represent objects, people or experiences	L.18.1 Understand that words, gestures or signs stand for people, objects, or experiences that are not present	L.24.1 Demonstrate in a variety of ways understanding of most of what is communicated through gestures, signs or oral language	L.36.1 Demonstrate an understanding of an increased vocabulary, influenced by experiences and relationships	L.48.1 Understand words or signs for objects, actions and visible attributes found frequently in both real and symbolic contexts	L.60.1 Understand an increasing variety and specificity of words for objects, actions and attributes encountered in both real and symbolic contexts
				L.24.2 Point to familiar objects, people and body parts			L.60.2 Determine the meanings of unknown words/concepts using the context of conversations, pictures or concrete objects
Language Comprehension	L.6.2 Orient to the direction of sound or visual cues	L.12.2 Can carry out simple requests (e.g., “wave bye-bye”)	L.18.2 Remember language heard repeatedly in stories, poems and interactive language experiences	L.24.3 Respond to questions and follow simple directions	L.36.2 Follow two-step directions	L.48.2 Understand increasingly complex sentences that include 2 - 3 concepts (e.g., “Put the blue paper under the box.”)	L.60.3 Understand increasingly complex sentences that include 3-4 concepts (e.g., “Plants are living things that will not survive without soil, sunlight and water.”)
	L.6.3 React when hearing own name or to positive facial expression						

Strand B: Early learning experiences will support children to use language (expressive language).							
	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Vocabulary	L.6.4 Use a variety of facial expressions and sounds (e.g., cooing, babbling and varied cries) to communicate	L.12.3 Begin to use word approximations (e.g., "ma-ma" or "da-da") or conventional gestures (e.g., waving, signing "more")	L.18.3 Begin to use words or conventional gestures to communicate	L.24.4 Name familiar objects and actions; use commands (e.g., "no"), possessives (e.g., "mine") or reactions (e.g., "ow")	L.36.3 Use nouns and verbs to label experiences, actions or events L.36.4 Use some personal pronouns when referring to others (e.g., you, he, she)	L.48.3 Use accepted words for objects, actions and attributes encountered frequently in both real and symbolic contexts L.48.4 Use simple pronouns (e.g., I, me, you, mine, he, she)	L.60.4 Use an increasing variety and specificity of accepted words for objects, actions and attributes encountered in both real and symbolic contexts
			L.18.4 Has a 20+ word vocabulary	L.24.5 Use new words frequently to talk about familiar things or activities	L.36.5 May occasionally use more sophisticated words than they typically use in conversational speech but that have been learned through books and personal experiences (e.g., large, fast, angry, car, run)	L.48.5 Begin to use some words that are not a part of everyday conversational speech but that are learned through books and personal experiences (e.g., gigantic, rapidly, frustrated, transportation, race or jog)	L.60.5 Use more complex words learned through books and personal experiences (e.g., label favorite shirt as chartreuse, or know that a paleontologist studies dinosaurs)
Expression of Ideas, Feelings and Needs	L.6.5 "Talk" to self and others using various vocalizations	L.12.4 Communicate wants and needs through a combination of crying, babbling and occasional word approximations, and/or gestures	L.18.5 Respond to questions with sounds, sometimes including words and oftentimes gestures	L.24.6 Use words to request objects, have needs met or gain attention	L.36.6 Use inflection in phrases or sentences to ask a question L.36.7 Comment on a variety of experiences, interactions or observations	L.48.6 Communicate about current or removed events and/or objects L.48.7 Use increasingly longer, complex sentences that combine phrases or concepts to communicate ideas	L.60.6 Use more complex words to describe the relationships between objects and ideas (e.g., position words such as "under" or "beside" and comparative words such as "bigger" or "longer")

Strand B: Early learning experiences will support children to use language (expressive language) (continued).

Language Structure	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
			L.18.6 Increasingly use gestures and sounds in coordination to communicate	L.24.7 Combine words and speak in short, two-word phrases such as "Me up!"	L.36.8 Use basic grammar rules including pronouns, plurals, possessives and regular past tense Note: Variations in applying grammar rules may be due to dual language learning and/or alternative grammar usage in home or community	L.48.8 Use basic grammar rules including irregular past tense and questions Note: Variations in applying grammar rules may be due to dual language learning and/or alternative grammar usage in home or community	L.60.7 Use basic grammar rules including subject-verb agreement, tenses, regular and irregular past tense, irregular plurals Note: Variations in applying grammar rules may be due to dual language learning and/or alternative grammar usage in home or community
					L.36.9 Use speech that is mostly intelligible to familiar adults	L.48.9 Use speech that is mostly intelligible to familiar and unfamiliar adults	L.60.8 Use an increasing variety and specificity of accepted words for objects, actions and attributes encountered in both real and symbolic contexts

Strand C: Early learning experiences will support children to use language for social interaction.

Conventions of Conversation	L.6.6 Show interest in back and forth pretend games	L.12.5 Begin to understand that a conversation is about taking turns	L.18.7 Pay attention to a speaker by pausing physical activity, shifting gaze or looking toward speaker	L.24.8 Take turns in conversations by initiating and sustaining a simple conversation over two turns	L.36.10 Have conversations with adults and peers that include four or more exchanges	L.48.10 Maintain a topic of conversation over the course of several turns	L.60.9 Initiate, maintain and end conversations by repeating what other person says and/or by asking questions
			L.18.8 Repeat or try another mode of communicating desire if initial attempts are unsuccessful				

Strand C: Early learning experiences will support children to use language for social interaction (continued).														
Language for Interaction	0-6 months	L.6.7 Coo, gurgle, smile in response to stimulation and to initiate social contact	6-12 months	L.12.6 Enjoy opportunities to “converse” with adults in a more sustained fashion, including playing simple imitation games	12-18 months	L.18.9 Use gestures and/or sounds to interact (e.g., waves, shakes head no, reaches to be lifted up)	18-24 months	L.24.9 Answer a basic question with a word	24-36 months	L.36.11 Converse with adults and peers about common experiences or events	3 to 4 years	L.48.11 Answer simple who, what, where and why questions	4 to 5 years	L.60.10 Use language to share ideas and gain information
		L.6.8 Express pleasure as adults imitate the faces and sounds they make		L.12.7 Intentionally use gestures and/or vocalizations to regulate the behavior of others and engage in social interaction			L.24.10 Use language to express wants, needs, likes and dislikes to others							
Strand D: Early learning experiences will support children to gain book appreciation and knowledge.														
Interest and Engagement with Books	L.6.9 Respond to music, stories and pictures shared with an adult	L.12.8 Engage with adults, showing shared attention to a book	L.18.10 Point to preferred pictures in books or texts	L.24.11 Point to named pictures; may name or comment on familiar pictures	L.36.12 Sustain attention for short periods of time while being told a story or reading a favorite picture book	L.48.12 Select fiction and non-fiction books to be read and attend with interest	L.60.11 Independently choose to “read” books and select a variety of texts including fiction and nonfiction							
				L.24.12 Chime-in on nursery rhymes or repeat words or phrases from familiar stories	L.36.13 Recite familiar phrases of songs, books and rhymes; may chime in with rhyme in familiar text or song									

Strand D: Early learning experiences will support children to gain book appreciation and knowledge (continued)

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Understanding of Stories or Information (Stories or information may be shared through oral storytelling, sharing of pictures and/or books)				L.24.13 Answer simple specific questions about familiar stories (e.g., "What does the cat say?"). Ask basic questions about pictures (e.g., "Who is that?")	L.36.14 Enjoy telling and retelling stories and information	L.48.13 Demonstrate comprehension through retelling with use of pictures and props, acting out main events or sharing information learned from nonfiction text	L.60.12 With prompting and support, retell familiar stories, including story elements (e.g., setting, characters, events) and/or share key details from informational text
						L.48.14 Ask and answer simple who, what, where and why questions related to story or text	L.60.13 Identify main components of a story or text (the major plot points of a story or the main topic of an informational text)
						L.48.15 Make predictions and/or ask questions about the text by examining the title, cover, pictures	L.60.14 Use connections between self and character, experience and emotions to increase comprehension

Strand E: Early learning experiences will support children to gain knowledge of print and its uses.

Book Concepts			L.24.14 Hold book upright	L.36.15 Turn pages of a book	L.48.16 Look at pages of a book from left to right (or according to conventions of home language)	L.60.15 Know how print is read (e.g., left to right, top to bottom, front to back or according to convention of home language)	
					L.48.17 Recognize that print represents spoken words (e.g., first name in print, environmental labels)	L.60.16 Know that books have titles, authors, illustrators or photographers	L.60.17 Recognize words as a unit of print and that letters are grouped to form words
Print Concepts				L.36.16 Recognize some familiar signs and symbols in the environment (e.g., logos, signs for familiar store)		L.48.18 Identify some printed words and/or common symbols (e.g., bathroom signs) in the context of the environment	L.60.18 Identify some familiar printed words out of context
							L.60.19 Begin to use awareness of letter sounds along with pictures to read words in text

Creative Arts

Learning Progression	0-6 months	6-12 months	12- 18 Months	18-24 Months	24 to 36 Months	3 to 4 years	4 to 5 years
Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>
Strand A: Early learning experiences will support children to engage in and enjoy the arts.	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>	Indicators <i>This is evident, for example, when children:</i>
Music	CA.6.1 React to music by turning to a sound source, cooing in response, wiggling or moving, soothing themselves, etc.	CA.12.1 Show interest in singing, moving and dancing, using their body	CA.18.1 Use instruments to explore rhythm and melody	CA.24.1 React to changes in music by joining in with more extended segments of familiar music using voice, physical gestures and/or instruments	CA.36.1 Show response to qualities of different music with variations in physical movement (e.g., children walk, bounce, slide, rock, sway in response to qualities of rhythm)	CA.48.1 Adapt to changes in the basic qualities of music and move in more organized ways to same/different qualities of music	CA.60.1 Initiate new musical activities with voices/instruments (e.g., apply new words, add instruments to familiar song)
	CA.12.2 Move body (e.g., nod head, bounce, wiggle, rock) in response to qualities of music whether melody, volume, or rhythm is same or different (fast/slow; low/high; calm/jazzy)	CA.18.2 Respond to music by joining in on one or two words in a song or moving physically upon hearing a familiar melody or rhythm (e.g., hand gestures)	CA.24.2 Initiate words to songs and song gestures (e.g., naming animals in a song or patting, nodding)	CA.36.2 Respond with voice, body and/or instruments to longer segments/or patterns of music	CA.48.2 Imitate or spontaneously sing an entire verse of song	CA.60.2 Invent own music (through humming, singing, creating rhythms, etc.)	CA.60.3 Play with familiar rhythms and patterns in a novel way e.g., explore, and initiate pitch (high/low), rhythm (patterns), and dynamics (loud/soft)
	CA.12.3 Use musical sounds to aid in communication prior to the advent of language (e.g., babbles in a sing-song manner)	CA.18.3 Imitate parts of songs with words and/or gestures	CA.24.3 Repeat words to songs, song gestures and/or sounds (pitches)	CA.36.3 Repeat parts of simple songs	CA.48.3 Initiate new musical activities with voices or instruments (e.g., apply words, initiate their own listening and movement experiences with some adult assistance)	CA.60.4 Create music using their voices and/or a variety of instruments and materials	CA.60.4 Create music using their voices and/or a variety of instruments and materials

Strand A: Early learning experiences will support children to engage in and enjoy the arts (continued)

	0-6 months	6-12 months	12- 18 Months	18-24 Months	24 to 36 Months	3 to 4 years	4 to 5 years
Visual Arts	CA.6.2 React to stimulation in the environment. This can include drawing, sculptures or painting. Response may be slight such as a glance or stopping an activity	CA.12.4 Respond and explore through sensory experiences such as water play, texture-books or toys and jumbo crayons	CA.18.4 Experiment with a variety of media, including painting with a paint brush, finger painting, scribbling, gluing and taping, age appropriate art software	CA.24.4 Use a wide variety of art materials and media (e.g., clay, dough, wet sand) for purposeful sensory exploration CA.24.5 Experiment with strokes and lines using brushes, crayons, markers, etc.	CA.36.4 Create art in a variety of media with some control and own purpose	CA.48.5 Use different materials and techniques to make art creations that reflect thoughts, feelings, experiences, knowledge	CA.60.5 Use a variety of tools and materials to represent ideas through the visual arts
Drama				CA.24.6 Imitate simple aspects of a role using realistic props and sounds	CA.36.5 Engage in simple pretend play activities	CA.48.6 Act out simple scenarios, taking on a familiar role for brief periods during dramatic play	CA.60.6 Assume elaborate roles in dramatic play (e.g., may play multiple roles or may stay in character for extended periods of time) CA.60.7 Use materials and props in unique ways and are creative in finding and using materials as props desired for dramatic play
Dance		CA.12.5 Respond to music with full body movements	CA.18.5 Show increasing body awareness through gross motor movement (e.g., walking, bouncing, swaying, rocking, climbing) and bilateral movement (patting), show directional awareness in movements, and use non-locomotor movements (simple finger plays)	CA.24.7 Demonstrate developing ability to balance, awareness of body (e.g., name body parts, move distinct body parts) CA.24.8 Move creatively while listening to music (e.g., stamp feet, wave arms, sway).	CA.36.6 Demonstrate directional and spatial awareness involving time (fast/slow), space (high, middle, low), or energy (hard/soft) (e.g., moving like a turtle, jumping like a frog, floating like a feather, etc.)	CA.48.7 Demonstrate increasingly complex dance concepts while learning to move their body in place and through space (e.g., jumping from one place to another, combining several movements like hopping, turning, stamping feet)	CA.60.8 Use multiple dance concepts as a way to communicate meaning, ideas and feelings (e.g., use movement to represent leaves falling off trees – sway arms, wiggle fingers, stretch, fall to ground)

Strand B: Early learning experiences will support children to explore and respond to creative works.

	0-6 months	6-12 months	12- 18 Months	18-24 Months	24 to 36 Months	3 to 4 years	4 to 5 years
Appreciation of the Arts					<p>CA.36.7 Describe or ask questions about a work of art</p>	<p>CA.48.8 Respond to the materials, techniques, ideas and emotions of artworks (2- and 3-dimensional (e.g. explain a picture or sculpture including several details)</p>	<p>CA.60.9 Describe the attributes of various arts media (e.g., used a lot of colors and the paint is thick, sculpture is bumpy)</p>
					<p>CA.36.8 Express interest in and show appreciation for the creative work of others (e.g., through body language, facial expression or oral language)</p>	<p>CA.48.9 Demonstrate increased appreciation of the work of others and identify preferences</p>	

Early Mathematical Discovery						Mathematics	
Learning Progression	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:
Strand A: Early learning experiences will support children to understand counting and cardinality.							
Number Names			M.18.1 Say or sign a few number names, but may not necessarily recite them in the correct order	M.24.1 Say or sign a few number names, with beginning evidence of correct sequence (e.g., starts with "one")	M.36.1 Say or sign number sequence up to at least five. Use other number names but not necessarily in the correct order	M.48.1 Say or sign the number sequence up to at least 10	M.60.1 Say or sign the number sequence up to at least 20
Cardinality			M.18.2 Demonstrate one-to-one or one-to-many correspondence (e.g., may fill each compartment in a egg carton with one or several objects)	M.24.2 Put objects in one-to-one correspondence (e.g., puts one item in each compartment)	M.36.2 Count two to three objects using one-to-one correspondence	M.48.2 Count up to at least five objects using one-to-one correspondence, using the number name of the last object counted to represent the total number of objects in a set	M.60.2 Count up to 10 objects using one-to-one correspondence, regardless of configuration, using the number name of the last object counted to represent the total number of objects in a set
Written Numerals						M.48.3 Count out a set of objects up to four	M.60.3 Count out a set of objects up to five
						M.48.4 Recognize written numerals up to at least five	M.60.4 Recognize written numerals up to at least 10

Strand A: Early learning experiences will support children to understand counting and cardinality (continued).					
0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years
Recognition of Quantity			M.24.3 Name groups of one to two objects	M.36.3 Name and match a small collection of up to three objects	M.48.5 Recognize and name, without counting, the number of objects in small groups of at least 3 or 4 objects
Comparison			M.24.4 Compare collections that are quite different in size	M.36.4 Compare collections of 1 to 4 similar items verbally or nonverbally	M.48.6 Compare sets of 1 to 5 objects using a visual matching or counting strategy and describing the comparison as more, less than or the same
Strand B: Early learning experiences will support children to understand and describe relationships to solve problems (operations and algebraic thinking).					
Number Operations				M.36.5 Use some vocabulary related to relative quantity (e.g., "more," "less")	M.48.7 Understand that adding to (or taking away) one or more objects from a group will increase or decrease the objects in the group
					M.60.7 Use real-world situations and concrete objects to model and solve addition (e.g., putting together) and subtraction (e.g., taking away) problems up through five M.60.8 Recognize and describe parts contained in larger numbers by composing number combinations up to at least five (e.g., recognize how many have been secretly taken away from a group of five objects)
Strand C: Early learning experiences will support children to understand the attributes and relative properties of objects (measurement and data).					
See Attribute, Sorting and Patterns learning progression in Cognition					
Measurement			M.24.5 Use some vocabulary related to size and quantity (e.g., use say something is "big" or request "more")	M.36.6 Have an increasing vocabulary related to number, size and quantity (e.g., use words such as "tall," "long")	M.48.8 Recognize measurable attribute of an object such as length, weight or capacity
					M.60.9 Compare the measurable attributes of two or more objects (e.g., length, weight and capacity) and describe the comparison using appropriate vocabulary (e.g., longer, shorter, same length, heavier, lighter, same weight, holds more, holds less, holds the same amount) M.60.10 Begin to use strategies to determine measurable attributes (e.g., length or capacity of objects). May use comparison, standard or non-standard measurement tools

Strand C: Early learning experiences will support children to understand the attributes and relative properties of objects (continued).

	0-6 months	6-12 months	12-18 months	18-24 months	24-36 months	3 to 4 years	4 to 5 years
Data						M.48.9 Sort objects into two groups, count, and compare the quantity of the groups formed (e.g., indicate which is more)	M.60.11 Represent data using a concrete object or picture graph according to one attribute
Sorting and Classifying			M.18.3 Match objects that are the same	M.24.6 Sort objects using inconsistent strategies (e.g., favorite items, colors)	M.36.7 Sort on the basis of one attribute with adult support	M.48.10 Sort and classify objects by one attribute into two or more groups (e.g., color, size, shape)	M.60.12 Sort and classify a set of objects on the basis of one attribute independently and describe the sorting rule. Can re-sort and classify the same set of objects based on a different attribute

Strand D: Early learning experiences will support children to understand shapes and spatial relationships (geometry and spatial sense).

Spatial Relationships			M.18.4 Adjust their reach and grasp based upon distance, size and weight of an object	M.24.7 Show beginning understanding of positional vocabulary (e.g., up/down, in/out, on/off, under)	M.36.8 Find objects or locations based upon landmarks and position words (e.g., "Your blanket is on the couch.")	M.48.11 Use positional vocabulary (e.g., up/down, in/out, on/off, under) to identify and describe the location of an object	M.60.13 Use relational vocabulary of proximity (e.g., beside, next to, between, above, below, over and under) to identify and describe the location of an object
Identification of Shapes				M.24.8 Match familiar shapes (e.g., circle, square and typical triangle) with same size and orientation	M.36.9 Match familiar shapes with different size and orientation	M.48.12 Identify 2-dimensional shapes (starting with familiar shapes such as circle and triangle) in different orientations and sizes	M.60.14 Identify and describe a variety of 2-dimensional and 3-dimensional shapes with mathematical names (e.g., ball/sphere, box/rectangular prism, can/cylinder) regardless of orientation and size
Composition of Shapes						M.48.13 Combine two or more shapes to create a new shape or to represent an object in the environment	M.60.15 Complete a shape puzzle or a new figure by putting multiple shapes together with purpose

Early Scientific Inquiry						Science	
	0-6 months	6-12 months	12-18 months	18-24 months	24 to 36 months	3 to 4 years	4 to 5 years
Learning Progression	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:	Indicators This is evident, for example, when children:
Strand A: Early learning experiences will support children to apply scientific practices.							
Questioning and Defining Problems	See Curiosity and Initiative learning progression in Cognition		S.24.1 Observe and make comments on things observed through the senses	S.36.1 Ask simple questions related to things observed through the senses ("what" and "why")	S.48.1 Ask more detailed questions including the relationship between two things or cause and effect relationships	S.60.1 Define a problem to be solved, including details and limitations to be considered (e.g., "We need to figure out how to reach that shelf, but we aren't allowed to stand on the chairs.")	
Investigating	See Cause and Affect learning progression in Cognition		S.36.2 Manipulate materials and comment on the impact of own actions	S.48.2 Intentionally vary actions in order to observe the effect of these actions on materials	S.60.2 Engage in collaborative investigations to describe phenomena or to explore cause and affect relationships	S.60.3 Gather data by drawing, counting or otherwise documenting observations	
Using Evidence	See Personal Preferences learning progression in Social and Emotional Development		S.36.3 Provide personal reasons or evidence for decisions or opinions (e.g., "I made this picture green because my mom likes green.")	S.48.3 Cite examples to support their ideas (e.g., "I think the plant will die because when I forgot to water my plant it died.")	S.60.4 Give evidence from observations or investigations	S.60.5 Begin to distinguish evidence from opinion	
Strand B: Early learning experiences will support children to engage in the process of engineering.							
Design Cycle			S.36.4 Gather information to help determine if something has been designed by humans	S.48.4 Identify a problem and, with adult assistance design a solution (e.g., device or process) to address that problem	S.60.6 Identify a problem and, with adult assistance, design a solution, test and refine design elements		

Strand C: Early learning experiences will support children to understand patterns, process and relationships of living things.						
	0-6 months	6-12 months	12-18 months	18-24 months	24 to 36 months	3 to 4 years
Unity and Diversity of Life				S.24.2 Explore characteristics of different plants and animals	S.36.5 Observe features of plants and animals and explore function of features	S.48.5 Compare and contrast basic features of living things (e.g., body parts and their uses) between and across groups S.48.6 Recognize changes in living things over their lifespan by observing similarities and differences between babies and adults
				S.24.3 Observe living things	S.36.6 Observe how a variety of living things obtain food as a source of energy for surviving	S.48.7 Explore how animals depend upon the environment for food, water and shelter
Living Things and Their Interactions with the Environment and Each Other						S.60.7 Group and classify living things based upon features, providing evidence to support groupings S.60.8 Demonstrate an understanding of how living things grow and change through predictable stages (e.g., birth, growth, reproduction, death)
						S.60.9 Provide examples of how animals depend on plants and other animals for food
Strand D: Early learning experiences will support children to understand physical sciences.						
Energy, Force and Motion				S.24.4 Use trial and error to explore the way different objects move	S.36.7 Observe different ways objects move (e.g., roll, bounce, spin, slide) and what happens when they interact (collide)	S.48.8 Investigate how objects' speed and direction can be varied
						S.60.10 Make predictions and conduct simple experiments to change direction, speed and distance objects move S.60.11 Determine cause and effect of push/pull/collision that make objects, start, stop and change direction

Strand D: Early learning experiences will support children to understand physical sciences (continued)					
	0-6 months	6-12 months	12-18 months	18-24 months	24 to 36 months
Matter and its Properties				S.24.5 Observe simple attributes of materials (e.g., hard, soft)	S.36.8 Observe and describe attributes of materials that are related to their function (e.g., flexibility, transparency, strength)
					S.48.9 Compare and contrast attributes of common materials related to their function (e.g., flexibility, transparency, strength)
					4 to 5 years
					S.60.12 Evaluate the appropriateness of a material for a given purpose based upon its properties
					S.60.13 Observe how heating and cooling cause changes to properties of materials (e.g., ice melts when we bring it inside. Plastic becomes brittle when it is left outside in the cold.)
Strand E: Early learning experiences will support children to understand features of earth.					
Earth's Features and the Effects of Weather and Water				S.24.6 Observe natural features of the earth (e.g., land, rain)	S.36.9 Describe common features of the earth (e.g., sky, land and water) and what is found there (e.g., birds, fish, stars)
					S.48.10 Observe, record, and note patterns regarding weather and the effects on the immediate environment (e.g., Rain over a period of days causes flooding. Sunny days cause the flower bed to dry out.)
					S.48.11 Investigate how water interacts with other earth materials (e.g., sand, dirt, pebbles)
					S.60.14 Give examples of ways in which weather variables (hot/cold temperatures, amount and intensity of precipitation, wind speed) affect us and/or cause changes to earth's features (e.g., The stream has greater water flow after snow melts.)
Earth and Human Activity				S.24.7 Talk about different foods humans eat	S.24.10 Give examples of natural resources that humans use to survive (e.g., food, water)
					S.48.12 Investigate how humans use design solutions to adapt natural resources to meet basic needs (e.g., cut trees to build houses, make applesauce out of apples)
					S.60.15 Explore how humans' use of natural resources impacts the environment (e.g., if we catch all the salmon, this can no longer be a food source. Cutting down trees can cause erosion.)

Social Studies

Note: Precursors to the skills reflected in social studies can be found in the domain of Social and Emotional and Cognition.

		3 to 4 years	4 to 5 years
Learning Progression	Indicators <i>This is evident, for example, when children:</i>		Indicators <i>This is evident, for example, when children:</i>
Strand A: Early Learning experiences will support children to understand self, family and a diverse community.			
Individual Development and Identity	SS.48.1 Identify physical characteristics of self (e.g., eyes, hair, skin, etc.) SS.48.2 Demonstrate an understanding of self as part of a family (e.g., parents, grandparents, siblings, caregivers)		SS.60.1 Demonstrate an understanding that there are similarities and differences among people and families
Culture	SS.48.3 Identify cultural characteristics of self, family and community (e.g., home language, foods, modes of transportation, shelter, etc.)		SS.60.2 Demonstrate understanding that there are similarities and differences among the cultural characteristics of people, families and communities (e.g., languages, foods, art, customs, modes of transportation and shelter)
Strand B: Early Learning experiences will support children to learn about people and the environment.			
Power, Authority and Governance	SS.48.4 Demonstrate an understanding of some reasons for basic rules in the home, cultural community and/or classroom		SS.60.3 Demonstrate understanding of the reasons for rules and laws in the home, cultural community and/or classroom
People, Places and Environments	SS.48.5 Demonstrate awareness that people share the environment with other people, animals and plants and have the responsibility to care for them SS.48.6 Describe, draw or construct aspects of the geography of the classroom and/or home SS.48.7 Participate in jobs and responsibilities at home, classroom or community		SS.60.4 Demonstrate awareness that people have a responsibility to take care of the environment through active participation in activities such as recycling SS.60.5 Describe, draw or construct aspects of the classroom, home and/or community (including roads, building, bodies of water, etc.) SS.60.6 Demonstrate an understanding of why certain responsibilities are important and participate in fulfilling responsibilities at home, classroom or community (e.g., cleaning up, caring for pets)
Civic Ideals and Practices			
Strand C: Early Learning experiences will support children to develop an understanding of economic systems and resources.			
Individuals, Groups and Institutions	SS.48.8 Demonstrate awareness of a variety of jobs in the community and the work associated with them through conversation and/or play		SS.60.7 Demonstrate awareness of the tools and technologies associated with a variety of roles and jobs; expressing interest in different careers
Production, Distribution and Consumption	SS.48.9 Demonstrate beginning understanding of commerce through exploring the roles of buying and selling in play		SS.60.8 Demonstrate understanding of the basic relationship of money for the purchase of food, shelter, goods and services, moving toward an understanding of the difference between wants and needs
Science, Technology and Society	SS.48.10 Understand the use of tools, including technology, for a variety of purposes		SS.60.9 Begin to be aware of technology and how it affects life

Strand D: Early Learning experiences will support children to understand change over time.		
Time, Continuity and Change	3 to 4 years	4 to 5 years
	<p>SS.48.11 Demonstrate a basic understanding of sequence of events and time periods (e.g., using terms such as time of day, yesterday, today and tomorrow)</p> <p>SS.48.12 Demonstrate a beginning understanding of change over time through discussing topics such as their own growth and how they have changed</p>	<p>SS.60.10 Demonstrate a beginning understanding of past, present and future as it relates to one's self, family and community</p> <p>SS.60.11 Demonstrate a beginning understanding of change over time through discussing, representing or playing, about expanding topics such as their own growth and family history</p>

Dual Language Development Framework: Learning Progressions for Second Language Acquisition

This is a basic framework for considering development of second language learning and was developed as a supplement to the Connecticut Early Learning and Development Standards. It is necessary to consider information about children’s language development in all languages they are learning when looking at their skills and progress in other developmental domains and content areas. The Language and Literacy domain applies to all students and reflects what children should know and be able to do in their first or primary language(s). Although learning multiple languages may impact the timing of some development in the Language and Literacy domain, the learning progressions in that domain are considered the primary language and literacy acquisition standards. This section is not applicable to all students, but rather is designed to raise awareness of the typical stages of acquiring a second language. It shows a general progression of skills, loosely based on a child with some initial experiences in a first language (L1), who is receiving continued support of language and academic development in L1 at the same time he/she is learning a second language (L2). The general progression in the document is shown below.

<p>Beginning Home language and first experiences with second language</p>	<p>Middle Beginning use of second language</p>	<p>Later Increasing use of second language</p>
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There is wide variation in the experiences and skills of children who are learning a second language. The degree to which children’s use of their first or second language is supported at home and in other environments has a great impact on their language development, as does the age at which they begin to learn a second language. Children with different experiences and varying exposure to languages may vary from the developmental progression indicated in this document. Some examples are:

- Children who learn two languages at home on a continuing basis from birth may develop similar skills in both languages at the same time.
- Children with strong verbal skills in L1 may move from the beginning stages to later stages more quickly than a child who is very young or who has not had strong language models in L1.
- Children whose school experiences are provided in L2 may begin to demonstrate stronger skills in L2 than in L1 if their academic knowledge, vocabulary and expression of higher order thinking are not supported in L1.

All of these variables should be considered when looking at children’s language and literacy development. This document can serve as a basis for considering a child’s skills when they are learning a second language or when their home language is different from that learned at school.

Research widely supports the advantages of learning multiple languages and shows that greater skills in a first language support the development of skills in a second language. Therefore, this document promotes continuing support for children’s language development in their first language. While the supports for first and second language development may not occur in the same settings, communication and coordination to ensure common goals across settings will help to ensure the best outcomes for children.

Dual Language Development Framework

Learning Progression	Beginning Home Language and first experiences with second language	Middle Beginning use of second language	Later Increasing use of second Language
Strand A: Early learning experiences will support children to develop listening skills.			
Comprehension of Information Presented Orally	DLL.B.1 Demonstrate an understanding of words related to basic and advanced concepts in L1 that are appropriate for their age. May understand a few words in L2	DLL.M.1 Demonstrate listening comprehension of familiar information and concepts in L2, especially with visual and verbal supports (e.g., repetition of information, clarification)	DLL.L.1 Demonstrate listening comprehension of familiar and unfamiliar content and concepts in L2 with continued and appropriate support (including the use of contextual clues, real experiences, concrete objects, visual/films, etc.)
Comprehension of Oral Instructions, Questions and Prompts	DLL.B.2 Respond to directions, prompts and questions in L1 and acknowledge or respond nonverbally to common words or phrases in L2 when accompanied by gestures and contextual cues	DLL.M.2 Begin to respond to age appropriate routine directions, prompts and familiar questions in L2, especially when there are contextual clues	DLL.L.2 Respond to age appropriate directions, prompts and questions in L2, including multi-step directions with continued and appropriate support (including the use of contextual clues, real experiences, concrete objects, visual/films, etc.)
Vocabulary	DLL.B.3 Demonstrate growing vocabulary in L1 while beginning to attend to L2 language, relying on simplified speech and visual or nonverbal cues or the actual objects	DLL.M.3 Demonstrate understanding of familiar words and simple phrases in L2, especially objects, actions and basic common social vocabulary	DLL.L.3 Comprehend and respond to increasingly complex and varied L2 vocabulary with continued and appropriate support (including the use of contextual clues, real experiences, concrete objects, visual/films, etc.)
Pronunciation and Intonation Patterns	DLL.B.4 Demonstrate an age-appropriate understanding of intonation patterns in L1 and recognize a couple of basic patterns in L2 (e.g., intonation used for question versus statement in English)	DLL.M.4 Respond appropriately to an increasing number of basic intonations patterns in L2 (e.g., can follow and use intonation of songs with or without the correct words)	DLL.L.4 Distinguish intonation patterns and word stress that affect meaning in questions, statements, exclamations and commands in L2; May still demonstrate difficulty hearing some sounds
Conversations and Discussions	DLL.B.5 Demonstrate active listening strategies about personal topics by attending to the speaker nonverbally, making eye contact (if culturally relevant) and attending to gestures	DLL.M.5 Use age-appropriate listening strategies during conversations and discussions, asking on-topic questions with support	DLL.L.5 Attend to speaker during conversation and discussion in L2, responding appropriately with continued and appropriate support (including the use of contextual clues, real experiences, concrete objects, visual/films, etc.)
Strand B: Early learning experiences will support children to develop speaking skills.			
Communication of Needs	DLL.B.6 May use L1 or L2 to attempt to communicate. In L2 dominant environments may rely on nonverbal communication, such as gestures or behaviors, to seek attention, request objects or initiate a response from others	DLL.M.6 Combine nonverbal and some verbal communication in L2 to be understood by others (may use L1 and L2 in combination or may use imitative, telegraphic and/or formulaic speech); Request items in L2. May use social greetings and common phrases (e.g., "I don't know") in L2	DLL.L.6 Show increasing ability to use verbal communication in L2 to be understood by others. Demonstrate increased participation in conversations with peers and adults
Conversation and Discussion	DLL.B.7 Use L1 during language exchanges and use basic nonverbal communication techniques such as gestures, etc. May occasionally use single words in L2 to communicate	DLL.M.7 Use both L1 and L2 to engage with peers/adults, request or respond. May use L1 and L2 interchangeably (code-switching) and engage in age-appropriate social discussions	DLL.L.7 Demonstrate ability to engage in age-appropriate conversations in L2 on a variety of topics

Pronunciation and Intonation	DLL.B.8 Produce age-appropriate sounds and phonemic structures in L1. May apply L1 patterns when using single words or short phrases in L2	DLL.M.8 Use approximations of sounds and some age-appropriate sounds in L2 but may still carry pronunciation patterns from L1. May add or omit sounds in L2 even when repeating after a model	DLL.L.8 Generally use age-appropriate pronunciation, enunciation, intonation and fluency in L2 but may still carry pronunciation patterns from L1
		DLL.M.9 Use age-appropriate pronunciation, enunciation, intonation and fluency using words, phrases and simple sentences when repeating after a model	
Grammar and Syntax	DLL.B.9 Use age-appropriate grammar in L1 (e.g., plurals, simple past tense, etc.). May apply L1 patterns when using single words or short phrases in L2	DLL.M.10 Begin to use some L2 grammatical structures but may still apply rules from L1 to L2	DLL.L.9 Increasingly use age-appropriate forms of grammar in L2, (e.g., plurals, simple past tense, subject-verb agreement)
Social Conventions	DLL.B.10 Use age-appropriate social communication skills in L1. May apply L1 conventions when using single words or short phrases in L2	DLL.M.11 Show a beginning understanding of social conventions in L2	DLL.L.10 Use age-appropriate verbal and non-verbal social conventions in L2
Vocabulary Production	DLL.B.11 Use age-appropriate vocabulary in L1 and begin to use and demonstrate understanding of (through nonverbal communication or gestures) basic, concrete labels in L2	DLL.M.12 Begin to use L2 vocabulary, especially concrete objects and routine verbs. Also begin to use social greetings and common phrases/words and appropriate nonverbal actions that indicated understanding of common phrases/words	DLL.L.11 Use age-appropriate and varied vocabulary in a variety of contexts with continued and appropriate support (including the use of contextual clues, real experiences, concrete objects, visual/films, etc.)
Utterance Length and Complexity	DLL.B.12 Use age-appropriate range of utterance length in L1 and may use isolated words in L2	DLL.M.13 Use two and three word utterances in L2 while continuing to expand utterance length and complexity in L1	DLL.L.12 Use age-appropriate utterance length in L2 with increasing use of more complex grammatical structures and a wider variety of elements of speech (e.g., descriptors, pronouns, etc.)
Academic Information (inquiry, narrative development)	DLL.B.13 Prefer use of L1 to engage in learning and exploration across developmental domains or content areas (e.g., ask and answer age appropriate questions related to science and math, identifies emotions, retells stories, etc.)	DLL.M.14 Begin to use L2 to engage in inquiry and learning experiences; may rely on students that share common L2 for understanding and learning. Need concrete experiences to acquire understanding and make connections to L1, prior experiences and known concepts	DLL.L.13 Are able to use L1 or L2 in a range of learning and exploratory contexts with continued ongoing support in L1 and L2

Strand C: Early learning experiences will support children to develop early literacy skills.

Note: These progressions apply to children approximately 3-5 years of age.

Vocabulary, Symbols and Environmental Print	DLL.B.14 Begin to recognize that symbols (classroom, home or community) in the environment carry a consistent meaning in L1 or L2	DLL.M.15 Recognize in the environment (classroom, home or community) some familiar symbols, words and print labels in L1 or L2	DLL.L.14 Recognize in the environment (classroom, home or community) an increasing number of familiar symbols, words and print labels in L2
Connect written text and spoken language	DLL.B.15 Begin to recognize the first letter in their own name or the character for their own name in L1 or L2	DLL.M.16 Identify some letters or characters in L1 and L2 and the sounds associated with them	DLL.L.15 Begin to demonstrate that the letters or characters of the L2 alphabet or system are symbols that make up or represent words
Phonemic awareness	DLL.B.16 Attend to and experiment with different sounds or tone in words in L1	DLL.M.17 Attend to and experiment with different sounds or tone in words in L1 and L2 with support	DLL.L.16 Experiment with and vary sounds in words in L1 and L2 (e.g., manipulating onsets, rimes and phonemes to create rhymes, alliteration, etc.)
Written language	DLL.B.17 Begin to demonstrate an awareness that written language can be in L1 or L2	DLL.M.18 Begin to use marks or symbols to represent spoken language in L1 or L2	DLL.L.17 Continue to develop beginning writing skills by using letters or symbols from L2 to represent their ideas

Appendix A: CT ELDS to Common Core State Standards Alignment — English Language Arts

Language and Literacy Early Learning and Development Standards			Common Core State Standards in English Language Arts
	3 to 4 years	4 to 5 years	Kindergarten
Strand A: Understand Language (Receptive Language)			
Word Comprehension	L.48.1 Understand words or signs for objects, actions and visible attributes found frequently in both real & symbolic contexts	L.60.1 Understand an increasing variety and specificity of words for objections, actions and attributes encountered in both real and symbolic contexts L. 60.2 Determine the meanings of unknown words/concepts using the context of conversations, pictures or concrete objects	CC.K.L.4 Determine or clarify the meaning of unknown and multiple-meaning words and phrases based on kindergarten reading and content CC.K.L.4.a Identify new meanings for familiar words and apply them accurately (e.g., knowing duck is a bird and learning the verb to duck) CC.K.L.4.b Use the most frequently occurring inflections and affixes (e.g., -ed, -s, re-, un-, pre-, -ful, -less) as a clue to the meaning of an unknown word
Language Comprehension	L.48.2 Understand increasingly complex sentences that include 2 to 3 concepts (e.g., "Put the blue paper under the box.")	L.60.3 Understand increasingly complex sentences that include 2 to 3 concepts (e.g., "Plants are living things that will not survive without soil, sunlight and water.")	CC.K.L.5 With guidance and support from adults, explore word relationships and nuances in word meanings CC.K.L.5.a Sort common objects into categories (e.g., shapes, foods) to gain a sense of the concepts the categories represent CC.K.L.5.b Demonstrate understanding of frequently occurring verbs and adjectives by relating them to their opposites (antonyms) CC.K.L.5.c Identify real-life connections between words and their use (e.g., note places at school that are colorful)
Strand B: Use language (Expressive language)			
Vocabulary	L.48.3 Use accepted words for objects, actions and attributes encountered frequently in both real and symbolic contexts L.48.4 Use simple pronouns (I, me, you, mine, he, she)	L.60.4 Use an increasing variety and specificity of accepted words for objects, actions and attributes encountered in both real and symbolic contexts	CC.K.L.6 Use words and phrases acquired through conversations, reading and being read to, and responding to texts
	L.48.5 Begin to use some words that are not a part of everyday conversational speech but that are learned through books and personal experiences (e.g., gigantic, rapidly, frustrated, transportation, race or jog)	L.60.5 Use more complex words learned through books and personal experiences (e.g., label favorite shirt as chartreuse, or know that a paleontologist studies dinosaurs)	
Expressing Ideas, Feelings and Needs	L.48.6 Communicate about current or removed events and/or objects L.48.7 Use increasingly longer, complex sentences that combine phrases or concepts to communicate ideas	L.60.6 Use more complex words to describe the relationships between objects and ideas (e.g., position words such as under, beside and comparative words such as bigger or longer)	CC.K.SL.4 Describe familiar people, places, things and events and, with prompting and support, provide additional detail CC.K.SL.5 Add drawings or other visual displays to descriptions as desired to provide additional detail CC.K.SL.6 Speak audibly and express thoughts, feelings and ideas clearly

Language Structure	L.48.8 Use basic grammar rules including irregular past tense and questions Note: Variations in applying grammar rules may be due to dual language learning and/or alternative grammar usage in home or community	L.60.7 Use basic grammar rules including subject-verb agreement, tenses, regular & irregular past tense, irregular plurals Note: Variations in applying grammar rules may be due to dual language learning and/or alternative grammar usage in home or community	CC.K.L.1 Demonstrate command of the conventions of standard English grammar and usage when speaking CC.K.L.1.a Print many upper- and lowercase letters CC.K.L.1.b Use frequently occurring nouns and verbs CC.K.L.1.c Form regular plural nouns orally by adding /s/ or /es/ (e.g., dog, dogs; wish, wishes) CC.K.L.1.d Understand and use question words (interrogatives) (e.g., who, what, where, when, why, how) CC.K.L.1.e Use the most frequently occurring prepositions (e.g., to, from, in, out, on, off, for, of, by, with) CC.K.L.1.f Produce and expand complete sentences in shared language activities
	L.48.9 Use speech that is mostly intelligible to familiar and unfamiliar adults	L.60.8 Use an increasing variety and specificity of accepted words for objects, actions and attributes encountered in both real and symbolic contexts	

Strand C: Use language for social interaction

Conventions of Conversation	L.48.10 Maintain a topic of conversation over the course of several turns	L.60.9 Initiate, maintain and end conversations by repeating what other person says and/or asking questions	CC.K.SL.1 Participate in collaborative conversations with diverse partners about kindergarten topics and texts with peers and adults in small and larger groups CC.K.SL.1.a Follow agreed-upon rules for discussions (e.g., listening to others and taking turns speaking about the topics and texts under discussion) CC.K.SL.1.b Continue a conversation through multiple exchanges CC.K.SL.2 Confirm understanding of a text read aloud or information presented orally or through other media by asking and answering questions about key details and requesting clarification if something is not understood CC.K.SL.3 Ask and answer questions in order to seek help, get information, or clarify something that is not understood
Language for Interaction	L.48.11 Answer simple who, what, where and why questions	L.60.10 Use language to share ideas and gain information	

Strand D: Book Appreciation and Knowledge

Show Interest and Engagement with Books	L.48.12 Select fiction and non-fiction books to be read and attend with interest	L.60.11 Independently choose to 'read' books and select a variety of texts, including fiction and nonfiction	CC.K.R.F.4 Read emergent-reader texts with purpose and understanding CC.K.R.I.10 Actively engage in group reading activities with purpose and understanding CC.K.R.L.10 Actively engage in group activities with purpose and understanding
Understands Stories or Information (Stories or information may be shared through oral storytelling, sharing of pictures and/or books)	L.48.13 Demonstrate comprehension through retelling with use of pictures and props, acting out main events or share information learned from nonfiction text	L.60.12 With prompting and support, retell familiar stories, including story elements (e.g., setting, characters, events) and/or shares key details from informational text	CC.K.R.I.1 With prompting and support, ask and answer questions about key details in a text CC.K.R.I.2 With prompting and support, identify the main topic and retell key details of a text CC.K.R.L.1 With prompting and support, ask and answer questions about key details in a text CC.K.R.L.2 With prompting and support, retell familiar stories, including key details CC.K.R.L.3 With prompting and support, identify characters, setting and major events in a story

	L.48.13 Ask and answer simple who, what, where and why questions related to story or text	L.60.13 Identify main components of a story or text (the major plot points of a story or the main topic of an informational text)	CC.K.R.I.3 With prompting and support, describe the connection between two individuals, events, ideas, or pieces of information in a text
	L.48.15 Make predictions and/or ask questions about the text by examining the title, cover, pictures	L.60.14 Use connections between self and character experience and emotions to increase comprehension	
Strand E: Knowledge of Print and Its Uses			
Book Concepts	L.48.16 Looks at pages of a book from left to right (or according to conventions of home language)	L.60.15 Know how print is read (left to right, top to bottom, front to back or according to convention of home language)	CC.K.R.F.1 Demonstrate understanding of the organization and basic features of print CC.K.R.F.1.a Follow words from left to right, top to bottom, and page by page CC.K.R.I.4 With prompting and support, ask and answer questions about unknown words in a text CC.K.R.I.5 Identify the front cover, back cover, and title page of a book CC.K.R.I.6 Name the author and illustrator of a text and define the role of each in presenting the ideas or information in a text CC.K.R.L.4 Ask and answer questions about unknown words in a text CC.K.R.L.5 Recognize common types of texts (e.g., story-books, poems) CC.K.R.L.6 With prompting and support, name the author and illustrator of a story and define the role of each in telling the story CC.K.R.I.7 With prompting and support, describe the relationship between illustrations and the text in which they appear (e.g., what person, place, thing, or idea in the text an illustration depicts) CC.K.R.I.8 With prompting and support, identify the reasons an author gives to support points in a text CC.K.R.I.9 With prompting and support, identify basic similarities in and differences between two texts on the same topic (e.g., in illustrations, descriptions, or procedures) CC.K.R.L.7 With prompting and support, describe the relationship between illustrations and the story in which they appear (e.g., what moment in a story an illustration depicts) CC.K.R.L.9 With prompting and support, compare and contrast the adventures and experiences of characters in familiar stories
	L.48.17 Recognizes that print represents spoken words (i.e., first name in print, environmental labels)	L.60.16 Know that books have titles, authors, illustrators or photographers L.60.17 Recognize words as a unit of print and that letters are grouped to form words	
Print Concepts	L.48.16 Identify some printed words and/or common symbols (e.g., bathroom signs) in the context of the environment	L.60.18 Identify some familiar printed words out of context L.60.19 Begin to use awareness of letter sounds along with pictures to read words in text	CC.K.R.F.3 Know and apply grade-level phonics and word analysis skills in decoding words CC.K.R.F.3.a Demonstrate basic knowledge of letter-sound correspondences by producing the primary or most frequent sound for each consonant CC.K.R.F.3.b Associate the long and short sounds with the common spellings (graphemes) for the five major vowels CC.K.R.F.3.c Read common high-frequency words by sight (e.g., the, of, to, you, she, my, is, are, do, does) CC.K.R.F.3.d Distinguish between similarly spelled words by identifying the sounds of the letters that differ

Letter Recognition	L.48.19 Recognize some letters especially those in one's own name	L.60.2 Recognize and names known letters of the alphabet in familiar and unfamiliar words	CC.K.R.F.1.b Recognize that spoken words are represented in written language by specific sequences of letters CC.K.R.F.1.c Understand that words are separated by spaces in print CC.K.R.F.1.d Recognize and name all upper- and lower-case letters of the alphabet
		L.60.21 Make some letter-sound connections	

Strand F: Phonological Awareness:

Phonological Awareness	L.48.20 Recognize rhyming words in songs, chants or poems	L.60.22 Produce rhyming words or words that have same initial sound	CC.K.R.F.2 Demonstrate understanding of spoken words, syllables, and sounds (phonemes) CC.K.R.F.2.a Recognize and produce rhyming words CC.K.R.F.2.b Count, pronounce, blend, and segment syllables in spoken words CC.K.R.F.2.c Blend and segment onsets and rhymes of single-syllable spoken words CC.K.R.F.2.d Isolate and pronounce the initial, medial vowel, and final sounds (phonemes) in three-phoneme (consonant-vowel-consonant, or CVC) words* (This does not include CVCs ending with /l/, /r/, or /x/.) CC.K.R.F.2.e Add or substitute individual sounds (phonemes) in simple, one-syllable words to make new words
	L.48.21 Identify when initial sounds in words are the same	L.60.23 Recognize which words in a set of words begin with the same sound	
	L.48.22 Distinguish individual words in a sentence	L.60.24 Distinguish syllables in words	

Strand G: Conveying meaning through drawing, letters and words

Conveying meaning through drawing, letters and words	L.48.23 Draw or "writes" to convey an idea, event or story. "Writing" involves scribbles, letters and/or letter-like shapes (e.g., make pretend list or use their words to dictate a message to communicate with others)	L.60.25 Draw original stories with a beginning, middle and end	CC.K.W.1 Use a combination of drawing, dictating, and writing to compose opinion pieces in which they tell a reader the topic or the name of the book they are writing about and state an opinion or preference about the topic or book (e.g., My favorite book is . . .) CC.K.W.2 Use a combination of drawing, dictating, and writing to compose informative/explanatory texts in which they name what they are writing about and supply some information about the topic CC.K.W.3 Use a combination of drawing, dictating, and writing to narrate a single event or several loosely linked events, tell about the events in the order in which they occurred, and provide a reaction to what happened CC.K.W.5 Production and Distribution of Writing: With guidance and support from adults, respond to questions and suggestions from peers and add details to strengthen writing as needed CC.K.W.6 Production and Distribution of Writing: With guidance and support from adults, explore a variety of digital tools to produce and publish writing, including in collaboration with peers CC.K.W.7 Participate in shared research and writing projects (e.g., explore a number of books by a favorite author and express opinions about them) CC.K.W.8 Research to Build and Present Knowledge: With guidance and support from adults, recall information from experiences or gather information from provided sources to answer a question
	L.48.24 Write in a manner that is distinct from drawing. Combine scribbles with letter-like forms	L.60.26 Use early developmental spelling. May use one letter for the initial or final sound	CC.K.L.2 Demonstrate command of the convention of standard English capitalization, punctuation, and spelling when writing CC.K.L.2.a Capitalize the first word in a sentence and the pronoun I CC.K.L.2.b Recognize and name end punctuation CC.K.L.2.c Write a letter or letters for most consonant and short-vowel sounds (phonemes)

Appendix B: CT ELDS to Common Core State Standards Alignment — Mathematics

Mathematics Early Learning and Development Standards			Common Core State Standards in Mathematics
	3 to 4 years	4 to 5 years	Kindergarten
Strand A: Understand Counting and Cardinality			
Number Names	M.48.1 Say or sign the number sequence up to at least 10	M.60.1 Say or sign the number sequence up to at least 20	K.CC.1. Count to 100 by ones and by tens. K.CC.2. Count forward beginning from a given number within the known sequence (instead of having to begin at 1).
Cardinality	M.48.2 Count up to at least five objects using one-to-one correspondence, using the number name of the last object counted to represent the total number of objects in a set	M.60.2 Count up to 10 objects using one-to-one correspondence, regardless of configuration, using the number name of the last object counted to represent the total number of objects in a set	K.CC.4. Understand the relationship between numbers and quantities; connect counting to cardinality a. When counting objects, say the number names in the standard order, pairing each object with one and only one number name and each number name with one and only one object b. Understand that the last number name said tells the number of objects counted. The number of objects is the same regardless of their arrangement or the order in which they were counted c. Understand that each successive number name refers to a quantity that is one larger
	M.48.3 Count out a set of objects up to 4	M.60.3 Count out a set of objects up to 5	K.CC.5. Count to answer “how many?” questions about as many as 20 things arranged in a line, a rectangular array, or a circle, or as many as 10 things in a scattered configuration; given a number from 1–20, count out that many objects
Written Numerals	M.48.4 Recognize written numerals up to at least five	M.60.4 Recognize written numerals up to at least 10	K.CC.3. Write numbers from 0 to 20. Represent a number of objects with a written numeral 0-20 (with 0 representing a count of no objects)
Recognizing Quantities	M.48.5 Recognize and name, without counting, the number of objects in small groups of at least 3 or 4 objects	M.60.5 Quickly recognize and name, without counting, the number of objects in collections of up to at least five items	K.Introduction. Students choose, combine, and apply effective strategies for answering quantitative questions, including quickly recognizing the cardinalities of small sets of objects, counting and producing sets of given sizes, counting the number of objects in combined sets, or counting the number of objects that remain in a set after some are taken away
Comparison	M.48.6 Compare sets of 1-5 objects using a visual matching or counting strategy and describing the comparison as more, less than or the same	M.60.6 Compare sets of up to 10 objects using a visual matching or counting strategy and describing the comparison as more, less than or the same	K.CC.6. Identify whether the number of objects in one group is greater than, less than, or equal to the number of objects in another group, e.g., by using matching and counting strategies* (* Include groups with up to ten objects) K.CC.7. Compare two numbers between 1 and 10 presented as written numerals

Strand B: Understand and describe relationships to solve problems (operations and algebraic thinking)			
Number Operations	M.48.7 Understand that adding to (or taking away) one or more objects from a group will increase or decrease the objects in the group	M.60.7 Use real-world situations and concrete objects to model and solve addition (e.g., putting together) and subtraction (e.g., taking away) problems up through 5	<p>K.NBT.1. Compose and decompose numbers from 11 to 19 into ten ones and some further ones, e.g., by using objects or drawings, and record each composition or decomposition by a drawing or equation (e.g., $18 = 10 + 8$); understand that these numbers are composed by ten ones and one, two, three, four, five, six, seven, eight, or nine ones</p> <p>K.OA.1. Represent addition and subtraction with objects, fingers, mental images, drawings*, sounds (e.g., claps), acting out situations, verbal explanations, expressions, or equations</p> <p>* Drawings need not show details, but should show the mathematics in the problem (This applies wherever drawings are mentioned in the Standards.)</p>
		M.60.8 Recognize and describe parts contained in larger numbers by composing number combinations up to at least five (e.g., recognize how many have been secretly taken away from a group of five objects)	<p>K.OA.2. Solve addition and subtraction word problems, and add and subtract within 10, e.g., by using objects or drawings to represent the problem</p> <p>K.OA.3. Decompose numbers less than or equal to 10 into pairs in more than one way, e.g., by using objects or drawings, and record each decomposition by a drawing or equation (e.g., $5 = 2 + 3$ and $5 = 4 + 1$)</p> <p>K.OA.4. For any number from 1 to 9, find the number that makes 10 when added to the given number, e.g., by using objects or drawings, and record the answer with a drawing or equation</p> <p>K.OA.5. Fluently add and subtract within 5</p>
Strand C: Understand the attributes and relative properties of objects (measurement and data)			
Measurement	M.48.8 Recognize measurable attribute of an object such as length, weight or capacity	M.60.9 Compare the measurable attributes of two or more objects (e.g., length, weight and capacity) and describe the comparison using appropriate vocabulary (e.g., longer, shorter, same length, heavier, lighter, same weight, holds more, holds less, holds the same amount)	<p>K.MD.1. Describe measurable attributes of objects, such as length or weight. Describe several measurable attributes of a single object</p> <p>K.MD.2 Directly compare two objects with a measurable attribute in common, to see which object has "more of"/"less of" the attribute, and describe the difference. For example, directly compare the heights of two children and describe one child as taller/shorter</p>
		M.60.10 Begin to use strategies to determine measurable attributes (length or capacity of objects). May use comparison, standard or non-standard measurement tools	
Data	M.48.9 Sort objects into two groups, counts and compares the quantity of the groups formed (e.g., indicates which is more)	M.60.11 Represent data using a concrete object or picture graph according to one attribute	
Sorting and Classifying	M.48.10 Sort and classify objects by one attribute into two or more groups (e.g., color, size, shape)	M.60.12 Sort and classify a set of objects on the basis of one attribute independently and describe the sorting rule. Can re-sort and classify the same set of objects based on a different attribute	<p>K.MD.3. Classify objects into given categories; count the numbers of objects in each category and sort the categories by count **</p> <p>** Limit category counts to be less than or equal to 10</p>

Strand D: Understand shapes and spatial relationships (geometry and spatial sense)

Spatial Relationships	M.48.11 Use positional vocabulary (e.g., up/down, in/out, on/off, under) to identify and describe the location of an object	M.60.13 Use relational vocabulary of proximity (e.g., beside, next to, between, above, below, over and under) to identify and describe the location of an object	K.G.1. Describe objects in the environment using names of shapes, and describe the relative positions of these objects using terms such as above, below, beside, in front of, behind, and next to K.G.2. Correctly name shapes regardless of their orientations or overall size K.G.3. Identify shapes as two-dimensional (lying in a plane, "flat") or three-dimensional ("solid")
Identifying Shapes	M.48.12 Identify 2- dimensional shapes (starting with familiar shapes such as circle and triangle) in different orientations and sizes	M.60.14 Identify and describe a variety of 2- dimensional and 3- dimensional shapes with mathematical names (e.g., ball/ sphere, box/rectangular prism, can/cylinder) regardless of orientation and size	K.G.4. Analyze and compare two- and three-dimensional shapes, in different sizes and orientations, using informal language to describe their similarities, differences, parts (e.g., number of sides and vertices/"corners") and other attributes (e.g., having sides of equal length)
Composing Shapes	M.48.13 Combine two or more shapes to create a new shape or to represent an object in the environment	M.60.15 Complete a shape puzzle or a new figure by putting multiple shapes together with purpose	K.G.5. Model shapes in the world by building shapes from components (e.g., sticks and clay balls) and drawing shapes K.G.6. Compose simple shapes to form larger shapes. For example, "Can you join these two triangles with full sides touching to make a rectangle?"



Appendix C: Connecticut Early Learning and Development Standards (CT ELDS)

Development Process

Early learning and development standards are statements of what children from birth to age five should know and be able to do at various ages across their earliest years of development. These learning progressions serve as guides for the adults who support children's growth and development over time, providing a basis for planning experiences and providing support through the early childhood years. The Connecticut Early Learning and Development Standards (CT ELDS) will serve as the foundation for supporting ALL young children, no matter where they live, play and learn.

The Governor's Early Childhood Education Cabinet, along with the Connecticut State Department of Education (CSDE) and the newly formed Office of Early Childhood, has devoted significant fiscal and human resources to creating rigorous and developmentally appropriate early learning and development standards. This process has taken place over the course of 2 ½ years, with development completed in October 2013.

Background Work

As a part of Connecticut's 2009 application for American Recovery and Reinvestment Act funds for Head Start State Advisory Councils, early learning standards were identified as a priority area. The goal for this priority area was: By September 2013, Connecticut will adopt comprehensive and multi-domain early learning standards that reflect a progression of skills, birth through age five, aligned with kindergarten through grade 12 standards. A workgroup to address this goal was selected with the intention of ensuring wide, cross-sector input. The first meeting of the Learning Standards Workgroup was convened on June 22, 2011, and included representatives from the Connecticut Early Childhood Education Cabinet, the Connecticut

Department of Education, Head Start, higher education, early intervention, the Regional Education Service Centers, home care provider networks, public schools and the state chapter of the National Association for the Education of Young Children. A full list of workgroup members and their affiliations can be found in Appendix D.

The Learning Standards Workgroup relied heavily upon two guiding documents to inform the process of standards development:

- The Joint Position Statement of the National Association for the Education of Young Children (NAEYC) and the National Association of Early Childhood Specialists in State Departments of Education (NAECS/SDE): Early Learning Standards: Creating the Conditions for Success (NAEYC, 2012)
- Early Learning Guidelines Resource: Recommendations and Issues for Consideration When Writing or Revising Early Learning Guidelines (Scott-Little, Kagan, & Frelow, 2010)

In order to provide a strong background for members, the workgroup reviewed both current Connecticut documents and other state and national sets of early learning standards. After members had an opportunity to explore specific characteristics of these valuable documents, the group began addressing the various issues set forth by Scott-Little, Kagan & Frelow (2010) including: guiding principles, age ranges and groupings, domains and subject areas and the structure of the standards.

In the fall of 2011, shortly after the workgroup began this process, the United States Department of Education released its Race to the Top Early Learning Challenge application. Connecticut opted to address early learning and development standards as a key strategy under Focused Investment Area C of the Early Learning Challenge. The efforts of the



Standards Workgroup were coordinated with the Connecticut Leadership Team for the Race to the Top application and a detailed plan was developed for the learning standards work. Although funding was not granted to Connecticut, the plan outlined in the application served as a guide for the continued work of the Standards Workgroup.

The specific steps in the development process are outlined below. These efforts involved many local and national experts, in addition to the contribution of the Standards Workgroup members. A full listing of those who contributed to the various stages of this work is included in Appendix E.

Alignment and Gap Analysis

The first critical step in creating new learning standards was a detailed and thorough alignment and gap analysis of Connecticut's current learning standards. The workgroup chose to draw upon existing documents as much as possible, both in an effort to ease the transition to new learning standards and to effectively capitalize on previous investments and resources used in creating standards documents. Determining the existing alignments of standards and identifying gaps involves intensive consideration of documents, which often have very different structure and language. Below is a list of the various alignment

projects conducted. The information gathered through this work was integral to the development of the first draft of the CT ELDS.

- Comparison of Common Core State Standards and Connecticut's preschool standards (the Connecticut Preschool Curriculum Framework): this process involved CSDE consultants as well as outside local experts in the area of Mathematics and English Language Arts. The alignment between documents was examined and a crosswalk document, including guidance for practice, was issued.
- Comparison of Connecticut's preschool standards (the Connecticut Preschool Curriculum Framework) and the Head Start Child Development and Early Learning Framework: the CSDE and the Connecticut Head Start Association engaged in an intensive and collaborative process to determine the alignments and gaps between these two documents. This process involved rating the degree of matches found, a cross check for agreement on the matches and the reconciliation of any discrepancies. The completion of this work resulted in the report: Crosswalk between the Head Start Child Development and Early Learning Framework

and the Connecticut Preschool Curriculum and Assessment Frameworks (Connecticut Head Start Association, 2012).

- SRI International’s Standards Alignment Study. This study included the following documents: Connecticut’s Preschool Curriculum Framework, Connecticut’s Kindergarten Science Curriculum Standards, Connecticut’s Kindergarten Social Studies Framework and the Connecticut Guidelines for the Development of Infant and Toddler Early Learning. A full report dated May 30, 2012, detailed the process and outcomes of this study (Hebbeler and Taylor, 2012).

- The appropriateness of the indicators for children who are dual-language learners
- The appropriateness of the indicators for children with special needs

Finally, EASTCONN, the acting fiduciary of the Connecticut Early Childhood Education Cabinet, worked with CSDE to synthesize the input and make revisions based upon the expert input. This resulted in the draft CT ELDS.

Drafting New Standards

On June 25 and 26, 2013, groups of experts in each of the identified domains were gathered to create a first draft based upon the structure outlined by the Learning Standards Workgroup. Each group utilized the information from the alignment and gap analysis studies, additional resources and research (including other state standards documents, K-12 standards and research) and crafted an initial draft of new birth-to-five standards across seven age bands.

This initial draft was reviewed by multiple experts throughout the state for further refinement in July and August of 2012. These reviewers considered the initial draft of the CT ELDS from one of several perspectives:

- Domain-specific feedback, including:
 - Breadth, depth and relative difficulty of skills addressed
 - The age appropriateness of the indicators
 - The placement of the indicators within the domain
 - The wording of the indicators
- The cultural relevancy of the indicators for diverse populations

Content Validation

The Standards Workgroup decided to adhere to the recommended practices for standards development set forth by Scott-Little, Kagan & Frelow (2010). Requests for Proposal were issued for both a Content Validation Study and an Age Validation Study. The review of the proposals submitted resulted in the recognition that additional funding would be necessary to support a methodologically sound age validation study. However, as a result of the RFP process, the Connecticut Early Childhood Education Cabinet entered into a contract with the National Association for the Education of Young Children to conduct a Content Validation Study. This study involved gathering feedback from national experts as to whether the skills, knowledge and dispositions in the Connecticut Early Learning and Development Standards reflect critical, comprehensive goals and a continuum of growth and development. This study was completed in September 2013 and revisions to the draft standards were made as a result of this report (Snow, 2013).

The Content Validation Study contributed greatly to the robust and thorough process Connecticut engaged in to create the Connecticut Early Learning and Development Standards, thereby ensuring that our efforts to support *All Children, In All Settings, Every Year*, are based on the strongest of foundations: sound early learning and development standards.

Appendix D: Connecticut Early Childhood Education Cabinet: Early Learning Standards Workgroup

- Co-Chair: Harriet Feldlaufer** *Chief, Bureau of Teaching & Learning,
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- Co-Chair: Dina Anselmi** *Co-director, Trinity College Center for Teaching & Learning
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- Amparo Garcia** *Lead Planning Analyst, Department of Education*
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- Michelle Levy** *Consultant, Connecticut State Department of Education*
- Sherry Linton-Massiah** *Project Director, Early Childhood Education Cabinet*
- David Morgan** *Chair, CT Head Start Association & Director, TEAM, Inc.*
- Kathryn O'Connor** *Director, Connecticut College Children's Program*
- Karen Rainville** *Executive Director, CAEYC & Co-Chair, EC Alliance*
- Jane Rothschild** *SLC, HARC Stepping Stones*
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**The Connecticut Early Childhood Workforce
Core Knowledge and Competency Framework**

**Peg Oliveira, Deborah Adams, Colleen Brower
and the Early Childhood Workforce Workgroup**

I. Introduction

Acknowledgements

Process and Purpose

Alignment with Related Standards

Guiding Principles and Core Beliefs

Background and Process

Defining Core Knowledge Areas

Using Bloom’s Taxonomy to Guide and Assess Skills and Knowledge

Summary

II. Core Knowledge and Competencies

Introduction

Every moment an adult interacts with and cares for a young child is a moment rich with the potential for learning. An effective early childhood teacher must be knowledgeable about child development, able to engage in respectful reciprocal relationships with children, families and the community, and adept in the use of strategies and tools to promote positive development. Early childhood teachers must have a firm understanding of relationship-based practices, personal knowledge of child development and all academic areas, in order to effectively support every child's growth in all domains, including children with special needs. In addition, early childhood teachers should be skillful at observing and assessing learning and intentional in planning experiences and environments that support every child's growth.

In order to effectively encourage children's social and emotional development for example, a teacher must possess an understanding of theories of social and emotional development, exhibit particular dispositions such as empathy and caring, and be able to implement specific strategies and practices (i.e., those associated with helping children cope with separation, becoming self-regulated).

Research shows that the development of early childhood teachers with these competencies brings great rewards for children. High-quality early childhood care and education produces substantial long-term educational, social, and economic benefits. The largest benefits for children occur when early childhood teachers are professionally prepared and adequately compensated.

This document offers a blueprint of the core competencies early childhood teachers should possess in order to take advantage of this formative period in a child's life. These core competencies are meant to cross a variety of sectors where teachers interact with children ages birth to five, such as, public schools, family child care homes, and all of licensed early care settings.

Acknowledgements

This work is a product of thoughtful collaboration between individuals that represent multiple agencies as well as sectors/settings in which children receive early care and education. The time dedicated to the brainstorming, review, and constant editing by groups of volunteers speaks volumes to the passion and commitment people have for improving the early childhood workforce. The Connecticut Early Childhood Workforce Workgroup and the Connecticut Early Childhood Workforce Core Knowledge and Competency Core Knowledge and Competency Leadership Team extends endless gratitude to the workgroups and reviewers for their time and expertise in developing this draft and for their continued interest in completing this work. A special thanks to EASTCONN for providing the office support and graphic design elements. Please see Appendix A for a listing of workgroup members.

Rationale and Purpose

As research has revealed more about the rapid growth and development of young children and how they learn best, it has also underscored the importance of early learning for later school success¹. Similarly, research on the temperament and skills understood to be predictive of an effective early childhood teacher has also expanded Connecticut's efforts to build a high quality early care and education system. Leveraging this research while building a system to help ensure that every child is cared for by a highly qualified workforce with access to a high quality professional development system will benefit our youngest learners.

At the foundation of this system is the knowledge base of theory and research that underlies practice. This is referred to as **Core Knowledge and Competencies** and is defined as:

Core Knowledge and Competencies for teachers define what early care educators need to know (content) and be able to do (skills) while working with and/or on behalf of children and their families.

Core Knowledge and Competencies provide all who work within Connecticut's early care and education sectors a common set of standards upon which training, technical assistance, and post-secondary coursework can be designed and aligned.

The specific goals of this Core Knowledge and Competencies document are to:

- Provide coherent structure and content to inform the daily practice of professionals who work directly with young children and their families;
- Promote self-reflection and intentional professional development;
- Guide program administrators and directors in assessing staff, identifying areas for professional development, and creating/reviewing job descriptions;
- Aid professional development organizations in designing professional learning opportunities that will fulfill competency needs;
- Assist teacher education programs in designing course content that will fulfill competency needs, as well as facilitate transfer and articulation agreements; and
- Support public and private investments, incentives, and initiatives that encourage and facilitate professional competency.

¹ Better Teachers, Better Preschools: Student Achievement Linked to Teacher Qualifications Issue 2 / Revised December 2004, W. Steven Barnett, National Institute for Early Education Research.

Connecticut chose to first identify core knowledge and competencies for the role of teacher across various settings/sectors. The teacher role was chosen because it has the most immediate impact on children when they are outside their home. The teacher role was also chosen to align the multiple credentials and certifications associated with this role by offering a unifying framework.

The working definition of “early childhood teacher” developed for this purpose is:

Parents are their children’s first and most influential caregivers and teachers. During the course of their early years, however, most children in Connecticut will also have their development and experiences shaped by at least one early childhood professional – someone dedicated to the care, education and well-being of young children, birth to age eight, and their families.

The Connecticut Early Childhood Workforce Core Knowledge and Competency Framework is intended for early childhood teachers across all settings (schools, community, child center classrooms and home-based care) who work with children, singularly or in groups, birth through age 5 and their families. The CT Core Knowledge and Competencies articulate the essential skills and knowledge that teachers who work with young children and their families need to know, understand, and be able to do to promote and assess young children's healthy development and learning. Through the work of expert advisers, and with input from early childhood education professionals and stakeholders, the resulting competencies offer a road map for building meaningful relationships with children, families and colleagues, for creating nurturing, stimulating environments, and for developing oneself as a professional in this incredibly important field.

Alignment with Related Standards

In the process of defining Connecticut’s Early Childhood Workforce Core Knowledge and Competency Framework, developers began with the expectations and definitions of a comprehensive early childhood workforce as set forth in the federal Race to the Top Early Learning Challenge (RTT-ELC) grant application.² This definition states that a core knowledge and competency framework, at a minimum:

- (a) Is evidence-based;
- (b) Incorporates knowledge and application of the State’s Early Learning and Development Standards, the Comprehensive Assessment Systems, child development, health, and culturally and linguistically appropriate strategies for working with all children and families;

² Core knowledge and competencies (CKCs) refers to the expectations for what the workforce should know (content) and be able to do (skills) in their role working with and/or on behalf of children and their families. These CKCs provide a foundation for professional development design (including instructional practices) and other quality improvement efforts. Workforce Designs: A Policy Blueprint for State Early Childhood Professional Development Systems. NAEYC 2009.

- (c) Includes knowledge of early mathematics and literacy development and effective instructional practices to support mathematics and literacy development in young children;
- (d) Incorporates effective use of data to guide instruction and program improvement;
- (e) Includes effective behavior management strategies that promote positive social and emotional development while reducing challenging behaviors;
- (f) Incorporates feedback from experts at the State's postsecondary institutions and other early learning and development experts and early childhood Teachers; and
- (g) Includes knowledge of protective factors and effective approaches to partnering with families and building families' knowledge, skills, and capacity to promote children's health and development.

The developers of Connecticut's Early Childhood Workforce Core Knowledge and Competency Framework sought symmetry with the core knowledge and competency reports produced in our neighboring states of Maine, Massachusetts, New Hampshire, New York, Rhode Island, and Vermont. This effort was made in order to achieve a set of Connecticut Core Knowledge and Competencies for Early Childhood Teachers that are in accord with the region, ultimately leading to the possibility of the portability of credentials between New England states for the early childhood workforce. This regional alignment encourages opportunity for a highly qualified workforce in the New England region.

The alignment process focused first on the consistency of the competencies with the Federal definition, NAEYC standards and other important resources; and with neighboring states (Maine, Massachusetts, New Hampshire, New York, Rhode Island, and Vermont). Additionally, developers incorporated changes in the field such as new trends, research, regulations, and ongoing development of other states' initiatives.

Based on this research, the Connecticut Core Knowledge Domains chosen for inclusion are:

- Building Meaningful Curriculum
- Using Developmentally Effective Approaches for Teaching and Learning
- Promoting Child Development and Learning
- Observing, Documenting and Assessing
- Building Family and Community Relationships
- Health, Safety and Wellness
- Professionalism and Advocacy

An additional priority was to address competency elements that are needed to elevate Connecticut's prominence within the federal Race to the Top Early Learning Challenge (RTT-ELC) criteria. As such, an effort was made to weave the following elements throughout the core knowledge areas as foundational to the fabric of high quality practice:

- Special Education
- Cultural Competence
- Dual Language Learners

Guiding Principles and Core Beliefs

The following Core Beliefs, drawn from work on Core Knowledge and Competency Framework development in California, served as the foundation for the development of this framework, and form the heart of all seven of the competency domains:

- Children are born ready to learn.
- The family is where children attain their first experiences in life and is the most prominent and continuing influence in a child's life.
- All children and their families, regardless of their racial-ethnic origins, value systems, faiths, customs, languages, and compositions, must be equally respected.
- Families and children have the right to access support systems that foster their growth and development.
- Every human being is a unique individual, with diverse modes of learning and expression as well as experiences, interests and strengths.
- Children are worthy of the same respect as adults.
- Children's needs for shelter and for physical, intellectual, emotional, and social nourishment must be met for them to grow, develop, and learn to their fullest potential.
- Children are social beings who need to be engaged in meaningful relationships.
- Children have the right to secure, trusting relationships with adults and to safe, nurturing environments.
- Children learn through play, both simple and complex. Teaching and learning are dynamic, integrated, and reciprocal processes.
- Children learn through self-directed play as well as meaningful, intentionally planned experiences, in a typical sequence of awareness, exploration, inquiry and application.
- Social and emotional learning is key to every child's ability to self-regulate, to identify their own feelings and to interact successfully with others.
- Children construct knowledge based on their curiosity and driven by their interests as well as through interactions with adults and other children facilitating this construction.
- Children learn best when exposed to and engaged in high-quality environments, interactions, and relationships.

- Children learn best when the adults in their life work in partnership with one another.

In defining the Core Knowledge and Competencies for Early Childhood Teachers, Connecticut will incorporate the following Guiding Principles:

- Build a **meaningful curriculum** to advance all areas of each child’s development, including social, emotional, intellectual, and physical competence;
- Use developmentally appropriate techniques to **teach effectively**;
- Support **child development and learning** by understanding that children develop at individual rates, yet in a predictable sequence, and applying this knowledge in practice;
- Systematically **observe, document and assess** children’s behavior, to inform planning for individual experiences and build meaningful curriculum, as well as to recognize and meet individual needs;
- Build productive and reciprocal **partnerships with children and their families and communities**, recognizing that children are best understood in the context of family, culture, and society;
- Maintain a **safe and healthy environment** for children;
- Make a commitment to **professionalism** by continuing to develop skills and work collaboratively to improve the quality of early care and education services.
- Include the array of experience brought by diversity of **culture, dual language learners and children with special needs**.

Background and Process

Phase 1: Reviewing existing competencies in Connecticut

In 2011, the federal Race to the Top Early Learning Challenge (RTT-ELC) grant application set forth expectations and definitions for states to build the foundations for a comprehensive early childhood workforce. Connecticut established an early childhood stakeholder workgroup to examine the State’s current workforce status and documents that guide Connecticut’s workforce development. The stakeholder workgroup found that Connecticut has:

- Multiple sets of competencies³ associated with the teacher role and multiple certifications and/or credentials but no unifying framework that describes the expectations associated with the role of the teacher across sectors/settings.
- Some competencies associated with some but not all early childhood teacher roles and no single framework that describes the expectations associated with each early childhood role.

³ Competency sets included SDE Teacher Certification PK-3 or B-K, SDE Teacher Certification Special Education PK-12, Early Childhood Teacher Credential (ECTC), Child Development Associate (CDA) credential, Training Program in Child Development (TPCD)/CCAC Core Areas of Knowledge, Infant/Toddler Credential (for Birth to 3 system) and Infant/Toddler Certificate (offered by Charter Oak State College)

These findings set the charge for the first phase of work, undertaken by a stakeholder group of 40 individuals, representing a variety of sectors, to further examine the multiple sets of competencies associated with the teacher role. This process set a baseline for the next phase; developing a Core Knowledge and Competencies framework for the teacher role and eventually all other early care and education roles.

Phase 2: Defining Connecticut's Core Knowledge and Competency Framework

In February, 2013, experts from across the state representing Connecticut's early care and education system (child care centers, family child care providers, state-funded programs, Head Start, higher education institutions, coaches and consultants) were invited to participate in a daylong forum on the defining the process for determining Connecticut's Core Knowledge and Competencies.

Drawing from their own experiences, national experts as well as representatives from New England states offered their expertise, consultation and perspectives on the development of an Early Childhood Workforce Core Knowledge and Competency Framework in their states. Feedback from the forum was used to prepare Connecticut's draft set of core knowledge and competencies.

Interested forum participants were invited to join in an ongoing stakeholder work group dedicated to development of Connecticut's Core Knowledge and Competencies. Thirty stakeholders from the forum volunteered to participate in the design of a Connecticut Core Knowledge and Competency framework and to create accompanying documents. An independent consultant, a consultant from the State Department of Education (who recently transitioned to the new Office of Early Childhood in July 2013) and a consultant from Connecticut Charts-A-Course (who recently transitioned to the new Office of Early Childhood in July 2013), comprised the leadership team and facilitated the stakeholder work group meetings as well as an online process of editing preliminary drafts of Connecticut's Core Knowledge and Competencies.

Three daylong working group sessions were held that allowed input from the intended audience for the competencies; teachers and those who are responsible for their professional development.

The first working group session held in April 2013 centered on the definition of each domain by which competencies would be constructed. Participants agreed on a set of Core Beliefs and Guiding Principles to frame their work, and began by making several significant design decisions including:

- To include indicators, as well as domains of Core Knowledge and Competencies
- To align the knowledge and competencies by level with an adapted version of Bloom's Taxonomy.

The stakeholder work group then defined domains of Core Knowledge and Competencies for inclusion. These domains are:

- Building Meaningful Curriculum

- Using Developmentally Effective Approaches for Teaching and Learning
- Promoting Child Development and Learning
- Observing, Documenting and Assessing
- Building Family and Community Relationships
- Health, Safety and Wellness
- Professionalism and Advocacy

Additionally, the following strands of knowledge were identified as elements that needed elevated prominence within the federal Race to the Top Early Learning Challenge (RTT-ELC) criteria. These strands are:

- Special Education
- Cultural Competence
- Dual Language Learners

Domains were edited and solidified through an online feedback process. Following this process, a second working group session, held in May 2013, centered on the definition of indicators within these competency domains. At this meeting participants were asked to consider and define indicators by level within the defined domains.

After the draft competencies were revised based on feedback from the second stakeholder working group meeting and online edits the consultant posted an updated draft to the online editing format. Subsequent weekly online “homework” assignments allowed members to comment on developing drafts of this report. All feedback was analyzed and considered for inclusion in the final draft.

To expand the perspective, a draft was sent to groups of individuals who did not participate in the workgroups but work within one or more of the sectors/settings in which this document is intended. Feedback was incorporated and a third working group session, held in July 2013, focused on sorting out redundancy and confirming the placement of items.

A final sorting by the leadership team along with results from the stakeholder workgroup meetings and online edits, as well as previous research on the development of CKC’s in other states, was synthesized and produced this penultimate draft of a Connecticut Early Childhood Workforce Core Knowledge and Competency Framework.

Core Competency Areas

Connecticut’s Draft Early Childhood Workforce Core Knowledge and Competencies are organized into seven domains deemed important to the profession. Additionally, reflected in all domains is the respect for the need, across all domains, for knowledge and understanding of cultural competency, dual language learning and special education as related to each domain.

Also important, the Connecticut Early Learning and Development Standards (ELDS) that outline the knowledge, skills, and dispositions that children ages birth to age five should know and be able to do, were woven throughout the domains as a foundational framework to guide practice

and assessment. See Appendix B for a description of each domain.

Using Bloom's Taxonomy to Guide and Assess Skills and Knowledge

Inherent in each of the seven competency areas is the assumption that adults can exemplify their knowledge, understanding and skill across a continuum of higher order thinking; from beginner to advanced. Bloom's Taxonomy-Revised provides the frame that supports the continuum of thinking skills that early childhood educators should possess as well as be able to promote with young children.

Bloom's Taxonomy is a multi-tiered model of classifying learning according to six cognitive levels of complexity, or thinking structures. The lowest three levels are: knowledge, comprehension, and application. The highest three levels are: analysis, synthesis, and evaluation. Each level scaffolds and builds upon the prior.

With the Bloom's Taxonomy-Revised framework as an organizing device, the knowledge and competencies become more complex. The six levels of Bloom's were re-structured by the leadership team into four levels for the purpose of simplicity and to align with existing core knowledge and competency frameworks in neighboring states. The core competency levels are also cumulative. In other words, (1) concepts at Level 1 will advance in difficulty through the subsequent levels; and (2) someone working at a Level III in any given competency area should have the knowledge and competencies identified for Levels I and II in that area. See Appendix C for a description of the re-structured Bloom's Taxonomy.

Summary

This DRAFT Core Knowledge and Competency Framework document (see Appendix D) completes the work outlined in the Workforce Workgroup strategic goal. The work will continue through the Office of Early Childhood in collaboration with the cross-sector workgroups. The following work will continue.

- A cross-walk between documents from neighboring states, Connecticut credentials and certifications, and national standards to identify alignment across states and national work.
- Coding the interwoven strands (Special Education, Cultural Competence, and Dual Language Learners)
- Referencing seminal work.
- A glossary of terms
- Final editing and vetting of the Connecticut document
- Begin development of Core Knowledge and Competency Frameworks for early childhood roles such as Directors, Coaches, Consultants, Specialists, Home Visitors, Higher Education Faculty, Professional Development Designers/Trainers, etc.
- Begin constructing competency-based professional development plan frameworks and evaluation tools.

Our culminating efforts will result in foundational documents outlining the competencies for multiple early childhood roles by which training and technical assistance will be based to better

serve individuals working in those roles. Professional development plans and evaluative measures will assist individuals to grow in their role and explore additional role options as they progress in competency development. To reiterate, ‘research shows that the development of early childhood teachers with these competencies brings great rewards for children’. Connecticut is well on its way to codifying these competencies in alignment with other states to promote regional sharing of expertise and portability of credentials thanks in a large part to the leadership of the Workforce Workgroup and the funding provided by the Connecticut Early Childhood Cabinet.

APPENDIX A:

CONNECTICUT'S EARLY CHILDHOOD WORKFORCE CORE KNOWLEDGE AND COMPETENCIES WORKGROUP

This draft edition of **Connecticut's Early Childhood Workforce Core Knowledge and Competencies Workgroup** is the result of thoughtful collaboration among many early childhood professionals. We thank the following early childhood professionals, representing various sectors, who provided their insight, expertise, tireless assistance and guidance during the writing and review process of **Connecticut's Early Childhood Workforce Core Knowledge and Competencies Workgroup**.

LAST NAME	FIRST NAME	AGENCY	SECTOR REPRESENTING
Core Knowledge and Competency Leadership Team			
Adams	Deborah	Education Consultant	Office of Early Childhood
Brower	Colleen	Education Consultant	Office of Early Childhood
Oliveira	Peg	Education Consultant	Independent Contractor
Core Knowledge and Competency Workgroup Members			
Berrios	Tanya	St. Mark's Day Care Center, Inc.	Teachers, Child Day Care
Casey	Sheila	West Haven Community House	Teachers, Head Start
Castle	Sara	Boys and Girls Club & Family Center of Bristol, Imagine Nation Preschool learning Center	Teachers, School Readiness
Daley	Susan	Willow House Preschool and Early Learning Center	Directors, Center-based
Gill	Renee	CT Family Day Care Association Network (CFDCAN)	Entities, CFDCAN
Helmerich	Lee	Bridgeport School Readiness	Community Networks, School Readiness Councils
Kennen	Kristen	Education Connection	Accreditation Facilitation Project (AFP)
Langer	Pam	CT Parents As Teachers (PAT)	Parents as Teachers Org
Liberto	Nancy	Early Childhood Teacher Credential	Higher Ed Faculty, 4 year colleges
Mansfield	Kimberly	Goodwin College	Higher Ed Faculty, 2 and 4 year colleges
Meiner	Beryl	Branford Early Learning Center	Directors, Center-based
Memcott	Cheryl	West Haven Community House	Teachers, Head Start
Morgan	David	CT Head Start Association & TEAM, Inc.	Directors, Head Start

O'Brien	Catherine	CT Association for Infant Mental Health (CT-AIMH)	Infant/Toddler Mental Health
Parris	Joan	Norwalk Community College	Higher Ed Faculty, 2 year colleges
Peloso-Ulreich	Tina	Bridgeport Public Schools	Directors, Public Schools
Rader	Ana	All Our Kin, Inc.	Family Child Care
Resnick	Deb	Birth to Three	State Agencies, Department of Developmental Disabilities
Sevell-Nelson	Amy	Educational Consultant	Education Consultants and Coaches
Stabler	Jo-Ann	Charter Oak State College	Higher Ed Faculty, 4 year colleges
Tacchi	Barbara	Waterbury School Readiness	Community Networks, School Readiness
Tenorio, Ed.D	Sue	Early Childhood Special Education	Community Networks, Discovery
Thergood	Naima	St. Mark's Day Care Center, Inc.	Teachers, Child Day Care
Velazquez	Marissa	DC Moore School	Site Coordinators
Watson	Debbie	Post University	Higher Ed Faculty, 4 year colleges
Whitney	Grace	Head Start Collaboration Office	State Agencies, Head Start Collaboration Office

APPENDIX B:**CONNECTICUT'S EARLY CHILDHOOD WORKFORCE CORE KNOWLEDGE AND COMPETENCIES DOMAIN DESCRIPTIONS*****1. Building Meaningful Curriculum***

Early childhood teachers must have a firm understanding of relationship-based practice, personal knowledge of child development and all areas of development, in order to effectively support every child's growth in all domains, including children with special needs. They should be familiar with national and state early learning standards.

Teachers of young children use their knowledge to design, implement, and evaluate experiences that promote positive development and learning for each and every young child; individually and in groups. They use a curriculum-planning process that responds to the strengths, interests, and challenges of the children they teach. Teachers understand the importance of the academic (or content) disciplines in early childhood curriculum. They know the essential concepts, inquiry tools, and structure of content areas. Teachers are able to identify resources to deepen their understanding of academic content as needed. They use their own knowledge along with other resources to build a meaningful and appropriately challenging curriculum that achieves comprehensive developmental and learning outcomes for every young child.

They understand the importance of relationships and high-quality interactions in supporting successful learning and they provide a learning environment that is respectful, supportive, challenging and aesthetically pleasing which will have a positive impact on the whole child. They use their experience and knowledge of 1) the early learning standards, 2) current research, theory and best practice of how children learn and develop, 3) child assessment information and 4) the unique interests, strengths and needs of the children and families in the program to design, implement, and evaluate meaningful challenging curriculum for each child.

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to develop experiences that promote child development and learning. The CKC's describe the background knowledge and skills teachers need in order to effectively implement the ELDS. It is expected that teachers understand the learning goals and definitions of each learning domain as outlined in the CT ELDS.

2. Using Developmentally Effective Approaches for Teaching and Learning

Teaching, as defined in this competency, is the use of developmentally effective appropriate strategies and tools to promote development and learning, based on an understanding of the complexity of child characteristics and the intersect of relationships and interaction as the foundation of practice. This competency area focuses on the teacher's role in designing interactions and experiences.

Teachers of young children recognize that teaching is a complex enterprise, and its details vary depending on children's ages, characteristics, and the settings within which teaching and learning occur. Teachers of young children should be familiar with a wide array of approaches, curriculum models, instructional strategies and tools. They understand that children construct knowledge through hands-on, engaging experiences with people and materials. Teachers of young children understand the goals, benefits, and limitations of equipment, materials, and daily routines. They demonstrate the ability to develop positive and respectful relationships that meet the needs of a diverse group of children. They support play as a vehicle for learning.

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to guide appropriate approaches for teaching and learning. It is expected that teachers understand the essential dispositions that underpin competent learning and the strategies to support such dispositions.

3. Promoting Child Development and Learning

Knowledge of child growth and development is the foundation for constructing the developmentally appropriate and meaningful experiences to support children's learning and development. Teachers of young children should understand how to promote young children's learning and development by tailoring experiences to nurture young children's individual nature thus enabling the child to develop his or her full potential.

Teachers working with young children must understand what to expect regarding children's range of abilities to be able to plan appropriate sequences of action, adjust teaching strategies, and pose manageable tasks and challenges to extend learning for all children. Teachers of young children recognize that while all children are born ready to learn, development in a single domain impacts and is impacted by learning and growth in other domains. They understand key developmental milestones and that development is progressive yet individualized. They should be familiar with various theoretical frameworks of child development, and able use this information to provide appropriate and meaningful early learning experiences for all children. They use their understanding of young children's characteristics and needs to create learning environments that are respectful, supportive yet challenging and aesthetically pleasing for each child.

In addition to consideration of the child's age, teachers must consider each child's individuality in terms of distinct personality, developmental level, temperament, needs, learning styles, and ability levels. This competency includes recognition of the influence of a child's culture, abilities and special needs. Competent teachers of young children understand that an inclusive environment benefits both children with and without special needs, and be ready to embrace an inclusive philosophy.

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to develop experiences that promote child development and learning. The

following describes the background knowledge and skills teachers need in order to effectively implement the ELDS.

4. Observing, Documenting and Assessing Young Children

Assessment is the systematic collection of information and the subsequent analysis of a child's growth and development processes. The knowledge and skills to conduct responsible, ethical, and effective observation, screening, and assessment of young children, including but not limited to individual variations, developmental needs and the identification of special needs, are covered in this competency area.

Teachers must understand the goals, uses, benefits, and limitations of various assessment approaches. Teachers of young children must be familiar with multiple forms of assessment, including child observation as well as the use of technology in documentation, assessment and data collection. They recognize that regular and ongoing assessment is central to the practice of early childhood professionals. They conduct systematic observations and document them. They recognize assessment must take place continually over time.

Teachers of young children know that partnerships with families go beyond merely telling family members about the child's development; it actively seeks the family's perspective and genuinely uses this information to create a clearer picture of the child's development. They use assessment methods and tools that are current and congruent with what is known about developmentally appropriate and culturally responsive practice. They also use information from assessments in a responsible way, in partnership with families and other professionals, to inform curricular and instructional modifications and to positively influence the development of every child.

5. Building Family and Community Partnerships

Families and communities form the context in which children live. Teachers of young children must recognize and respect that all children develop within the context of their families, and therefore embrace a myriad of different family structures and dynamics. This competency encompasses the knowledge, skills, and tendencies required to value and respond appropriately to all aspects of family diversity—such as race, ethnicity, socioeconomic status, culture, family composition, religion, age, ability, and home language. Teachers seek out and embrace information from families and use research-based knowledge of family dynamics, family stages and parenthood to support their planning of experiences for the children.

Additionally, this competency area includes the ability to engage the community in support of children, at the local-program level, family home, and in the broader public arena. Teachers of young children understand that successful early childhood care and education depends upon partnerships with children's families and communities. They also understand the complex characteristics of children's families and communities. They use this understanding to create reciprocal relationships that support and empower families.

6. Promoting Health, Safety and Wellness

Foundational to all other teaching practices is assuring the health, safety and wellness of young children. The key concept in this competency is that children's health is not simply the absence of illness or injury; it encompasses safety, nutrition, fitness, and physical and emotional health.

Children's safety is the first and foremost responsibility of adults who provide care for them. Safety encompasses not only the physical aspect, but also the social and emotional aspects. Most basically, teachers must be able to ensure children's safety and be prepared to handle emergencies. Teachers of young children also need to stay current on state and federal regulations and research related to children's safety and health. Finally, they should promote the sound health, dental, nutritional, and emotional stability of young children and their families, by modeling these characteristics and connecting families to culturally appropriate community health resources.

7. Professionalism

Teachers should identify and conduct themselves as members of the early childhood profession. They must know and use ethical guidelines and other professional standards related to early childhood practice. They should be committed to continuous, collaborative learning regarding their profession and to lifelong personal and professional growth. They value knowledgeable feedback, reflective input and critical perspectives on their work. They use such input to make informed decisions that integrate knowledge from a variety of sources.

Early childhood educators need to understand the complex services that constitute and shape the early care and education system; their own participation as leaders; and their organizations' roles. They should be aware of larger public and private systems that shape the quality of services available to children and families. They are informed advocates for sound educational practices and policies. They value the diversity of lifestyles, languages, beliefs, and cultural backgrounds that can be found in all aspects of our society, and advocate for policies which are free of bias and responsive to the differences in the needs of children.

**APPENDIX C:
CORE KNOWLEDGE AND COMPETENCY FRAMEWORK: ADAPTATION OF BLOOM'S TAXONOMY**

The following is an adaptation to the revised version of Bloom's Taxonomy to describe progressive complexity of thinking about the competencies associated with Connecticut's Core Knowledge and Competencies (CKC's). Keep in mind the following important points:

- These levels are not to be associated with the progression along the career pathway.
- This information can be used for building professional learning experiences that assist individuals to progress in their ability to make decisions about their practice.
- This theoretical framework provides a roadmap for professional learning design and does not equate to any specific credential, license, or certification.

LEVEL	DEFINITION
Level 1: Knowledge and Understanding	Can name, recognize, recall relevant information from long-term memory, understand its content and construct meaning.
Level 2: Applying	Can apply content knowledge and information in the classroom setting. Carrying out or using a procedure through executing or implementing.
Level 3: Analyzing and Emergent Evaluating	Can break material into its component parts, in order to understand and determine how they relate to one another, and to an overall structure or purpose. Begins to compare, contrast, and experiment by differentiating, organizing, and identifying attributes.
Level 4: Evaluating and Creating	<p>Can critically reflect on knowledge and application, bringing together the knowledge in new combinations, thinking creatively about the knowledge to solve new problems, and working to change policies and practices that are not aligned with research-based best practices.</p> <p>Can make judgments about the merit of ideas, materials and methodologies by applying accepted standards and criteria, and if necessary, expanding upon them.</p> <p>Can think creatively. Is able to combine concepts and/or components to develop original ideas and new ways of looking at, and understanding, elements.</p>

**APPENDIX D:
CORE KNOWLEDGE AND COMPETENCIES: DOMAINS, INDICATORS AND LEVELS**

Codes within the document begin to depict an alignment to the Federal Criteria (FED), the Early Childhood Teacher Credential at the Associate or Bachelor Level (ECTC A or ECTC B), Neighboring States (MA, ME, NH, NY, RI, V), CT Association for Infant Mental Health (CTAIMH), National Association for the Education of Young Children (NAEYC), Early Learning and Development Standards (ELDS), Special Education (SE), Dual Language Learners (DLL), Cultural Responsiveness (CR). **Further coding and attribution to neighboring states is in process and will be added to the document along with a glossary.**

I. Building Meaningful Curriculum

Early childhood teachers must have a firm understanding of relationship-based practice, personal knowledge of child development and all areas of development, in order to effectively support every child's growth in all domains, including children with special needs.

They should be familiar with national and state early learning standards. Teachers of young children use their knowledge to design, implement, and evaluate experiences that promote positive development and learning for each and every young child; individually and in groups. They use a curriculum-planning process that responds to the strengths, interests, and challenges of the children they teach. Teachers understand the importance of the academic (or content) disciplines in early childhood curriculum. They know the essential concepts, inquiry tools, and structure of content areas. Teachers are able to identify resources to deepen their understanding of academic content as needed. They use their own knowledge along with other resources to build a meaningful and appropriately challenging curriculum that achieves comprehensive developmental and learning outcomes for every young child.

They understand the importance of relationships and high-quality interactions in supporting successful learning and they provide a learning environment that is respectful, supportive, challenging and aesthetically pleasing which will have a positive impact on the whole child. They use their experience and knowledge of 1) the early learning standards, 2) current research, theory and best practice of how children learn and develop, 3) child assessment information and 4) the unique interests, strengths and needs of the children and families in the program to design, implement, and evaluate meaningful challenging curriculum for each child.

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to develop experiences that promote child development and learning. The CKC's describe the background knowledge and skills teachers need in order to effectively implement the ELDS. It is expected that teachers understand the learning goals and definitions of each learning domain as outlined in the CT ELDS.

Domain: Building Meaningful Curriculum (FED)

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to develop experiences that promote child development and learning. The following describes the background knowledge and skills teachers need in order to effectively implement the ELDS. **It is expected that teachers understand the learning goals and definitions of each learning domain as outlined in the CT ELDS.**

SUB-DOMAIN: USING CONTENT KNOWLEDGE TO BUILD MEANINGFUL CURRICULUM (NAEYC)

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Building Curriculum	<p>Has basic knowledge of the following content/academic areas: language and literacy; the arts; mathematics; physical activity and health; science and nutrition; and social studies, with special depth in the areas of language and literacy. (ECTC)</p> <p>Implements curriculum according to plans developed for children by staff. (ECTC, NAEYC)</p> <p>Demonstrates full understanding of and skill in use of program curricula. (ECTC, NAEYC)</p> <p>Understands that curriculum resources (books, website resources and commercially prepared curricula) vary in quality and that high quality resources reflect the knowledge and principals of early childhood development and learning.</p>	<p>Applies knowledge of quality curriculum to identify high quality resources (books, website resources and commercially prepared curricula).</p> <p>Demonstrates familiarity with authoritative resources to supplement their own content knowledge (ECTC B).</p> <p>Engages in work that demonstrates the basic knowledge and skill in the following content/academic areas: language and literacy; the arts; mathematics; physical activity and health; science and nutrition; and social studies, with special depth in the areas of language and literacy (ECTC A).</p>	<p>Participates in the selection of and advocates for high quality, developmentally appropriate curriculum resources.</p> <p>Engages in work that reflects advanced knowledge and skill in the development of learning in each content area: language and literacy; the arts; mathematics; physical activity and health; science and nutrition; and social studies, with special depth in the areas of language and literacy (ECTC B).</p> <p>Clarifies goals and features of specific curriculum in use.</p> <p>Uses their own knowledge, appropriate early learning standards, and other resources to design, implement, and evaluate meaningful challenging curriculum for each child.</p>	<p>Recommends curricula that are developmentally, culturally-linguistically appropriate and responsive to the needs and interests of children. (CR)</p> <p>Engages in action research to investigate the inter-relationship between content areas and creates multi-modality methods of delivery.</p> <p>Analyzes the effectiveness of curriculum through the lens of family, culture and community factors.</p>
Language development and communication. (ELDS)	<p>Has basic knowledge of how language and communication skills develop sequentially and is</p>	<p>Plans and implements meaningful and intentional learning experiences designed to support what infants,</p>	<p>Works with children and their families, using community resources as needed, to maintain the child’s home language (RI)</p>	<p>Analyzes and evaluates current theory and research pertaining to language</p>

	<p>dependent on infant, toddler and preschooler experiences (RI).</p> <p>Understands that Dual Language Learners must have opportunities to progress in their home language as they are learning English (RI) (DLL).</p> <p>Recognizes that a rich vocabulary provides a strong foundation for later literacy.</p> <p>Engages in meaningful and extended conversation with individual children each day.</p> <p>Practices communicating with children in ways that respect family culture by acknowledging special words, names, routines, etc. (NH, pg 18). (DLL) (CR) (NY)</p> <p>Clarifies pronunciation of the child’s name and provides linguistically and culturally appropriate materials. (DLL) (CR)</p>	<p>toddlers and preschoolers should know, understand and be able to do in the domain of language development and communication on a regular basis (RI, NY).</p> <p>Applies strategies in the classroom so that Dual Language Learners have opportunities to progress in their home language as they are learning English (RI) (DLL).</p> <p>Learns and uses culturally appropriate phrases in the child’s first language and models good listening skills. (DLL) (CR)</p> <p>Engages in meaningful, contextual conversations with young children, using new words and their meanings, planning intentional environments and experiences to spark language.</p>	<p>(DLL).</p> <p>Incorporates research-based individualized instruction designed to promote English language development of Dual Language Learners (RI) (DLL)</p> <p>Demonstrates growing abilities to verbally stimulate conversation with DLLs using English. (DLL)</p> <p>Understands the stages of second language acquisition, receptive and expressive language. (DLL)</p>	<p>development and communication to expand and refine expectations for infants, toddlers and preschoolers and apply that knowledge to one’s practice (RI pg 31).</p> <p>Analyzes other curricular areas and creates opportunities to foster language and communication through other content area experiences.</p> <p>Demonstrates a variety of strategies that respond to the child’s behaviors as they progress through different stages of second language acquisition. (DLL)</p>
<p>Domains of Learning (ELDS)</p> <ul style="list-style-type: none"> • Social & Emotional Development • Cognition • Mathematics • Science • Language & Literacy • Social Studies • Physical Development & Health 	<p>Understands the learning goals and definitions of these domains as outlined in the ELDS. (ELDS)</p> <p>Understands that development in these domains is sequential and is dependent on infant, toddler and preschooler experiences (RI pg 32).</p>	<p>Plans and implements intentional learning experiences designed to support what infants, toddlers and preschoolers should know, understand and be able to do in the each domain (RI pg 32) as outlined in the ELDS.</p>	<p>Utilizes in-depth knowledge of the scope and sequence of learning goals in these domains to develop and implement a comprehensive, integrated curriculum (RI pg 32).</p>	<p>Analyzes and evaluates current theory and research pertaining to these domains to expand and refine expectations for infants, toddlers and preschoolers and apply that knowledge to one’s practice (RI pg 32).</p>

• Creative Arts				
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SUB-DOMAIN: Contextual Factors in Building Meaningful Curriculum				
CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Developmentally Appropriate Learning Environment (VT) (NAEYC)	<p>Is committed to creating an inclusive classroom that values the inclusion of all children and benefits all children. (SE) (NY)</p> <p>Creates an environment – using the space, the materials and the routine – that encourages play, exploration and learning (VT)</p> <p>Understands that staff physical position in the classroom or playground impacts supervision of children.</p> <p>Adapts environment to accommodate children with special needs (SE)</p> <p>Designs the environment so that each child has a space for personal items to ensure his/her sense of belonging and security within the community. (NY)</p> <p>Adapts the indoor and outdoor environment, equipment, materials, experience and activities based upon information gathered in the process of curriculum planning.</p> <p>Creates environment that allows children to spend time alone, in small groups, and in large group settings. (NY)</p> <p>Supports an environment with developmentally appropriate toys, materials and environmental arrangement to promote development (ME)</p> <p>Understands and values access to the least restrictive environment.(SE)</p>	<p>Regularly uses some strategies to ensure proper supervision.</p> <p>Prepares and guides children as appropriate in their engagement in and use of the indoor and outdoor environment, equipment, materials, experience and activities.</p> <p>Applies knowledge about children’s learning and development to create healthy, respectful, supportive and challenging learning environments.</p> <p>Plans the classroom/environment and learning experiences in consultation, as appropriate, with service providers to meet legal requirements as well as children’s individual needs and interests.</p>	<p>Analyzes classroom layout to optimize supervision.</p> <p>Analyzes and evaluates the environment when trying to find causes for challenging behaviors. Makes changes as needed. (SE)</p> <p>Assesses and adjusts environments based on knowledge of children’s learning goals.</p> <p>Collaborates with staff and colleagues to ensure that all children participate fully in indoor and outdoor learning opportunities.</p>	<p>Uses numerous supervision strategies consistently.</p> <p>Analyzes, evaluates and applies current theory and research on learning environments and various teaching approaches.</p> <p>Advocates for access to appropriate learning environments.</p>
Interactions with Materials	<p>Understands that children learn through interaction with materials as they explore, problem-solve and discover.</p> <p>Utilizes materials that demonstrate acceptance of all</p>	<p>Facilitates children’s learning as they interact with materials to explore, problem-solve, and discover.</p>	<p>Reflects on children’s learning through their interactions with materials as they explore, problem-</p>	<p>Evaluates materials choices to enhance various learning experiences and</p>

	<p>children’s gender, family, race, culture and special needs. (NY) (SE) (CR)</p> <p>Chooses toys and materials that children find interesting and keeps multiples of favorites.</p> <p>Utilizes knowledge of child development and individual children to select materials.</p>	<p>Appropriately uses technology (computers, digital and video) to support children’s learning.</p> <p>Intentionally selects and rotates materials that reflect children’s interests, learning styles and stages of development. (NY)</p> <p>Provides open-ended materials that encourage problem solving and creativity and challenge children to construct knowledge in various domains.</p>	<p>solve, and discover in order to deepen understanding.</p> <p>Adapts and modifies materials to accommodate children with special needs. (SE)</p> <p>Uses technology, including adaptive technology, in appropriate ways (VT)</p>	<p>support optimal development.</p> <p>Critically reflects on the possible use of materials, including assistive technology to meet specific needs of selected students with varying abilities. (SE)</p>
<p>Daily Routines and Structural Support (NAEYC)</p>	<p>Uses everyday classroom routines to deliver meaningful curriculum.</p> <p>Has a daily routine that is predictable yet allows flexibility to support children’s abilities and interests (VT)</p> <p>Maintains a daily schedule that provides balance between active and quiet, child-directed and teacher-directed, individual and group, and indoor and outdoor activities.</p> <p>Supports children with separation and transition.</p>	<p>Uses routine activities (diapering, dressing) and daily transition times to support curricular/learning goals (VT)</p> <p>Plans transitions which are efficient and maximize learning opportunities.</p> <p>Establishes and maintains a daily schedule that is flexible and responsive to the needs and interests of the group and the individuals within the group.</p>	<p>Creates environments that are culturally, ethnically, racially, linguistically diverse (VT) (CR)</p> <p>Observes the environment and makes adjustments to reduce behavior issues and maximizes appropriate use of materials (VT) (FED)</p>	<p>Analyzes and adapts daily schedule to reflect the needs and interests of the group and the individuals within the group.</p>
<p>Families and Communities</p>	<p>Understands that families should be involved in the creation and/or implementation of curriculum.</p> <p>Supports parents by suggesting how they can promote and retain first language development.</p>	<p>Creates an environment reflective of the diversity of families enrolled as well as the larger society including those with special needs and people from many ages. (NAEYC) (FED)</p> <p>Uses families as a resource to implement the curriculum (read to the class, bring in materials, talk about their home life with children). (DLL)</p>	<p>Uses the community around them as a resource when building curriculum. (SE) (CR)</p> <p>Is responsive to community needs when building curriculum. (CR)</p>	<p>Utilizes families to evaluate the curriculum and determine if it is meeting the mission of the program.</p>

II. Using Developmentally Effective Approaches for Teaching and Learning

Teaching, as defined in this competency, is the use of developmentally effective appropriate strategies and tools to promote development and learning, based on an understanding of the complexity of child characteristics and the intersect of relationships and interaction as the foundation of practice. This competency area focuses on the teacher’s role in designing interactions and experiences.

Teachers of young children recognize that teaching is a complex enterprise, and its details vary depending on children’s ages, characteristics, and the settings within which teaching and learning occur. Teachers of young children should be familiar with a wide array of approaches, curriculum models, instructional strategies and tools. They understand that children construct knowledge through hands-on, engaging experiences with people and materials. Teachers of young children understand the goals, benefits, and limitations of equipment, materials, and daily routines. They demonstrate the ability to develop positive and respectful relationships that meet the needs of a diverse group of children. They support play as a vehicle for learning.

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to guide appropriate approaches for teaching and learning. It is expected that teachers understand the essential dispositions that underpin competent learning and the strategies to support such dispositions.

Domain: Using Developmentally Effective Approaches for Teaching and Learning (FED)

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to guide appropriate approaches for teaching and learning. It is expected that teachers understand the essential dispositions that underpin competent learning and the strategies to support such dispositions.

SUB-DOMAIN: FOSTERING COMPETENT LEARNERS (ELDS) (FED)

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Essential Dispositions (ELDS) (NAEYC)	Understands the role and strategies for positive classroom management and positive child behaviors to support learning (ELDS) (ECTC) Encourages children to positively interact with adults and peers to support collaborative learning	Encourages children to use critical thinking skills to help them organize information Understands higher order thinking framework (Bloom’s Taxonomy) as a structure to plan engaging experiences that foster such thinking.	Analyzes children’s specific needs and tailors his/her strategy to help children develop creative thinking and problem solving. Creates multiple opportunities for children to develop their creative	Continuously researches and applies innovative approaches to expand own repertoire of instructional

	<p>Fosters children’s ability to adapt to new situations and children’s interests</p> <p>Encourages children to explore and see new information and ask questions</p>	<p>Uses questioning techniques and builds experiences based on higher order thinking model.</p>	<p>thinking and problem solving skills.</p> <p>Engage children in situations/experiences where reflection is required.</p>	<p>approaches.</p>
<p>Interactions and Experiences (VT) (NAEYC)</p>	<p>Understands that learning is facilitated through adult-child interactions.</p> <p>Promotes positive relationships and respectful and supportive interactions among teachers, families and children. (NAEYC) (CR)</p> <p>Responds to children’s initiations and requests, including the nonverbal cues of infants and toddlers (VT)</p> <p>Understand the importance of trusting relationships with children where they feel safe, secure, and valued (VT) (ECTC)</p> <p>Understands that positive relationships with children, families and teachers are a foundation for all healthy development and learning. (NAEYC) (CR) (VT)</p>	<p>Establishes individual relationships with each child through one-on-one interactions, individualized observations, and conversations with family members. Develops attached relationships with those for whom she is primary caregiver.</p> <p>Demonstrates and facilitates developmentally appropriate interactions between and among children and adults to support learning.</p> <p>Promotes positive, pro-social relationships among children and helps each child feel accepted (VT) (ECTC)</p> <p>Guides children to resolve interpersonal conflicts and solve problems with others (VT)</p>	<p>Encourages children to develop independence by providing physical and emotional security and opportunities for children to master new skills, experiences success, and safely take risks (VT)</p> <p>Evaluates a variety of positive guidance techniques and selects appropriate methods for the specific situation or child (VT) (ECTC)</p> <p>Reflects on situations in order to identify when to interact with a child to deepen the child’s understanding.</p>	<p>Models positive relationships and respectful and supportive interactions among children, families, teachers and other professionals. (NAEYC)</p> <p>Analyzes own relationships and interactions with children, families and teachers and implements strategies to continuously improve relationships. (CR) (NAEYC)</p>

SUB-DOMAIN: TEACHING & FACILITATING

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
<p>Intersect of Content and Implementation</p>	<p>Has a beginning understanding of current theoretical perspectives and research specific to teaching and facilitating.</p> <p>Has working knowledge of principles of the CT. Preschool Curriculum Framework and/or other early learning curricula.</p> <p>Curriculum goals and objectives guide teachers ongoing assessments of children’s progress (NAEYC 2.A.05)</p>	<p>Identifies and applies sound theoretical perspectives that undergird teaching strategies.</p> <p>Develops program policies and methodology that supports children’s learning in all domains.</p> <p>Able to explain to staff, colleagues and families the principles of curriculum planning: observation, assessment, documentation, interpretation, planning and implementation.</p>	<p>Consistently, with family input, incorporates family, culture and community factors into curriculum planning. (CR)</p> <p>Monitors program practices for consistency with principles of developmentally, culturally-linguistically appropriate curriculum planning. (CR)</p>	<p>Applies information from related fields such as health, mental health, etc to develop a holistic approach to early childhood education (RI 48).</p>

	<p>Understands the importance of incorporating family, culture, and community factors when planning curriculum. (NAEYC) (CR)</p> <p>Understanding of health and impact on children’s learning and development.</p>	<p>Incorporates family, culture and community factors into curriculum planning. (CR)</p>	<p>Analyzes and integrates sound theoretical perspectives into teaching strategies in curriculum development.</p> <p>Engages staff, colleagues and families in discussing curricular goals along a developmental continuum.</p>	
<p>Uses a diversity of instructional approaches (NAEYC) (ECTC B)</p>	<p>Understands and values play as one of the primary vehicles for learning in all domains. (ECTC A)</p> <p>Creates experiences that are based on children’s natural curiosity, deepen their knowledge, and sustain active engagement with materials and ideas. (ELDS) (NY)</p> <p>Creates experiences that are planned in a way that infuses diversity and meets the needs of children with special needs, children that are Dual Language Learners and children from diverse backgrounds. (DLL)</p> <p>Demonstrates recognition of the various strengths, their characteristics and their impact upon the teaching-learning process.</p> <p>Recognizes that developmentally appropriate practice includes both typical developmental characteristics as well as those that are unique to each child (RI 27)</p> <p>Understands that curriculum is delivered in part through genuine and nurturing relationships.</p> <p>Identifies a variety of positive guidance techniques (VT)</p>	<p>Implements a learning environment that maximizes play as a vehicle for learning.</p> <p>Utilizes engaging conversations with adults and thought provoking questions with adults to facilitate learning.</p> <p>Plans and implements developmentally appropriate learning experiences that are tailored to each child’s interests, learning styles and individual stage of development and unique needs to create meaningful play opportunities and enable a child to develop his or her full potential. (DLL)</p> <p>Provides meaningful individualized instruction for children with strengths, varying abilities and behaviors. (SE) (ECTC A)</p> <p>Sets realistic expectations for young children for behavior and apply appropriate child guidance strategies according to the individual child and the situation (ECTC A).</p> <p>Uses a variety of positive guidance strategies that respect children and teach appropriate social skills (VT)</p>	<p>Engages staff, colleagues and families in discussion about the benefit, characteristics and limitations of child-initiated play and exploration and adult-facilitated strategies that support learning and development.</p> <p>Collaborates with other significant adults in planning appropriate activities, routines and experiences for individual children including special needs and dual language learners. (SE) (DLL)</p> <p>Analyzes the impact of parent/family understanding and acceptance of a child’s disability upon the child’s cognitive and social abilities, attitudes, values, and interests. (SE)</p>	<p>Continually analyzes and revises planned play experiences to deepen children’s understanding of concepts. (ECTC B)</p> <p>Integrates the use of accommodations and modifications as an increase of self-regulation and independence of students with disabilities. (ECTC B) (SE)</p>
Individual Ways	Recognizes that each child is unique and learns	Provides opportunities and experiences to	Utilizes knowledge about	Uses information

<p>of Knowing and Learning (NAEYC) (ECTC B)</p>	<p>in a distinctive way.</p> <p>Show genuine interest in children’s experiences, ideas and work and focus’ activities on children’s interest areas (NY) (NAEYC)</p> <p>Is attentive and responsive to children’s needs, interests and verbal and non-verbal cues (NY) (NAEYC) (CR) (DLL)</p> <p>Recognizes that children need time to grasp concepts or practice skills. (ELDS)</p> <p>Understands and values that each child has unique characteristics including developmental levels, learning styles, temperament, and interests. (ECTC A)</p> <p>Understands that children’s development can be impacted by a myriad of short and long-term risk factors such as poverty, illness, changes in family structure, etc.</p>	<p>support each child’s unique and distinctive way of knowing and learning. (ECTC A)</p> <p>Responds consistently to each child’s individual needs. (NAEYC)</p> <p>Uses responses to children’s questions as a means to reinforce or expand upon concepts.</p> <p>Anticipates emerging skills and plans experiences to allow children to build and extend knowledge and skills over time.</p>	<p>individual children with special needs and consistently makes accommodations and adaptations to ensure their inclusion. (ECTC B) (SE)</p> <p>Analyzes own instructional approaches to support individual children’s development and learning.</p> <p>Collaborates with a multi-disciplinary team and participates as appropriate in the development of IEPs that incorporate effective practices and focus on families’ priorities and concerns, as well as children’s development and interests. (SE)</p> <p>Reflects upon emerging skills and plans experiences to allow all children with differing learning styles to build and extend knowledge and skills over time.</p> <p>Pays close attention to the level of support a child needs to perform a task and acknowledges even small amounts of progress. (SE) (ELDS) (DLL)</p>	<p>gained from multiple sources to provide welcoming strategies matched for each child’s individual needs including culture and language. (ECTC B)</p> <p>Communicates with staff, families and colleagues to support children’s learning through repetition in building and extending children’s knowledge and skills. (ECTC B)</p> <p>Evaluates learning experiences through the lens of current theory and research about children’s ways of knowing and learning.</p>
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III. Promoting Child Development and Learning

Knowledge of child growth and development is the foundation for constructing the developmentally appropriate and meaningful experiences to support children's learning and development. Teachers of young children should understand how to promote young children's learning and development by tailoring experiences to nurture young children's individual nature thus enabling the child to develop his or her full potential.

Teachers working with young children must understand what to expect regarding children's range of abilities to be able to plan appropriate sequences of action, adjust teaching strategies, and pose manageable tasks and challenges to extend learning for all children. Teachers of young children recognize that while all children are born ready to learn, development in a single domain impacts and is impacted by learning and growth in other domains. They understand key developmental milestones and that development is progressive yet individualized. They should be familiar with various theoretical frameworks of child development, and able use this information to provide appropriate and meaningful early learning experiences for all children. They use their understanding of young children's characteristics and needs to create learning environments that are respectful, supportive yet challenging and aesthetically pleasing for each child.

In addition to consideration of the child's age, teachers must consider each child's individuality in terms of distinct personality, developmental level, temperament, needs, learning styles, and ability levels. This competency includes recognition of the influence of a child's culture, abilities and special needs. Competent teachers of young children understand that an inclusive environment benefits both children with and without special needs, and be ready to embrace an inclusive philosophy.

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to develop experiences that promote child development and learning. The following describes the background knowledge and skills teachers need in order to effectively implement the ELDS.

Domain: Promoting Child Development and Learning

The CT Early Learning and Development Standards (ELDS) outline the skills, knowledge and dispositions children birth to age five should know and be able to do across domains. The ELDS should be used to develop experiences that promote child development and learning. The following describes the background knowledge and skills teachers need in order to effectively implement the ELDS.

SUB-DOMAIN: CHILD DEVELOPMENT

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
General Knowledge of Domains, Stages and Milestones (NY, RI, NAEYC)	<p>Knows and recognizes developmental differences and needs.</p> <p>Understands that children’s development includes several interrelated domains - physical, cognitive, social and emotional – that influence each other and develop simultaneously (RI 26) (NAEYC) (ECTC A)</p> <p>Recognizes the major developmental milestones of children birth to age five (RI 26). (NAEYC)</p> <p>Understands that each child’s development typically proceeds in a predictable and recognizable sequence (RI 26) with variations due to distinct personality, inherited traits and unique temperament, allowing children to develop at their own pace. (NAEYC)</p> <p>Knows that face-to-face interactions which include rich and varied language are crucial to development. (CR)</p>	<p>Displays in their work knowledge about individuality in the basic topics of infancy and early childhood development or more advanced knowledge in one developmental phase (ECTC A). (ECTC A)</p> <p>Understands current research regarding the importance of early experiences on the development of the brain. (NAEYC)</p> <p>Uses knowledge of child development in order to provide developmentally appropriate and engaging experiences and interactions. (NAEYC)</p>	<p>Begins to apply knowledge about children with special needs and makes accommodations and adaptations to ensure their inclusion. (SE)</p> <p>Demonstrates an understanding of and applies in the program setting current research and knowledge about various theories of child development including brain development, motor development, cognitive processes and language development, early learning, temperament, attachment theory, emotional intelligence, self-regulation, self- development and executive functioning, peer relations, modes of play and exploration, and common types of exceptional development of young children from birth to five years (ECTC B) (NAEYC)</p>	<p>Analyzes and evaluates own practice in relationship to current theory and research on child growth and development and applies new knowledge to one’s practice.</p>

	Recognizes and provides for adaptations to the environment and activities to allow those with special needs to engage in healthy mind and body experiences (CR, SE)			
Fostering Healthy Attachment and Relationships	<p>Understands the importance of healthy attachment and resiliency of young children (RI 26) (CTAIMH-E, Level I, p.2) (NAEYC) (VT)</p> <p>Helps children to achieve self-regulation and acquire coping skills (NY pg 11)</p> <p>Provide children with positive relationships that foster social and emotional development (NAEYC)</p> <p>Is aware of diverse family structures and cultural differences in child rearing practices and beliefs (NH pg 29) in order to promote healthy attachments. (CR)</p> <p>Understanding and identifying each child’s ethnic and cultural values.</p>	<p>Uses knowledge of healthy attachment theory to support children’s personal connections with adults and peers, and help them prepare for separation e.g. during changes in staffing patterns and prolonged absences. (VT)</p> <p>Explains the variety of ways children experience grief and loss and how they relate to attachment (NH pg 13).</p> <p>Identifies basic strategies that communicate a safe and welcoming environment for children and families. (NAEYC)</p> <p>Establishes trusting relationships that supports the parent(s) and young child in their relationships with each other and that facilitates needed change (CTAIMH-E Level 1, p. 3). (NAEYC)</p>	<p>Differentiates between over dependency upon parents and lack of opportunities to exercise independence.</p> <p>Responds appropriately to the variety of ways children experience grief and loss.</p> <p>Advocates for continuity of care within the classroom and program to ensure that children are able to form a relationship with a consistent caregiver. (NAEYC)</p> <p>Uses the child’s first language, e.g. selected vocabulary or phrases, to facilitate interaction and model the value of the language for children and parents, and other adults. (DLL)</p>	<p>Creates a systemic approach to community outreach to ensure continuity of services for children, staff and families who experience grief and loss. (NAEYC)</p> <p>Promotes parent/caregiver competence in:</p> <ul style="list-style-type: none"> • Facing challenges • Resolving crises and reducing the likelihood of future crises • Solving problems of basic needs and familial conflict • (CTAIMH-E, Level I, p.3)
SUB-DOMAIN: INFLUENCES ON DEVELOPMENT				
CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Environmental Influences (NY)	Recognizes that there are multiple environmental influences including home language, culture, family composition, ethnicity, home environment, and community characteristics that affect the development and learning of children in	Create environments for young children that are inclusive of children with diverse learning needs and support children’s health, respect their culture, unique family composition and individuality, promote positive	Demonstrate their understanding of the essentials of developmental research and describe the principles that they are using as the basis for creating effective learning environments for all young children (ECTC B).	

	<p>both positive and negative ways (RI 27) (NAEYC) (CR) (ECTC A)</p> <p>Uses knowledge of environmental influences to adapt environments and learning experiences for individual children. (ECTC A)</p> <p>Investigates and provides for children’s sensory preferences (NY).</p>	<p>development, and challenge children to gain new competencies (ECTC B).</p> <p>Provide activities that are coherent with respect to their intended goals for early learning, drawing across multiple systems of influences and aspects of development to support the whole young child (ECTC B).</p> <p>Creates environments for young children that support children’s health, respect their culture and individuality, promote positive development, and challenge children to gain new competencies (ECTC A). (CR)</p>	<p>Analyzes, evaluates and applies current theory and research related to environmental influences and applies that knowledge to one’s practice. (ECTC B)</p>	
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<p>Risk factors impacting children (NY)</p>	<p>Recognizes that children’s growth and development can be impacted by short and long term risk factors, such as socioeconomic level, access to resources, poverty, illness, family dynamics, health, access to health services (physical, dental, and mental), lack of access to play environments, changes in family structure, stressful environments, community tragedies (ECTC A)</p>	<p>Applies knowledge of child development to identify and be responsive to the impact of risk factors on child development. (ECTC B)</p> <p>Provides direct care and teaching/developmental activities to infant, very young children, and families with multiple, complex risk factors to help ensure healthy outcomes and the optimal development of the child in all domains (physical, social, emotional, cognitive) (CTAIMH-E, Level I, p.3) (ECTC A)</p>	<p>Identifies appropriate resources and services to address risk factors impacting children, and partners with families to make appropriate referrals where needed.</p> <p>Applies strategies to support children’s resiliency to mitigate the impact of potential risk factors in their lives. (ECTC B)</p>	<p>Analyzes, evaluates and applies current theory and research related to risk factors and applies that knowledge to one’s practice. (ECTC B)</p>
<p>Special Needs (RI)</p>	<p>Is aware of laws and policies in the field of special education and treatment of individuals with special needs. (SE)(NAEYC)</p> <p>Knows where to access resource and referral sources for assistance with Birth to 3 and preschool special education. (NAEYC)</p>			

IV. Observing, Documenting and Assessing to Support Young Children and Families (FED)

Assessment is the systematic collection of information and the subsequent analysis of a child's growth and development processes. The knowledge and skills to conduct responsible, ethical, and effective observation, screening, and assessment of young children, including but not limited to individual variations, developmental needs and the identification of special needs, are covered in this competency area.

Teachers must understand the goals, uses, benefits, and limitations of various assessment approaches. Teachers of young children must be familiar with multiple forms of assessment, including child observation as well as the use of technology in documentation, assessment and data collection. They recognize that regular and ongoing assessment is central to the practice of early childhood professionals. They conduct systematic observations and document them. They recognize assessment must take place continually over time.

Teachers of young children know that a partnership with families goes beyond merely telling family members about the child's development; it actively seeks the family's perspective and genuinely uses this information to create a clearer picture of the child's development. They use assessment methods and tools that are current and congruent with what is known about developmentally appropriate and culturally responsive practice. They also use information from assessments in a responsible way, in partnership with families and other professionals, to inform curricular and instructional modifications and to positively influence the development of every child.

Domain: Observing, Documenting and Assessing to Support Young Children and Families

The following describes the knowledge and skills expected of early education teachers to utilize appropriate screening and assessment tools as well as implement intentional teaching based on observing, documenting and assessing child growth and development as outlined in the Early Learning and Development Standards (ELDS).

SUB-DOMAIN: UNDERSTANDING AND PRACTICING RESPONSIBLE ASSESSMENT TO PROMOTE POSITIVE OUTCOMES FOR EACH CHILD, INCLUDING THE USE OF ASSISTIVE TECHNOLOGY FOR CHILDREN WITH SPECIAL NEEDS

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Knowledge of early childhood assessments (FED) (NAEYC)	<p>Recognizes that observation and assessment are ongoing processes.</p> <p>Has a working knowledge of the variety of assessment methods, both formative and summative</p>	<p>Explains the value and importance of practicing responsible assessment to promote positive outcomes for each child (ECTC A).</p> <p>Explains the reason for and use of assistive technology in assessment of</p>	<p>Engages in assessment practices that promote positive outcomes for individual children (ECTC B). [VA1 Level 3] (DLL)</p> <p>Implements assistive technology in the process of assessing children</p>	<p>Critically analyzes assessment tools and strategies used for determining children's learning goals for validity and reliability. [VA1 Level 4] (RI)</p> <p>Collaborates to create partnerships for assessment [VA1 Level 4]</p>

	<p>and the benefits of using a variety of assessment strategies.</p> <p>Demonstrates familiarity with the IDEA mandates and the role of the IFSP and IEP in supporting children’s development (ECTC) (NAEYC) (SE)</p> <p>Understands that assessment is ongoing and should be integrated into daily curriculum. (RI)</p>	<p>children with disabilities (ECTC A) (SE)</p> <p>Understands the purposes and appropriateness of various developmental screening and assessment instruments and procedures. (ECTC A) (ECTC B)</p> <p>Understands that standardized assessments must be used for purposes for which they are intended and only administered by trained individuals. (RI)</p>	<p>with disabilities to promote positive outcomes for individual children. (ECTC B). (SE)</p> <p>Can select and identify early childhood assessments by purpose and methodology. (SE)</p> <p>Analyzes the strengths and weaknesses of various assessment methodologies and makes appropriate choices for various populations and situations. (RI) (ELDS) (DLL)</p>	
<p>Conducting Developmentally Appropriate Authentic Assessments and if appropriate formal assessments (ongoing, natural settings, meaningful activities) (RI 42)</p>	<p>Ensures that assessment strategies are responsive to all children including those that are DLL, special needs, or from diverse backgrounds. (NAEYC) (RI)</p> <p>Understands the importance of gathering information about the child over time, in natural settings, while children are engaged in meaningful activities (RI pg 42).</p> <p>Assesses children’s progress across all developmental areas.</p> <p>Formally and informally observes the parent(s) or caregiver(s) and infant/young child understand the nature of their relationship, developmental strengths, and capacities for change (CTAIMH-E, Level I, P. 2)</p>	<p>Applies the cycle of assessment, planning, implementation and evaluation, including a variety of assessment strategies, to gather meaningful and objective information to support each child’s individual development. (NY)</p> <p>Ensures that appropriate modifications and/or accommodations specific to special needs, e.g. disability, non-English speaking, are in place during assessments. (SE) (NAYEC) (DLL)</p> <p>Consistently collects assessment information from multiple sources which objectively illustrates what children know and are able to do in relation to learning goals. (NAEYC)</p> <p>Identifies children for screening or assessment to address potential developmental delays or disabilities. (ECTC)</p>	<p>Use assessment practices that reflect educational, legal, and ethical issues(ECTC B) (NAEYC) (ECTC A)</p> <p>Analyzes and evaluates observation and assessment data and applies knowledge to practice. (NAEYC)</p> <p>Select and administer functionally, developmentally, culturally, and linguistically appropriate assessments. (RI) (ECTC A)</p> <p>Analyzes and evaluates observation and assessment data and applies knowledge to practice.</p> <p>Implements responsible assessment processes into daily practice that considers how formal/standardized assessments are integrated into the overall classroom assessment plan and implements them as appropriate to reduce and/or eliminate negative influences on the assessment</p>	<p>Analyzes the effectiveness of authentic assessment practices to gather meaningful and objective information and utilizes that information to refine one’s assessment plan (RI pg 42) (NAEYC)</p> <p>Ensures that consideration is given to cultural, linguistic and environmental influences during the planning, selecting, adapting, modifying and implementing of all assessment procedures. (ELDS) (DLL) (CR)</p> <p>Evaluates current research, emerging developments, and best practices related to the assessment of young children.</p> <p>Uses assessment and data including observation, documentation, and other appropriate assessment tools and approaches, including the use of technology in documentation,</p>

			process and results. (RI pg 42).	assessment and data collection for its intended purpose. (NAEYC) (FED)
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<p>Observing and Documenting (NAEYC)</p>	<p>Understands the importance of documenting assessment information (RI pg 44) (RI)</p> <p>Observes children without bias, showing objectivity, fairness. (ECTC)</p> <p>Identifies opportunities within the classroom environment to collect assessment information (RI pg 42).</p>	<p>Begins to create assessment documentation which is linked to learning goals; is objective and specific; and includes enough detail to give a third party a complete understanding of the assessment event. (RI pg 44) (NAEYC)</p> <p>Monitors and observes children, knowing which children are able to interact with peers easily and happily at their developmental level and which ones have more difficulty and creates opportunities for the formation of positive connections with peers.</p>	<p>Consistently creates assessment documentation which is linked to learning goals; is objective and specific; and includes enough detail to give a third party a complete understanding of the assessment event. (RI pg 44) (NAEYC)</p>	<p>Analyzes the effectiveness of practices uses to document assessment information and utilizes that information to refine one’s assessment plan. (RI pg 44) (NAEYC)</p>
<p>Assessment in Curriculum Planning</p>	<p>Understands and values the importance of utilizing child assessment information when planning curriculum.(RI pg 45) (NAEYC)</p> <p>Authentic assessment practices are embedded within the regular classroom experiences and routines and conducted by those who are familiar to the child.</p> <p>Communicates understanding of the benefits of using a variety of assessment strategies and the goals, benefits and appropriate uses of assessment including its use in development of appropriate goals, curriculum, and teaching strategies for young children. (ECTC) (NAEYC) (DLL)(ECTC A)</p>	<p>Utilizes observation and assessment results to plan developmentally appropriate curriculum. (RI pg 45) (NAEYC) (ETCT A)</p> <p>Use responsible assessment to enhance children’s abilities and to identify individual differences and unique objectives. (ECTC B) (NAYEC) (SE)</p> <p>Uses assessments to plan and modify environments, curriculum, and teaching to meet children’s needs including for use in planned interventions and referral for special services (RI pg 45) (NAEYC) (SE)</p>	<p>Utilizes assessment info from a variety of sources to develop curriculum for individuals, small groups, and large groups of children. (RI pg 45)</p> <p>Develops multi-level learning opportunities in response to assessment information to meet the needs of children at different places on the development continuum. (RI pg 45 some) (DLL) (SE)</p>	<p>Continuously evaluates the assessment system to determine its effectiveness in informing curriculum and adapts as needed. (NAEYC)</p> <p>Performs developmental screening and/or adapt screening and assessment procedures to meet the individual needs of children, the culture of their families and the setting. (ECTC) (NAEYC) (CR)</p>

SUB-DOMAIN: COMMUNICATING ASSESSMENT RESULTS AND INVOLVING FAMILIES AND OTHERS IN THE ASSESSMENT PROCESS (RI Pg46) (NAEYC)				
CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Involves families in assessment procedures. (NAEYC)	<p>Articulates the ethical dimensions of assessment, including confidentiality. (ECTC A)</p> <p>Informs families ahead of time of the assessment practices.</p> <p>With families, assesses, interprets results and adjusts developmental and learning goals to meet the changing needs of the child and family. (ECTC A)</p>	<p>Includes other adults who are important to the child, in the observation process.</p> <p>Involves the family when making referrals for screening and/or child assessment. (ECTC A) (SE)</p>	Demonstrate essential skills in using assessments, interpreting assessment results, and using formal assessment information to influence practice for making appropriate referrals. (ECTC A)	Works in the community to develop guidelines for a culturally sensitive, developmentally appropriate assessment and transition process for dual- language learners in early childhood settings. (CR)
Values diverse family structures and cultures when explaining information in ways that families will understand. (NAEYC)	<p>Exchanges complete and unbiased information in a supportive manner with families and other team members (CTAIMH-E, Level I, p.2) (CR)</p> <p>Communicates with families about the value of assessment and its role in supporting children’s learning and development.</p> <p>Demonstrates sensitivity to family culture, values, home language, and literacy level when communicating about assessment procedures or results with families. (CR) (DLL)</p>	<p>Shares assessment information in ways that address language differences but using interpreters and translated documents. (DLL)</p> <p>Whenever possible, before and after the administration of assessments, attempt to communicate information in the parents’ native language (written and oral). (DLL)</p>	<p>Informs families about state Early Intervention/Early Childhood Special Education rules and regulations regarding Assessment. (SE)</p> <p>Explain assessment goals and benefits to colleagues or families. (ECTC)</p>	Advocates and facilitates discussions among early childhood educators and families on the benefits and limitations of observational information.
Professional partnerships (NAEYC)	<p>Understands that assessment information comes from a variety of sources (families, other teachers, specialists). (ECTC A)</p> <p>Understands that child assessment information is confidential and the sharing of this information is governed by program policy. (RI)</p> <p>Understands the purpose and value of sharing child assessment information with families and other professionals. (ECTC A)</p>	<p>Incorporates assessment information from a variety of sources (families, other teachers, specialists, peers, child care providers) when seeking to describe what children know and are able to do.</p> <p>Assists staff and families in accessing diagnostic assessments, extra services and/or other supports as needed.(SE)</p> <p>Facilitate referrals based on screening, observation and child assessment.</p>	<p>Works in partnership with others in using assessments that are aligned with curriculum or developmental goals, inclusive of the activities prescribed in a child’s IFSP/IEP. (ECTC) (SE)</p> <p>Analyzes assessment information to determine whether further evaluation by other professionals is warranted. (RI pg 45)</p>	Advocates and encourages diverse relationships with other professionals to ensure collaboration.

V. Building Family and Community Relationships

Families and communities form the context in which children live. Teachers of young children must recognize and respect that all children develop within the context of their families, and therefore embrace a myriad of different family structures and dynamics. This competency encompasses the knowledge, skills, and tendencies required to value and respond appropriately to all aspects of family diversity—such as race, ethnicity, socioeconomic status, culture, family composition, religion, age, ability, and home language. Teachers seek out and embrace information from families and use research-based knowledge of family dynamics, family stages and parenthood to support their planning of experiences for the children.

Additionally, this competency area includes the ability to engage the community in support of children, at the local-program level, family home, and in the broader public arena. Teachers of young children understand that successful early childhood care and education depends upon partnerships with children’s families and communities. They also understand the complex characteristics of children’s families and communities. They use this understanding to create reciprocal relationships that support and empower families.

Domain: Building Family and Community Relationships

The following describes the knowledge and skills expected of early education teachers to build family and community relationships that support collaborative understanding and engagement in supporting child growth and development in all domains of learning.

SUB-DOMAIN: CREATING RESPECTFUL, RECIPROCAL AND TRUSTING RELATIONSHIPS WITH FAMILIES

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Family Systems	<p>Understands that each child grows up in a unique environment and is affected in different ways by the adults and children around her/him. (CR)</p> <p>Understands the relationship between family functioning and positive child outcomes. (RI) (NAEYC)</p> <p>Understands the dynamics and complexity of family systems. (RI) (ECTC B)</p>	<p>Seeks information from families regarding variations across cultures in terms of family strengths, expectations, values and child rearing practices (RI) (NY)</p> <p>Identifies and responds effectively to emerging family issues.</p> <p>Knowing about and understanding diverse family and community characteristics and</p>	<p>Understands the characteristics of Connecticut communities, especially the effects of racial-ethnic isolation and changing demographics on families and children’s learning outcomes. (ECTC) (CR)</p>	<p>Applies understanding of cultural competence to communicate effectively, establish positive relationships with families, and demonstrate respect for the uniqueness of each family’s culture (CTAIMH-E, Level 1, p. 2) (CR)</p>

	Demonstrates respect for the family role as the primary educator, advocate, and “expert” on their own child and actively seeks family opinion and input. (RI. p. 21)	respecting the differing structures, languages and cultures of each child and how that can affect development. (NAEYC) (DLL) (NY)		
Communication	<p>Communicates regularly, respectfully and effectively with families in a family-friendly and culturally appropriate way. (R.I.21) (N). (NAEYC) (NY) (ECTC B)</p> <p>Creates opportunities for two way communication to build relationships with families based on mutual trust and understanding. (CR) (NY)</p> <p>Communicates information pertaining to safety regulations and standards to families.</p>	<p>Utilizes a range of techniques to communicate effectively with all families, especially families with linguistic differences. (DLL) (NY)</p> <p>Shares with families an understanding of infant and family relationship development (CTAIMH-E, Level I, p. 2).</p>	Obtains translation services as necessary to ensure effective communication with families who may experience a communication barrier (CTAIMH-E, Level I, p.4) (DLL)	<p>Structures connections w/families to inform instructional design that is culturally consistent and builds upon the strengths of dual language learners and their families. (CR)</p> <p>Observes and constructs reciprocal relationships with families, independently or as part of a team. (ECTC A)</p>
Professional relationships (NY).	<p>Demonstrates and maintains positive and appropriate relationships with families. (NAEYC)</p> <p>Maintains appropriate personal boundaries with young children and families (CTAIMH-E, Level I, p. 3).</p>		Engages and supports families and communities through respectful, reciprocal relationships that incorporate family and community strengths in their approach to early learning in the classroom. (ECTC A) (NAEYC)	<p>Analyzes, evaluates and applies current theory and research on developing relationships with families. (RI)</p> <p>Serves as a role model and mentor to others on developing positive relationships with families. (RI)</p>

SUB-DOMAIN: ENGAGING FAMILIES IN THEIR CHILDREN’S DEVELOPMENT AND LEARNING

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Family Engagement Opportunities (NY) (NAEYC) (ECTC A)	<p>Understands that meaningful opportunities for family engagement linked to children’s learning goals occur both in the classroom and at home. (RI) (NY)</p> <p>Creates and maintains a safe and welcoming environment for families, including providing a quiet space for families to nurse, soothe or comfort a</p>	<p>Supports the parent’s role by providing relevant information about child development and learning and healthy attachment. (RI)</p> <p>Provides opportunities for family engagement both in the classroom and at home that build upon families’ cultural-linguistic</p>	<p>Consistently provides opportunities for families to be engaged in their child’s education in a way that reflects cultural and linguistic differences. (RI)(CR)</p> <p>Evaluates and improves family engagement opportunities on a regular basis to meet the needs of current families. (RI)</p>	Serves as a role model and mentor to others on involving families in their child’s development and learning. (NY)

	child (RI). (NAEYC)	background, strengths, skills, talents, interests and availability. (RI) (DLL) Provides opportunities for family engagement both in the classroom and at home tied to established learning goals for children. (RI)	Supports and reinforces parent’s strengths, emerging parenting competencies, and positive parent- young child interactions (CTAIMH-E, Level I, p. 2)	
Special education and health needs (NY) (RI) (NAEYC) (SE)	Helps all families understand the benefits, for all children, of integrating children with special education and health needs. Knows about available services (RI p. 23)	Helps families obtain clear and understandable information about their child’s special education and health needs. (RI) Helps families advocate for special needs and services (RI p. 23)	As appropriate and desired, provides additional information to parents related to disabilities. Supports families in the development of Individual Education Plans (IEPs) and other individualized plans for children. (DLL)	Creates opportunities to share with peers information about accommodations and modifications for children with a disability. Collaborates with other service providers to ensure classroom-based comprehensive services to children and families; serves as an advocate for families when necessary.
SUB-DOMAIN: UTILIZING COMMUNITY RESOURCES TO SUPPORT FAMILIES				
CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Connect families with needed resources and services. (NY). (NAEYC)	Is aware of resources within the program and surrounding community. (NAEYC) Demonstrates beginning skills to foster family and community partnerships. (ECTC A). Provides families with community resource information. (NAEYC) (NY) (CR) (DLL)	Able to identify a limited number of community resources families may draw on to enhance their literacy and social goals. (ECTC) (NAEYC)	Collaborates and communicates with other service agencies to ensure that the children and family receives services for which they are eligible and that the services are coordinated (CTAIMH-E, Level I, p.3). (NY) Builds relationship with community organizations and their representatives to bring services to child and families in the classroom. (NY)	Establishes supportive and respectful reciprocal relationships with families, assess needs of children and families, and link families appropriately with community resources to enhance health, family literacy and social goals. (ECTC B)

VI. Health, Safety and Wellness

Foundational to all other teaching practices is assuring the health, safety and wellness of young children. The key concept in this competency is that children’s health is not simply the absence of illness or injury; it encompasses safety, nutrition, fitness, and physical and emotional health.

Children’s safety is the first and foremost responsibility of adults who provide care for them. Safety encompasses not only the physical aspect, but also the social and emotional aspects. Most basically, teachers must be able to ensure children’s safety and be prepared to handle emergencies. Teachers of young children also need to stay current on state and federal regulations and research related to children’s safety and health. Finally, they should promote the sound health, dental, nutritional, and emotional stability of young children and their families, by modeling these characteristics and connecting families to culturally appropriate community health resources.

Domain: Health, Safety and Wellness

The following describes the knowledge and skills expected of early education teachers to support the health, safety and wellness of all children in the settings in which children receive early care and education services.

SUB-DOMAIN: REGULATIONS, BEST PRACTICE STANDARDS AND SAFETY PROCEDURES [IVA](ELDS)

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
State and Federal Regulations and National Health and Safety Performance Standards (NAEYC)	<p>Has knowledge and understands the purpose of and follows state and federal regulations and best practice standards including, but not limited to: (RI)</p> <ul style="list-style-type: none"> • Administration of medication • Infant and child CPR and First Aid training • Fire & emergency procedures • Staffing ratios • Department of Children and Family Mandated Reporters • Communicable disease • Sudden Infant Death Syndrome • Department of Public Health • National Association for the Education of Young Children • Caring for Our Children <p>Recognizes signs of abuse and/or neglect and</p>	<p>Demonstrates knowledge of state regulations and the hierarchy between the minimal licensing requirements and national standards as the ultimate goal regarding best practices.</p> <p>Maintains organized accessible and up to date records related to the health, safety and nutrition of the children in their care (NY pg 54).</p> <p>Promptly and appropriately reports harm or threatened harm to a child’s health or welfare to Children’s Protective Services after discussion with supervisor</p>	<p>Develops and implements systems for documentation and notification of suspected child abuse and neglect, in accordance with state law.</p> <p>Obeys laws related to child abuse and the rights of children with and without disabilities (NY) (RI)</p>	<p>Anticipates and plans for potential risks to protect children, youth, and adults.</p> <p>Partners with teachers to teach age appropriate precautions and rules to children to ensure safety both indoors</p>

	<p>understands the role of a mandated reporter to identify, document, and report suspected child abuse and neglect as mandated by law.</p> <p>Actively supervises children to ensure safety both indoors and out. (RI)</p> <p>Monitors and maintains safety in all areas, both indoors and outdoors, including the condition of equipment and materials, and the identification and removal of potential hazards (RI).</p> <p>Follows recommended guidelines to prevent Sudden Infant Death Syndrome (SIDS).</p> <p>Understands ratio requirements and alerts appropriate individuals when they are not met (RI)</p>	<p>(CTAIMH-E, Level I, p.2).</p>		
<p>Emergency Preparedness (NAEYC)</p>	<p>Knows and follows safety regulations and emergency plans. (MA, pg 26) (NY)</p> <p>Routinely practices emergency and disaster drills including safety procedures for children with disabilities. (RI)</p> <p>Maintains up to date emergency contacts for each child and authorized pick up.</p>	<p>Implements procedures and emergency preparedness plans with other program staff including maintenance of emergency supplies (MA pg 26).</p> <p>Maintains a system to account for all children and staff in the event of an emergency or disaster.</p>	<p>Develops and documents and modifies contingency plans for emergency situations and disaster drills. (MA, pg 26)</p>	<p>Evaluates and critiques established safety procedures and makes recommendations for change, as necessary.</p>
<p>Safe learning environment (NAEYC) (ECTC) (VT)</p>	<p>Performs daily safety checklist of indoor/outdoor environment.</p> <p>Understands regulation ratio requirements and alerts appropriate individuals/administrators when they are not met.</p> <p>Recognizes potential health hazards in meals (choking, allergies, etc.) and takes steps to avoid them. (RI pg 19).</p>	<p>Communicates information pertaining to safety standards to families and educates families of the importance of a safe home environment.</p>		<p>Analyzes learning environments regularly to provide a safer learning environment for children.</p>

	Understands that various strategies (such as face to name headcounts and positioning) help to ensure adequate supervision (NY)			
SUB-DOMAIN: REGULATIONS, BEST PRACTICE STANDARDS AND SAFETY PROCEDURES (ELDS)				
CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Healthy learning environment (VT) (NAEYC)	<p>Understands program policies and practices regarding children’s health and safety status (RI pg 59) (ELDS)</p> <p>Provides a clean, safe and healthy environment (MA) (ELDS)</p> <p>Provides families with information regarding the good health routines.</p>	<p>Designs and assesses environments and procedures to protect the health of children, youth, and adults.</p> <p>Ensures adherence to health and safety regulations and policies.</p> <p>Understands impact of exposure to toxic environments.</p>	<p>Monitors the environment for healthy practices, making improvements as necessary. (ELDS)</p> <p>Engage with appropriate health professionals and consultants to ensure that classroom practices support the individual health and developmental needs of all children, including participating in the planning and implementation of IFSP and IEP goals. (ECTC B) (NAEYC)(SE)</p>	<p>Advocates for program policies and procedures that affect the health status of the school community. (ECTC A) (ECTC B) (SE) (NAEYC)</p>
Children’s Health Needs (ECTC B) (NAEYC)	<p>Follows policies and procedures for infection control and universal precautions. (RI)</p> <p>Integrates optimal health routines into curriculum and routines. (NY)</p> <p>Recognizes and seeks to understand culturally influenced health practices of children. (RI pg 17)(CR)</p> <p>Understands common signs and symptoms of common childhood illness (RI) and observes children daily to check for evidence of health concerns and communicates these concerns to appropriate program staff as needed. (MA pg 24) (RI)</p> <p>Collects developmental health history from</p>	<p>Communicates with families about program policies and practices regarding health and individual health status. (RI pg 59)</p> <p>Understands individual children’s allergies and other health needs and takes appropriate measures to ensure the health and safety of each child (RI pg 59)</p> <p>Provides information to families regarding communicable disease which their child has been exposed to (NY pg 59)</p> <p>Recognize physical disabilities</p>	<p>Implements procedures and collaborates with others to promote physical health and well-being.</p> <p>Considers necessary accommodations and/or modifications for physical disabilities and other health impairments (SE)</p> <p>Makes health referrals when necessary. (MA pg 23).</p>	<p>Establishes linkages and monitors system for documenting health records. (MA pg 23).</p> <p>Analyzes, evaluates and applies current theory, research and policy on children’s health (RI pg 17).</p> <p>Supports families in ensuring that children have access to health insurance and regular source of medical care. (MA pg 23).</p>

	families for each child that covers topics like physical health, self-care skills, and social relationships (NY pg 61) Follows and models healthy lifestyle practices to support the health of each child. (ELDS)	and other health impairments (SE)		
Mental Health (ECTC B) (NAEYC) (FED)	Understands the importance of mental wellness and how it connects to the individual’s overall health. Understands that stress and trauma have an impact on a child’s development and behavior. (MA pg 25). (ELDS) Recognizes the characteristics of a healthy sense of self and the related ability of children to make appropriate choices. Understands that children are more likely to thrive when they feel physically and emotionally safe and that certain environmental factors can create stress. (NH pg 27)	Provides appropriate referral information for children and families. (MA pg 25). Recognizes behavioral symptoms of stress in children. (MA pg 25). Responds individually to the unique mental health needs of each child. (SE) Utilizes appropriate mental health services and resources.	Uses practices that support the emotional well-being of children and youth. Adapts curricula to respond to social-emotional events (MA pg 25) Identifies physical and mental signs of stress and trauma and makes appropriate referrals.	Promotes positive mental health in all aspects of program design (MA pg 25). (ELDS) Establishes a system for accessing mental health supports and works collaboratively to address concerns at the child, family and program level. (MA pg 25).

SUB-DOMAIN: REGULATIONS, BEST PRACTICE STANDARDS AND SAFETY PROCEDURES (ELDS)

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Healthy mind and body state (ECTC B) (NAEYC)	Recognizes, models and provides time and space for at least the recommended amount of active play both indoors and outdoors on a daily basis (MA pg 28; NYpg61) (ELDS) (VT) Plans and adapts age appropriate opportunities for children to be active and have adequate rest. (MA pg 28) within the daily schedule. (NY)	Recognizes the importance of a child’s secure home base, and facilitates families access to applicable resources or consultation about nutrition, emergencies, diagnoses, treatments and other information (NY pg 62) Provides health screenings such as lead, and dental provider. Creates a mutually respectful	Creates a psychologically safe environment for all children and families. (NY pg 62) Communicates health, safety, wellness and nutrition information with families. (NY) Maintains a partnership with the programs health provider.	Designs program and ensures resources to provide age appropriate opportunities for all children to be active and have adequate rest, including inclusion of all children (MA pg 28)

<p>Nutrition (NAEYC) (VT) (ECTC A)</p>	<p>Understands that the nutritional needs of infants, toddlers and preschoolers are unique to their development. (RI pg 18) (ELDS)</p> <p>Follows instructions for providing appropriate meals for children with special dietary needs (MA pg 27). (ELDS)</p> <p>Teaches and joins children for meals and snacks and models developmentally appropriate and healthy eating habits with infants, toddlers and preschoolers. (RI pg 18) (ELDS)</p>	<p>environment. (NY pg 62) (CR)</p> <p>Respectfully communicates with families regarding nutritional needs, family preferences and cultural influences on food and eating habits and uses this information to plan responsive experiences that promote nutrition and healthy eating practices. (CR) RI pg 18). (ELDS) (NY)</p> <p>Observes children during mealtime to learn about individual eating preferences and uses observations to inform menus, meal schedules, and communication with families (RI pg 18).</p> <p>Understands impact of Lack of Access to and consumption of affordable, nutritional, toxin-free foods.</p>	<p>Recognizes symptoms and behaviors of children that signal possible nutritional need or feeding/eating concerns. (RI pg 18)</p> <p>Reviews the nutrition program, making improvements as necessary.</p>	<p>Analyzes, evaluates and applies current theory, research and policy on nutrition. (RI pg 18).</p> <p>Advocates for program policies and procedures that affect the nutritional welfare within the school community. (RI pg 18).</p>
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VII. Professionalism

Teachers should identify and conduct themselves as members of the early childhood profession. They must know and use ethical guidelines and other professional standards related to early childhood practice. They should be committed to continuous, collaborative learning regarding their profession and to lifelong personal and professional growth. They value knowledgeable feedback, reflective input and critical perspectives on their work. They use such input to make informed decisions that integrate knowledge from a variety of sources.

Early childhood educators need to understand the complex services that constitute and shape the early care and education system; their own participation as leaders; and their organizations’ roles. They should be aware of larger public and private systems that shape the quality of services available to children and families. They are informed advocates for sound educational practices and policies. They value the diversity of lifestyles, languages, beliefs, and cultural backgrounds that can be found in all aspects of our society, and advocate for policies which are free of bias and responsive to the differences in the needs of children.

Domain: Professionalism

The following describes the knowledge and skills expected of early education teachers to represent the early childhood profession. In addition, the NAEYC Code of Ethics is the foundational document by which early childhood professionals should utilize.

SUB-DOMAIN: FOUNDATIONS IN EARLY CHILDHOOD PROFESSION (N) [VIA] (VT) (NAEYC)

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
Identifying and conducting self as part of the EC Profession	<p>Maintains active membership in professional organizations and the Connecticut Professional Development Registry (RI)</p> <p>Understands that there is a connection between the core knowledge and regulations, program policies and professional standards (RI 48).</p> <p>Understands that early childhood practice is impacted by emerging research, current issues and advances in the field (RI 48).</p> <p>Understands that the profession has a research-based core of knowledge at its foundation (RI 48)</p>	<p>Understands that the profession has a research-based core of knowledge as its foundation and utilizes this as a means of making decisions. (ECTC A)</p>	<p>Consistently seeks new information on research, current issues and advances in child development, behavior, and relationship-focused practice (CTAIMH-E, Level 1, p.5) (ECTC B)</p>	<p>Actively involved in groups or organizations engaged in research, policymaking and/or leadership (RI 48). (ECTC B)</p> <p>Intentionally serves as a resource and mentor for others in the field (NY 77).</p>

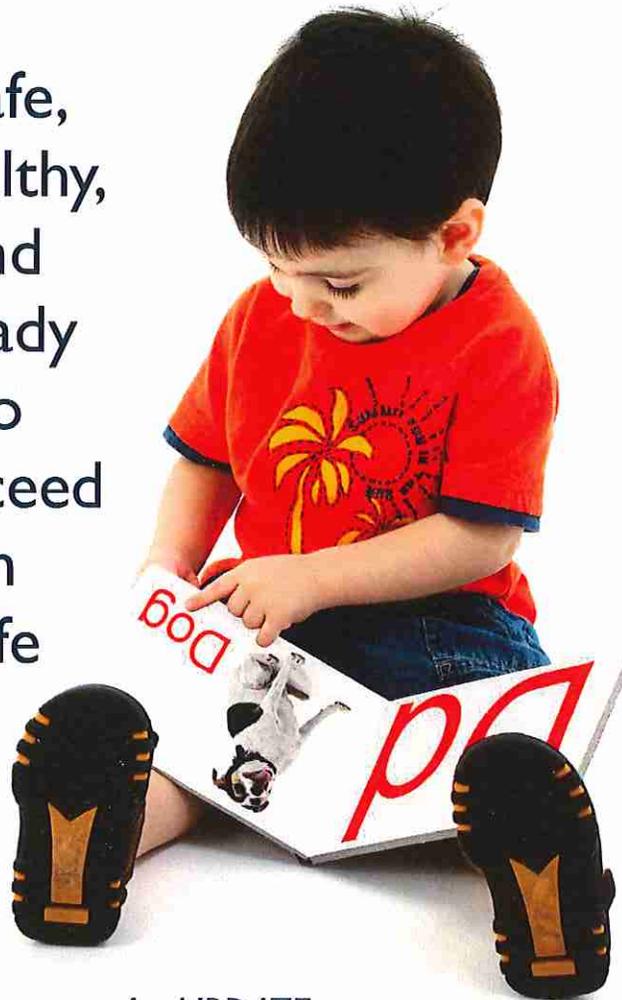
	Understands that early care and education is an ever-evolving field based on current research and current issues (RI 48)			
Commitment to continued professional development as an Early Childhood Professional	<p>Engages in annual self evaluation process and uses information learned to influence an individualized professional development plan. (ECTC A)</p> <p>Identifies ethical and professional guidelines established by the early childhood profession (RI 48). (ECTC A)</p> <p>Upholds standards of confidentiality, sensitivity and respect for children, families, and colleagues (NY 73) (RI 49) (ECTC A)</p> <p>Recognizes areas for professional and/or personal development and participates in appropriate learning activities offered by professional organizations (RI) (CTAIMH-E, Level I, p.5) (ECTC A)</p>	<p>Engages in continuous, collaborative learning to inform practice (ME)</p> <p>Utilizes professional code of ethics in making professional decisions (RI 48). (ECTC B)</p> <p>Is an effective communicator with other staff and families of their understanding of families of young children and those with special needs in ways that reflect their respect for the challenges facing young families. (SE) (ECTC A)</p>	<p>Actively establishes and implements an individualized professional development plan that leads to a specific degree.</p> <p>Serves as a role model and promotes compliance with ethical standards in the workplace. (RI 48)</p> <p>Uses reflective practice throughout work with infants/young children and families to understand own emotional response to infant/family work (CTAIMH-E, Level I, p.5) (CR)</p>	<p>Articulates a personal philosophy of early childhood based on core knowledge (RI 48).</p> <p>Identifies potential conflicts of interest and ethical dilemmas and proactively seeks support in resolving emerging ethical issues. (RI 48) (ECTC B)</p> <p>Analyzes and evaluates own practice in relationship to current theory and research on child growth and development and applies new knowledge to one's practice.</p>
Ethical standards and professional guidelines (NY 73) (ECTC A) (NAEYC) (VT)	<p>Possesses a copy or has access to the National Association for the Education of Young Children Code of Ethics.</p> <p>Complies with any program requirements such as attendance, mandated reporting, professional development requirements, health and safety certifications, etc.</p> <p>Recognizes potentially unethical practices. (RI 49)</p>	Maintains professional boundaries and relationships with staff, children, and families	Uses the ethical and professional guidelines established by the early childhood profession when solving dilemmas in working with children and their families. (ECTC B)	

<p>Advocating for Children, Families and the Profession (NY) (NAEYC)</p>	<p>Recognizes that national, state, and local policies and legislation affect children and families (ECTC A)</p> <p>Grounds decisions and advocacy in efforts in multiple sources of knowledge and multiple perspectives. (ECTC B)</p>	<p>Utilizes leadership qualities to improve experiences for children and families. (ECTC A)</p> <p>Advocates for all children in the classroom including those with special needs and DLL. (DLL) (SE) (ECTC B)</p>	<p>Explains current public policy issues and their impact on children, families and the profession. (ECTC B)</p> <p>Engages as an advocate for critical issues, in the early childhood professions and for the children families and communities served (ECTC B)</p>	<p>Describe how public policies are developed, and demonstrate essential advocacy skills. (ECTC B)</p>
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SUB-DOMAIN: VALUING DIVERSITY

CATEGORY	Level 1: Beginning	Level 2:	Level 3:	Level 4: Advanced
<p>Diversity and cultural competence. (CR) (NAEYC)</p>	<p>Demonstrates an understanding of and respects differences in family compositions, languages, beliefs and cultural backgrounds among children, family and colleagues. (ECTC A)</p> <p>Views diversity as an asset to the classroom and program and supports children and families enrolled in the program to recognize and appreciate diversity as an asset to the program and community.</p> <p>Understands how culture influences child-rearing practices and how that in turn can affect growth and development. (RI 49).</p>	<p>Recognizes own personal bias and how that influences perspective and work. (CR)</p> <p>Seeks out opportunities to expand his/her exposure to other cultures.</p>	<p>Plans curriculum which takes into account the diversity that exists in all aspects of society. (RI) (CR)</p> <p>Supports children in identifying and challenging bias. (RI) (CR)</p> <p>Collaborates with other educators, families, service providers, community agencies, in culturally responsive ways to meet the needs of ALL children and their families and teach and promote diversity(RI) (CEC 9) (RI) (CR)</p>	<p>Mentors others in understanding issues related to diversity and cultural competence. (CR)</p>

Safe,
Healthy,
and
Ready
to
Succeed
in
Life



An UPDATE to
Bridgeport's Blueprint for Young Children
September 2009



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September 2009

We are pleased to provide you with *An UPDATE to Bridgeport's Blueprint for Young Children*. When the *Blueprint* was first issued in 2006, an outcome was the formation of the Bridgeport Alliance for Young Children (BAYC). The *UPDATE* maintains the original goals of the *Blueprint* but refines the work into a three to five year plan that takes advantage of collaborating with a myriad of Bridgeport programs that currently support families with children from birth to age eight. The process of completing the *UPDATE*, supported by parents, educators, service providers, and residents, has resulted in a *community plan* that includes both achievable and measurable results.

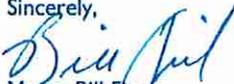
Significant progress has occurred since the publication of the original *Blueprint*--

- School Readiness availability has increased by 36%
- Kindergarten Developmental Reading Assessment (DRA) scores have improved
- Volunteers from neighborhoods across the city have been trained as *Community Messengers*
- *Lee y serás*, the Hispanic parent empowerment program, has been provided
- Medical professionals have developed comprehensive family-centered health and development strategies
- Local and state elected officials have been informed on the benefits of early care and education of our children.

As the conveners of BAYC, we remain focused on a vision of Bridgeport — *a community where all children are safe, healthy, and ready to achieve their potential* — by providing support in four strategic areas: Families Empowering Families; Health and Development; Early Care and Education; and Awareness and Advocacy.

On behalf of the entire Bridgeport community we applaud everyone who participated in this effort. We also wish to thank the William Caspar Graustein Memorial Fund, Child Health & Development Institute of Connecticut, the State of Connecticut Department of Education, the Governor's Early Childhood Education Cabinet, and United Way of Coastal Fairfield County for their generous financial and technical support in the development and publication of this plan. We have confidence in Bridgeport's commitment and ability to move closer to realizing our vision.

Sincerely,


Mayor Bill Finch
City of Bridgeport


John V. Ramos, Sr., Ed.D.
Superintendent of Schools


Merle Berke-Schlessel, Esq.
United Way of Coastal Fairfield County



Bridgeport's Vision for Young Children

Bridgeport is a strong community with the resources and commitment to nurture successful children.

The Mission

To work with families and the greater community to ensure access to quality early care, education and health services for all children birth to age eight.

Result

All Bridgeport children will be safe, healthy, and ready to fulfill their potential.

Bridgeport Alliance for Young Children

The Bridgeport Alliance for Young Children (BAYC) emerged from the 2006 *Blueprint for Young Children* planning process with a charge to:

- capitalize on the strength of collaborations in Bridgeport, and
- Challenge leaders to provide transparent stewardship of the funds invested in their youngest residents.

This *UPDATE to Bridgeport's Blueprint for Young Children* removes silos from the service delivery system, prioritizes achievable strategies identified by the community, and defines the measures that will be used to evaluate our progress.

To that end, BAYC leadership, Leadership in Action (LAP) participants, the myriad of providers who volunteer their expertise, and hundreds of parents are committed to the use of results-based accountability (RBA) and Community Decision Making.

The Planning Process

In January, 2008, the Bridgeport Alliance for Young Children (BAYC) received a capacity grant from the Governor's Cabinet on Early Childhood, the Department of Education and the William Caspar Graustein Memorial fund to refine the 2006 *Blueprint for Young Children* into a 3-5 year Community Plan. The volunteer leadership from BAYC embarked upon an eighteen-month planning process that included three citywide leadership meetings ("All-BAYC Meetings") and focus groups at each of the Family Resource Centers (Cesar Batalla School, Dunbar School, Roosevelt School, and Waltersville School). BAYC leadership also hosted a Parent Conversation followed by a presentation of preliminary strategies and sought feedback at a District PAC meeting and the Parent Convention.

The BAYC Health & Development Work Group assembled indicator data and collected input from parents and medical professionals on the gaps in health care for Bridgeport's young children and their families and recommended priorities for improvement. The leadership met with five parent groups in locations across the community and with providers at the city's two community health centers and other health practitioners, conducted a survey with medical professionals at Bridgeport Hospital, and hosted a meeting to finalize the *UPDATE* health priorities.

The other work groups (Families Empowering Families, Early Care & Education and Awareness & Advocacy) reviewed the existing *Blueprint*, considered current conditions, and tracked progress in implementation in their process of identifying headline indicators and strategies for the *UPDATE*. The document is a true *community plan* that has received input from more than four hundred parents, city leaders, and providers from all fields – medical and mental health, education, social services, and not-for-profit agencies dedicated to improving the quality of life in Bridgeport.

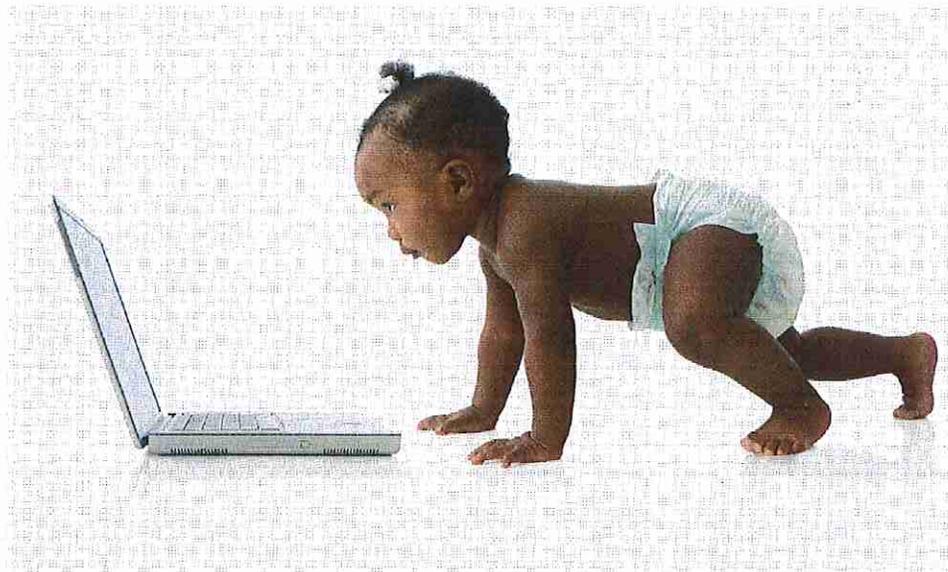


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I. Overview

The first eight years of life are a time of rapid development and great importance: a child's early experiences have been shown to affect significantly the quality of his or her adult life. The Bridgeport community – as parents, caregivers, teachers, service providers, business and faith-based leaders, and community members – continues to come together in united action to protect our young children from harm; nurture their physical, mental, and emotional health; and prepare them for success in school and life.



Approximately 11,000 Bridgeport families have children ages 0-8. While these families have numerous strengths, many also face challenges that affect their ability to prepare their children for success. These challenges include poverty, low levels of parental education, single-parent households, maternal depression, domestic violence, and a primary home language other than English. Racial and ethnic minorities in Bridgeport bear an uneven share of these burdens. In the presence of these challenges, children face greater risks of poor health, delayed development, and low educational achievement.

An **UPDATE to Bridgeport's Blueprint for Young Children (UPDATE)** presents the road map to address the challenges facing our young children and their families and create the community we want: a place in which **all Bridgeport children, birth to age 8, will be safe, healthy, and ready to fulfill their potential.** We can only achieve this ambitious result with the full support of the Bridgeport community.

The *UPDATE* promotes the safety, health, and readiness of Bridgeport's children by focusing on four strategic areas:

1. **Families empowering families** with the information, supports, and skills needed to encourage their children's success;
2. Ensuring the physical, and social-emotional **health and development** of young children and their families;
3. Providing equal access to high-quality community- and school-based **early care and education** programs to all Bridgeport children; and
4. Mobilizing the Bridgeport community behind efforts to support its youngest residents through **awareness and advocacy** strategies.

The Bridgeport Alliance for Young Children (BAYC) will provide the leadership needed to pull together these efforts and drive the success of the *UPDATE*. BAYC is a collaborative of parents, residents, elected officials, and providers whose vision for Bridgeport is that of a strong community with the resources and commitment to nurture successful children.

To measure our progress in producing children who are safe, healthy, and ready for school over the next five years, an annual progress report will regularly track the following headline indicators of our success:

- The percentage children with chronic absenteeism
- The rate of children substantiated as abused or neglected

- The % of children 0-8 enrolled in HUSKY who receive their well-child visits as recommended by the American Academy of Pediatrics
- The % of children who receive mental health services compared to the estimated community need
- The % of 3rd grade students at or above proficiency on each domain of the Connecticut Mastery Test (CMT)
- The % of Kindergarten students above standard on the January Developmental Reading Assessment (DRA)

Since the development of the *Blueprint for Young Children* in 2006, significant progress has been made on behalf of Bridgeport children and families. Implementing the *UPDATE* will strengthen existing child and family-serving systems, create new supports where needed, coordinate our work across Bridgeport for greater impact, and sustain measurable progress over the long term. The document describes a community-driven implementation approach that will guide our work together over the next five years.

Whether you are a parent, service provider, or community member concerned about our children and our community, we encourage you to read on to learn more about our plan to nurture safe, healthy Bridgeport children who are ready to reach their potential. More importantly, we encourage you to join us in working to make our vision a reality!

II. Governance Structure



The development of young children does not occur in isolation. The work of nurturing young children and their families, especially in a community as complex as Bridgeport, requires a holistic approach to supporting healthy social-emotional, physical, and cognitive development. The Bridgeport Alliance for Young Children exists to support the success of young children in Bridgeport.

The Membership

The “Membership” of BAYC is open to all individuals, active and/or interested in addressing the challenges of Early Childhood in Bridgeport and termed “Members.” Members are asked to sign an *agreement to collaborate*. BAYC will host a minimum of two (2) All-BAYC Member meetings each year. The first meeting will be held to present and affirm by consensus the work plan for the year. The second will be used for progress reports.

BAYC is headed by the **Child and Family Council**, with confirmation from the original conveners, the Mayor of the city of Bridgeport, the Superintendent of Schools, and the President and CEO of the United Way of Coastal Fairfield County, are empowered to ensure comprehensive services and supports for all of Bridgeport’s children and their families. As an essential component of an Early Childhood System of Care, the Council operates within the larger BAYC structure to provide the logical connection among common stakeholders and act as the mechanism that “connects the dots” between local, state and federal services. Council membership includes decision-makers at the highest level within the city who have the ability to leverage systems changes., a representative of the Parent Leadership Council, the co-chairs of the four work groups, and members of the community who are recommended by a Council member. The Council is empowered by the Membership to:

- Develop guidelines and supports for successful implementation of the *UPDATE*;
- Provide a forum for communication across providers and sectors that eliminates silos;
- Guide the development of comprehensive, family-driven, individualized supports for families;
- Define a continuum of support services for Bridgeport families and children – physical and mental health, social and emotional development, early care and education, and family supports;
- Define roles, responsibilities, and referral protocols among multiple providers;
- Identify system issues and opportunities for service quality improvement, make recommendations and/or assign responsibility for developing action plans to address them;
- Track State actions and policy to ensure Bridgeport’s voice is heard.

The **Management Team** represents the Membership between meetings of the Child and Family Council and is responsible for: co-coordinating Work Group activities, revenue generation and expenses, approving BAYC policy, representing BAYC to the public, and supervision of BAYC staff. Members of the Executive Committee include the BAYC Co-Chairs elected at the Annual Meeting, co-chairs of each work group, representatives designated by the PLC, and “community partners” nominated by any BAYC member. BAYC staff includes a part-time BAYC Coordinator and a part-time Kindergarten Transition Coordinator.

Two additional BAYC committees act in an advisory capacity. The first, **Leadership Advisors**, includes those community leaders who cannot make a commitment to the Child and Family Council but are willing to share their expertise with the Council. The second, a **Parent Leadership Council (PLC)**, consists of parents representing the District PAC, School Readiness PACs, Head Start, and volunteers. The PLC will advise the child and Family Council on matters affecting families. The PLC meets quarterly to review the data collected to assess the progress of the *UPDATE* and measure “how well we’re doing” and “who is better off.”

III. Strategic Plan

The BAYC *UPDATE* for promoting the safety, health, and readiness of Bridgeport's young children is organized into four strategic areas (and four corresponding work groups):

- a. Families Empowering Families
- b. Health and Development
- c. Early Care and Education
- d. Awareness and Advocacy

BAYC Accountability Process

Using the framework of "Results Based Accountability," the *UPDATE* describes the results we want to achieve, designates responsibility for achieving those results, and specifies how we will track our progress using our overall "Population Result" and six "Headline Indicators." Strategies were chosen to "turn the curve" toward positive outcomes on these measures. For each strategy, performance measures have been developed track how much has been accomplished, how well the work has been done, and if anyone is better off as a result.

The original *Bridgeport's Blueprint for Young Children* will remain a reference for detail about Bridgeport demographics. "Understanding the Challenges in Bridgeport," found on pages 7-10 of the *Blueprint* presents a detailed picture of life in Connecticut's largest city. (*Bridgeport's Blueprint for Young Children*, may be found on the BAYC website, www.baycbridgeport.org.)

BAYC is grounded in a data-driven approach under which we regularly review our progress to ensure that our investments lead to results. The Executive Committee will work with the Parent Leadership Council, the Collaborative and each work group to develop a regular progress reporting system. All initiatives and programs incorporate strong data collection and evaluation practices to support continuous improvement. To strengthen our long-term capacity to track progress, BAYC has also created a "data development agenda" that includes collaboration with the Norwalk Early Childhood Council to identifies measures that are common to both city's community plans. The data needed to successfully measure the progress of the *UPDATE* is identified in the Implementation Plan on pages 26-31.

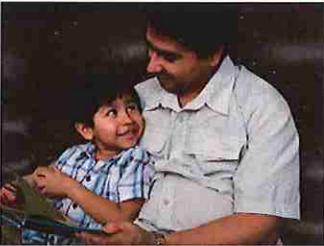
BAYC will present progress reports at annual All-BAYC meetings and through our web site to allow all partners and the wider community to review our directions, strategies, and progress. However, the real success story will be about children who are safe, healthy and ready to fulfill their potential.



Families Empowering Families

We will measure success by tracking:
The % of children with chronic absenteeism

The rate of substantiated cases of abused or neglected children

Strategies	Strategic Objective	
	<p>Increase parent awareness of their role as their child's first teacher and participation in programs to fulfill this role</p>	<p>All parents and caregivers will be empowered with information, family-centered, family-driven support and skills needed to ensure that they are their children's first and most effective teacher</p>
	<p>Increase opportunities for parents to expand the skills & knowledge that will support their child's engagement, attendance, and success in school</p>	
	<p>Increase the availability of services and information offered in multiple languages</p>	
	<p>Increase parent participation in leadership roles in the community</p>	

Families Empowering Families

Change We Want To See:

All parents and caregivers will be empowered with information, family-centered, family-driven support and the skills needed to ensure that they are their children's first and most effective teacher.

The importance of families in the healthy development of young children is no secret. Many of Bridgeport's 11,000 families with children ages 0-8, however, face challenges that affect their ability to prepare their children for success in school and life.

- More than 95% of children are eligible for free and reduced-price lunch (<185% of federal poverty level) and 16% of families were living below the federal poverty level in 2000
- Approximately 5,000 families with children 0-8 are headed by single mothers and more than 25% of families of children 0-8 are headed by mothers who have not completed high school
- 45% of children come from homes with a primary language other than English
- Substance abuse and drug-related arrest rates are much higher in Bridgeport than in the rest of the state

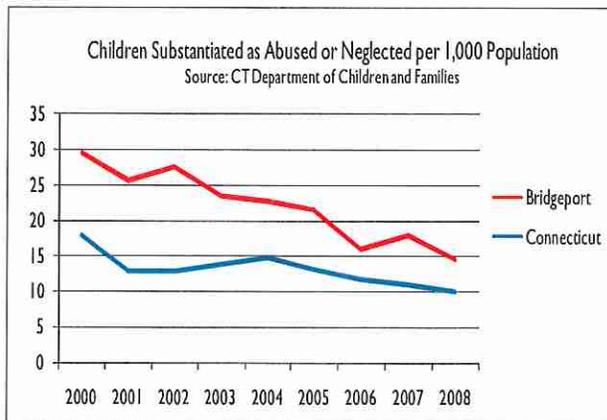
Families Empowering Families Indicator #1:

The percentage of kindergarten through 3rd grade students with chronic absenteeism



The Story Behind the Baseline:

Regular school attendance is essential for learning, and research has demonstrated a correlation between poor attendance in preschool and a lack of school readiness. The CT Commission on children highlights the value of parental involvement and positive outcomes for children, including better attendance. Parents and caregivers impact their children's attendance based on their understanding of the importance of preschool and school, cultural factors, and the level of stress under which the family lives their lives due to poverty, health and behavioral issues. The 2006 attendance data for Bridgeport schools shows an average attendance rate of 96.8 which is comparable to the state average attendance rate. However, five schools have an average attendance of 94.3%, well below the state average.



Families Empowering Families Indicator #2:
The percentage of substantiated cases of abuse or neglect in Bridgeport.

The Story Behind the Baseline:

The rate of substantiated abuse or neglect cases in Bridgeport has been cut in half since 2000. Despite this significant progress, the abuse and/or neglect rate in Bridgeport remains nearly 50% higher than the state rate. The possibility that the drop in the substantiation rate indicates only a drop in reporting suggests the need for

heightened vigilance by mandated reporters. Child abuse is linked to poverty, low parenting and coping skills, substance abuse, maternal depression, and domestic violence, all of which increase the risk of abuse and neglect. The community must continue to come together in a coordinated fashion to help families develop their strengths in terms of employment, economic assets, health, and parenting and coping skills. The community has many resources already devoted to this work that can be coordinated for increased impact.

Current Efforts

Bridgeport is already teeming with programs and initiatives to involve parents and other family members in their children's development through Family Resource Centers, school-based parent engagement, and social service agencies. Active parent engagement programs include:

The **Parent Leadership Training Institute (PLTI)** helps parents become leading advocates for children. PLTI is a 20-week course that also has a mirror program for children (CLTI).

People Empowering People (PEP) is an innovative program designed to build on strengths of adults and teens. PEP recognizes the unique strengths, life experiences and capacities of each person. PEP, conducted in Spanish, emphasizes the connection between individual and community action.

Community Messengers, sponsored by BAYC, is a project that trains volunteers to connect their neighbors with the agencies and available services. The Fairfield County Community Foundation – Donor Advised Fund, the Southern Connecticut Gas Company and William Caspar Graustein Memorial Fund provide funding for the program.

Lee y serás® (read and you shall be) is a national program sponsored by Scholastic that empowers Hispanic parents in their role as their child's first teacher. The program is funded by ABCD, Inc. and the Adrian Kirby Family Literacy Program.

Continuing and building on these activities and other parenting programs provided through the BAYC partner agencies will help Bridgeport families raise children who are safe, healthy and ready to fulfill their potential.



Families celebrate completing the 2009 Lee y serás with volunteer Julio Reinoso holding the piñata for one of the young children.



Presenters and volunteers for Community Messengers cross-training

How We Will Get There

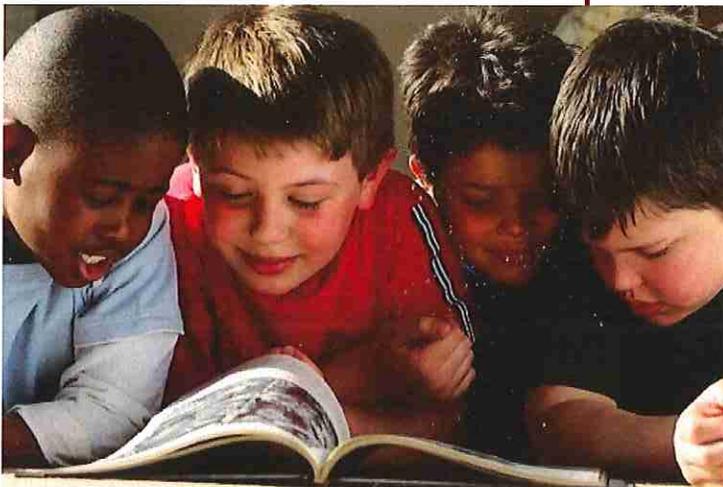
The Families Empowering Families Work Group serves as the parent and family involvement arm of BAYC. The Work Group identified and has immediately started implementing its priority goal to increase parent and family participation within BAYC. Over the next three years, the Work Group will:

1. Increase parent awareness of their role as their child's first teacher and participation in programs to fulfill this role

- Continue transportation, child care and meal assistance for existing programs linked with BAYC. BAYC will ensure these services, which are crucial to family participation, continue to be offered and are expanded to additional programs.
- Increase parent awareness via multiple communication methods, such as email, to: 1) reach families not currently participating in programs, and 2) increase the participation of currently engaged families.
- Use Community Messengers to increase the involvement of families (including families of children with special needs). Community Messengers will provide parents with ways to access information about services available in Bridgeport.
- Develop mechanisms with providers to document offerings and track participation.
- Offer staff training/professional development opportunities focused on family participation.
- Develop manuals to provide agency staff with knowledge of basic program resources to enable them to help families link to services within organizations and throughout the community.

2. Increase opportunities for parents to expand the skills and knowledge that will help support their children's engagement, attendance, and success in school.

- Offer information sessions and workshops on parenting.
- Offer opportunities for parents to train other parents.



3. Increase the availability of services and information offered in multiple languages

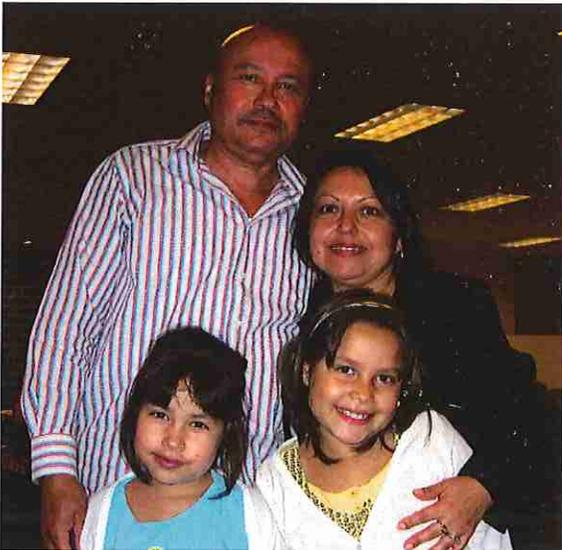
- Assess language resources available within the community through a partnership with the International Institute.
- Provide networking opportunities for program staff to share information and build relationships regarding multiple language programs and practices.
- Offer program documentation and programs (such as GED programs and parenting classes) in primary languages other than English.
- Offer programs and program documentation in multiple languages. BAYC will partner with public libraries and volunteer organizations to offer resources in low-cost locations.

4. Increase parent participation in leadership roles in the community, including BAYC

- Change meeting times and locations and provide child care during BAYC work group and Parent Council meetings to make it easier for parents to participate.

Partners and Resources Needed

The time and effort of partners identified by the Work Group will be the most important resource needed to support this work. Many of our primary partners are already involved in BAYC, including the Bridgeport Board of Education, the City of Bridgeport, the School Readiness Council, local colleges and universities, the United Way of Coastal Fairfield County, the Bridgeport Public Library, the International Institute, and Family Resource Centers.



Miriam Egea, 2009 Parent Leadership Training Institute graduate, with her family.

Additional Partners Needed:

Head Start Parent Council
The Parent Center
Parent Leadership Training Institute (PLTI)
and PLTI Alumni
Family Support Centers
ASPIRA
Hispanic Business Council
Greater Bridgeport Latino Network
RYASAP
Federally Qualified Healthcare Centers
National Network of Partnership Schools
Faith-based institutions

Health and Development

We will measure success by tracking:

The % of children 0-8 enrolled in HUSKY who receive their well-child visits as recommended by the American Academy of Pediatrics.

The % of children who are receiving mental health services compared to the estimated community need.

Strategies	Strategic Objective
	<p>Ensure comprehensive health care in Medical and Dental Homes with care coordination and implementation of HUSKY requirements</p>
	<p>Increase systematic and comprehensive screening for young children and their parents in multiple community-based programs and settings</p>
	<p>Enhance Bridgeport Early Childhood System of Care capacity to provide comprehensive, integrated services for children and families identified with multiple needs</p>
	<p>Increase and improve mental health treatment services for young children and their families</p>
	<p>Secure support for Medicaid reimbursement for essential services and increased Medicaid rates for all primary care providers and specialists</p>
	<p>Increase the percentage of children who have healthy diets and adequate physical activity</p>

All Bridgeport children, birth to 8, will have comprehensive, family-centered health care, including medical, dental and vision preventive care and treatment.

All children's social-emotional and developmental issues and family risks will be identified and addressed.

Health and Development

Changes We Want To See

1. **All Bridgeport children birth to age 8 will have comprehensive, family-centered care, including medical, social-emotional health, and dental preventive care and treatment**
2. **Vulnerable families will be identified and connected to resources and services to reduce the level of stress on their children**
3. **Children will have healthy diets and adequate physical activity**

Recent research shows that the first years of life are a time of tremendous brain growth, and that a child's early experiences profoundly impact his or her development and ability to succeed in school. Research also highlights the importance of a dynamic, nurturing home, school, and community life for young children.

- By three years of age, at least 80% of brain growth has occurred. Children who are not touched, stimulated, or played with have brains which are 20-30% smaller.
- 94% of children found to be lagging in health, socio-emotional, and/or cognitive development at entry to Kindergarten have physical and mental health-related issues.
- High levels of environmental (or "toxic") stress in early childhood associated with poverty, maternal depression, domestic violence and other issues can lead to lifelong problems in learning, social-emotional and behavioral health, and physical health.

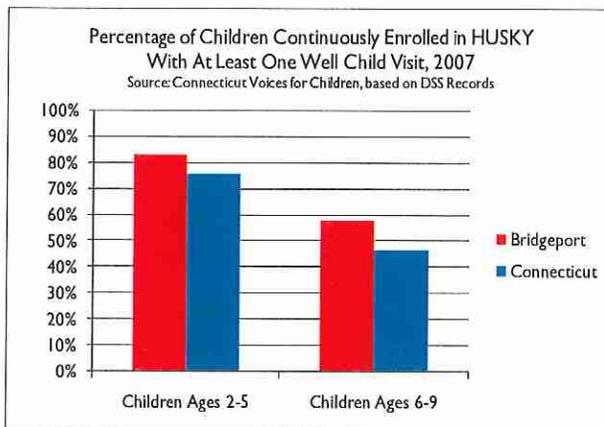


Children confronted by these environmental risks face higher chances of poor health and delayed development. Data show that Bridgeport children – particularly those from black and Hispanic families – face significant health and development issues.

- Over 1 in 5 pregnant women have late or no prenatal care
- One in 10 Bridgeport babies is born with low birth weight and at risk of developmental delays
- An estimated 1 in 5 children has serious social or emotional issues
- One in 4 Bridgeport school children are obese
- Despite the fact that HUSKY includes dental benefits, only 1 in 3 HUSKY children receives routine dental services annually. ORBIT's Give Kids a Smile program grew from 86 children in 2007 to 200 children (with 100 on a waiting list) in 2008.

Health & Development Indicators:

- The % of children 0-8 enrolled in HUSKY who receive their well-child visits as recommended by the American Academy of Pediatrics.
- The % of children who are receiving mental health services compared to the estimated community need.



The Story Behind the Baseline: In 2007, 83% of Bridgeport children ages 2-5 and 58% of Bridgeport children ages 6-8 continuously enrolled in HUSKY received a recommended well-child visit – above the statewide rate for these age groups. Bridgeport must build on its success in this area to continue to work towards all children in these age groups receiving their recommended visits.

Well-child care, a requirement for a health provider to serve as a true “Medical Home,” supports children’s growth and develop-

ment, assists early identification of health problems including poor nutrition and obesity, and reduces the need for emergency care or more costly services. Health coverage is a crucial element of the Medical Home model, although many children in families covered by HUSKY miss their well-child visits due to family issues (lack of knowledge, scheduling challenges) and/or barriers to access (lack of transportation, need for child care for other children).

While some parents are quite pleased with their children’s health care, other parents, especially those who are low-income and on HUSKY, question whether they are getting the same quality of care as those with private insurance.

Early childhood mental health is a field that has grown exponentially in the past two decades. Until relatively recently, mental health problems in infants and young children were largely unrecognized and rarely were treated¹. Yet, 15% to 20% of young children are now estimated to have significant social-emotional or behavioral problems and rates are approximately double in children living in impoverished environments². In Bridgeport, providers estimate that only 2% of the community need for mental health services is being met.

Improving performance on the indicators can be achieved by ensuring that families have health coverage and working with providers to reduce barriers to access, as well as supporting those efforts to adopt and expand promising practices.

¹ Horwitz, Gary, Briggs-Gowan, & Carter, 2003.

² Briggs-Gowan, Carter, Skuban, & Horwitz, 2001.

Here’s what parents Bridgeport parents have told us...

“I wish that when we walk into the doctor’s office, they didn’t care what color you are, what language you speak or what card you carry. I want to be listened to; my doctor brushes me off.”

Mrs. C.

“Parents who speak another language are afraid to say anything to the doctor.”

Mrs. S.

“I wish we had better access to pediatricians, specialists, dentists, eye doctors.”

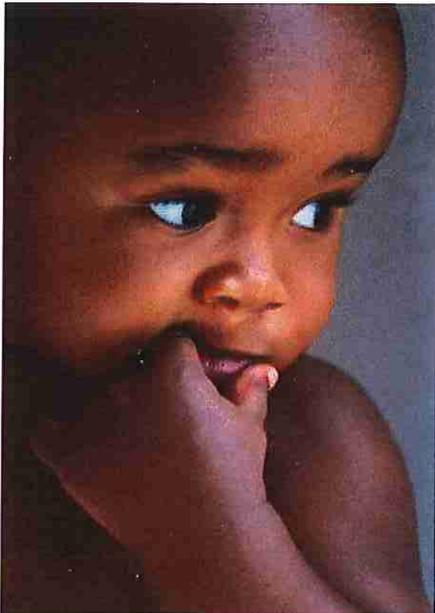
Mrs. P., a parent on HUSKY

“If I had private insurance, the whole experience would be different.”

Three parents

Current Efforts

The good news is that a consistent, nurturing relationship between a parent and young child and access to comprehensive medical, dental and mental health care can reduce the effects of environmental stressors. BAYC recognizes the need for a holistic approach and a comprehensive set of health and developmental services to support children's healthy social-emotional and physical development and to assist parents in raising healthy children. The *UPDATE* builds on Bridgeport's existing health and development systems and their work to connect across partners. Providers and the City are coming together in various ways to provide services to address young children's social-emotional health, family stressors, health care access, child asthma, childhood obesity, immunizations, oral health, and lead exposure. These efforts include but are not limited to:



- The Bridgeport Health and Social Services Department has taken the lead in mobilizing community members and providers to address asthma, adult diabetes, chronic diseases, community nutrition, women, children, and family nutrition (WIC), early prenatal care through Healthy Start, lead poisoning, and community physical activity
 - The Primary Care Action Group brings together Optimus Health Care and Southwest Community Health Center, Bridgeport Hospital and St. Vincent's Medical Center, Bridgeport Health Department, AmeriCares Free Clinic, Fairfield County Medical Association, Southwestern Area Health Education Centers (AHEC) and Bridgeport Child Advocacy Coalition (BCAC) to address health care for the uninsured in greater Bridgeport.
 - The Children's Health Task Force and HUSKY Outreach Collaborative, under the leadership of the Bridgeport Child Advocacy Coalition (BCAC), work to ensure access to quality, affordable health care for all children and their parents.
-
- Child FIRST, the lead agency for Bridgeport's early childhood System of Care, has worked collaboratively to expand screening and consultation for maternal depression, psychosocial risk, and emotional and behavioral problems at Bridgeport Hospital, multiple early care and education classrooms, primary grades, and Family Resource Centers. Child FIRST continues to expand home-based psychotherapeutic intervention and care coordination for the most vulnerable children and has served as a model for other communities.
 - The ORBIT Oral Health Collaborative has expanded access to dental services by engaging dentists to serve HUSKY children and children with no dental insurance and advocating for oral health education and access to care locally and statewide.
 - Southwestern AHEC has increased compliance with recommended immunization schedules by supporting local pediatric and family practices to track childhood immunizations through the CT Immunization Registry and Tracking System (CIRTS).

How We Will Get There

BAYC will support community efforts to build on the momentum these and other efforts have created for Bridgeport's children and families in recent years and by collaborating on these top priorities:

1. Ensure comprehensive health care in Medical and Dental Homes with care coordination and implementation of HUSKY requirements

- Ensure that all children and their parents have health coverage, and those who are eligible are enrolled in HUSKY and benefit from full implementation of EPSDT (Early Prevention, Screening, Diagnosis and Treatment) requirements through monitoring, improved reimbursement, and provider training.
- Promote Medical Home principles and self-assessment and practice improvement processes across all Bridgeport providers to provide health services that are accessible, continuous, coordinated, comprehensive, family-centered, and culturally competent. This will increase the percentage of children covered by HUSKY who receive their recommended well-child visits.
- Provide care coordination so families are able to connect with a comprehensive array of services and supports to meet the needs of both their children and family.
- Promote the Age One Dental Visit and the establishment of a Dental Home for children through an increase in the number of dentists accepting HUSKY.



2. Increase systematic and comprehensive screening for young children and their parents in multiple community-based programs and settings

- Work with providers to institute systematic screenings in pediatric and early care and education settings (developmental, social-emotional, environmental risk, hearing, vision, oral health) family centers, and within the CT Department of Children and Families (DCF).

3. Enhance Bridgeport Early Childhood System of Care capacity to provide comprehensive, integrated services for children and families identified with multiple needs

- Secure sustained resources to continue and expand the Child FIRST model of comprehensive developmental, social-emotional, and risk assessments, home-based mental health services, and care coordination to help families obtain services through BAYC Child and Family Collaborative partners.
- Increase the availability of mental health consultation to both early childhood and adult providers.

4. Increase and improve mental health treatment services for young children and their families

- Ensure that every child served by DCF receives appropriate mental health services, including access to therapeutic foster care.
- Advocate for a change in Birth-to-3 policies to include mental health services for children with emotional/behavioral difficulties.

5. Secure support for Medicaid reimbursement for essential services and increased Medicaid rates for all primary care providers and specialists

- Work with legislators and state level advocates to increase HUSKY reimbursement rates. This will ensure access to primary care and specialists for children on HUSKY, as well as coverage for screening, assessment, care coordination, mental health and developmental consultation, mental health treatment in the home and non-traditional settings, and other specialty services. Increasing reimbursement will improve access to care and therefore increase the percentage of children covered by HUSKY who receive their recommended well-child visits.

6. Increase the percentage of children who have healthy diets and adequate physical activity

- Design and implement a comprehensive citywide initiative on healthy eating and exercise.
- Provide education and training to licensed and informal child care providers to increase the percentage of early care programs that meet national and state standards for exercise and nutrition.
- Increase access to healthy foods by ensuring that all eligible children and their parents participate in WIC and food stamps (SNAP).

Partners and Resources Needed

Bridgeport has an impressive array of health and development services that have been engaged in BAYC planning processes. Through the BAYC Child and Family Collaborative, we must now connect these services and make sure all partners – doctors, health centers, early care centers, and neighborhood agencies – are fully aware of services and how to access them. Additional resources will be needed to address specific service gaps as they are identified.

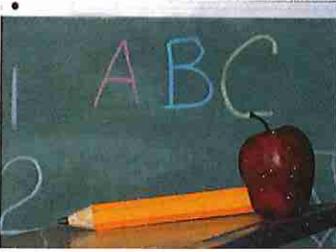


Early Care and Education

We will measure success by tracking:

The % of 3rd grade students at or above proficiency on each domain of the Connecticut Mastery Test (CMT)

The % of Kindergarten students above standard on the January Developmental Reading Assessment (DRA)

Strategies	Strategic Objective	
	<p>Expand and improve professional development for Early Care and Education staff to improve program quality and increase student readiness for school upon entering Kindergarten</p>	<p>All Bridgeport children, birth to 8, will have equal access to high quality community-based and school-based early care and education programs.</p>
	<p>Expand efforts to improve program quality</p>	
	<p>Implement a Pre-K-3 Literacy Plan that aligns curricula and integrates current efforts across schools and community preschool sites</p>	
	<p>Expand the supply of infant/toddler and preschool slots to meet community needs</p>	
	<p>Help children with no preschool experience successfully transition to Kindergarten</p>	

Early Care and Education

Change We Want To See:

All Bridgeport children age birth to 8 will have equal access to high-quality community- and school-based early care and education programs.

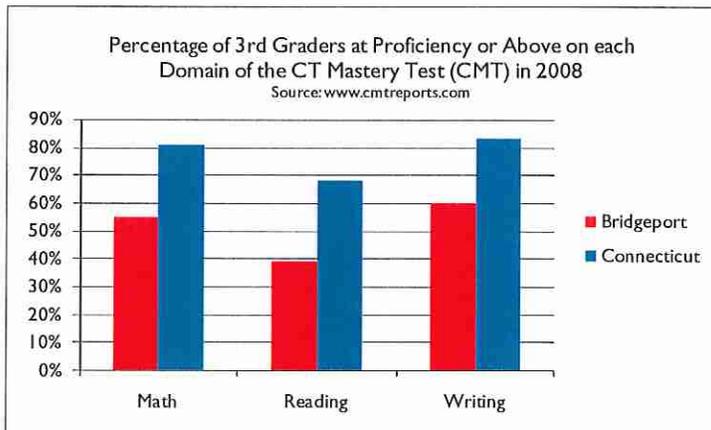
To be fully prepared for school success, young children must be healthy and enjoy nurturing home environments. To produce children who are ready to learn when they enter Kindergarten, it is also critical to ensure universal access to affordable, high-quality early learning experiences. Expanding access to high-quality early care and education will put Bridgeport children on a path to success in school and life. Bridgeport has made significant advances in promoting school readiness in recent years, but room remains for further improvement.

- The percentage of Kindergarteners with a preschool experience increased from 61% in 2002 to 73% in 2008, but more than one in four Bridgeport Kindergarteners still has no preschool experience.
- In 2008, 29% of Kindergarten students easily demonstrated literacy skills on Connecticut's Kindergarten Inventory, up from 21% in 2007. Still, 30% of Bridgeport children had difficulty demonstrating literacy skills in 2008.

Early Care and Education Indicator #1:

The percentage of 3rd grade students at or above proficiency on each domain of the Connecticut Mastery Test (CMT)

The Story Behind the Baseline:



Bridgeport 3rd grade students lag behind their Connecticut peers in terms of achieving proficiency on the CMT in math, reading, and writing (see chart). Almost 40% of Bridgeport's early childhood population speaks a language other than English at home, placing limits on school success.

Addressing issues including poverty, single-parent households, low levels of parental education, and teen pregnancy requires action from all sectors of the

community. The early childhood education community will do its part to improve our young children's academic performance by focusing on expanding the supply of high-quality early childhood education experiences available to children and families. Other BAYC partners are addressing family and health issues. The Bridgeport Public Schools will continue their work to improve curriculum and instruction in grades K through 3. Pages 7-10 of the *Blueprint* (found at www.baycbridgeport.org) provide further insight into the City's racial and ethnic diversity and the risk factors associated with children meeting expected educational and development goals.

Early Care and Education Indicator #2:

The percentage of Kindergarten students above standard on the January Developmental Reading Assessment (DRA)

In January 2009, 66% of Bridgeport Kindergarteners were assessed as “above standard” on the DRA, up from 57% in January 2008. Kindergarten DRA scores represent one indicator of young children’s readiness for school success upon beginning school.

The Story Behind the Baseline:

School readiness is a reflection of the richness of children’s early home and preschool environments. Continued improvement on Kindergarten DRA scores will require:

- 1) Increasing the supply of ECE slots– Bridgeport has increased the number of SR slots from 1100 to 1500 over the past 3 years. The School Readiness Council estimates an additional 600 children do not have a formal pre-K experience before entering Kindergarten.
- 2) Increasing utilization of these slots– Bridgeport has maintained a 97% utilization of the allocated SR slots and 100% of Head Start slots. An outreach staff person has been working to identify children who do not have formal pre-K experience before entering Kindergarten.
- 3) Increasing the quality of new and existing programs.

Current Efforts

The *UPDATE* builds on numerous efforts to improve early care and education (ECE) quality, expand the supply of quality programs and improve access to them, and help children successfully transition to Kindergarten and succeed in elementary school.

Existing Bridgeport ECE initiatives include:

- Drive toward expansion and 100% utilization of School Readiness, Head Start and Early Head Start slots.
- High-quality professional development for ECE staff, delivered by a wide range of organizations.
- Program quality improvement efforts, including support for assessment and accreditation.
- Kick Off to Kindergarten, a summer program to help prepare children with no preschool experience for Kindergarten.
- Kindergarten transition activities, including individual school plans, parent information sessions, and professional development for preschool and Kindergarten teachers.
- Implementation of the Total Learning Initiative, a comprehensive model of educational and social support for children birth to nine and their families. This public-private partnership successfully combines physical, arts/music, cognitive, and linguistic programming with early intervention and family support services to reduce the achievement gap.
- Implementation of Early Reading First, which provides training and other supports in early literacy to directors and teachers in community preschool settings with documented positive results.

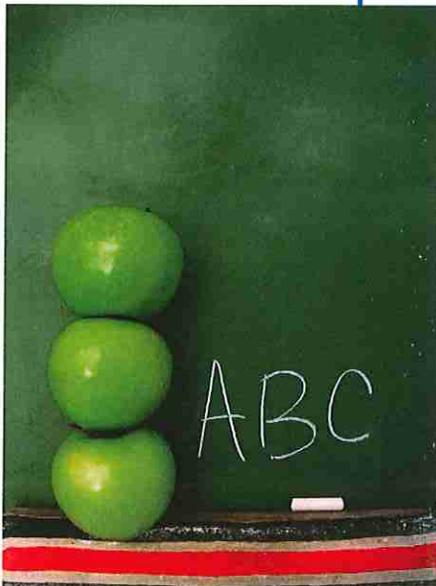


- ECE course offerings at Housatonic Community College (HCC) have expanded in recent years. The College has added several courses for administrators so they may get their Directors Credential and recently added courses such as Creative Experiences and Behavior Management in the required curriculum for ECE associate degree program.
- Development of an early childhood education BA program in Bridgeport through a partnership with Wheelock College that allows ECE graduates from HCC to stay in Bridgeport to receive a Bachelors degree in Human Development with additional courses in early childhood, education, diversity, and community relations.

These and other efforts have proven effective. In 2007, The School Readiness Council, Leadership in Action Project, and Bridgeport Department of Early Childhood partnered to assess four-year olds in formal preschool programs across the city. Twenty-two percent (22%) of Bridgeport children were found to need a large degree of additional instructional support in literacy when assessed in October; that percentage dropped to 8% in May, validating the impact of a formal prekindergarten program.

How We Will Get There

Through the leadership of the BAYC Early Care and Education Work Group and School Readiness Council (SRC), the *UPDATE* will support ECE programs with the following five strategies:



I. Expand and improve professional development for Early Care and Education staff to improve program quality and increase student readiness for school upon entering Kindergarten

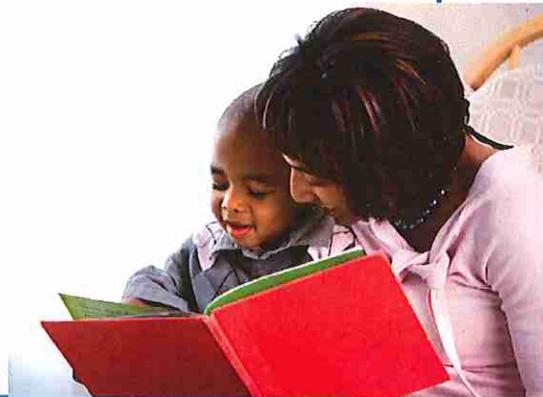
- Increase access to professional development by publicizing educational opportunities at monthly School Readiness Council and Provider Network meetings. As a result of ECE Work Group planning sessions, Bridgeport Public Schools will open its ECE workshops to all preschool teachers (including family day care teachers).
- Identify and follow-up with ECE teachers who do not complete education programs, including Child Development Associate Certificates (CDA) and Associate's degree programs. The Work Group will collect data that assess the extent of the problem and develop strategies for early identification and follow-up with teachers who do not complete programs.
- Provide joint professional development to ECE and Kindergarten program staff to improve Kindergarten transition. Head Start Kindergarten Transition Plans provide a model to help students transition to Kindergarten. To better prepare preschool students, Bridgeport Public School staff will also conduct professional development at Provider Network meetings on district expectations for Kindergarten students.

2. Expand efforts to improve program quality

- Train ECE program directors on the use of the Early Childhood Environment Rating Scale (ECERS) to improve program quality across seven categories: (1) personal care routines, (2) space and furnishings, (3) language-reasoning, (4) activities, (5) interactions, (6) program structure and (7) parents and staff. School Readiness staff will provide technical assistance to program staff on actions teachers can take to improve quality in each category.
- Increase parent awareness of ECE program quality with the BAYC Awareness and Advocacy Work Group to ensure that Bridgeport's public awareness campaign helps parents identify quality programs (e.g., what to look for when visiting a center or family day care).

3. Implement a Pre-K-3 Literacy Plan that aligns curricula and integrates current efforts across schools and community pre-school sites

- Sustain and expand Total Learning model in more Bridgeport classrooms through federal and state funding streams.
- Sustain and expand Early Reading First grant-funded embedded coaching, professional development, and data team activities across more Bridgeport schools.
- Develop a community literacy plan that integrates efforts to improve curriculum, instruction, and assessment across all preschools and K-3 classrooms utilizing an embedded coaching model and engaging parents, community resources and partners. This will help all children achieve academic standards through third grade and beyond.
- Establish an ECE Community Literacy Center and Lab School to:
 - 1) train cohorts of teachers in sessions of varying duration with follow-up coaching
 - 2) provide parent and community literacy programming to ensure a comprehensive approach. Given the current economic climate, the Work Group will refine plans for the Center in Year 1, including financing strategies.

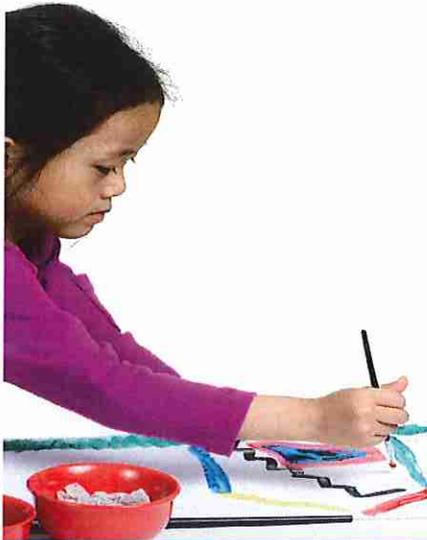


4. Expand the supply of infant/toddler and preschool slots to meet community needs

- Secure funding to support additional infant-toddler and preschool slots, including both operating support and capital support for construction. The supply of infant/toddler slots meets a small fraction of the demand due to the limited amount of Early Head Start and state subsidies. While there are 3,200 preschool slots available in Bridgeport, the community's 2009 Unmet Needs Report estimates a need and demand for 640 more slots, including 480 full-day slots.

5. Help children with no preschool experience successfully transition to Kindergarten

- Identify children with no preschool experience and ensure that all preschool slots are utilized.
- Expand Kick Off to Kindergarten. As part of the expansion of this successful pilot, Housatonic Community College (HCC) and the United Way will help existing ECE and Head Start programs offer a version of Kick Off to Kindergarten over the summer. Many of these programs experience decreased enrollment during the summer, and have space to serve more children. HCC will offer professional development and materials to implement the program's Doors to Discovery curriculum.
- Offer support for recent immigrants through a partnership with the International Institute to engage families whose children lack a preschool experience – through dissemination of wordless books to families (to promote reading in any language) and information on enrolling in preschool and Kindergarten (e.g., Kindergarten Book Bags).



Partners and Resources Needed

In addition to the continuation of funds already invested in these efforts, the primary resource required to implement these strategies is the time commitment of partners and agreement to share existing products, programs and resources. Many of the key partners identified for each strategy are already BAYC members and have committed to implement *UPDATE* activities.

Awareness and Advocacy

We will measure success in this area by tracking progress across all indicators

Strategies

Strategic Objective



Conduct a public awareness campaign on the importance of investing in early childhood and the resources available in the community



All local and state legislators will be aware of the importance of investing in early childhood and the investments needed in Bridgeport

The Bridgeport community will be fully informed and mobilized behind efforts to support improved outcomes for its youngest residents.

Awareness and Advocacy

Change We Want To See:

The Bridgeport community will be fully informed and mobilized behind efforts to support improved outcomes for its youngest residents.

Increasing awareness of BAYC strategies across family engagement, health and development, and early care and education will build broad public and legislative support for systems changes. Awareness of the importance of early childhood investments among all Bridgeport residents – parents, businesses, and faith leaders, as well as among local and state policymakers – is necessary to achieve a safe and healthy community with children ready to fulfill their potential.

BAYC supports Bridgeport's many current efforts to raise the awareness of legislators and the public through financial support, technical assistance, publicity, and the participation of BAYC member agencies and parents. BAYC (working through its partners in early care, health, and family support) represents the primary collaborative effort to raise awareness of early childhood issues among the general Bridgeport community. 211 Infoline, a free community resource phone line, is a primary resource along with the Bridgeport Public Schools Communication Director, school-based Family Resource Centers and neighborhood-based Family Support Centers.

The Bridgeport Child Advocacy Coalition (BCAC), a BAYC partner, works to raise the awareness of state and local legislators and mobilizes community members to advocate for policy and system changes. At the state level, BAYC is a member of the Connecticut Early Childhood Alliance (CECA), which advocates on behalf of children and families.

How We Will Get There

Many efforts to raise awareness of early childhood issues occur in Bridgeport, but an opportunity exists for a multi-pronged, coordinated public awareness campaign to communicate BAYC messages. The BAYC Awareness and Advocacy Work Group will – through partner agencies, parents, and volunteers – reach elected officials, community leaders, and residents with messages related to the importance of family and community action in a child's early years.

The Awareness and Advocacy Work Group must engage committed community members and early childhood providers to coordinate implementation of two overarching awareness and advocacy strategies:



Michele White, MSW, discusses health and development of children birth to age 8 at a District PAC meeting

1. Conduct a coordinated public awareness campaign to educate all sectors of the community on the importance of investing in early childhood and the resources available in the community.

2. Raise the awareness of all local and state legislators on the importance of investing in early childhood and the investments needed in Bridgeport.

Public Awareness Campaign

BAYC and its partners will target four specific populations with a coordinated public awareness campaign—

- 1) parents;
- 2) the business community;
- 3) the faith-based community, and
- 4) residents who do not have a child under age 18

Several components of the campaign will reach all audiences:

Maintain and enhance the BAYC website (in English and Spanish at www.baycbridgeport.org) with information about the importance of early childhood programs, and resources. BAYC staff will maintain this site with technical support.

Work with marketing professionals to design an integrated public relations campaign to deliver BAYC messages.

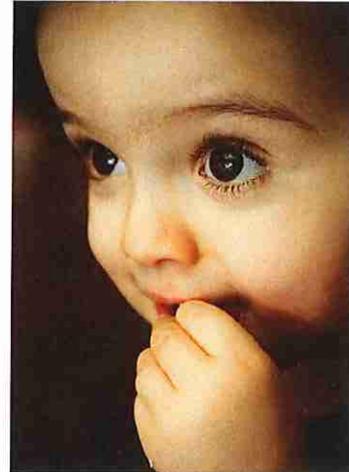
The Awareness and Advocacy Work Group will recruit marketing professionals to lend their time and talent to BAYC to design and effectively disseminate messages that support BAYC's mission.

Create a speakers bureau for presentations to clubs, organizations and leadership groups. A standard presentation which can be tailored for different audiences will highlight the Mission and work of the collaborative and include a call to action for individuals and organizations. BAYC members will deliver the presentation to various community audiences (civic and business groups, agency staff, and parent groups).

Parents are integral partners in the *UPDATE*. BAYC will continue to sponsor *Community Messengers*, a grassroots program to reach into all neighborhoods of the city. As representatives of BAYC, *Community Messengers* will distribute posters, brochures and flyers from partner agencies. BAYC will also continue its support of the many parent efforts already occurring in Bridgeport through a Parent Leadership Council. The business and faith-based communities will play important roles in the success of the *UPDATE*. BAYC will arrange meetings with business and faith leaders to present the



2009 Parent Leadership Training Institute graduates



UPDATE and discuss ways for these sectors to become involved in supporting BAYC's work – including serving on BAYC's Advisory Group.

Additional future responsibilities of the group will be to:

- Conduct customer (parent) satisfaction surveys
- Conduct community awareness surveys on available services and family-centered ideas

Legislative Advocacy

To raise awareness of the importance of early childhood investments among local and state legislators, BAYC will work in collaboration with BCAC and the CT Early Childhood Alliance through the following action steps:

Develop a “Core Group” of BAYC members to establish relationships with each member of the Bridgeport legislative delegation and other appropriate local and state officials. BAYC members will work diligently to build relationships with local and state elected and appointed officials to position BAYC as a recognized and respected voice for Bridgeport’s children and a “go-to” resource for questions on early childhood issues. BAYC will measure effectiveness of advocacy efforts by tracking progress of support on early childhood issues.

Provide issue “experts” from BAYC to brief legislators about specific topics. Ongoing relationships with legislators will be important, and BAYC will also provide data-driven evidence that proves the value of specific early childhood investments.

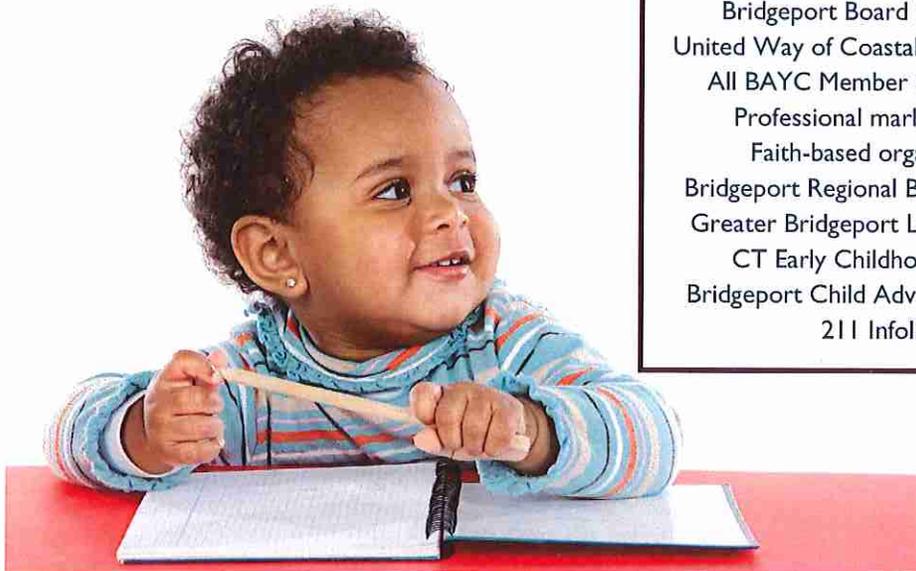
Develop a Bridgeport Advocacy Network in partnership with BCAC and the statewide CECA that can be pulled together as needed.

Partners and Resources Needed

The primary resources needed to advance these strategies include the time and talent of BAYC members and volunteers, BAYC staff support, and in-kind materials and production capacity. Unlike other BAYC work groups, the Awareness and Advocacy Work Group does not have a pool of dedicated professionals from which to recruit members. Work Group leadership therefore must be resourceful to identify concerned residents and professionals to support the awareness and advocacy strategies that will help ensure the achievement of all the goals of the *UPDATE*.

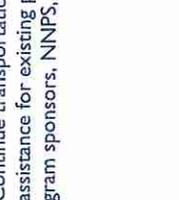
Partners and Resources Needed

Office of the Mayor and City Council
Bridgeport Board of Education
United Way of Coastal Fairfield County
All BAYC Member Organizations
Professional marketing firms
Faith-based organizations
Bridgeport Regional Business Council
Greater Bridgeport Latino Network
CT Early Childhood Alliance
Bridgeport Child Advocacy Coalition
211 Infoline



BAYC Implementation Plan for 2010-2015

Strategic Area I: Families Empowering Families

Strategy	Action Steps and Responsibility	Time Frame	Resources	Performance Measures
<p>1. Increase parent awareness of their role as their child's first teacher and participation in programs to fulfill this role</p> 	<p>Continue transportation, child care and meal assistance for existing programs / FRCs, Program sponsors, NNPS, Public Schools, PACs</p> <p>Increase program awareness via multiple communication methods including Community Messengers / BAYC</p>	<p>Ongoing</p>  <p>Annually</p>	<p>Low cost: Program budgets vary across agencies. Expenses for transportation, child care and meals is estimated at \$43 per participant per meeting.</p> <p>Low cost: Community Messengers - \$7,000 per year for 15 volunteers</p>	<p># families/parents reached with information about available programs & services</p> <p># of families/parents using services</p> <p>% parents/families completing programs</p>
<p>2. Increase the availability of services and information offered in languages other than English</p>	<p>Develop & implement process to document programs and track participation / BAYC Parent Council with partner agencies providing parent workshops and programs</p> <p>Offer diversity training for partner agency staff / Partner agencies</p>	<p>Jan-Mar 2010 then Ongoing</p> <p>Ongoing</p>	<p>No cost/low cost to partner agencies</p> <p>Low cost to partner agencies</p>	<p>% increase in participant attendance records</p> <p>% of staff trained</p>
<p>3. Increase parent participation in leadership roles in the community, including BAYC</p>	<p>Assess language resource currently available; offer programs and program materials in multiple languages / International Institute; BOE translation services; ASPIRA</p> <p>Provide orientation and training for parents as leaders at times and in locations accessible to parents / The Parent Center; FRCs; PLTI; PEP; BAYC Work Groups</p>	<p>Jan-Mar 2010 then Ongoing</p> <p>Annually</p>	<p>Low cost to partner agencies</p> <p>Annual costs: Parent Center & FRCs - \$500K PLTI/CLTI -\$60K PEP-\$7500</p>	<p>% of providers with program materials available in multiple languages</p>  <p>% of slots on Parent Leadership Council</p> <p># parents on BAYC Work Groups</p>

Strategic Area II: Health & Development

Strategy	Action Steps and Responsibilities	Time Frame	Resources	Performance Measures
<p>1. Ensure comprehensive health care in Medical Homes with care coordination and implementation of HUSKY requirements</p> 	<p>Ensure that all children & their parents have health coverage, and those who are eligible are enrolled in HUSKY benefit from full implementation of EPSTD requirements through monitoring, improving reimbursement, and provider training—Southwestern AHEC; BCAC</p>	Ongoing	HUSKY: \$2M: Care coordination;	% of children on HUSKY % of children receiving timely well-child care
	<p>Promote Medical Home principles, selfassessment and practice improvement processes to provide health services that are accessible, continuous, coordinated, comprehensive, family-centered, culturally competent / BCAC</p>	2010 - complete patient surveys 2011-2015 - patient awareness	\$180K well-child visits	% of children receiving timely well child care <i>Data Development Agenda:</i> % of pediatric practices and clinics engaged in EPIC and Medical Home promotion
<p>2. Increase systematic and comprehensive screening for young children and their parents in multiple community-programs/ settings</p>	<p>Provide care coordination for families to connect with a comprehensive array of services and supports. / AHEC, BCAC, Child FIRST</p>	Ongoing		% of children receiving timely well child care
	<p>Promote Age One Dental Visit and establishment of Dental Home / AHEC; EPIC (CHD); CT DPH; DSS</p>	Ongoing		% of children receiving dental visit by 1st birthday % of children with preventive dental care
<p>3. Enhance Bridgeport Early Childhood System of Care capacity to provide comprehensive, integrated services for children and families identified with multiple needs</p>	<p>Work with providers to institute systematic screenings in: Child FIRST, pediatric offices, ECE settings, FRCs, DCF programs, FQHCs /Hospitals, ABCD, Inc., ORBIT collaborative</p>	Ongoing	\$400K (\$18 HUSKY reimbursement per screening)	# of children screened # of children receiving services
	<p>Secure sustained resources to continue and expand Child FIRST model of comprehensive developmental, social-emotional, and risk assessments, home-based mental health services, and care coordination to help families obtain services through BAYC Child/Family Collaborative partners.</p>	Ongoing	RWJF Grant; Local Philanthropy;	# of families served through EC System of Care process # of behavior issues (e.g. expulsion) in K-3 settings # of agencies participating in System of Care
	<p>Increase availability of mental health consultation to both early childhood and adult providers. / BAYC Child & Family Council, DCF, Head Start, ECCP, US DOE, Foundation for Learning</p>			<i>Data development Agenda:</i> # of mental health services embedded in ECE programs

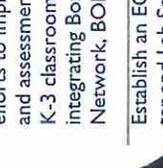
Strategic Area II: Health & Development cont.

Strategy	Action Steps/Responsibility	Time Frame	Resources	Performance Measures
<p>4. Increase and improve mental health treatment services for young children and their families</p> 	<p>Ensure that every child served by DCF receives appropriate mental health services, including access to therapeutic foster care: Child FIRST, HUSKY, Behavioral Health Partnership, DCF, DCF contractors, Birth-to-3, BAYC Child & Family Leadership</p> <p>Advocate for change in Birth-to-3 policies to include mental health services for children with emotional/behavioral difficulties: Child FIRST, HUSKY, Behavioral Health Partnership, DCF, DCF contractors, Birth-to-3, BAYC Child & Family Leadership</p>	<p>Ongoing</p>		<p># of children receiving mental health services # of early childhood trained clinicians serving Bridgeport % of children who need mental health care receiving it</p>
<p>5. Secure support for Medicaid reimbursement for essential services and increased Medicaid rates for all primary care providers and specialists</p>	<p>Work with legislators and state level advocates to increase HUSKY reimbursement rates ensuring access to primary care and specialists for children on HUSKY, as well as coverage for essential services: BAYC Child & Family Council; CT ECE Alliance, BCAC, Southwestern AHEC, CT DSS, Medicaid, managed care plans</p>	<p>Ongoing</p>	<p>Low cost</p>	<p># of children receiving mental health services # of early childhood trained clinicians serving Bridgeport % of children who need mental health care receiving it</p> <p>Specific services included in HUSKY reimbursement # of primary care # of services not reimbursed physicians and specialists accepting HUSKY</p>
<p>6. Increase the percentage of children who have healthy diets and adequate physical activity</p>	<p>Design and implement a comprehensive citywide initiative on healthy eating and exercise: DPH, BCAC, WIC, ECE Provider Network, public schools, YMCA, United Way</p> <p>Provide education and training to licensed and informal child care providers to increase the percentage of early care programs that meet national and state standards for exercise and nutrition: city Health Dept, WIC/SNAP</p> <p>Increase access to healthy foods by ensuring that all eligible children and their parents participate in WIC and food stamps (SNAP)</p>	<p>2010 and Ongoing</p>	<p>Healthy Eating and Physical Exercise Program Implementation: \$75K</p> <p>Low cost</p> 	<p>% of eligible mothers and children enrolled in WIC % of eligible children and adults on food stamps</p> <p>% of EC programs meeting accreditation standards for exercise % of EC programs with written policies regarding healthy diets</p> <p># of children participating in school breakfast program</p>

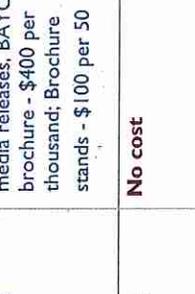
Strategic Area III: Early Care & Education

Strategy	Action Steps/Responsibilities	Time Frame	Resources	Performance Measures
1. Expand and improve professional development for ECE staff to improve program quality and increase student readiness for school upon entering Kindergarten 	Expand existing professional training opportunities to staff of private & family daycare centers: BOE, ECE Dept, HCC ECE	Ongoing	Quality Enhancement funding: \$40K	# hours provided to center-based instructional staff for professional development
	Promote completion of ECE credentials including CDA and Associates Degree: BOE, ECE Dept, HCC ECE	Ongoing		% of ECE teachers with at least a CDA % of ECE instructional staff with at least an AA degree
2. Expand efforts to improve program quality 	Expand opportunities for embedded coaching for instructional staff: BOE ECE Dept, ABCD	Ongoing		% of ECE instructional staff with at least a BA degree
	Expand Early Language & Literacy Observation (ELLCO) for all ECE instructional staff: School readiness Council, Provider Network	Ongoing		Data Development Agenda: # hours provided to instructional staff in home-based centers
	Train ECE staff on ECERS or similar environmental evaluation tool: SRC, ECE Cabinet, SDE, Charter Oak, CES	Ongoing	Low Cost	% of classrooms scoring 5+ on ECERS
	Increase parental awareness of program quality	Ongoing	Low Cost	# of accredited ECE classrooms Data Development Agenda: % of ECE centers that meet defined nutritional standards

Strategic Area III: Early Care & Education Strategic Area III continued:

Strategy	Action Steps/Responsibility	Time Frame	Resources	Performance Measures
<p>3. Implement PreK-3 Literacy Plan that aligns curricula and integrates current efforts across schools and community preschool sites</p> 	<p>Sustain and expand Total Learning model in more classrooms through multiple funding sources: Public Schools, ABCD, State DOE</p> <p>Sustain and expand Early Reading First grant funded embedded coaching & professional development across more BPS and community preschools: BOE Early Reading First, ABCD</p>	<p>Ongoing</p>	<p>Total Learning/ARRA-</p>	<p>% of classrooms, providers and children engaged through Total Learning and Early Reading First (Birth-3; 3-5; K-3)</p> <p># of teachers and parents engaged in Literacy Center and Lab School</p>
<p>4. Expand the supply of infant/toddler and preschool slots</p>	<p>Develop community literacy plan integrating efforts to improve curriculum, instruction, and assessment across all preschools and K-3 classrooms, engaging parents and integrating Born Learning; SRC, Provider Network, BOE ECE Dept.</p> <p>Establish an ECE Community Literacy Center and Lab School to expand family literacy programming and train cohorts of teachers</p>	<p>Jan-June 2010 Ongoing</p>	<p>Title I; CHEFA Bonding-\$3.5M</p>	<p># of families engaged in early learning programming</p> 
<p>5. Help children with no preschool experience successfully transition to Kindergarten</p>	<p>Identify children with no formal preschool experience and ensure that all preschool slots are utilized: BAYC Kindergarten Transition Coordinator, Provider Network, SRC, BOE ECE Dept, UW</p> <p>Expand Kick Off to Kindergarten Program: UW, SRC, HCC, BOE ECE Dept</p> <p>Offer support for immigrants: International Institute, Public Library, the Parent Center, FRCs</p>	<p>2015</p> <p>2010 Ongoing</p> <p>Ongoing</p>	<p>SR funding-\$5.0 million I/T Subsidies, \$24.3 million CHEFA bonds</p> <p>Low cost: UW - \$26K</p> 	<p># of slot subsidies secured Amount of bonding # of new slots created</p> <p>% of kindergartners with no formal preschool experience % of children scoring 2+ on Kindergarten Inventory Literacy & Language domains # of referrals to International Institute % of children scoring 2+ on Kindergarten Inventory % of children scoring 2+ on Kindergarten Inventory</p>

Strategic Area IV: Awareness & Advocacy

Strategy	Action Steps/Responsibilities	Time Frame	Resources	Performance Measures
<p>1. Conduct a coordinated public awareness campaign to educate all sectors of the community on the importance of investing in early childhood and the resources available in the community</p> 	<p>Maintain and enhance the BAYC website in English & Spanish / BAYC Work Groups</p>	<p>Jan-June 2010; Ongoing</p>	<p>Low cost: BAYC Website, - \$500 annual maintenance fees; \$4K translation to Spanish</p>	<p># of hits on BAYC website</p>
	<p>Recruit marketing professionals to assist in the design of an integrated campaign to deliver BAYC messages / BAYC Child & Family Council; CT Early Childhood Alliance; CT ECE Cabinet</p>	<p>Jan-June 2010; Ongoing</p>	<p>Low cost: Press Kits, media releases, BAYC brochure - \$400 per thousand; Brochure stands - \$100 per 50</p>	<p># of print releases mentioning ECE programs, BAYC, and/or partner agencies # of sites for distribution of BAYC messages</p>
	<p>Identify experts and recruit for speakers bureau / BAYC Child & Family Council</p>	<p>Ongoing</p>	<p>No cost</p>	<p># of presentations made to clubs & organizations</p>
	<p>Conduct customer (parent) satisfaction surveys; Conduct community surveys on the awareness of available services and family centered issues / BAYC Child & Family Leadership Council, BCAC</p>	<p>Ongoing</p>	<p>Low cost: Survey analysis - \$5K per survey</p>	<p>Data Development Agenda: Customer satisfaction surveys; Community awareness surveys</p>
<p>2. Raise the awareness of all local and state legislators on the importance of investing in early childhood and the investments needed in Bridgeport</p> 	<p>Develop relationship with members of Bridgeport legislative delegation / Issue experts from the BAYC Child & Family Council, BCAC, partner agencies, parent spokespersons</p>	<p>Ongoing</p>	<p>No cost</p>	<p># of contacts for advocacy "call to action" notices; # of requests for "talking points" and/or assistance from the Bridgeport delegation</p>
	<p>Expand Bridgeport grassroots advocacy network for early childhood / Community Messengers / NINFS / BOE Communications, CT EC Alliance</p> 	<p>Ongoing</p>	<p>Low cost</p>	<p>Data Development Agenda: Track progress of support on issues identified by BAYC</p>

VI. Public Investment in Early Childhood Services

The Bridgeport financing scan for services around the early years of a child's life reveals a complex funding structure. The scan identified twenty-four different funding sources that support 68 different public and private agencies. Coordinating and linking services across agencies and institutions within Bridgeport can be difficult for both families and providers. Sometimes funding requirements limit how a program or service can operate and sometimes providers and institutions disagree on how a program should operate. The result can be many organizations stretched to do a little of everything. The *UPDATE to the Blueprint for Young Children* resulted from work by providers and parents to produce a plan that would offer the community a strong return on their investments or, "biggest bang for their buck." Implementation of the *UPDATE* relies heavily on the Collaborative partners and their commitment to the plan. The current staff infrastructure includes two part-time employees, however, as the plan matures, the staffing pattern may require expansion and additional staff.

The grid on pages 25-30 indicates low-cost or no-cost initiatives. Implementation of the strategies requiring an infusion of federal, state and local dollars have not in some cases been assigned a financial amount due to the uncertainty of available funds. Securing resources for implementation is the responsibility of collaborating partners, and will rely upon the expertise of providers and the commitment of Bridgeport parents.

Early Care and Education

Bridgeport organizations and government agencies delivering early childhood services invested more than \$27.5 million in early care and education for 2,400 children. The largest funding sources include the School Readiness program, Head Start, Care4Kids, and the Department of Social Services. All of the funding sources seek to enable children from low-income families to participate in early care and education (see Chart).

Estimated Public Investments in ECE in Bridgeport, 2008-09		
Preschool	School Readiness	\$10,671,800
	Head Start	9,600,200
	Public School system	300,000
	Care 4Kids	2,276,900
	Subtotal	22,848,900
Infants/Toddlers	Care4Kids	2,760,100
	DSS	2,046,500
	Subtotal	4,806,600
TOTAL		\$27,655,500

Other Services that rely on significant amounts of public and/or philanthropic funds include:

- *Safe children.* Funds support domestic violence services, DCF foster care services, and Safe and Drug Free Schools' funding
- *Economic security.* This investment area includes a number of nutrition programs, such as Food Stamps (SNAP); Women, Infants and Children (WIC); school breakfast and lunch funding, and a variety of emergency assistance and safety net programs.

- *Family supports.* This area includes the Parent Center, 4 Family Resource Centers, 6 Family Support Centers, Help Me Grow, Intensive Family Preservation services, and the Nurturing Families Network.

- *Out of school time.*

This includes after-school, summer and vacation recreation, the Public Library, and city playgrounds.

Additional Estimated Public Investments (in thousands)					
	Federal	Fed/State	State	Philanthropic	Total
Child Welfare		\$13,841			\$13,841
Family Support	\$140	\$6,310	\$207	\$8	\$6,664
Health	\$8,004	\$23,483	\$1,201	\$280	\$32,968
Health - Behavioral		\$1,348		\$25	\$1,373
K-3 Education	\$11,831		\$57,840	\$140	\$69,811
Parent Engagement			\$20	\$10	\$30
Youth Development			\$48		\$47
Out-of School Time	\$212				\$212
TOTAL					\$124,947

(Source: William Caspar Graustein Memorial Fund- Fiscal Scan 2005-06)

BAYC Collaborating Partners

Financial Supporters

A.B.C.D, Inc.

General Electric

CT Department of Education

Governor's Cabinet on Early Childhood

Child Health & Development Institute of CT

United Way of Coastal Fairfield County

Fairfield County Community Foundation

William Caspar Graustein Memorial Fund

Partners

ASPIRA of Connecticut

Children's Trust Fund

Bridgeport Board of Education

City of Bridgeport

Bridgeport Child Advocacy Coalition

Child Guidance Center of Greater Bridgeport

Bridgeport Dept. of Health & Human Services

CT Dept. of Children & Families

Bridgeport Family Resource Centers

CT Dept. of Mental Health and Addiction Services

Bridgeport Hospital, Child FIRST

CT Dept. of Social Services

Bridgeport Housing Authority

Hall Neighborhood House

Bridgeport Parent Center

Housatonic Community College

Bridgeport Parent Leadership Training Institute

International Institute

Bridgeport Public Education Fund

National Network of Partnership Schools

Bridgeport Public Library

Optimus Health Care

Bridgeport School PACs

School Readiness Provider Network

Bridgeport School Readiness Council

Southern Connecticut Gas Company

Bridgeport Schools Early Childhood Dept.

Southwest Community Health Center

Casey Family Services

Southwestern Area Health Education Center

Catholic Charities

YMCA

United Way of Coastal Fairfield County

United Way of Connecticut/2-1-1

Center for Women and Families of Eastern
Fairfield Cty



**Bridgeport Alliance for Young Children
Leadership In Action**

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With Operating support from



**United Way
of Coastal Fairfield County**



*We would like to acknowledge the commitment of our collaborating partners
and significant assistance from Holt, Wexler and Farnam. LLP*



The Vernon Community Network is a collaboration of providers that will identify and coordinate social service, health, educational and economic development resources for the enhancement of the community.



WELCOME

By Alan Slobodien, President, Vernon Community Network
Impetus for creation of the Vernon Community Plan for Children

The Town of Vernon is a mid-sized community of approximately 30,000 people located twenty miles east of Hartford, CT, the state's capital. Vernon is a community that holds great pride and in a strong New England tradition, works hard to help all its citizens. As our entire nation grapples with economic challenges, the Vernon community led by its Town Council and Board of Education continues to strive for excellence. Vernon is a community in transition. Once a thriving rural community, Vernon was home to textile industry, farming and a hub of cultural activity for the smaller towns located in

eastern Connecticut. Vernon has experienced growth in economic stress and increased needs from a population whose median family income is low in comparison to nearby towns. But transition and challenge give rise to opportunity, creativity and a strengthening of community pride. One aspect of Vernon's pride is providing social services to its citizens in need. The town government and its citizens have welcomed community-based non-profit organizations for decades. A network of these non-profits as well as local government agencies, the faith community and the local Board of Education was established in December 2003 with a membership of eight agencies. This network initially named the "Family Summit" continued to broaden in its scope and membership and currently (2011) has over 35 member organizations that meet regularly under the umbrella name, [Vernon Community Network](#). In 2008, the Vernon Community Network undertook a community planning process to address the needs of Vernon youth and their families, recognizing that assisting our youth population helps to build a thriving community, a welcoming community; a community of good will.

Executive Committee

Alan Slobodien, President
Kim McTighe, VP
Angela Atwater, Treasurer
Joan McMahon, Secretary
Jim Sendrak, At Large
Carl Mandell, At Large
David Engelson, Past Pres.
Bryan Flint, Membership

Where to begin? The community planning process began by assembling a broad group of dedicated parents, service providers, educators, faith community representatives, policy makers and business representatives. This group developed a goal statement, *"All Vernon children birth to eighteen are safe, healthy and productive."* Two grants were secured to fund the planning process: an initial grant from the Hartford Foundation for Public Giving was later supported by a grant from the William Caspar Graustein Memorial Fund. Both foundations recognize that many voices are needed to develop a comprehensive community plan; a plan that produces positive change for individuals, families and the greater community.

The path to change: Imagine a community where all children are safe, healthy and productive; where individuals and families feel connected to their neighbors, schools, local government, business and faith organizations. Building this type of community demands that people of good will and honest intent join together, overcoming differences and unite with one vision, *"All children birth to eighteen are safe, healthy and productive"*. On behalf of the Vernon Community Network, I look forward to uniting with you!

ACKNOWLEDGEMENTS

A sign of true community decision-making is having representation from a diverse group of constituents, each bringing to the table both professional expertise and personal experiences, equaled in value. We recognize the tremendous expertise, support and camaraderie provided by the following that were identified as community leaders:

LEADERSHIP WORKGROUP

- **Angela Atwater**, Executive Director, KIDSAFE CT, *Co-Chair*
- **Eric Baim**, Principal, Rockville High School
- **Leslie Campolongo**, Church of the Risen Savior
- **Jill Charbonneau**, Prevention Social Worker, CT Department of Children & Families
- **Bryan Flint**, Past President, Rockville Community Alliance
- **Cindy Guerreri**, Consultant, Essential Outcomes, LLC
- **Beth Katz**, Principal, Vernon Center Middle School
- **George Lombardo**, Community Program Coordinator, Foodshare, Inc.
- **Carl Mandell**, Director, Vernon Regional Adult-Based Education
- **Kim Marinar**, Director, Guidance Rockville High School
- **Kim McTighe**, Youth Counselor, Vernon Youth Services Bureau
- **Barbara Pascal-Gladstone**, Director, ECHN Child and Adolescent Behavioral Health Services
- **Renee Pellerin**, Probation Officer, Rockville Juvenile Court
- **Paula Plante**, Coordinator, KIDSAFE CT
- **Thomasina Russell**, Parent
- **Ann Scharin**, Coordinator, Vernon School Readiness Council
- **Don Skewes**, Detective, Vernon Police Department
- **Alan Slobodien**, Director, Vernon Youth Services Bureau, *Co-Chair*
- **Maria Turchi**, School Social Worker, Vernon Public Schools
- **Matthew S. Wlodarczyk**, Principal, Skinner Road School

CONTENT AREA EXPERTS / Strategic Areas of Focus

To round out the team the following contributed mightily to this comprehensive planning effort:

- **Marcia Ambrose**, Indian Valley YMCA
- **Sue Beirn**, RN, Vernon Public Schools
- **Bruce Blair**, Hockanum Valley Child Day Care Center
- **Patricia Buell**, Vernon Public Schools
- **Phyllis Carleen**, Early Head Start
- **Ardith Crampton**, ECHN Family Development Center
- **Monica Dallahan**, CREC, Birth-Three
- **Hyacinth Douglas Baily**, Greater Hartford YMCA
- **Risa Filkoff**, Vernon Regional Adult-Based Education
- **Pauline Fortier**, Academy of Art and Learning
- **Tina Gladden**, Indian Valley YMCA
- **Pat Goff**, Rockville High School
- **Jerry Griffin**, Vernon Public Schools
- **Svetlana Grishtaev**, Vernon Regional Adult-Based Education
- **Judy Hany**, Vernon Town Council
- **Michelle Hill**, Vernon Youth Services
- **Brian Levesque**, Principal (Past) Rockville High School
- **Sarah McDermott**, UCONN Jumpstart
- **Tess McKenzie**, Maple Street School Family Resource Center
- **Tanjua Merrow**, Parent
- **Jill Morey**, ECHN Family Resource Center
- **Lisa Perry**, Parent
- **Sarah Santora**, Foodshare, Inc.
- **Sally Sherman**, Vernon Public Schools
- **Paul Vivian**, Graustein Memorial Fund
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- **Town of Vernon**

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INTRODUCTION

WHAT IS A COMMUNITY PLAN?

Traditionally planning is undertaken by a small group of people tasked with designing the future direction of a certain stand-alone program or organization. A Community Plan is developed with input from broad audiences, with the idea of allowing the community as a whole to agree upon a set of top priorities and to provide a detailed plan by which the different community entities and citizens will work together to achieve certain changes within the community, and to hold one another accountable for achieving desired results.

BACKGROUND

The Vernon Community Network (VCN), initiated in 2003 by a team of community stakeholders, is a collaborative of providers interested in coordination of social, health and educational services. Most recently, the VCN recognized the challenges facing the community given the change in statute regarding youth ages 16-18 that have previously been eligible for the Family with Service Needs program. Given the new lack of consequence, behaviors such as truancy and running away, the VCN identified a need for a planned response and thus applied for, and received funding from the Hartford Foundation for Public Giving. The grant allows for a community planning process that involved all key stakeholders including parents, youth, professionals and community organizations. In 2010 the Graustein Memorial Fund awarded a grant to include a focus on children birth-8, thereby providing opportunity for the creation of a comprehensive plan for improving outcomes for all Vernon children Birth-18.

A UNIQUE OPPORTUNITY

These grants allows for a proactive approach to planning for the successes of ALL Vernon children and youth. Specifically this community plan gives Vernon a chance to think broadly and deeply about what comprehensive and system-wide reforms are needed to attain this desired result. Rather than focusing on individual programs or schools, efforts will be on how the community works together – across these programs and departments and sectors – to improve the lives of children and youth.

APPROACH

The first step was to develop a Leadership Work Group (LWG), a group of leaders who can dive into the details and guide this plan to completion. The VCN is the convener and champion for this effort, with the Vernon School Readiness Council (VSRC) specifically leading the plan development for young children. The LWG is inclusive and capable of reaching out to and consulting with all segments of the community. The process for the ensuing planning will be based on the Center for the Study of Social Policy's community planning framework, with Results-Based Accountability (RBA) at the core. RBA has been officially adopted by the Appropriations Committee of the Connecticut State Legislature as a means for determining funding for all State departments.

HOW TO NAVIGATE THROUGH THE VERNON COMMUNITY PLAN FOR CHILDREN AND YOUTH

This plan is divided into three main sections – *Children*, *Youth*, and *Community* and are based upon the Result Statement:

ALL VERNON CHILDREN BIRTH – 18 ARE SAFE, HEALTHY AND PRODUCTIVE

Areas of Focus – To achieve this end result each of the following need to be addressed:

1. **Safe** – Children and their families must live in safe homes and neighborhoods, and have access to safe schools and places of recreation.
2. **Healthy** – Children and their families need to have access to high quality, affordable care that focuses on physical, emotional and behavioral health. There must be a continuum of care spanning across education, information, diagnosis and treatment.
3. **Productive** – Children and their families need to have opportunities and experiences that will prepare them to be successful learners, beginning in the early years and leading to post-secondary education and/or the world of work.

Four guiding questions are used in each section:

What Do We Know? – Where Are We Now?

- **Headline Indicators** – The LWG analyzed data in each of the strategic areas of focus and identified Headline Indicators that serve as a baseline for all recommended strategies that will lead us to our desired end result. Each section has graphs to depict what we know to be current conditions in each of the Strategic Areas, and additionally reflect trends in that area.
- **Secondary Indicators** – These have been identified as supporting data to the headline indicator. There may be additional work to be done in gathering/collating data, analyzing the data, and designing strategies for implementation to impact the trend identified.
- **Current Conditions & Impact** – Along with the indicator is a narrative description of what we believe to be “the story” behind that baseline, supported by community input that was collected via multiple focus groups, interviews, and a survey. A force field analysis was completed by the LWG and Content Area Experts to gain a common understanding of conditions that contribute to a negative trend and positive approaches that could “turn the curve” on the current condition.

What Are We Doing? – The current programs, services and systems that exist in one form or another that address a certain area of focus.

What Can We Do? – to make a difference in the Headline Indicator, this includes information on best practices both locally and beyond town borders.

- **Strategies and sub-strategies** – Based on what we know about the data, current conditions, and forces at work, strategies were developed that LWG members believe will make a positive impact on changing the negative direction of the various trends. Sub-strategies reflect a collection of actions to develop for implementation.

- **Data Development Agenda (DDA) and Research & Information** – While some data would be valuable and informative to this approach, there are times when certain data is not gathered in any systematic way or is inaccessible. The DDA allows for a documentation of a desired data set, with the intention of developing a way to collect it locally if at all possible. Additionally, theories as to suitable strategies and actions to employ in an effort to “turn the curve” on troubling trends are best tested in research of possible causes, effects and best practices.

How Will We Know We Have Been Effective?

“Our Work + Our Performance = Difference Made For People We Serve.”

- **Performance Measures** – The LWG recognizes the need to hold themselves and the community accountable for making a difference in the trends and thus are in need of program measures that respond to three guiding questions: *“How much did we do? How well did we do it? Is anyone better off?”*
- **System Measures** – It is understood that programs operate within larger systems and that those systems interface with one another at various times and to varying degrees. For example, communications are critical to successful program administration and operations. These systems must also be analyzed for effectiveness in leading us to our end result.

ABOUT VERNON

Adapted from Vernon Plan of Conservation and Development – (12/09), Town of Vernon website, the Community Status report on Young Children in Vernon, CT (12/07), and the US Census Bureau's American Community Survey 2005-2009.

HISTORY

Originally called North Bolton, the Town of Vernon, CT was established in 1808. Vernon contains the borough of Rockville, incorporated in 1889, as well as the smaller villages of Talcottville and Dobsonville. In the early 1800's, Vernon was predominantly an agricultural community, and slightly over 800 people called it home. With a rural landscape, travel to outlying towns became difficult and by 1836, residents of Rockville found it inconvenient to travel to Vernon's center, which held the towns' church, meeting house and school, so they built their own. By 1856, residents began alternating between Vernon center and Rockville for Town meetings, which contributed to less interaction between residents of the same town. By the mid 1800's, as technology improved and the desire to travel more efficiently grew, a railway spur branched through Vernon, connecting it to larger cities such as Hartford and Providence.

INDUSTRY

Vernon boasts 17.7 square miles of land and 0.3 square miles of it water, including two rivers within its 18.03 sq mile borders. These natural resources formed the foundation for a thriving mill industry, which harnessed the power generated from these waterways. From 1821 to 1952, the Hockanum River alone boasted thirteen mills along its banks, producing cotton, twine, paper, silk products, wool, and stockinet. The cloth for the inaugural suits for Presidents William McKinley and Theodore Roosevelt were produced in Vernon adding to a sense of pride for the area. With the prosperities of the mill industry, came jobs, homes, families and prosperity. These mills thrived until early 1900. When WWII started, many of the mills moved to the South and with this move, Vernon saw its economic boom collapse.

Based on the US Census Bureau's American Community Survey 2007-2009, 73.2 percent of Vernon residents are in the workforce. A majority of its residents (16 years and older) work in the following occupational fields: Educational Services, Health Care, and Social Assistance (25 percent), Manufacturing (14 percent) and Finance and Insurance, and Real Estate and Rental and Leasing (12 percent) and Retail Trade (11 percent). The median income of households in Vernon is \$67,233.

GOVERNMENT

Since 1970, the Town has operated under a Mayor/Town Council form of government, subject to approval by the Town's electorate at Town Meetings on certain appropriations and the Annual Budget. The Mayor of Vernon is Chief Executive Officer of the Town, and is charged with management of the Town's Government, annual budget for all departments and agencies including the Board of Education, its finances, its employees and carrying out rules, regulations and compliance with the law. The twelve-member Town Council is the exclusive legislative body, with the powers and duties of the Board of Finance with respect to the Board of Education budget and financial program. Both the Mayor and the Town Council are elected on a partisan basis for two-year terms. The Town holds an Annual Town Meeting for the consideration of its budget on the fourth Tuesday of April, as determined by the Town Council. The annual budget becomes effective only after it has been approved by a majority vote of qualified voters present and voting at such meeting. The vote may neither increase nor decrease the amount approved by the Town Council.

DEMOGRAPHICS

According to the *American Community Survey 2005-2009*, Vernon's population during this time was approximately 30,000 residents, with a median age of 40.6 years. Nineteen percent of the population was under 18 years and 16 percent was 65 years and older.

Race

97.8 percent of Vernon's population indicates their racial make-up as one race, with 74.5 percent White, 12.4 percent Black/African American, 4.4 percent Asian and less than 1 percent described as American Indian/Alaska Native.

Housing & Households Characteristics:

In 2007-2009 there were 13,000 households in Vernon. The average household size was 2.3 people. Families made up 62 percent of the households in Vernon. This figure includes both married-couple families (47 percent) and other families (14 percent). Non-family households made up 38 percent of all households in Vernon. Most of the nonfamily households were people living alone, but some were composed of people living in households in which no one was related to the householder.

Occupied Housing Unit Characteristics:

In 2007-2009, Vernon had 13,000 occupied housing units – 61 percent owner occupied and 39 percent renter occupied. One percent of the households did not have telephone service and 4 percent of the households did not have access to a car, truck, or van for private use. Multi-vehicle households were not rare. 40 percent had two vehicles and another 19 percent had three or more.

Housing Costs:

The median monthly housing costs for mortgaged owners was \$1,744, non-mortgaged owners \$707, and renters \$885. 35 percent of owners with mortgages, 16 percent of owners without mortgages, and 41 percent of renters in Vernon spent 30 percent or more of household income on housing.

POVERTY/ GOVERNMENT PROGRAMS

In 2007-2009, seven percent of people were in poverty. Ten percent of related children under 18 were below the poverty level, compared with four percent of people 65 years old and over. Seven percent of all families and 35 percent of families with a female householder (no husband present) had incomes below the poverty level.

GEOGRAPHIC MOBILITY

In 2007-2009, 88 percent of the people living in Vernon were living in the same residence one year earlier; six percent had moved during the past year from another residence in the same county, four percent from another county in the same state, two percent from another state, and less than 0.5 percent from abroad.

EDUCATION AND SCHOOLS

There is also diverse educational attainment of Vernon's residents over aged 25. In 2007-2009, 90 percent of people 25 years and over had at least graduated from high school and 30 percent had a bachelor's degree or higher. Ten percent were dropouts; they were not enrolled in school and had not graduated from high school.

The total school enrollment in Vernon was 7,000 in 2007-2009. Nursery school and kindergarten enrollment was 980 and elementary or high school enrollment was 3,900 children. College or graduate school enrollment was 2,100.

Each school works to establish its individual school environment or identity, encouraging students' and their families' full participation in their development (academically, socially and emotionally) and making school a place where differences can be valued and encouraged.

CHILDREN

Birth – 8

Safe, Healthy, Productive

- Prenatal Care
 - *Babies Born at Low Birth Weight*
- Child Abuse and Neglect
 - *Risk Factors Associated with Child Abuse & Neglect*
 - Children Living with Single Parent*
 - Children Living below Poverty Level*
- Preschool Experience
- 3rd Grade CMT Reading
 - *3rd Grade Reading CMT Scores by School*



CHILDREN (Ages Birth – 8)

I. PRENATAL CARE

A. WHAT WE KNOW – Where Are We Now?

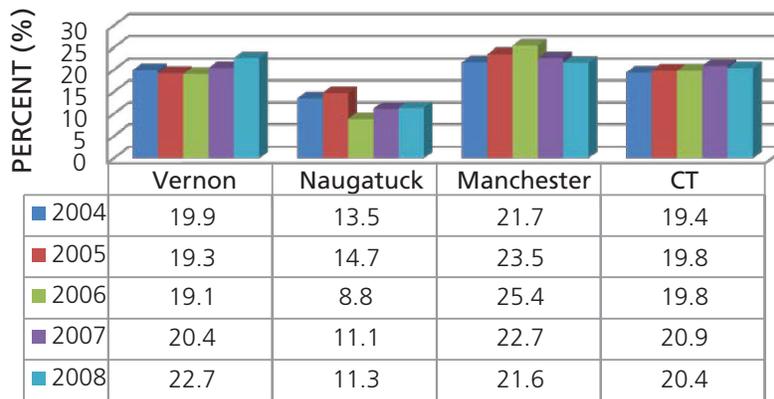
Adequate prenatal care is important to the overall care of pregnant women, and to the healthy development of their babies. It is during the prenatal care visits that medical experts can evaluate any medical and social risks, provide treatment of some problems, and referrals for any needed support services. Additionally, it is a time for expectant mothers and fathers to talk about both maternal and infant health. Adequate use of prenatal care is known to positively affect birth weight, full-term deliveries, and overall healthy development of the baby at delivery and beyond.

Headline Indicator: Non-Adequate Prenatal Care

BASELINE DATA

Women Receiving Non-Adequate Prenatal Care*

*CT Department of Public Health: Vital Statistics, Table 4



1. Current Conditions

The CT Department of Public Health uses the definition for adequacy of prenatal care (PNC) as described in the “Adequacy of Prenatal Care Utilization Index” (APNCU) from the University of North Carolina, Chapel Hill. Adequacy of PNC is viewed as having two parts – Initiation of Prenatal Care, and Adequacy of Received Services. Both of these are based on timeliness. The belief is “the sooner the better” for PNC, preferably within the first trimester. Adequacy of Received Services identifies timing of care following the initial visit up until delivery. This is to help determine if a woman receives enough PNC visits – based on the standard of one visit per month for 28 weeks, one visit every two weeks through 36 weeks, and weekly visits thereafter.

The graph above provides five consecutive years of data, the most recent available from the CT DPH. On average 20.28%, or approximately 72 Vernon women received non-adequate prenatal care each year, higher than the state average of 20.06%. This is significant when comparing Vernon to the 11.9% of women in Naugatuck, a community very much like Vernon in population, education and economic make-up. Also of note is that the average for women receiving non-adequate prenatal care over a five year period is 22.98% in Manchester, a community nearly twice the size of Vernon. Local health providers/professionals believe that there are many issues that contribute to nearly one quarter of women in a year who receive non-adequate prenatal care. Vernon has many available service providers – ECHN/Rockville General Hospital Maternity Care Clinic, the local OB-GYN doctors/practices, and the East Hartford Community Health Center/Vernon satellite office at the Cornerstone.

So if availability is not a problem – what is? The following is a list of possible factors:

- Lack of insurance or lack of knowledge of how to access insurance
- A belief that if someone is on state insurance (HUSKY) they must get their prenatal care in Hartford.
- Women have to reapply for HUSKY after delivery.
- CT DSS office in Manchester is understaffed to enroll women in a timely manner.
- Transportation
- Reluctance to contact a doctor and share personal information with them.
- Lack of understanding of the importance of prenatal care, and the inherent risk factors for their unborn baby.
- Inability to get time off from work for their visits.
- Inconsistency of doctor's availability in a practice or location.
- Unequal reimbursement rates for OB care and GYN care
- Variations in medical advice for when a woman should begin prenatal care

Further emphasizing the need for improving the percent of women who receive adequate prenatal care is the fact that Vernon is one of 39 towns in CT identified in the "Statewide Needs Assessment for Maternal, Infant and Early Childhood Home Visiting Programs," (September 2010) as in "moderate to high need" for maternal & infant and/or early childhood services. Vernon is the only town in Tolland County identified as such. DPH identifies the criteria used in their determination to include unemployment rates, excess low birth weight, excess non private insurance, children living in poverty, child abuse and neglect, low 3rd grade CMT scores and high school drop-out rates.

A challenge remains in reaching the women who are most hard-to-engage in this discussion. Until we speak directly to these roughly 72 women per year and hear their "story," we will continue to struggle to make a difference in Vernon-based data. It is not always timely nor reliable, and often anecdotal rather than statistically valid.

2. Impact on Mother and Baby

According to research, two of the major consequences of non-adequate prenatal care are infant mortality and low birth weight. According to the Connecticut Department of Public Health (DPH), between 2004 and 2008 there were, on average, three infant deaths in Vernon annually.

NOTE: There is not a direct correlation documented between these deaths and non-adequate prenatal care.

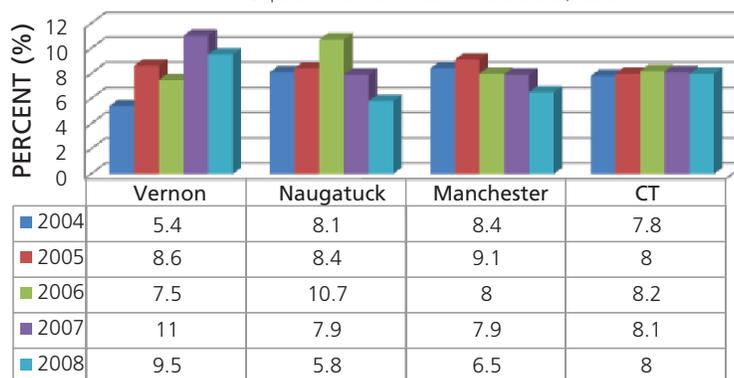
More prominent and more in need of further analysis is the rate of low birth weight in Vernon as compared to similar communities and the State. The graph below shows that there has been fluctuation in Vernon, with the most prominent increases in the last two years reported and that Vernon outpaces these towns and the State.

Secondary Indicator: Low Birth Weight

BASELINE DATA

Babies Born at Low Birth Weight*

*Less than 5.5 pounds regardless of gestational age
CT Department of Public Health: Vital Statistics, Table 4



There are additional risks inherent in non-adequate prenatal care such as missed opportunities for preventive testing for mother and baby, the monitoring the growth and development of the baby and the treatment of any complications. Prenatal visits are a time for counseling and guidance with linkages made to critical support services, e.g., Women Infants and Children (WIC) and HUSKY.

B. WHAT ARE WE DOING?

A coordinated system for outreach and identification of newly pregnant women does not currently exist in Vernon, although there are efforts that occur throughout various organizations in town. Local experts identified both Health and Child Development classes at Rockville High School as the primary opportunities for raising awareness and educating young people on the importance of adequate prenatal care.

The next opportunity for connecting with pregnant women who may not be receiving such care occurs most often at Rockville General Hospital's Maternity Care Clinic and in programs such as Nurturing Families, Early Head Start and the Maple Street School Family Resource Center. According to providers, the majority of these women are well into their second or third trimester of pregnancy at the time of enrollment.

Other places that provide education in relation to adequate prenatal care include OB-GYN Offices and agencies, Women Infants Children (WIC), East Hartford Community Health Care, the community baby shower and the 2-1-1 InfoLine.

Finally, an untapped, rich resource is the "informal" peer network, which is most likely to connect with women in the earliest stages of their pregnancy.



C. WHAT CAN WE DO?

In order to have a positive effect on the rate of non-adequate prenatal care and corresponding low birth weight of babies, it is important to reach these women pre-pregnancy or in their first trimester. This will take an effort by the Vernon community that builds on existing programs and services while introducing innovative approaches.

1. Additional data collection and analysis on non-adequate prenatal care and low birth weight as they relate to race and ethnicity, age of mother, and mother's level of education.

2. Explore opportunities for expanding home visitation services in Vernon.

- a) Research Child First (Bridgeport) to assess opportunity for replication locally.
- b) Assess the possibility of expanding Nurturing Families outreach efforts.

3. Create a multi-pronged approach to raising awareness on the importance of adequate prenatal care.

- a) Meet with Rockville High School Health teachers to discuss curriculum expansion.
- b) Connect with local pharmacies for planned display of informational materials.
- c) Expand scope and eligibility for community baby showers to include all income levels.
- d) Enhance use of existing media such as organizational websites and community newspapers.
- e) Identify and train peer/adult mentors to serve as neighborhood resources.
- f) Include prenatal care booths and vendors in Vernon Holistic Fair.

DATA DEVELOPMENT AGENDA (DDA) – Childhood Obesity

Healthcare practitioners define obesity in different ways. The U.S. Surgeon General, Dr. Regina Benjamin recently stated that the most common thing that physicians and other clinicians use is the BMI (Body Mass Index), the relationship between height and weight. She noted, however, that someone could have a BMI that is outside of the range and still be perfectly healthy. Given this discrepancy, most people are starting to move to the percentage of body fat as a much better indicator, according to Dr. Benjamin. Ways in which to do this comprehensively are being explored. Further, some family physicians who see the entire family, women and children, have raised a concern about the lack of specific guidelines that would help them in their working with childhood obesity.

In order to combat chronic disease, the Connecticut Department of Public Health is in the process of creating "*Connecticut's Plan for Heart Healthy, Smoke Free, & Physically Fit Communities 2011-2016*". This plan offers insight in the chronic health issue of childhood obesity. The Vernon Public School Wellness Committee will serve as the link to this statewide planning process and its local implementation.

D. HOW WILL WE KNOW WE MADE A DIFFERENCE?

- How much did we do?
- How well did we do it?
- Is anyone better off?

II. CHILD ABUSE AND NEGLECT

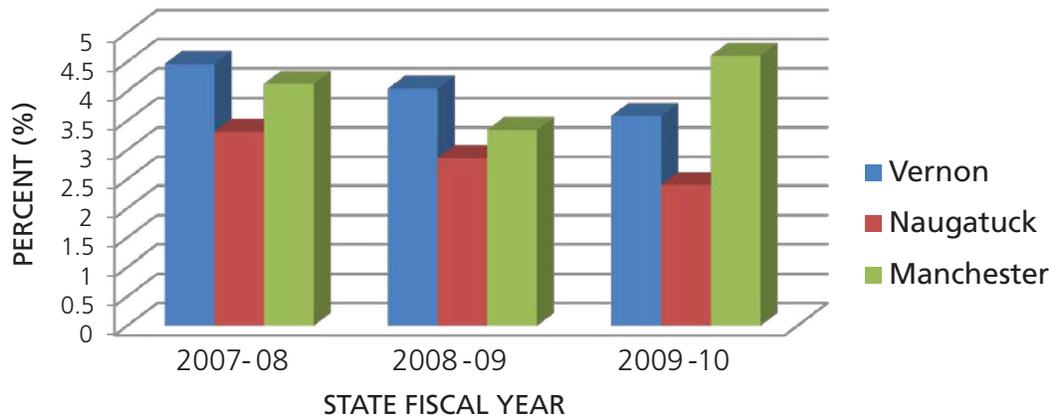
A. WHAT WE KNOW – Where Are We Now?

All children deserve to be safe within their homes and in their community. To gain an understanding of how many Vernon children between the ages of Birth to 8 are victims of child abuse and neglect, the LWG examined data from the CT Department of Children & Families (DCF), where investigators apply an approved protocol for such a determination. Over the last three years for which data is reported (State Fiscal Years 2008-2010), comparison was made with two other towns – Naugatuck being of similar population, education and economic make-up, and Manchester, a neighboring city nearly twice the size of Vernon.

Headline Indicator: Child Abuse/Neglect

BASELINE DATA

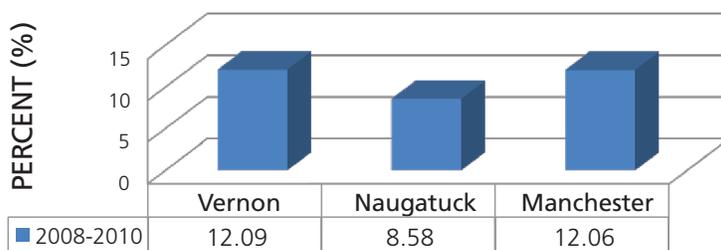
Children Birth-8 with Substantiated Allegations of Child Abuse/Neglect



The first graph depicts a higher percent of Vernon children aged Birth to 8 with substantiated abuse and neglect as compared to Naugatuck. Two out of three years there was a higher percentage than neighboring Manchester. There has been a slight decrease in substantiated allegations over the three-year period yet no clear understanding of “why.”

When looking at the three years in aggregate form (2nd graph), Vernon’s incidences of abused and neglected children are higher than both Naugatuck and Manchester

3 Year Aggregate of Children Birth-8 with Substantiated Allegations of Child Abuse/Neglect



IS THIS OKAY?

Between 2008 and 2010 (state fiscal year) there were 338 Vernon children who were victims of abuse and neglect, which on average, is 112 children annually. National research indicates that children suffer higher rates of abuse and neglect in the earliest years of their life. Children under the age of three are the most vulnerable and thus are the most frequent victims of child abuse, and *Vernon is no exception.*

1. Current Conditions

To help us understand the “Why” of the documented cases of child abuse and neglect in Vernon, we first agree that it knows no economic, social or racial bounds. However, we do know that there are *significant risk factors* (see sidebar) which may lead to abuse and neglect. Whether you live in Vernon or another community, the family characteristics and risk factors remain consistent. When looking at Vernon, the correlation of the first two of the **Risk Factors** (see 1st graph) and the documented concentration of economically stressed and single parent households appear to be centralized in specific geographic locations (see 2nd graph). Therefore, it is likely that the majority of children most at risk of being abused and neglected live in the households in these specific locations. It is reasonable to believe that efforts to reduce the numbers of children living in poverty and single-parent head of households will reduce the number of children abused and neglected. The following graphs provide the evidence.

RISK FACTORS Associated with Child Maltreatment

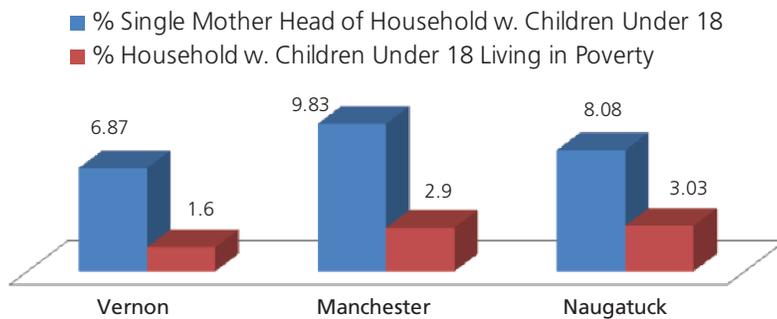
- Children living with single parent
- Children living below the poverty line
- Active substance abuse and mental health issues
- Criminal history
- Lack of child supervision
- Siblings with different fathers
- The absence of positive relationship between child and father
- Teen parenthood

Child Welfare Information Gateway

Secondary Indicator: Two Risk Factors

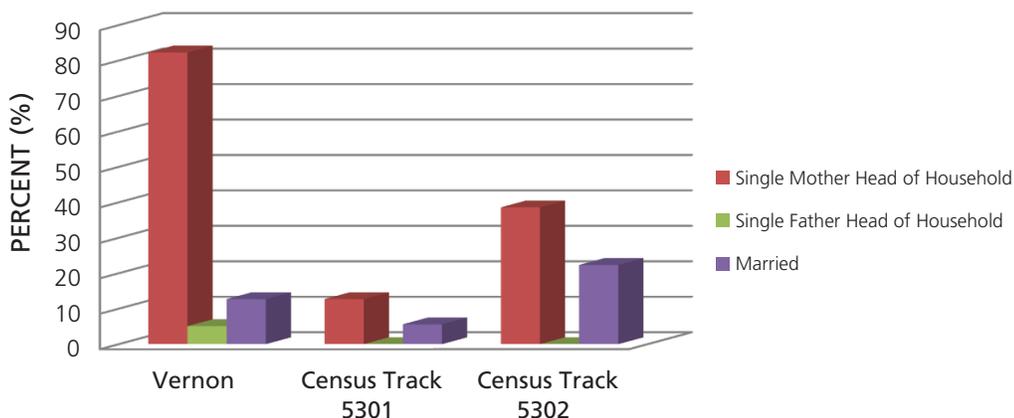
BASELINE DATA

Two Risk Factors Associated with Child Abuse & Neglect



Household Type by Geographic Location for Children < 18 Living in Poverty

Census 2000



What is Child Abuse & Neglect?

Abuse

“a non-accidental injury to a child which, regardless of motive, is inflicted or allowed to be inflicted by the person responsible for the child’s care.”

Neglect

“the failure (whether intentional or not) of the person responsible for the child’s care to provide and maintain adequate food, clothing, medical care, supervision, and/or education.”

**CT Dept. of Children & Families*



2. The Impact on Children

Research conducted by the Child Welfare Information Gateway indicates that the impact of child abuse and neglect is both short and long term. Some of the most common physical, psychological, behavioral, and societal consequences are noted **in the inset**.

Locally, the *Community Status Report on Young Children in Vernon, CT* reports “children who are not safe in their homes or communities, who witness or experience some form of violence or abuse are more likely to have problems with their development.” The Vernon Community Network and the Vernon School Readiness Council remain concerned that during the past three years, there are cyclical patterns of abuse and neglect experienced by Vernon families who are currently living in “at risk” situations.

B. WHAT ARE WE DOING?

Protective factors are traits that are present in families and communities that help to increase the well-being of children and families. These traits serve as cushions, helping parents to find support resources, or coping strategies that allow them to parent successfully, even under pressure. These include parental resilience, social connections, knowledge of parenting and child development, and concrete support in times of need. Currently, Vernon has both voluntary and mandated services available for families. The goal of the LWG is to assist families at risk before a crisis occurs.

1. Nurturing Families Network is a no-cost, voluntary primary prevention program that provides information, guidance and assistance to first-time parents. The network offers three distinct, interwoven services: Home visiting, parent education groups, and nurturing support connections through volunteer contact.

Nurturing Families has been rigorously researched and shown to successfully identify, engage and assist first-time parents assessed to be at-risk of harming their children, while also reducing the incidence and severity of child abuse and neglect. Studies by the University of Hartford’s Center for Social Research indicate that parents in the program make significant gains in education, employment and self-sufficiency; spend more time with their children; and become more sensitive to their needs.

The **Kempe Family Stress Checklist** is the research-based tool used to assess the likelihood that a first-time parent will abuse or neglect his/her child, thus qualifying for the program. Indicators are included in the box.

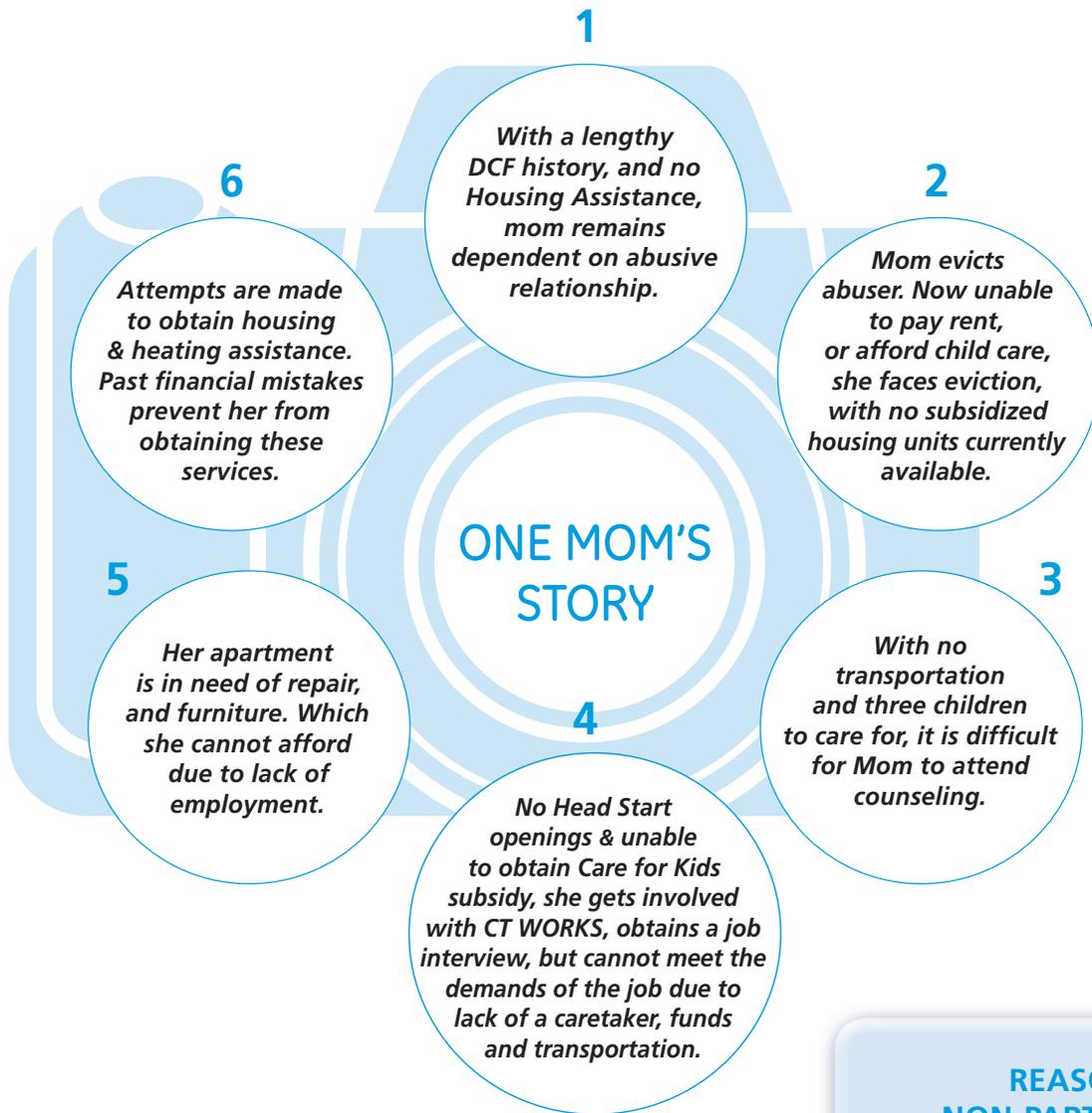


Impact of Child Abuse & Neglect

- Affect an individual’s physical and mental health
- Negative effects on physical development, including brain development in the early years
- Isolation, fear, and an inability to trust
- Low self-esteem, depression, anxiety and relationship difficulties
- Higher incidences of many health problems
- High-risk behaviors such as smoking, substance abuse, overeating, and sexual risk-taking
- A likelihood of engaging in juvenile delinquency, adult criminality, and violent behavior

KEMPE Family Stress Checklist

- Parent beaten or deprived as a child.
- Parent has a criminal, mental health, or substance abuse history.
- Parent has been suspected of abuse in the past.
- Parent demonstrates low self-esteem, social isolation, depression, and has limited “lifelines”.
- Parent experiencing multiple crises or stresses.
- Parent’s potential for violent temper outbursts.
- Parent has rigid and unrealistic expectations of child.
- Harsh punishment of child.
- Child difficult and/or provocative as perceived by parents.
- Child unwanted or at risk for poor bonding.



REASONS FOR NON-PARTICIPATION IN PARENT EDUCATION PROGRAMS

Some issues facing parents are fatigue, physical and emotional disabilities, and lack of centralized information for parent education. Additionally cited:

- No transportation to programs
- No compensated time off, childcare issues
- Sense of isolation (I am the only one with this problem)
- Denial of the gravity of child's issues
- Sense of hopelessness
- Classes may not be culturally responsive
- Lack of knowledge of parenting skills and child development
- Lack of trust

Protective Factors; www.childwelfare.gov

2. Fragmented System – Compounding the problem of ongoing abuse and neglect is the “system” in which these programs and services operate. The current system is fragmented, some believe as a result of insurance barriers, confidentiality restrictions, a lack of interagency communications and other factors which cause families to run between organizations to obtain assistance in a piecemeal manner, ultimately causing frustration to both service seekers and providers.

3. Parent Education is a key component to reducing child abuse and neglect. Although Vernon hosts multiple opportunities for parenting programs including faith-based organizations, schools, community non-profit groups, court systems and Department of Children and Families, there are challenges to getting parents to participate and many of these programs are under-utilized.

C. WHAT CAN WE DO?

The Vernon Community Network and Vernon School Readiness Council agree that a coordinated approach involving local, regional and state partnerships is most effective in addressing issues of abuse and neglect. The following proposed strategies implemented locally, will make a difference for children Birth to 8 who are suffering and/or at risk of abuse and neglect.

1. Develop a coordinated system of response for identified families.

- a) Establish a Child Advocacy Team (CAT), to create a collaborative approach to aid and assist families with complex service needs.
 - Assess opportunity to redeploy existing resources
 - Seek new funding
- b) Capture historical (situational) responses of Vernon Community Network to date to map future responses.
- c) Reduce barriers to participation in existing parent education programs.
- d) Implement mentoring programs, based on the *Parent-Aide* model, a system for long-term commitment to families who exhibit the risk factors connected with child abuse and neglect.
- e) Expand Nurturing Families Network screening and services in order to identify **all** families who present with risk factors for abuse and neglect and connect them with services.

2. Increase the capacity of the Vernon Community Network and its members to better meet the needs of children and families.

- a) Conduct Asset Mapping of Vernon Community Network – individual, group and community members
 - Host a Vernon Community Network Agency Fair – increasing awareness of existing services and resources
 - Make targeted linkages by connecting community needs to the appropriate VCN provider or organization.
- b) Create a coordinated calendar of training and technical assistance opportunities throughout the community.
 - Program Performance and Accountability

D. HOW WILL WE KNOW WE MADE A DIFFERENCE?

• How much did we do?

- # of community volunteers who register for mentor training.
- # of VCN members who attend capacity-building sessions.

• How well did we do it?

- % of volunteers who attend all mentor training sessions.
- % of VCN members who attend capacity-building sessions.
- % of VCN members who participate in the development of a coordinated system.

• Is anyone better off?

- % of trained volunteers that have increased ability to mentor others.
- % of VCN members who report using acquired capacity-building skills in their work environment.
- % of VCN members who adopt a common screening tool.

III. PRESCHOOL EXPERIENCE

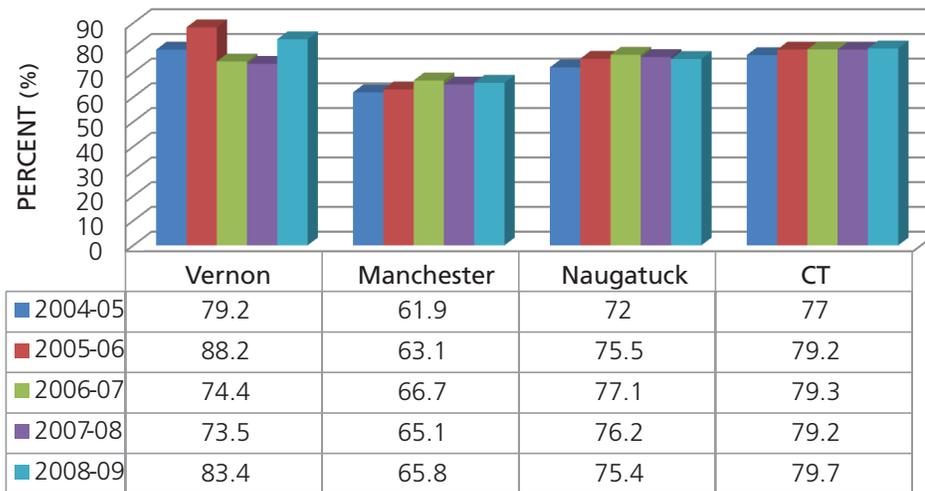
A. WHAT WE KNOW – Where Are We Now?

Preschool experiences are critical to the overall educational outcomes for children. Research states that children with a quality preschool and early care experience perform better academically with a decreased need for special education. Additionally they are less likely to engage in criminal behavior or to drop-out of school as they age. Studies also show that the positive effects are there well into adult years, for both the individual and to society as a whole with higher rates of employment and less dependency on government supports (Perry Preschool Project, Chicago, 2000).

Headline Indicator: Preschool Experience

BASELINE DATA

Kindergarten Students Who Attended Preschool, Nursery School or Headstart



1. Current Conditions

According to the CT State Department of Education (SDE), Education Data & Research (CEDaR) reports, Vernon fares well in comparison to the similar community in size and demographics as well as a neighboring community twice the size – both are in the same District Reference Group (DRG) as Vernon. Additionally Vernon remains close to or above statewide levels.

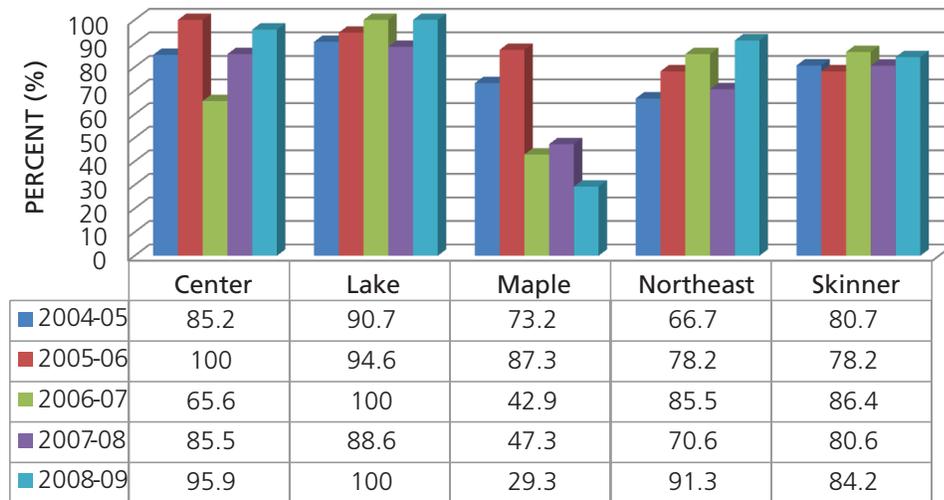
When looking at preschool experience reported by each of the elementary schools in the District, the result is noticeably different. While Center Road and Lake Street school kindergarteners consistently come into school having had a preschool experience, Northeast and Skinner Road have lower percentages, while Maple Street has experienced significantly low percentages of the same. In fact, in the most recent year reported, only 29.3% of Maple Street School kindergarteners had a preschool experience.

“The brain develops to 90% of its capacity in the first five years of a child’s life.”

*CT Commission on Children
newsletter: “School Readiness
and Early Reading Success”*

December 2004

Kindergarten Students Who Attended Preschool, Nursery School, or Headstart



1. The earliest years count
 2. Parents and families matter
 3. School Readiness is more than words and numbers
 4. School unreadiness costs
 5. With so many parents working, we need to get this right
 6. Quality matters
 7. Investments pay off
- From 7 Things CT Needs to Know About Early Childhood – In Brief
Hartford Courant, February 2005*

We must understand further the landscape of early education opportunities in Vernon to better direct our resources to improving the preschool experience for ALL Vernon children – building equity between the elementary schools.

Of issue, however, in furthering our understanding of this information lie two important questions: 1) What is the definition of “preschool experience” and 2) What about the condition of “quality?”

a. What is Preschool?

The CT SDE defines preschool experience simply as “preschool, nursery school, or Head Start.” While the latter is a known program nationally, the other two categories are not defined. This leaves parents to interpret for themselves what they feel is a preschool experience. On the kindergarten registration forms of the past they were simply asked, “Did your child have a preschool experience.” The range of experiences could have been anywhere from “Mom & Me” sessions at a playgroup or library, on up to, and including, a full day, full year program offered at some Vernon centers.

The Vernon School Readiness Council recently developed a kindergarten registration form with questions aimed at getting better information about children’s preschool experience so as to make better decisions on how to assure that all Vernon children had equal opportunity. In the 2010-11 school year, of the 258 registered kindergarteners, 175 parents answered the questions “Where did your child attend preschool?” and “How long did they attend?” The results showed that of the respondents the number of kindergarteners with a preschool experience of two years or more was 97, while 70 children attended preschool for one year, and 8 attended for six months or less. The experience of the other 83 children is not known

b. Where are they Going?

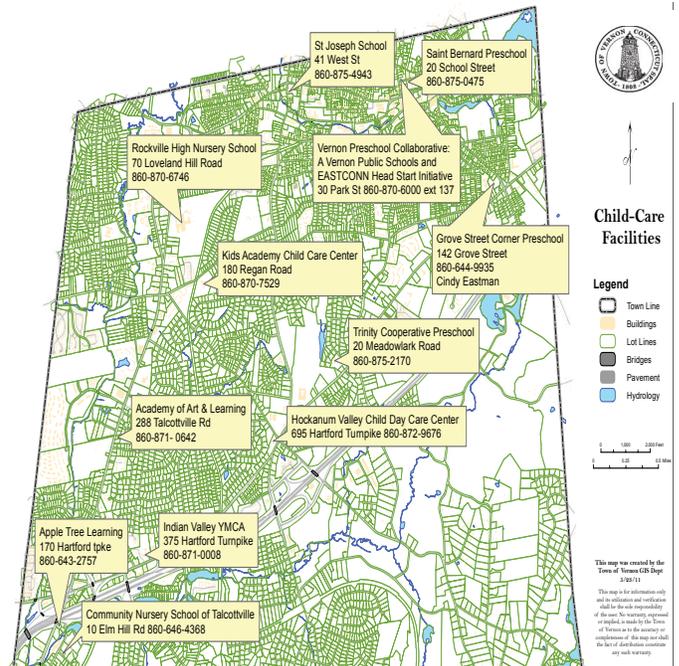
The CT Department of Public Health lists 11 community-based childcare programs in Vernon* as being licensed for childcare, with spaces for 592 preschool children. The Vernon Public School’s Preschool Collaborative, (which includes Head Start) is based in each of the five public elementary schools and offers an additional 130 spaces for preschoolers, for a total of 722 licensed or school-based preschool spaces in Vernon. While it is important to note that other care opportunities exist, such as licensed Family Child Care Providers, Kith and Kin, and Infant/Toddler Care, this Plan addresses the center-based and school-based preschool programs/spaces only.

* **NOTE:** Some parents do enroll their child(ren) in programs out of town that may be close in proximity to their place of employment or family members who may be needed for transportation. This Plan does not include information from or about these other places.

c. What about Quality?

Of the **11** licensed programs, **2** are currently accredited by the National Association for the Education of Young Children (NAEYC) and the Vernon Public School's Preschool Collaborative meets Head Start Performance Standards. These three programs serve a total of **298** children. The remaining eight programs, serving a total of **424** children, are not currently credentialed by either NAEYC or Head Start. They may meet any number of quality criteria but their levels of quality are not formally identified.

Obtaining NAEYC accreditation, considered to be the "gold standard" for high quality early childhood programs nationwide, is an expensive and time-consuming process. Even more critically, maintaining NAEYC standards once accreditation is obtained requires extensive resources and a strong collective commitment on the part of everyone involved. Head Start standards are similarly challenging. According to one local provider, the costs associated with credentialing far exceed the initial application and processing fees. Some estimates are that quality standards can add upwards of 30-40% additional operating costs. Primary of these expenses is increased staff credentials and on-going professional development training. Local providers agree that these costs are variable and difficult to assess given the existing resources. Smaller private centers are ineligible for most state and philanthropic grants, while larger centers and school-sponsored programs may have additional resources such as facilities management, office supplies, and grant funding. As the standards for quality continually increase, necessarily so, costs increase as well.



Most CT early childhood programs are undercapitalized and parents cannot afford to pay the actual cost of quality services. Programs are already subjected to a bewildering array of regulatory, grant, and other performance requirements that are both costly and time-consuming. These, along with general economic conditions, make reaching and maintaining high quality standard, currently being recognized, a difficult challenge.

Licensed Centers – as defined by the CT Department of Public Health in their statutes and regulations pertaining to required health and safety standards.

Accredited Centers – speaks to quality program standards articulated by the National Association for the Education of Young Children (NAEYC)

Head Start Performance Standards – closely aligned with NAEYC quality standards.

2. Impact on Children – Why Quality Preschool Matters

Numerous and extensive studies have documented the lifelong positive impacts of quality preschool education. Children who have had a quality preschool experience generally meet the following criteria:

- Better prepared for kindergarten and elementary school
- More developed social skills
- Better school attendance
- Better test scores, and down the road are
- More likely to graduate from high school, be employed
- Less likely to need public assistance or be incarcerated

10 Quality Components of Early Childhood Programs under Connecticut General Statutes Section 10-16q as amended by Public Act 99-230:

- Collaboration with community and coordination of resources
- Parent involvement, education & outreach
- Health services referrals
- Nutrition services
- Family literacy referrals
- Admission policies that promote racial, ethnic and economic diversity
- Transition to kindergarten plans
- Professional development plans
- Sliding fee scale
- Annual program effectiveness evaluation

Essential components of quality early childhood programs have been well defined. In Connecticut, the School Readiness Initiative is based on the quality accreditation standards of NAEYC, which form the basis for the CT State Department of Education's 10 Quality Components for school readiness programs (see sidebar). Head Start standards reflect similar components.

There are other tools and practices which can offer guidance and pathways to quality besides NAEYC accreditation. Programs may meet some or many quality standards without holding a credential if they are aware of and committed to quality components. However, all quality programs share common standards and characteristics. The impact of quality programs in Connecticut has been documented as well. Dr. Alice Torres' comprehensive 2008 study of school readiness policy and practices in one CT community noted that;

District leaders reported that the quality of the preschool program that a child attends impacts their success in kindergarten. They defined quality early childhood programs as those using established curriculum and assessment standards and maintaining program accreditation.

As part of the initial assessment of the effectiveness of the CT School Readiness Initiative for preschool children in 2000, Dr. Walter Gilliam, Director of the Yale Child Study Center, noted the following:

Classrooms in programs accredited by the National Association for the Education of Young Children (NAEYC) significantly outscored their non-accredited counterparts on virtually every measure of program quality assessed.

B. WHAT ARE WE DOING?

Closing preparation gaps and increasing student achievement begins by strengthening early learning. And over the past five years, the Vernon Board of Education in collaboration with the Vernon School Readiness Collaborative (VSRC) has worked vigorously and actively to keep early childhood education a front burner issue.

- In 2005 the Supervisor of Early Childhood/Special Programs position was created in order to dedicate time towards working with community partners to better prepare children for school success.
- In December 2007 the VSRC commissioned a report on the status of young children in Vernon so as to better address the needs of young children and their families. This report served (1) as a baseline to measure the community's progress toward the overall goal of child well-being for all children ages birth to eight years and (2) as a spark to generate interest in new initiatives designed to improve conditions for Vernon's youngest.
- In January 2008, in an effort to coordinate community practices related to kindergarten transition, the Vernon Public Schools (VPS) Early Childhood Team initiated the first of many conversations with town providers. This effort became more focused on providing professional development to teaching staff and led to the establishment of the professional development subcommittee of the Council, the "Vernon Early Childhood Community of Practice (VECCoP) inclusive of community programs as well as public school preschool and kindergarten staff. This group's early work focused on transition to kindergarten practices, but over time has evolved into a monthly professional development opportunity that addresses group-generated topics such as curriculum standards and assessment, dual language learners, and fine motor development, to name just a few. This ongoing collaboration has proved highly valuable to all involved and the group continues to be committed to aligning practices and building partnerships.

At the present time, the following programs are represented:

Academy of Art and Learning

Apple Tree Learning

Grove Street Preschool

Hockanum Valley Child Day Care Center

Indian Valley YMCA

ECHN Vernon Family Resource Center

Vernon School Readiness Council

Vernon Preschool Collaborative (Public School preschool/Head Start Collaborative)

Vernon Public School Kindergarten Program

- In September of 2009, the VPS Preschool Program partnered with the EASTCONN Vernon Head Start Program to provide high quality early childhood programming for three and four year old children in their home schools. In addition to almost tripling the number of students served (from approx. 60 to 150), this partnership, known as the Vernon Preschool Collaborative, has proven to have many significant benefits,

including shared resources, expanded high-quality professional development, improved transitions for students, and stronger school-family-community connections. Now located within each one of the five elementary schools, the Vernon Preschool Collaborative is enjoying its second year of implementation and continues to seek ways to improve and expand, as we continue to serve Vernon preschoolers and their families. It is believed that this will help increase the percentage of kindergartens district-wide who report on the 2011-12 registration forms that they had a preschool experience.

Additional efforts to increase the availability of high quality preschool to Vernon children have been in place for several years. The Vernon School Readiness Council has spearheaded many of these efforts, including the *Ready, Set School Fair*; publication of a program directory; *Dessert & Discovery* – in partnership with the ECHN Vernon Family Resource Center, a workshop series for both center-based and family childcare providers; and outreach and networking opportunities to the community.

C. WHAT CAN WE DO?

In order to move the high quality early childhood agenda forward, two critical issues must be addressed. First, those involved must come to an agreement about what defines a program as being high quality, and secondly, how do we work collaboratively to help each program meet this definition. Can we identify and create pathways and resources to help programs meet these standards?

At the present time, the following two systems are recognized nationally as being indicative of meeting the definition of high quality: 1) Accreditation by the National Association for the Education of Young Children, and 2) Head Start Performance Standards. It is intended that the *Vernon School Readiness Council's Vernon Early Childhood Community of Practice*, in addition to implementing these national systems, take the following actions:

1. Develop community based-quality standards (e.g. Vernon Early Childhood Quality Indicators) that all preschool programs could work towards.

- a) Expand VECCoP Membership to include all preschool providers in Vernon.
- b) Examine existing quality standards.
- c) Assess current standards and practices at the centers in Vernon.
- d) Adopt quality indicators.
- e) Share with the community to raise awareness of quality standards.

2. Provide coaching and other supports to programs while they work to attain and maintain these standards.

- a) Create Coaching job descriptions, qualifications.
- b) Establish volunteer participation guidelines for providers.
- c) Create a benefit program and assessment procedure for centers needing access to financial support.
- d) Create Resource binders for participating programs/centers

D. HOW WILL WE KNOW WE MADE A DIFFERENCE?

- **How much did we do?**
 - # of preschool programs that participate in the development of agreed upon quality standards for Vernon.
 - # of preschool programs that implement the standards.
- **How well did we do it?**
 - % of preschool programs that increase quality standards based on coaching and other supports provided.
- **Is anyone better off?**
 - % of preschool programs that meet high quality criteria of as defined by the Vernon Early Childhood Quality Indicators.
 - % of kindergarteners who attend a quality preschool as defined by Vernon Early Childhood Quality Standards.

IV. THIRD GRADE CMT READING

A. WHAT WE KNOW – Where Are We Now?

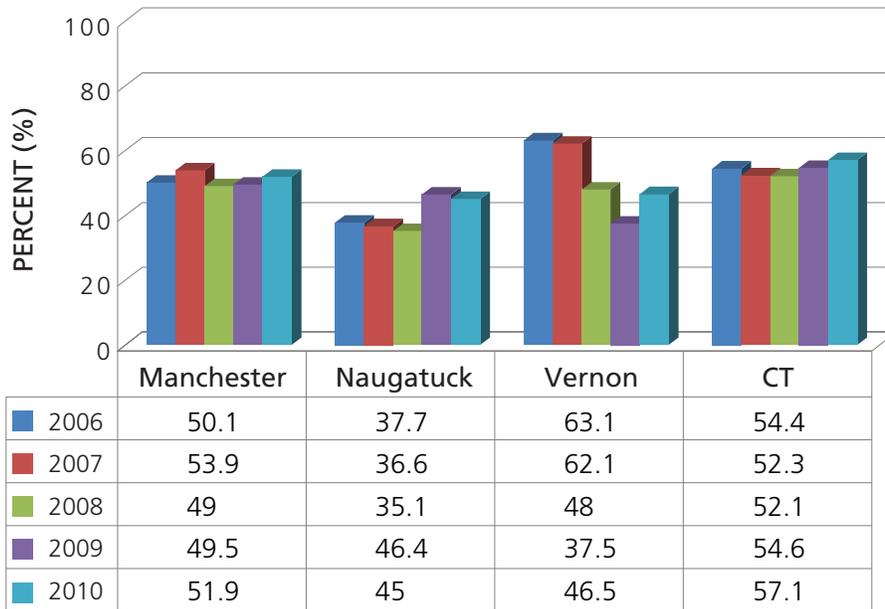
“Deficiencies in early achievement, particularly reading, can often predict later academic failure, and correlate with incarceration and welfare dependency as young adults.” (*Connecticut Appropriations Committee – Part 1, Quality of Life (Population) Result for Early Childhood Care and Education*).

Headline Indicator: CMT Reading

BASELINE DATA

3rd Graders At/Above Goal on CMT Reading*

*4th Generation – CT State Department of Education CEDaR



Source: State Department of Education

1. Current Conditions

A key indicator of success in school is reading on grade level by the end of grade 3. Slightly more than half of all grade 3 students in the state of Connecticut are reading at or above grade level. Vernon lags behind the state average with just under half of its students reading on grade level by the end of grade 3, while it has outperformed some of the communities in its District Reference Group (DRG). There are also notable differences when looking at the results by each of the five elementary schools in Vernon as the following graph depicts.

Connecticut Dept. of Education Student Mastery Testing Scale

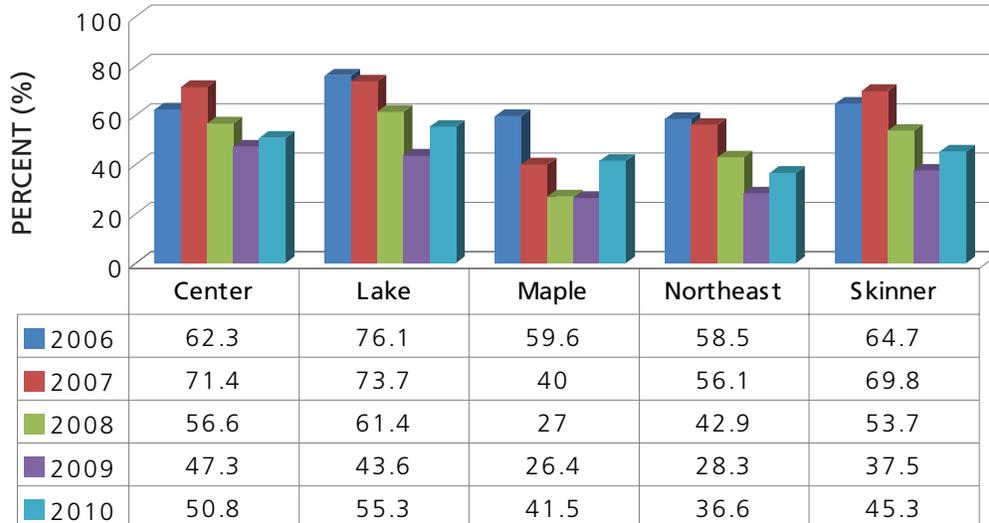
- 5 Advanced
- 4 Goal
- 3 Proficient
- 2 Basic
- 1 Below Basic

Secondary Indicator: CMT's

BASELINE DATA

3rd Graders At/Above Goal on CMT Reading by School and Year*

*4th Generation – CT State Department of Education CEDaR



Source: State Department of Education

a. What is involved in reading success?

A guaranteed viable curriculum is at the core of every reading program. A public school district develops a written curriculum based on national and state standards which includes a purposefully designed set of knowledge and skills which we expect all students to achieve. Once the curriculum is determined, then the search for tools with which the curriculum is implemented begins. This includes the implementation of a core reading series as well as additional support materials that enable all learners to access the curriculum.

b. How do we know if they are successful?

Once we know what we want students to know and be able to do, it is important to assess our students using common assessments. This enables the teachers to determine exactly what each child can do and where there are gaps. Assessment results are used to inform instruction. For those students who are able to perform the work, they are moved to the next level of work. For those who might need more time and/or assistance, there might be remedial work within the class or in addition to the class. In between the common assessments given grade-wide, there are many short assessments that provide the teacher with direction on what learning a child needs on a day-to-day basis.

c. What are some of the challenges?

Reading is a complex task made more complex by the differences between each child. Instruction does not look the same for each child; each child's learning style (auditory, visual, kinesthetic) needs to be addressed for the child to learn. Both the quality and the differentiation of instruction are pivotal to student achievement. Teachers can improve their practice through professional development and collaboration with other teachers.

In Vernon the variation in attainment of pre-literacy skills for children entering kindergarten is great. Some children enter school with a working vocabulary of 5,000 words while others have only 2,500.

2. Impact on Children

Grade 3 is a very exciting time for children in our educational system. They have spent at least three years learning to read by working discretely and holistically on the five components of reading: vocabulary, phonics, phonemic awareness, fluency, and comprehension. If there are deficiencies in any of those five areas it makes it difficult for a child to understand or even to decode what s/he is reading. The result? All learning will suffer. The research shows that children must be reading on grade level at the end of grade 3 in order to succeed in school. It is only a very small percentage of children who cannot read on grade level by the end of grade 3 who will ever “catch up” with their peers in reading. Therefore **early intervention is our key to success.**

We know that reading aloud to children early and often is critical to vocabulary development and an overall understanding of how words and pictures tell stories. There are children who have many books in their homes and have been read to since birth, and there are others for whom this is not the case.

By the time our students are in 3rd grade they are making the switch from *learning to read* to *reading to learn*.

B. WHAT ARE WE DOING?

a. Instruction

Two years ago, the Vernon Public Schools invested in a core reading series to be implemented district-wide in kindergarten through grade 5. Teachers have been using the series with fidelity for two years utilizing not only the core program but exploring and utilizing the ancillary support materials that come with the series. Teachers have provided students with reading materials on each student's individual reading level and have created classroom libraries in which students may choose books on their reading level as well.

b. Assessment

At the beginning of each school year, every student is assessed to determine each child's reading level as well as his or her proficiency in vocabulary, phonics, phonemic awareness, fluency, and comprehension. Teachers then are able to plan lessons for individual children or for small groups of children to address those needs. Each elementary school has an intervention block in addition to the regular reading block during which all students are grouped across the grade level in order that we may address specific gaps and at the same time push our students who are already on grade level to the next level. These groups are re-formed every six to eight weeks in order to continually address gaps and move our students to higher achievement in reading.

c. Review & Revise

The Vernon Public Schools has recently adopted a five-year curriculum review and revision cycle. The reading and language arts curriculum is now in the revision stage. The recently released national Common Core State Standards (CCSS) have been adopted by the state of Connecticut and Vernon is using the CCSS as the framework for revision to our curriculum. A complete revision of the curriculum will provide each teacher with a common set of expectations for all children across each grade level. Common assessments (in addition to the universal screening assessments) will be developed that will allow the district to not only pinpoint the level of achievement of each child on the standards but will inform our instruction and our future curriculum revision. This provides a high level of accountability within the district as well as a mechanism for accountability to the public on the accomplishments of the district.

C. WHAT CAN WE DO?

Children entering kindergarten in the Vernon Public Schools bring a variety of background and preparation with them. There is a wide disparity in the socio-economic status of the families in Vernon (an average poverty rate of 46% in our elementary schools) and that appears to influence the experiences each child has prior to entering school. In addition to a wide range of vocabulary acquisition, there is a wide range of contextual experiences for each child. While we live near farmland, many of our children have never seen a cow. We are relatively near the ocean and some of our children do not have the experience of a day at the beach. Some children do not have home libraries or visit our public library with regularity. In addition, the preschool experiences that our children have are varied in quality.

1. Provide opportunities for preschool children to be exposed to and interact with text and to contextually increase their vocabulary acquisition and background knowledge

- a) Ensure that every child has access to a high quality preschool experience.
- b) Ensure that all children have access to text – put books into the hands and homes of children.
- c) Provide varied opportunities for children to engage in experiences which expand their background knowledge and vocabulary.

2. Provide a guaranteed viable curriculum, delivered through high quality instruction and ensured through a variety of assessments, to which every student has access and multiple opportunities to achieve.

- a) Develop and Implement a reading and language arts curriculum based on national and state standards.
- b) Provide opportunities for teachers to develop and expand their instructional practices.
- c) Differentiate instruction for each learner to ensure that every student has access to the curriculum.
- d) Develop and implement common assessments that measure student achievement of the curriculum and report the results.

D. HOW WILL WE KNOW WE MADE A DIFFERENCE?

• How much did we do?

- # of varied preschool offerings that ensures access to high quality preschool for every child.
- # of preschool providers that regularly reviews and implements pre-literacy skills.
- # of books in the hands of every child at regular intervals from birth to age 5.
- # of varied opportunities for young children to expand their world and build their vocabulary and background knowledge.
- # of complete reading curriculum in the hands of every teacher.
- # of common assessments.

• How well did we do it?

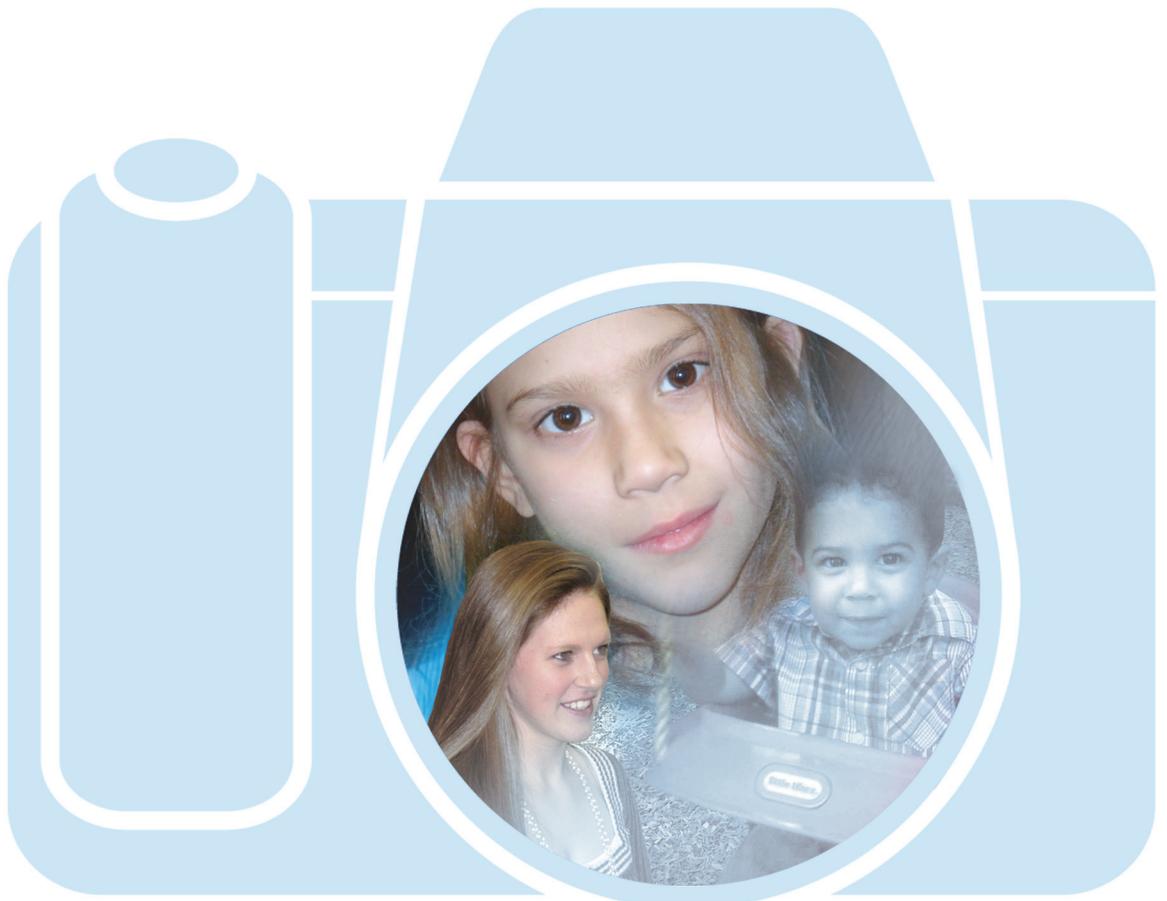
- % of books delivered to children birth to five that are read.
- % of preschool children with varied opportunities for outside learning.
- % of local reading/language arts curriculum implemented with fidelity.
- % of kindergarten students at low risk in letter naming fluency, letter sound fluency, and phoneme segmentation on fall universal screening assessments.
- % of kindergarten students reading at least at the state goal (Level 4 = Level C in Vernon) at the end of kindergarten.
- % of students reading at/above goal at each grade level.

• Is anyone better off?

- % of children who are assessed ready to learn at kindergarten entry.
- 85%-90% of all children will read at least the state goal at the end of kindergarten.
- 100% of children will read on grade level by the end of grade 3.

YOUTH
Ages 9-18
Safe, Healthy, Productive

- Juvenile Risk - FWSN & Youthful Offenders
- School Attendance
 - *High School Graduation*



YOUTH (Ages 9 – 18)

I. JUVENILE RISK – Families with Service Needs (FWSN) & Youthful Offenders

A. WHAT WE KNOW – Where Are We Now?

All children need to be in safe homes, schools and communities, and must *feel* safe in order to thrive. As the *Community Status Report on Young Children in Vernon* states, there is a direct tendency and “likelihood of engaging in juvenile delinquency, adult criminality, and violent behavior, when children are impacted by childhood abuse and neglect”. It is well documented that the trauma of child abuse and neglect can result in children and youth feeling an inability to manage emotions, behaviors (aggressive, destructive and self-harming), and feelings of isolation and loneliness. Collectively, professionals from Rockville Juvenile Court-Probation, Rockville High School, Vernon Police and Department of Children and Families confirm that Vernon youth involved in the court system mirror this description. As a result, Vernon Community Network believes there is strong evidence suggesting that the following data around juvenile delinquent behavior in Vernon can be linked to the child abuse and neglect data previously described in the *Children* section of this plan. The table below outlines the court charges for Vernon youth by age, offense and year.

Headline Indicator: # Vernon Juveniles Referred To the Juvenile Court System

BASELINE DATA

# Vernon Juveniles Referred to the Juvenile Court System By Year and Age						
Age	2005-2006	2006-2007	2007-2008	2008-2009	2009-2010	Total
8 yrs	2	0	0	1	0	3
9 yrs	3	0	0	1	0	4
10 yrs	0	1	0	1	1	3
11 yrs	5	1	4	1	1	12
12 yrs	6	6	7	5	3	27
13 yrs	13	16	16	19	10	74
14 yrs	18	14	22	25	11	90
15 yrs	37	27	28	24	35	151
16 yrs	19	12	12	8	16	67
17 yrs	9	10	4	2	3	28
COUNTS	66 Delinquency 27 FWSN 24 YIC (16&17)	37 Delinquency 34 FWSN 19 YIC (16&17)	61 Delinquency 22 FWSN 13 YIC (16&17)	53 Delinquency 23 FWSN 10 YIC (16&17)	63 Delinquency 11 FWSN 4 YIC (16&17)	

* **NOTE:** The table displays the number of juveniles referred to the Juvenile Court, and while there is not a duplicate count of youth, one youth can incur more than one charge against them.

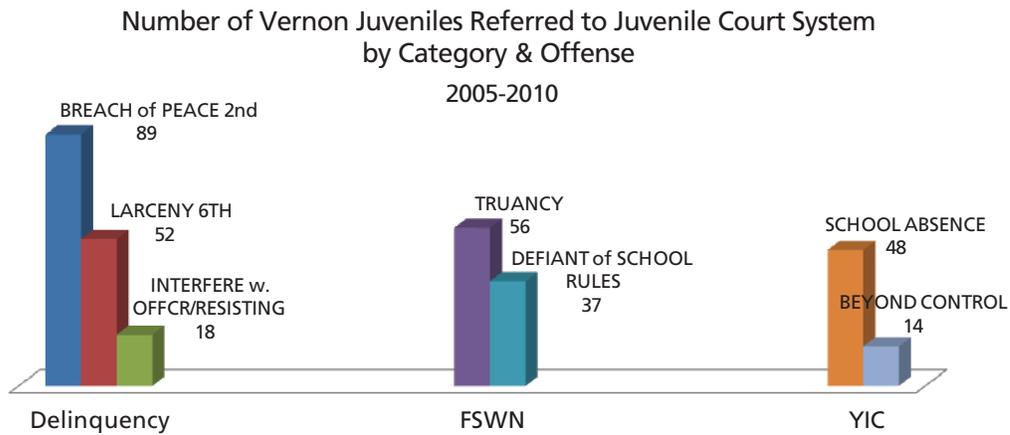
* Calculation – Annual average of children 13-17 according to Census 2000 (1,626) and 2010 Vernon Public Schools enrollment data (1,354) compared to the annual average number of referrals to juvenile court (84). **NOTE:** Some 18 year olds are included in the 12/2010 school population figures.

DELINQUENCY (*Criminal charges*): e.g., Breach of peace, larceny, criminal mischief

STATUS OFFENSES (Non-criminal juvenile offenses) e.g., Runaways, beyond control of parents, engaged in indecent/ immoral conduct, habitually truant, or exhibit defiance of school rules. Historically more than half of these youth have ended up with a delinquency petition.

- **FWSN** (*Families with Service Needs*), ages 8-16.
- **YIC** (*Youth in Crisis*), age 17.

The following graph displays the top juvenile offenses in Vernon, by category, over the last five years. In Vernon, the majority of delinquent and status offense behaviors occur between the ages of 13-17 at a rate of 5.6% for this age group. Annually, this totals 84 youth referred to juvenile court.



1. Current Conditions

Between 2007-09, there were two significant changes to laws that impacted juvenile offenders. One change (2007) was that Status Offender (e.g. FWSN/YIC) youths could not be adjudicated delinquent because of a violation of a court order or be detained unless the youth commits a delinquent act. In other words, detention is not an option. The second change (2009) defined 16 year olds as 'juvenile', thus, less likely to be charged as adults, depending on the nature and severity of the offense.

Locally experts say that there are good, yet challenging, aspects of the new laws. A positive aspect is that a troubled youth will now have a greater chance to change their behavior and avoid a less-forgiving adult criminal justice system. The challenge is that while the new law allows law-enforcement and the Court's practice of referring at-risk youth to support services, there are no legal consequences if the juvenile does not comply. This change reflects the emerging understanding that when a youth skips school, runs away or acts out of control – there is a reason. These youth need interventions and services to help them self-manage, as well as programs that work with all family members to address and change the child's behavior over time.

2. The Impact on Youth

The chart below displays the effects of childhood trauma and the related criminal activity, which may result over time.

EFFECTS OF CHILDHOOD TRAUMA*

Childhood Trauma	Outcome	Coping Pattern	Outcome	Criminal Activity
Physical Abuse	—>	Fighting with Peers	—>	Assault
Parent-child separation	—>	Substance Abuse	—>	Drug possession
Witness to violence	—>	Anxiety	—>	Accessory to homicide
Parental substance abuse	—>	Gang Activity	—>	Fraud
Sexual molestation	—>	Sexualized Behavior	—>	Prostitution

*Adapted from Dr. Denise Johnston, "Effects of Parental Incarceration", in Gabel and Johnston, p .81

TIFFANY'S STORY

To localize this impact, the following story of "Tiffany" (name has been changed) represents one seen repeatedly in Rockville Juvenile Court System.

 <p>Age 8 Concerns of domestic violence, substance abuse and sexual exploitation by a relative. DCF involvement begins.</p>	 <p>Age 12 Tiffany's behavior escalates (<i>sexual promiscuity, truancy, gang involvement, drug/alcohol use</i>) complicated by mother's inability to adequately parent. DCF re-involved with community-based services in place.</p>	 <p>Age 13 Chronic truancy from school. Juvenile Court involvement begins. Within 2 weeks she returns to court after being charged with Assault 3rd and Disorderly Conduct after a physical altercation with her mother. DCF and the Court decide to send her to live with relatives and receive in-home services.</p>	 <p>Age 14 Returned to mother's care. 3 months later, she is back in court for truancy. Later that year, she is charged with 2 counts Breach of Peace and Disorderly Conduct occurring in the home. Mother did not seek medical or psychiatric care, so Tiffany is once again removed from home and placed with relatives.</p>	 <p>Currently Tiffany is living in a structured environment with relatives. She receives counseling, support from DCF, and is now attending school consistently, with no current court involvement.</p>
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Throughout DCF and Juvenile Court involvement, Tiffany received educational advocacy, individual counseling and psychiatric treatment with hospitalization. She and her family had intensive family preservation and multi-dimensional family therapy. She was also placed, by court order, onto electronic monitoring, into detention, and referrals were made for respite care, which were refused.

B. WHAT ARE WE DOING?

The changes in law described in section I. A 1 above brought to the forefront a recognition locally that in many instances the same children that DCF identifies and cares for are the same youth that juvenile justice system works with and counsels. This presented an opportunity for action. The various partners already involved in helping these youth and families looked at sharing/combining resources by reinstating the Vernon Juvenile Review Board. Through this vehicle, various members of the Vernon Community Network --- Town of Vernon Youth Service Bureau, Vernon Police Department and Vernon Public Schools, Department of Children and Families, Rockville Juvenile Court and KIDSAFE CT --- come together to better coordinate interventions that are less punitive and more healing and restorative in nature.

This Board is responsible for diverting youth involved with both minor delinquent and FWSN status offenses from the juvenile justice system. Cases are referred by a variety of youth-serving and educational entities. The Board reviews these cases and makes recommendations that prevent youth from falling through the cracks, with an effort placed on working with the youth and their family to determine WHY the behavior is occurring instead of focusing on the behavior alone.

C. WHAT CAN WE DO?

The Leadership Workgroup and content area experts agree that a coordinated community response to prevention and early intervention is tantamount to success in reducing the number of Vernon youth involved in status offending and delinquent behaviors. It is imperative that parents, service organizations, educators and communities come together when tackling the issue of juveniles at risk. The following strategies outline an approach that will be effective in producing positive outcomes for Vernon youth, helping them to grow up healthy, caring, productive, and connected to their community.

Research and best practice tell us that using a strength-based approach to develop the assets of children and youth in order to produce behaviors that are more positive, lead to success – in their school, family and community. Specifically, the Search Institute has designed and broadly field-tested the 40 Developmental Assets. This is a framework for positive youth development, grounded in extensive research, resiliency, and prevention.

In addition to implementing the strategies outlined in the Child Abuse and Neglect section of this plan (pg 18), we propose the following to target status offending and delinquent juveniles as well as those adults who help them.

1. Design a positive youth development system focused on preventing criminal and unsafe behaviors.

- a) Continue to strengthen the capacity of the Juvenile Review Board.
- b) Conduct adult volunteer recruitment and training around mentoring and peer-support for youth and families.
- c) Create neighborhood-based safe places with adult supervision, with a centralized location – for accessibility.
- d) Maintain and expand the summer youth employment program of the Vernon Youth Services Bureau.
- e) Create Youth Emergency Services or similar community-based respite programs.
- f) Expand hours of the Vernon Public Schools Expulsion Center.

2. Encourage child and youth-serving organizations to promote *Developmental Assets* (The Search Institute.)

- a) Provide professional development opportunities on the *Developmental Assets* for those who work with Vernon youth.
- b) Provide parents, civic and faith organizations, and other caring adults training in the *Developmental Assets*.

D. HOW WILL WE KNOW WE MADE A DIFFERENCE?

- **How much did we do?**
of parents/professionals who register for Developmental Assets training sessions.
- **How well did we do it?**
% of parents/professionals satisfied with Developmental Assets training sessions.
- **Is anyone better off?**
% of those trained who incorporate Asset development in their work.
% of parents/professionals reporting a decrease in high-risk behaviors of youth they work with.

II. SCHOOL ATTENDANCE

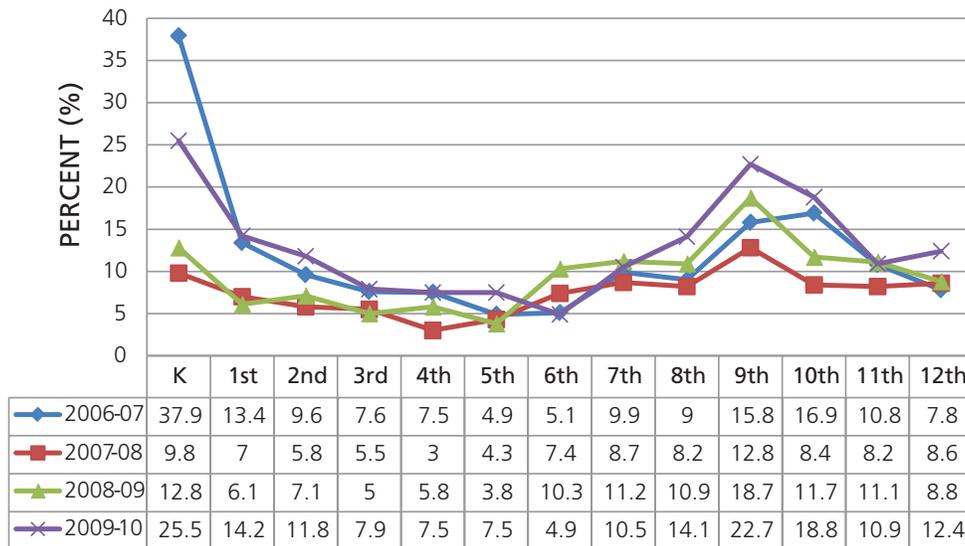
A. WHAT WE KNOW – Where Are We Now?

Solid, quality education is critical to productivity and economic stability in adult years. We know that in order to learn, regular school attendance is key to educational attainment and success. The graph below depicts a rise and fall in attendance trends throughout the grade levels. What stands out in this data is the evidence that there are significant swings in attendance during transitional years, which are Kindergarten, 6th grade, and 9th grade years. High school students identified in the 9th grade experience the greatest amount of absences, risking the loss of credit and preventing graduation. Conversely, students in the twelfth grade have the least amount of absences likely due to the perceived goal and incentives associated with graduation.

Headline Indicator: School Attendance

BASELINE DATA

Students Attending Less Than 90% of Scheduled Days
By Grade and School Year*



* Calculation – 182 scheduled days x 90% = 164 days, or conversely, 18 or more absences.

1. Current Conditions

Regular school attendance is essential for students to achieve the greatest benefit from the educational process. While the data reflects specific grade levels during which attendance is less than beneficial (K, 6th, 9th), a breakdown of Select Student Characteristics of this population further enhance our understanding of secondary factors that may contribute to school attendance. According to Connecticut Consortium on School Attendance for the Town of Vernon, these characteristics include gender, race, special education, English language learners (ELL) and Free Reduced Lunch Program (FLRP).

Consistently, the top two student characteristics of those attending less than 90% of scheduled days were students 1) Receiving free and reduced lunch (FLRP) and 2) Of a minority race, primarily Black or Hispanic.

Elementary Schools *

Consistently there were nearly 3/4s of the students in this attendance category were receiving FRLP. Slightly less than 50 % were minority students and close to 1/6th of them were identified as Special Education students. While not a large difference, there were slightly more boys than girls year to year in this category.

Middle School *

More than 50% of VCMS students in this attendance category from year to year were receiving FRLP. Nearly 40% of these students were minority students and close 1/6 of them were identified as Special Education students. There are an even percentage of boys and girls in this category.

High School *

Differing from Elementary and Middle School, RHS had a large range from 1/4 to 1/2 of students in this attendance category receiving FRLP. Slightly over 1/3 of these students were minority students and approximately 1/4 of them were identified as Special Education students. Consistently, almost 60% of those attending in this category are female.

*Note: In 2009-10 student characteristics previously titled Free and Reduced Lunch was reported as Low Income. Of interest, the percentage of students with that characteristic in that year was significantly less across all school levels from previous years, indicative of a definition change.

Its patterns begin in the early grades, and when added up through high school years, the frequency of these occurrences results in a disruption both in the classroom environment and in the student's educational attainment.

The story does not stop here; also not explicit in the data is the issue of Transition. Successful educational transitions are a *process*, not an event, making them all the more critical.

*"We have students who have missed 40 days of a school year... 22%. Students who miss 40 days of school have no chance of maintaining continuity of instruction."
A Vernon Educator*

OTHER FACTORS CONTRIBUTING TO SCHOOL ABSENCES

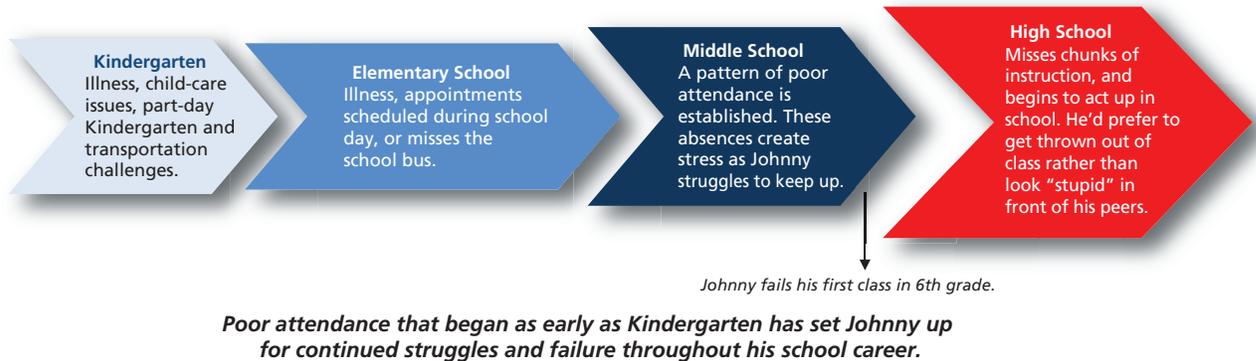
- Improper clothing for inclement weather – leading to illness, contributing to absenteeism
- Lack of structure at home – Unenforced bedtimes lead to fatigue for the child, resulting in poor grades, high absenteeism and potentially school retention
- Family vacations during scheduled school days – causing students to potentially fall behind in classroom assignments
- Lack of urgency for education; a sense of apathy on the part of parents and students
- Families that are over-extended in extra-curricular activities
- Cases of generational school failure
- Teen pregnancy

2. Impact on Students

Clearly, the issue of school attendance impacts educational attainment. In some cases, this may culminate in high school withdrawal or “dropping-out.” With this in mind, the following story portrays the cumulative impact of poor attendance.

JOHNNY'S STORY

Johnny is a typical student who by his senior year has missed 250 days of school. A normal school year consists of 180 days. Johnny's poor attendance habits began in Kindergarten. Reasons given for missing school range from physical illness to typical family emergencies, to the emotional stress and strain of feeling disconnected.



B. WHAT ARE WE DOING?

Underneath the facts and figures lie a recurring theme identified by local educators as “Where do I fit in?” This has been echoed by professionals in service organizations and the faith community as a prevailing lack of purpose felt by many local youth, described as a student's “disconnect” to school and community. They lack a sense of person, place and purpose.

1. TRANSITION PRACTICES

The transition to school should build on students' prior learning and develop strong links between parents and school. Children's perceptions of themselves as learners and as someone who belongs at school are often formed early in their schooling. Vernon Public Schools has a system of transitions that move students from grade level to grade level. Within each grade level transition, there are various activities designed to include key groups most important to children transitions: educators, school personnel, community providers, parents and students.

a. Kindergarten/Elementary School

For a very young child, the school environment differs from what they are used to at home, or in an early care setting. Vernon school staff and parents want children's entry into the public school system to be a positive, welcoming experience. The Vernon Public Schools, in collaboration with the Vernon School Readiness Council, developed a plan to facilitate a smooth transition from home or preschool to the world of kindergarten. Some key practices that help this process are as follows and are broken down by target group:

- **Transition to Kindergarten Informational Night.** All families who have children entering kindergarten are invited to an overview of kindergarten registration and curriculum.
- **Kindergarten Registration Campaign.** Held in the spring to encourage timely registration.
- **School-Specific Kindergarten Orientation.** Each spring, elementary school principals invite families to visit their schools for an orientation to kindergarten.
- Many schools offer an informal **meet the kindergarten teacher** event prior to school opening.
- The **Vernon Early Childhood Community of Practice** is a group of school and community based preschool teachers and administrators who meet regularly to discuss classroom practices, share information, align curriculum around best practices, and provide joint professional development opportunities for teachers and administrators.

- The **Vernon School Readiness Council** meets to share data gathered on preschool children and families, initiate referrals as needed, pass on assessment profiles to kindergarten teachers, and make parents aware of resources to support smoother, better-informed kindergarten transitions practices.

b. Middle School

The next major transition occurs when moving from elementary grades into middle school. Students concerns often include worry over schedule, finding their way around, fitting-in, and at times, personal safety. Similarly, educators understand the challenges of a more rigorous curriculum and grading with multiple teachers, less free time, reduced parent involvement and more peer pressure. Transition practices into Vernon Middle School are implemented in the second semester of a 5th grade student's academic year.

In **mid-winter (February/March)** prior to entering middle school, elementary teachers make class recommendations to 6th grade teachers regarding a student's level of instruction. Teachers and counselors meet face to face to discuss individual student progress, and academic, social, and home concerns.

In **spring (May)**, each elementary school visits the middle school for a large group presentation, and a small-group tour of the school that includes a visit to a class in session and lunch. There is also an Open House/Information Night for parents and their 5th grade student.

In **late summer**, during the week before school starts, students, with parent supervision, are welcome to visit the school building.

The first week of school, students tour the building and spend time adjusting to their new environment (practicing opening lockers, changing classes, going through procedures and expectations, etc.).

School counselors/social workers/psychologists lead small groups for those students identified as needing support with transitioning or other issues with school adjustment during the first marking period.

c. High School

Students entering high school look forward to having more freedom and independence while making new and more friends. However, they are also intimidated by upperclassmen, finding their way around, exams and getting lost in a larger, unfamiliar school. As young adolescents make the transition into high school, many experience a decline in grades and attendance. (Barone, Aguirre-Deandreis, & Trickett, 1991).

In **January/February**, counselors go to the middle school to discuss the high school. The High school also hosts a grade 8-orientation evening for parents and students. All eighth grade students come to the high school for a tour, one block class, and a lunch period.

Students also transition with the help of a student run (Link Crew) orientation day, a few days before school starts. Students identified as being at-risk are given additional tours, led by the school social worker. Additional tours or meetings are available to parents, if requested.

2. SCHOOL-FAMILY-COMMUNITY PARTNERSHIP PROJECT

Vernon Public Schools made application in August 2010 to participate in the Connecticut State Department of Education's School-Family-Community Partnership (SFCP). This joint venture works to increase family and community involvement with the schools in order to build awareness of the positive impact these relationships have on student learning. Maple Street School is the first participant in the project, with a building-specific action team that developed a plan focusing on facilitating family and community involvement in the areas of literacy and positive behavior. The intention is for all other schools in the district to follow suit in developing a school-specific action plan.

3. ATTENDANCE GRANTS

2009-2010 – Grants supported a modified school day and instruction for some students, use of NovaNet online learning for credit recovery, and Scientific Research-Based professional development.

2010-2011 – Grants support the following activities: an intense summer transition program for some eighth grade students and parents on developing a ten-year educational plan; increased information to parents on helping their child achieve academic goals; professional development for teachers on helping students achieve academic goals; and collaboration with the Juvenile Review Board and court services on students' academic programs.

4. INSTRUCTIONAL ROUNDS

The Vernon Public School Network (VPSN) connects the *individual* school community to the larger *whole* school community of Vernon by forming a network of professional educators that look at the teaching and learning of all our students. This new model to Vernon has helped to turn isolated schools throughout the town into a cohesive community, designed to push the practice of educators forward toward better-designed tasks that result in higher student achievement.

While Attendance data spans the entire student body K-12, we are keenly aware that the culminating effect on a smaller sub-set of students requires attention. While the Johnny's Story is hypothetical, we see it come to life when examining the Vernon high school graduation and dropout rates.

GRADUATION and DROP OUT RATES

Connecticut State Department
of Education

4 Year Graduation Rate

The number of high school students who receive a standard diploma within four years/students who were first-time freshmen four years ago.

Annual Dropout Rate

**Formula: total dropouts, grades
9-12 / total**

October 1 enrollment, grades 9-12

The denominator of the annual dropout rate does not include those students entering and transferring out of school after the October 1 date. However, the dropout period spans the summer prior to a school year plus the school year; e.g., July 1, 2003, through June 30, 2006.

Class/Cumulative Dropout Rate

**Formula: total dropouts for the class
over four-year period / grade 9**

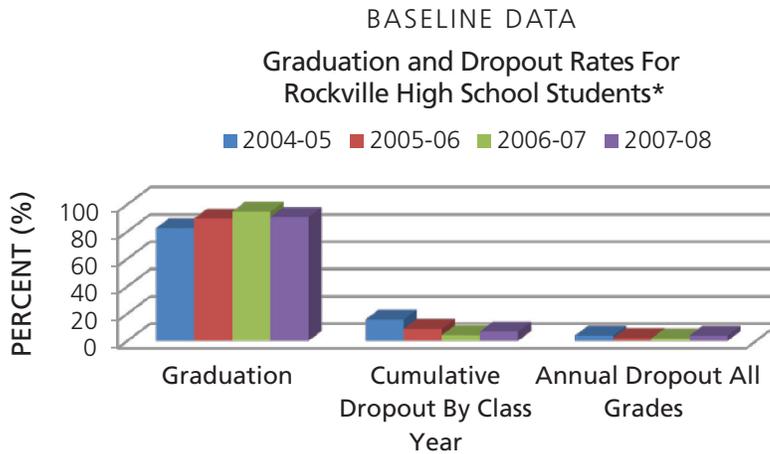
October 1 enrollment for the class.

The cumulative dropout rate is a class rate that reflects the proportion of students within a high school class who dropped out of school across four consecutive years.

A. WHAT WE KNOW – Where Are We Now?

As we learned from the "Johnny" story, the impact of chronic absenteeism can result in eventual dropping out of high school. As the graph below displays, the majority of Vernon students who enter Rockville High School as freshman in their first year *do* go on to graduate with their class in the traditional 4-year program. However, while in 2005-2007, the cumulative and annual dropout rates declined, in 2008 the annual dropout rate more than doubled (1.7% up to 3.7%) and the cumulative dropout rate increased more than one quarter. (4.1% to 6.8%).

Secondary Indicator: High School Drop-out Data



* **NOTE:** Prior to 2009, graduation rates were estimated based on annual dropout rates. Beginning in 2009, a more accurate tracking system that follows a student from initial entrance into 9th grade through to graduation will be reflected in the data. Connecticut and 49 other states signed an agreement with the National Governors' Association to this effect.

IS THIS OKAY?

To help us better understand the data reported on the State Department of Education (SDE) Connecticut Education Data and Research (CEDaR) website, and the impact on Vernon children, we calculated that between 2005 and 2008, there was a total of 5,044 students who attended Rockville High School; which equals 1,261 enrolled annually – freshman through senior. During that same period, 141 students dropped out of high school, which equals 35 students per year.

1. Current Conditions

There are many students, for various reasons, who do not graduate on time or, at all. According to *America's Promise Alliance* website and echoed by our local educators and school counseling staff, some of these reasons include family situations, boredom or lack of motivation, behavior management challenges, or becoming worn down by repeated academic failure.

• 1 student in America drops out every 26 seconds; or 1.23 million/year.

• About half of African American and Hispanic youth fail to graduate on time.

www.americaspromise.org

B. WHAT ARE WE DOING?

In Vernon, a two-fold approach is currently used. One approach focuses on how to prevent high school dropout while working to increase graduation rates, the second offers opportunities to further their education through Vernon Regional Adult Basic Education (VRABE).

1. PREVENTION

In October 2009, Connecticut's Dropout Prevention Summit provided a public forum that presented a multi-year, cross-sector strategic framework to:

- Improve K-12 educational outcomes for all Connecticut students.
- Address the complex causes of middle and high school academic failure.
- Reduce dropout rates among Connecticut's at-risk young people.
- Expand access to career pathways leading to post-secondary training options, including technical training that leads to good jobs with good pay.

Twenty-three districts with lower-than-average graduation rates were invited. *Vernon* was one of these identified districts which received a one-year \$5,000 planning grant in order to establish a dropout prevention committee to study the America's Promise "Attendance, Achievement, Attainment" framework. Also known as The 3 A's, the framework's three priorities are critical to student success as soon as they begin their educational careers and are heavily influenced by parental action/beliefs:

Attendance Every Day - Ensure children go to school regularly

Achievement Every Year - Monitor and help children make satisfactory progress each year

Attainment Over Time - Set high expectations for children and plan for attaining their long-term goals

2. ADULT/CONTINUED EDUCATION

According to the State of Connecticut, the present allowable age to withdraw from school with permission is 16 years of age. Effective July 2011, the law will change to 17-years of age. In Vernon, a high school student may withdraw for social, educational, or family reasons. However, prior to a student's withdrawal:

- Students meet with a representative of the high school who will discuss alternative plans.
- School counselors provide information concerning education opportunities available in the community.
- Prior to entering the Vernon Adult Education program, the student is required to participate in the orientation process which provides the students with program options such as Credit Diploma (CDP), National External Diploma Program (NEDP), or General Educational Development (GED).

The GED is a state-awarded diploma and does not always carry the same weight as the other two programs which result in an actual high school diploma. A student who pursues their GED is considered a *drop out* at the local level. CDP participants are considered a *transfer*. As of 2009-2010, there were 39 dropouts of which 17 chose to enter adult education. Fourteen of those students attended the Credit Diploma Program. The majority of those students were juniors or seniors.

Adult Basic Education Classes (ABE):

This classroom-based pre-GED course is designed for the student who needs additional skills prior to entrance into GED preparatory classes. Students work individually with the classroom teacher on math and basic literacy skills. Instructional levels range from beginning literacy to pre-GED readiness.

GED Preparation Classes:

This classroom-based course prepares students to pass the State of Connecticut administered General Educational Development (GED) Exam. Writing, Math, Science, Social Studies, and Reading are covered in the curriculum. The course is designed to offer students age 17 or older an alternative route to earn a CT State High School Diploma

National External Diploma Program (NEDP):

This program provides an alternative for adults who have gained skills through life experiences and demonstrated competence in a certain area. The NEDP is a portfolio assessment program that offers no classroom instruction.

Of note, an effective Teen Parent Program at Rockville High School, which provided childcare for teen parents during the school day, that allowed them to continue their education, was cut due to budget constraints. The loss of this program forced some teen parents to make the difficult choice between childcare and completing their education.

C. WHAT CAN WE DO?

Education is critical to future success, which requires schools, families and communities to be working in tandem. In fact, we know that students with involved parents (regardless of family income or background) are more likely to: Attend school regularly, adapt well to school, earn higher grades and test scores, have better social skills and behavior, and graduate and go on to postsecondary education.

Successful partnerships are needed in order to address the core issues surrounding poor school attendance and high school dropouts as described in this plan. These core issues include: the ebb and flow of parent involvement throughout a child's education, disenfranchised and disconnected youth, and disparities that exist from school to school, including professional development and family dynamics. If these root causes are addressed, then parents, schools and the community should witness an overall improvement in school attendance and graduation rates.

1. **Expand *School-Family-Community Partnership Project*** into all of the elementary schools, Vernon Center Middle School and Rockville High School.
2. **Implement the *Attendance, Achievement, Attainment framework*** targeting parents engaged as partners.
 - a) Create an action plan that specifies steps to fully implement the 3 A's.
 - b) Expand the capacity of the Youth Services Bureau (YSB) Counselors in the Vernon school system.
 - c) Explore reinstating *Teen-Parent Program* at Rockville High School.
3. **Encourage child and youth-serving organizations to promote *Developmental Assets*** (The Search Institute).
 - a) Provide professional development opportunities on the Developmental Assets for those who work with Vernon youth.
 - b) Provide parents, civic and faith organizations, and other caring adults training in the *Developmental Assets*.

Data Development Agenda (DDA):

- **Recognize Social Capital and connect youth to community.**
Develop and conduct a survey of youth on community connectedness relative to social capital to establish a baseline.

D. HOW WILL WE KNOW WE MADE A DIFFERENCE?

- How much did we do?
- How well did we do it?
- Is anyone better off?

COMMUNITY

Safe, Healthy, Productive

- Poverty
- Community Input
 - *Focus Groups and Interviews*
 - Questions & Results*



COMMUNITY

I. POVERTY

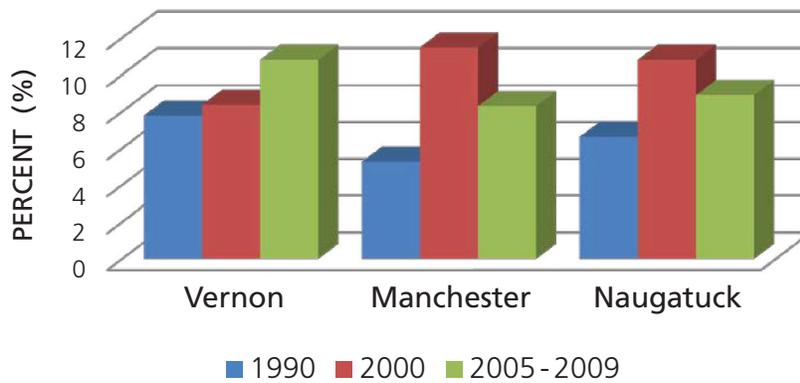
A. WHAT WE KNOW – Where Are We Now?

Where we live, work, study, and play are critically important for the overall health of a community, and its individual residents, especially for children. Growing up in neighborhoods and communities that are stable, safe, and nurturing establishes a foundation for healthy development. But for too many of our children, their well-being and feelings of connectedness and purpose become compromised growing up in a community that suffers from economic and social disadvantage. Understanding the prevalence of poverty in Vernon is of central importance to all of our children being safe, healthy and productive.

Headline Indicator: % of Vernon Children under 18 Living in Poverty

BASELINE DATA (*Census*)

Children Under 18 Living in Poverty



According to United States Census Bureau/American Community Survey reports for 1990, 2000, and 2005-2009, (5-Year Estimates) Vernon experienced a concerning upward trend in the percent of children under the age of 18 who live in poverty. As with other indicators of well-being, a comparison was done with a community similar in size and make-up to Vernon, as well as a neighboring community twice its size in population. Between 1990 and 2000, the percentage of all Vernon children under 18 living in poverty increased slightly. Between 2005 and 2009, the percentage increased dramatically, while surrounding towns decreased during this same time.

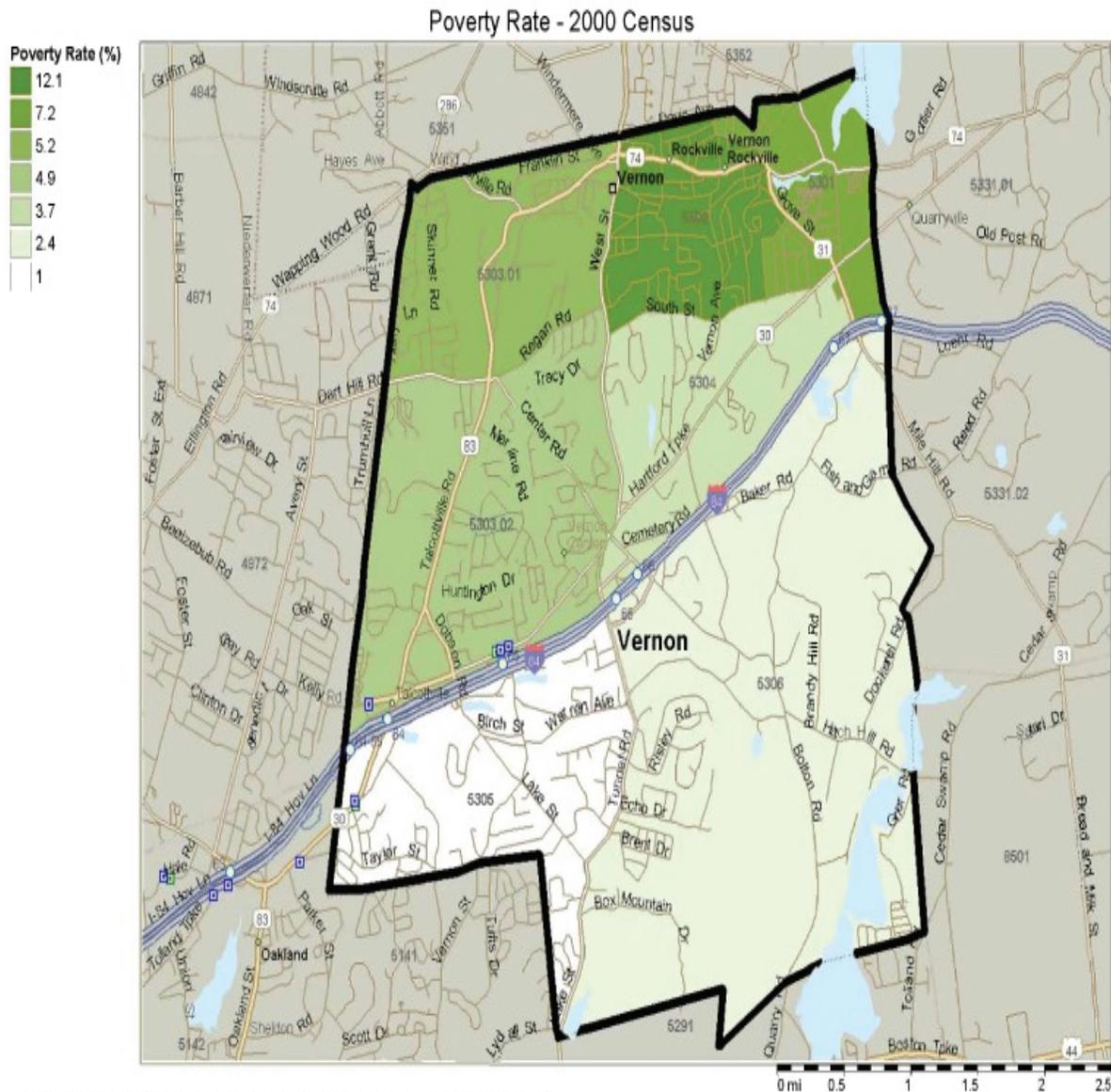


IS THIS OKAY?

As of 2009 estimates, there are approximately 534 children between the ages of birth to 17 living in poverty in Vernon. The majority of them reside in the Rockville section of town (Census tracts 5301 and 5302) as shown on the following map, which reflects the percent of people in those areas of Town living in poverty.

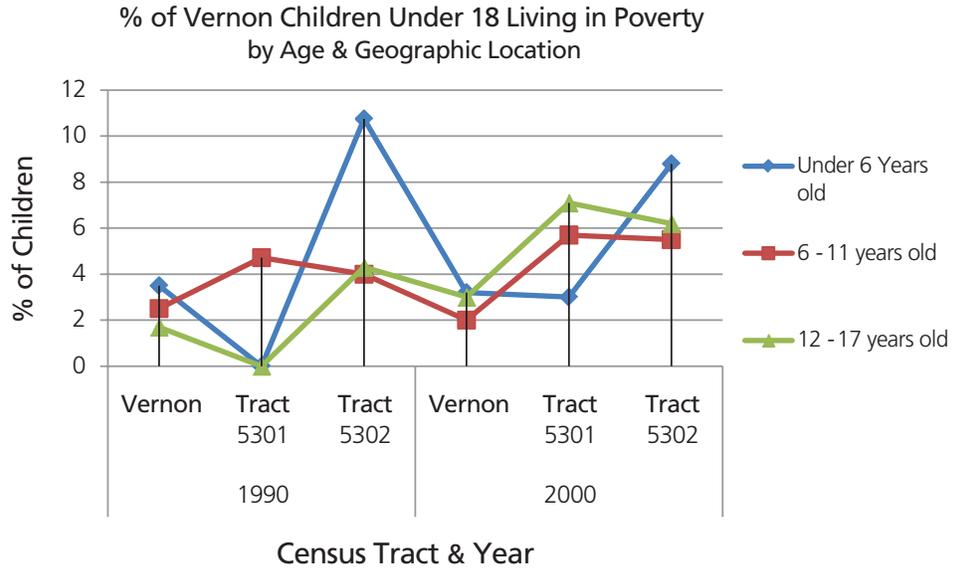
Vernon ranks in the top nine Connecticut towns with the greatest increase in Poverty since 2000.

This statistic puts Vernon at the 48th highest increase in poverty of 54 municipalities included in the cities and Towns survey.

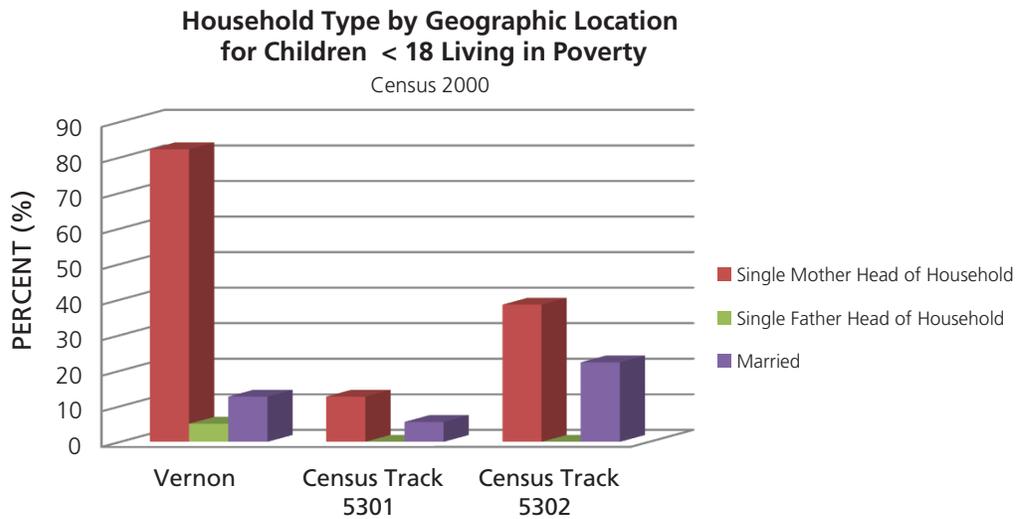


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The following graphs depict the 1990 and 2000 Census poverty data by age and census tract. (*This data is only available every ten years.*) During that decade, Vernon's total population decreased by 2,000 and approximately 600 of these were between the ages of birth to 17. Consistent over time however, is that this age group represents roughly 22% of the whole Vernon population. In the same period, the percentage of children under 18 living in poverty who resided in Census tract 5301 increased dramatically. Also noted is that children under 18 living in poverty in Census tract 5302 remained higher than any other location in town. In both 1990 and 2000, most children living in poverty were those under 6 years of age.



To further understand where these children live, we examined household type, as defined by the U.S. Census Bureau (see below graph). In Vernon, the majority of children under 18 living in poverty live in *single mother head of households*. In each of the two census tracts in Rockville, many also live with married parents.



1. Current Conditions

We know that poverty exists in varying degrees worldwide, within our country, state and local community. We also recognize that there is a higher concentration of poverty in Rockville. While there is no specific data to explain why this is so, there appears to be a connection between:

- Documented changing demographics
- Affordable housing
- Increased enrollment in the state HUSKY insurance program
- Public transportation

Vernon Social Services Department confirms that the most pronounced rates of poverty are in the Rockville section of town. Its residents are the primary consumers of services. Vernon families who live in affordable housing have varying degrees of poverty ranging from low income to working poor and from existing at the federal poverty level to below. These rental properties vary in costs and condition, with the poorest families able to afford units in the poorest physical condition.

AFFORDABLE HOUSING?

In 2007, the fair market rent for a two bedroom housing unit in the Hartford area (includes Vernon) calls for an annual household income of \$41,160. (HUD, 2007 *Out of Reach*)

When compared to Vernon's per capita income of \$32,160 (2008 *US Census Bureau, American Fact Finder*), affordable housing is well out of reach for many people. In many cases, multiple generations share housing to reduce housing expenses.

Changing Demographics

According to the most recent Vernon Plan of Conservation and Development, Vernon has seen significant shifts in its demographic population, particularly in the areas of age and income. As a trend, the population of middle-aged and mature adults (35-65) with school age children (5-19) has been on the decline while there has been a significant increase in the number of young adults (20-34) with young children (birth to 4). These younger families tend to be lower wage earners dealing with all the costs of raising young families.

Since 1998, the State of CT has offered a full health insurance package (HUSKY) for children up to age 19, regardless of family income. Families pay based on a formula, with two different levels of coverage, commonly known as HUSKY A and HUSKY B. In 1998, Vernon had 1,211 children enrolled in HUSKY A. This number has steadily increased over the years, in part due to outreach efforts. In November 2007, 1,759 children in Vernon were enrolled in HUSKY A. In October 2000, 50 Vernon children were enrolled in HUSKY B while in November 2007 there were 189 enrolled in HUSKY B.

However having HUSKY insurance is not enough to insure adequate healthcare. The number of providers who accept HUSKY has steadily decreased over the years due to the low reimbursement rates. Grant funded services for this population have been implemented but long waiting lists are common.

Areas of Vernon also offer the convenience and affordability of public transportation. This ease of access also allows for families in even poorer communities to improve their quality of life by relocating from urban areas to Vernon.

2. Impact Of Poverty

Simply stated, poverty is the lack of the most fundamental needs such as adequate food, clothing, and shelter. When unmet, children and families suffer. They suffer not only because they lack basic needs, but this impacts their ability to meet higher level needs such as education and work, or to strengthen their social and spiritual connections. If you are tired, cold, and hungry it is difficult to do much else. **The LWG understands that the eradication of poverty is not the scope of this plan, instead, it is our purpose to focus on the "culture of poverty" that serves as a root cause for the challenge that impact Vernon's children and families.**



When adequate resources are not available to our families and individuals, the consequences build. *Connecticut's Plan for Reducing Childhood Poverty* (October 2009) highlights several of these for children raised in poverty. These consequences can be seen in the arenas of physical development, academic achievement and emotional /social development. Children living in poverty are:

- **More likely to have health problems:** This includes low birth weight, stunted growth, asthma, obesity, and poor cognitive development.
- **Often underprepared for the rigors of education:** They are 1.3 times more likely to have developmental delays, learning disabilities, and often score lower on standardized tests. By the time these children begin formal schooling, children in low-income families already lag significantly behind their more affluent peers.
- **At greater risk for experiencing emotional and behavioral problems:** The fatigue of poverty is visible in the emotional challenges of depression and anxiety as well as in self-defeating, destructive behaviors. Children living in poverty may show difficulties with aspects of social competence including self-regulation and impulsivity. These children are also at risk for substance abuse in the form of self-medication.

Children under the age of six whose parents exhibit depression are at **two to five times** greater risk for homelessness, use of food banks, lack of medical care, unreliable child care and placement in foster care
From statewide report

Bolstering the case that family income effects children, are the findings that with increases in family income, children's cognitive-academic skills and social-emotional competence improve. However, the greatest impact on the mental health of children (even as young as infants) is the mental health of the parents.

Local experts say the greatest and most common situation they face is that parents suffering from mental health problems often do not have the physical or emotional resources to meet their children's needs. Many times this leads to mental health problems for the children:

- Parents with mental health problems often experience chronic stress from their psychiatric symptoms, leaving their level of function unpredictable and their work performance unstable. This jeopardizes employment and financial stability.
- Families living in poverty often live in homes with numerous family members, multiple families or strangers, usually in a confined single living space. Children's mental health issues can go unnoticed in such often-chaotic environments.
- Living in low-income neighborhoods carries additional risks such as increased exposure to community substance abuse and violence

B. WHAT ARE WE DOING?

While Vernon is a community rich in support services, healthcare providers, and quality public and private education, the current system of response for families and young children is fragmented. Access to services for Vernon children are limited by their families' knowledge and ability to advocate for themselves. In response, the community of providers formed the Vernon Community Network in an effort to better coordinate and connect existing services to families.

C. WHAT CAN WE DO?

While we will not be able to completely eliminate poverty in our community, we can work towards reducing the impacts of poverty on children and families in Vernon.

1. Develop a coordinated system of need based identification and service delivery designed to reduce the impact of poverty.

- a) Determine existing points of intake (e.g. local agencies, schools, hospitals, faith communities, etc.) and inventory existing intake procedures and forms.
- b) Inventory available physical facilities in town and those accessible from the Town of Vernon that may serve as a "one-stop" location for service needs and delivery.
- c) Research Geographical Information System (GIS) for creation of a virtual "one-stop" location to be available at each partner organization.
- d) Create a uniform intake procedure and corresponding documentation.
- e) Utilize multi-media venues such as email, internet, and local cable access.
- f) Track cases and follow up.

2. Develop a comprehensive mentoring system to provide enhanced case management and social connectedness for children and families.

- a) Inventory existing children's mentoring programs.
- b) Identify gaps in mentoring programs and create new resources.

DATA DEVELOPMENT AGENDA

Social Capital

L. J. Hanifan's 1916 article regarding local support for rural schools is one of the first occurrences of the term "social capital" in reference to social cohesion and personal investment in the community. In defining the concept, Hanifan contrasts social capital with material goods by defining it as:

"I do not refer to real estate, or to personal property or to cold cash, but rather to that in life which tends to make these tangible substances count for most in the daily lives of people, namely, goodwill, fellowship, mutual sympathy and social intercourse among a group of individuals and families who make up a social unit... If he may come into contact with his neighbor, and they with other neighbors, there will be an accumulation of social capital, which may immediately satisfy his social needs and which may bear a social potentiality sufficient to the substantial improvement of living conditions in the whole community. The community as a whole will benefit by the cooperation of all its parts, while the individual will find in his associations the advantages of the help, the sympathy, and the fellowship of his neighbors (pp. 130-131)."

The LWG is concerned about the lack of connection that both youth and adults expressed verbally and behaviorally in town and particularly in the schools. LWG believes that this is one resultant factor of living in poverty. Since this data does not yet exist for Vernon, a baseline will be developed by conducting a town-wide random sampling survey in 2011.

D. HOW WILL WE KNOW WE MADE A DIFFERENCE?

- How much did we do?
- How well did we do it?
- Is anyone better off?

FOCUS GROUP RESULTS

At the June 19, 2009 Leadership Work Group (LWG) meeting the members broke into small groups based on the Strategic Area of Focus (Safe, Healthy, and Productive) and were joined by content area experts to round out these teams. The work of the meeting was to analyze the report of compiled responses gathered from the focus groups and interviews conducted over the past several months.

The committees were asked to review the raw data, discuss and share reactions, and identify the top three or more themes that emerged from this analysis.

The results are as follows:

A. Focus Group



B. Interview/Key Stakeholders:

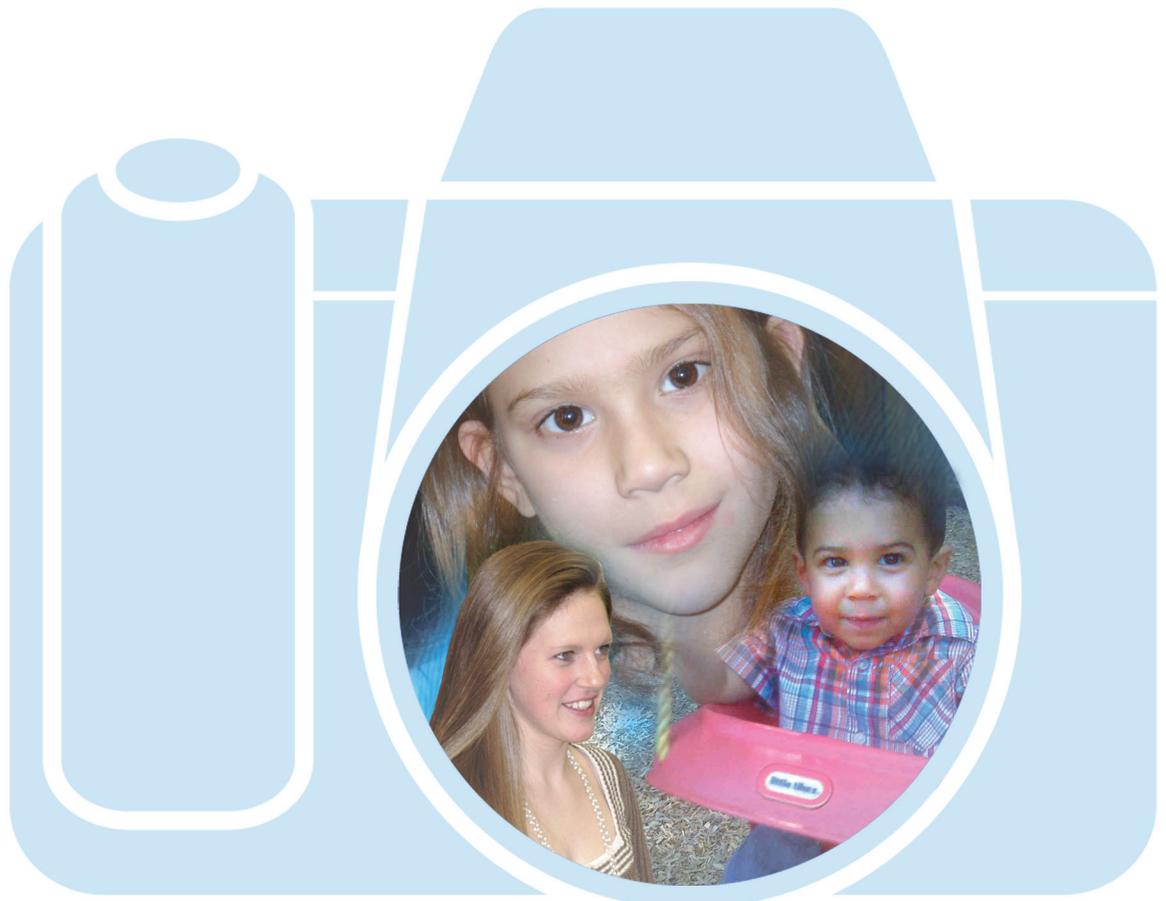


At the April 17, 2009 Vernon Community Network meeting, the top 3 issues that were agreed upon by consensus as most challenging/lacking for the Vernon community and providers were:

- 1) Coordinated system of communication:
both external (local 2-1-1) and inter-agency
- 2) Coordinated system of administrative functions: Funding, Marketing, Volunteers, Facilities
- 3) Enhanced service delivery system:
parent engagement, family support

IMPLEMENTATION & ACCOUNTABILITY

- Strategies & Partners
- Performance Measures
- Finance
- Governance



STRATEGIES & PARTNERS

There is no one entity or individual that can successfully and meaningfully implement all of the proposed strategies and actions described in this Plan. The following Strategy & Partner Matrixes were created in order to provide an at-a-glance of probable and potential partners, displayed by *Indicator* and *Plan Section* (Children, Youth, Community). Not every partner will be active in every strategy and action, and some partners may move in and out of the process based on relevance to the work of implementation and accountability as defined by various performance measures. In many cases Memorandums of Understanding (MOU's) will be developed so that all partners are clear on who is responsible for what, the resources that can be brought/redeployed, and assurances to create and account for performance measures of success.

PERFORMANCE MEASURES

This Plan is a baseline from which to begin to take action. This action must be measurable in both quantitative and qualitative ways. Individual programs will have measures, and some measures will be congruent with multiple partners, as well as across-systems. To this end the development of performance measures will be integral to holding partners and the community accountable for improving the outcomes for Vernon children and youth. Three main guiding questions will be used: "How much did we do?" "How well did we do it?" and most importantly, "Is anyone better off?" While some sections of this Plan already have suggested measures, others are in need of development. It is critical that all impacted partners be involved in the creation of such measures as they will be sharing in the accountability for the attainment of those measures and the on-going refinement of strategies and actions as they relate to making an impact on various indicators of child well-being as defined by on-going data collection.

Strategies & Partners
Children Birth-8: Prenatal Care

PARTNERS	Additional data collection and analysis on non-adequate prenatal care and low birth weight as they relate to race and ethnicity, age of mother, and mothers level of education.	Explore opportunities for expanding home visitation services in Vernon.	Research Child First (Bridgeport) to assess opportunity for replication locally.	Assess the possibility of expanding Nurturing Families outreach efforts.	Create a multi-pronged approach to raising awareness on the importance of adequate prenatal care.	Meet with Rockville High School Health teachers to discuss curriculum expansion.	Connect with local pharmacies for planned display of informational materials.	Expand scope and eligibility for community baby showers to include all income levels.	Enhance use of existing media such as organizational websites and community newspapers.	Identify and train peer/mentor to serve as neighborhood resources.	Include prenatal care booths and vendors in Vernon Holistic Fair.
TOWN DEPARTMENTS											
Mayor									X		
Town Council									X		
Youth Services Bureau	X	X			X			X	X	X	X
Vernon School Readiness	X	X	X		X			X	X	X	
Social Services	X	X			X						
Parks & Recreation											
Senior Center											
Police Department											
BOARD OF EDUCATION											
Board of Education		X				X			X		
Superintendent						X			X		
School Principals	X	X			X						
Supervisor of Early Childhood/Special Programs	X	X									
Director of Pupil Personnel Services		X									
Special Education Coordinator											
School Support Staff											
Teachers		X									
Guidance Counselors											
ELL Coordinator											
Speech Pathologists											
Social Workers		X									
School Readiness											
School Nurses		X				X					
COMMUNITY ORGANIZATIONS											
Vernon Community Network			X		X				X		
KIDSAFE CT	X	X			X				X	X	
Juvenile Court/Justice		X									
Hockanum Valley Community Council					X				X		
Cornerstone Foundation									X		
Foodshare									X		
Manchester Child Guidance Clinic		X			X						

Strategies & Partners
Children Birth-8: Child Abuse and Neglect

PARTNERS	Develop a coordinated system of response for identified families	Establish Child Advocacy Team-create a collaborative approach to aid & assist families with complex service needs	Assess opportunity to redeploy existing resources and seek new funding	Capture historical responses of Vernon Community Network in order to plan a coordinated response	Reduce barriers to participation in existing parent education programs	Implement mentoring programs based on the Parent-Aide model	Expand Nurturing Families Network screening & services in order to identify all families who present with risk factors	Increase the capacity of the Vernon Community Network and its members to better meet the needs of children & families	Conduct asset-mapping of Vernon Community Network individual, group & community members	Host a Vernon Community Network agency fair	Make targeted linkages by connecting community needs to the appropriate Vernon Community Network provider or organization	Create a coordinated calendar of training and technical assistance opportunities throughout the community
TOWN DEPARTMENTS												
Mayor			X								X	
Town Council												
Youth Services Bureau		X	X								X	
Vernon School Readiness												
Social Services		X										
Parks & Recreation												
Senior Center												
Police Department		X										
BOARD OF EDUCATION												
Board of Education												
Superintendent			X									
School Principals												
Supervisor of Early Childhood/Special Programs												
Director of Pupil Personnel Services												
Special Education Coordinator		X										
School Support Staff												
Teachers												
Guidance Counselors												
ELL Coordinator												
Speech Pathologists												
Social Workers		X										
School Readiness												
School Nurses												
COMMUNITY ORGANIZATIONS												
Vernon Community Network	X	X	X	X			X	X	X		X	X
KIDSAFE CT	X	X	X	X								
Juvenile Court/Justice	X											
Hockanum Valley Community Council		X										
Cornerstone Foundation												
Foodshare												
Manchester Child Guidance Clinic												

Strategies & Partners
Children Birth-8: Preschool Experience

PARTNERS	Develop community based-quality standards (e.g. Vernon Early Childhood Quality Indicators) that all preschool programs could work towards. Key indicators might include:	Expand VECOP Membership to include all preschool providers in Vernon	Examine existing quality standards	Assess current standards and practices at the centers in Vernon	Adopt quality indicators	Share with the community to raise awareness of quality standards	Provide coaching and other supports to programs while they work to attain and maintain these standards.	Create Coaching job descriptions, qualifications	Establish volunteer participation guidelines for providers	Create a benefit program and assessment procedure for centers needing access to financial support	Create Resource binders for participating programs/centers	
												STRATEGIES & ACTIONS
TOWN DEPARTMENTS												
Mayor	X						X					
Town Council	X						X					
Youth Services Bureau	X					X						
Vernon School Readiness	X	X	X			X		X			X	
Social Services	X					X						
Parks & Recreation												
Senior Center												
Police Department												
BOARD OF EDUCATION												
Board of Education	X				X							
Superintendent	X											
School Principals	X											
Supervisor of Early Childhood/Special Programs	X	X	X	X				X				
Director of Pupil Personnel Services	X											
Special Education Coordinator	X											
School Support Staff	X											
Teachers	X	X						X				
Guidance Counselors												
ELL Coordinator	X							X				
Speech Pathologists	X							X				
Social Workers								X				
School Readiness	X			X								
School Nurses	X											
COMMUNITY ORGANIZATIONS												
Vernon Community Network	X			X		X					X	
KIDSAFE CT	X					X						
Juvenile Court/Justice												
Hockanum Valley Community Council												
Cornerstone Foundation												
Foodshare	X										X	
Manchester Child Guidance Clinic	X											

Strategies & Partners
Children Birth-8: 3rd Grade CMT Reading

<p style="text-align: center;">STRATEGIES & ACTIONS</p> <p style="text-align: center;">↑</p>	<p style="text-align: center;">PARTNERS</p> <p style="text-align: center;">→</p>	<p>Provide opportunities for preschool children to be exposed to and interact with text and to contextually increase their vocabulary acquisition and background knowledge.</p>	<p>Ensure that every child has access to a high quality preschool experience.</p>	<p>Ensure that all children have access to text – put books into the hands and homes of children.</p>	<p>Provide varied opportunities for children to engage in experiences which expand their background knowledge and vocabulary.</p>	<p>Provide a guaranteed viable curriculum, delivered through high quality instruction and assessments, to which every student has access and multiple opportunities to achieve.</p>	<p>Develop and implement a reading and language arts curriculum based on national and state standards.</p>	<p>Provide opportunities for teachers to develop and expand their instructional practices.</p>	<p>Differentiate instruction for every learner to ensure that each learner has access to the curriculum.</p>	<p>Develop and implement common assessments that measure student achievement of the curriculum and report the results.</p>	
TOWN DEPARTMENTS											
Mayor											
Town Council											
Youth Services Bureau											
Social Services											
Parks & Recreation											
Senior Center											
Police Department											
North Central District Health Dept.											
BOARD OF EDUCATION											
Board of Education											
Superintendent											
School Principals											
Supervisor of Early Childhood/ Special Programs											
Special education coordinators											
School support staff											
Teachers											
Enrichment teachers											
ELL coordinator											
Speech pathologists											
School Readiness											
School nurses											
COMMUNITY ORGANIZATIONS											
Vernon Community Network											
KidSafe CT											
Juvenile Court											
Hockanum Valley Community Council											
Manchester Child Guidance Clinic											

Strategies & Partners
Youth 9-18: Juvenile Risk

PARTNERS	STRATEGIES & ACTIONS	PARTNERS										
		Design positive youth development system focused on preventing criminal & unsafe behaviors	Continue to strengthen capacity of Juvenile Review Board	Conduct adult volunteer recruiting & training for mentoring and peer-support for youth & families	Create neighborhood-based safe spaces with adult supervision, with a centralized location for accessibility	Maintain & expand the summer youth employment program (VYSB)	Create youth emergency services or similar community-based respite programs	Expand hours of Vernon Public Schools Exulsion Center	Encourage child & youth-serving organizations to promote Developmental Assets (Search Institute)	Provide professional development opportunities for those who work with Vernon youth	Provide parents, civic, faith organizations and caring adults training in Developmental Assets	
TOWN DEPARTMENTS												
Mayor												
Town Council				X	X							
Youth Services Bureau	X	X	X	X	X	X	X	X	X	X	X	X
Vernon School Readiness												
Social Services			X									
Parks & Recreation				X								
Senior Center												
Police Department	X	X	X									
BOARD OF EDUCATION												
Board of Education			X	X	X	X	X	X	X	X	X	X
Superintendent												
School Principals												
Supervisor of Early Childhood/Special Programs										X		
Director of Pupil Personnel Services												
Special Education Coordinator									X			
School Support Staff												
Teachers										X		
Guidance Counselors	X											
ELL Coordinator												
Speech Pathologists												
Social Workers										X		
School Readiness										X		
School Nurses												
COMMUNITY ORGANIZATIONS												
Vernon Community Network			X	X	X	X	X	X	X	X	X	X
KIDSAFE CT	X			X	X	X	X	X	X	X	X	X
Juvenile Court/Justice	X	X	X	X	X	X	X	X	X	X	X	X
Hockanum Valley Community Council				X	X	X	X	X	X	X	X	X
Cornerstone Foundation					X	X	X	X	X	X	X	X
Foodshare												
Manchester Child Guidance Clinic												

Strategies & Partners
Youth 9-18: School Attendance/Graduation

STRATEGIES & ACTIONS	PARTNERS	Expand School-Family-Community Partnership Project into all Vernon schools	Implement Attendance, Achievement, Attainment framework targeted on parents engaged as partners	Create an action plan that specifies steps to fully implement the 3 As	Expand role of Youth Services Bureau Counselors in the Vernon school system	Explore reconstituting Teen Parent Program at Rockville High School	Encourage child & youth-serving organizations to promote Developmental Assets	Provide professional development opportunities for those working with Vernon youth	Provide parents, civic and faith organizations, and other caring adults training in the Developmental Assets
TOWN DEPARTMENTS									
	Mayor								
	Town Council				X				
	Youth Services Bureau	X	X		X			X	X
	Vernon School Readiness	X	X						
	Social Services								
	Parks & Recreation								
	Senior Center								
	Police Department								
BOARD OF EDUCATION									
	Board of Education	X	X	X	X	X	X	X	
	Superintendent	X	X	X	X	X	X	X	
	School Principals	X	X	X	X	X	X	X	
	Supervisor of Early Childhood/Special Programs	X	X				X	X	
	Director of Pupil Personnel Services	X	X				X	X	
	Special Education Coordinator	X	X				X	X	
	School Support Staff	X	X			X	X	X	
	Teachers	X	X			X	X	X	
	Guidance Counselors	X	X			X	X	X	
	ELL Coordinator								
	Speech Pathologists					X			
	Social Workers	X	X				X	X	
	School Readiness	X	X				X	X	
	School Nurses	X	X			X	X	X	
COMMUNITY ORGANIZATIONS									
	Vernon Community Network						X	X	X
	KIDSAFE CT						X	X	X
	Juvenile Court/Justice						X	X	
	Hockanum Valley Community Council						X	X	
	Cornerstone Foundation								
	Foodshare								
	Manchester Child Guidance Clinic						X		

Strategies & Partners
Community: Poverty

PARTNERS	STRATEGIES & ACTIONS		Develop a coordinated system of need-based identification & service delivery	Determine existing points of intake, inventory and forms	Inventory available physical facilities in town and those accessible from Vernon that may serve as a "one-stop" location for service needs & delivery	Research Geographical Information System for creation of a virtual "one-stop" location to be available at each partner organization	Create a uniform intake procedure and the corresponding documentation	Utilize multi-media venues such as email, internet, and local cable access	Track cases and follow up	Develop a comprehensive mentoring system to provide enhanced case management and social connectness for children & families.	Inventory existing children's mentoring programs	Identify gaps in mentoring programs and create new resources
	→	←										
TOWN DEPARTMENTS												
Mayor				X	X							
Town Council						X						
Youth Services Bureau			X	X	X			X		X	X	
Vernon School Readiness											X	
Social Services			X	X	X			X		X		
Parks & Recreation												
Senior Center			X	X	X							
Police Department			X	X	X							
BOARD OF EDUCATION												
Board of Education			X	X	X						X	
Superintendent												
School Principals												
Supervisor of Early Childhood/Special Programs												
Director of Pupil Personnel Services												
Special Education Coordinator												
School Support Staff												
Teachers												
Guidance Counselors												
ELL Coordinator												
Speech Pathologists												
Social Workers												
School Readiness												
School Nurses												
COMMUNITY ORGANIZATIONS												
Vernon Community Network			X	X	X			X	X	X	X	X
KIDSAFE CT			X	X						X	X	X
Juvenile Court/Justice			X	X								
Hockanum Valley Community Council			X	X	X					X		
Cornerstone Foundation			X	X	X							
Foodshare			X	X								
Manchester Child Guidance Clinic											X	
Genesis/Community Health Resources												

FINANCE

Historically funders from state, federal and philanthropic entities have distributed funding based on variables associated with a deficit-based approach – those groups, organizations, communities that were the worst off received funding. Most applicants for such funding were given a set figure and set parameters of a program and were required, in turn, to submit proposals that did not take much thought or ingenuity – rather it was a somewhat rote exercise.

Today the utilization of a results-based accountability model provides for communities, organizations and programs the opportunity to identify their own areas of need and interest in order to improve outcomes for their residents and program participants. This approach is driven by local data, which leads to a clearer understanding of root cause for a specific local problem. This then leads to creation of strategies and actions that will make an impact on the true causal factors – it moves away from random good ideas for solutions that often have little effect. Finally, brought full cycle the updated data is collected, analyzed and strategies refined or marked “complete.”

With this the VCN and the LWG began to craft a Financial Plan that aligns with each indicator, its strategies and actions, divided into population segment. This Financial Plan provides for a Baseline amount of money that may at times be currently coming into the community, and others are estimates of what will be needed to bring a strategy to fruition over the next several years.

Used in this Financial Plan development was a Fiscal Scan (see Appendix) that listed most all current sources of revenue for existing programs and services in Vernon. While the figures are from the 2008 year, they were reviewed by members for accuracy and current status.

As noted some of the strategies and actions have dollar amounts filled in, with additional comments for on-going work. While some actions may require new monies, many can be attained by no- or low-cost efforts such as a redeployment of resources, e.g. staff responsibilities changed to align with the needed steps for implementation.

CHILDREN BIRTH-8

PRENATAL CARE	Base Investment	FY 2012-13	FY 2013-14	FY 2014-15	Additional Detail
<p>STRATEGY 1: Additional data collection and analysis on non-adequate prenatal care and low birth weight as they relate to race and ethnicity, age of mother, and mothers level of education.</p> <p>STRATEGY 2: Explore opportunities for expanding home visitation services in Vernon.</p> <p>Research <i>Child First</i> (Bridgeport) to assess opportunity for replication locally.</p> <p>Assess the possibility of expanding Nurturing Families outreach efforts.</p> <p>STRATEGY 3: Create a multi-pronged approach to raising awareness on the importance of adequate prenatal care.</p>	-0-	\$16,795	\$16,795		Data Specialist: 15 hours/wk x \$20/hr x 52 weeks, plus FICA
<p>Meet with Rockville High School Health teachers to discuss curriculum expansion.</p> <p>Connect with local pharmacies for planned display of informational materials.</p> <p>Expand scope and eligibility for community baby showers to include all income levels.</p> <p>Enhance use of existing media such as organizational websites and community newspapers.</p> <p>Identify and train peer/adult mentors to serve as neighborhood resources.</p> <p>Include prenatal care booths and vendors in Vernon Holistic Fair.</p>	\$18,300	-0-	-0-		Current project staff for School Readiness Council
	-0-	-0-	-0-		YSB Director meets with ECHN Family Development Center Director; (See Child Abuse & Neglect strategies)
	-0-	-0-	-0-		School Readiness co-chairs meet with Vernon Schools Superintendent
	\$18,300				Current project staff for School Readiness Council
	\$18,300				Current project staff for School Readiness Council
	\$18,300				Current project staff for School Readiness Council
	\$11,000				School/community partnership position assists with this action step
	-0-	-0-	-0-		Cost to vendors for booth space/Health fair is biennial

CHILD ABUSE & NEGLECT	Base Investment	FY 2012-13	FY 2013-14	FY 2014-15	Additional Detail
STRATEGY 1: Develop a coordinated system of response for identified families.					
Establish a Child Advocacy Team (CAT), to create a collaborative approach to aid and assist families with complex service needs.	-0-	\$13,918			Coordinator/case management position : 10hrs/week x \$25/hr x 50wks + FICA + Admin
<ul style="list-style-type: none"> Assess opportunity to redeploy existing resources Seek new funding 	-0-	\$58,100	\$58,100	\$58,100	Implementation Coordinator is responsible to convene meetings
Capture historical (situational) responses of Vernon Community Network to date to map future responses.					
Reduce barriers to participation in existing parent education programs.		\$58,100	\$58,100	\$58,100	Implementation Coordinator is responsible to convene meetings, organize data collection and create outreach plan
Implement mentoring programs, based on the Parent-Aide model, a system for long-term commitment to families who exhibit the risk factors connected with child abuse and neglect.		\$58,100	\$58,100	\$58,100	Implementation Coordinator coordinates with faith community & KIDSAFE CT to develop mentor training
Expand Nurturing Families Network screening and services in order to identify all families who present with risk factors for abuse and neglect and connect them with services.	\$84,000	\$134,000	\$134,000	\$134,000	ECHN current grant funded program provides this service for first-time parents deemed at-risk
STRATEGY 2: Increase the capacity of the Vernon Community Network and its members to better meet the needs of children and families.					
Conduct Asset Mapping of Vernon Community Network individual, group and community members.					
<ul style="list-style-type: none"> Host a Vernon Community Network Agency Fair increasing awareness of existing services and resources Make targeted linkages by connecting community needs to the appropriate Vernon Community Network provider or organization. 	-0-	-0-	-0-		VCN Executive Committee organizes agency fair Youth Services Director works with town IT department to create web based service map. YSB staff updates web map as needed
Create a coordinated calendar of training and technical assistance opportunities throughout the community.	\$1,500	\$750	\$750		
<ul style="list-style-type: none"> Program Performance and Accountability 	-0-	\$58,100	\$58,100	\$58,100	

PRE-SCHOOL EXPERIENCE	Base Investment	FY 2012-13	FY 2013-14	FY 2014-15	Additional Detail
STRATEGY 1: Develop community based-quality standards (e.g. Vernon Early Childhood Quality Indicators) that all preschool programs could work towards.					
Expand VECOP Membership to include all preschool providers in Vernon.					
Examine existing quality standards.					
Assess current standards and practices at the centers in Vernon.					
Adopt quality indicators.					
Share with the community to raise awareness of quality standards.					
STRATEGY 2: Provide coaching and other supports to programs while they work to attain and maintain these standards.					
Create Coaching job descriptions, qualifications.					
Establish volunteer participation guidelines for providers.					
Create a benefit program and assessment procedure for centers needing access to financial support.					
Create Resource binders for participating programs/centers.					
3RD GRADE CMT READING	Base Investment	FY 2012-13	FY 2013-14	FY 2014-15	Additional Detail
STRATEGY 1: Provide opportunities for preschool children to be exposed to and interact with text and to contextually increase their vocabulary acquisition and background knowledge.					
Ensure that every child has access to a high quality preschool experience.					School Readiness Council includes within it's ongoing work
Ensure that all children have access to text – put books into the hands and homes of children.					School/community partnership staff
Provide varied opportunities for children to engage in experiences which expand their background knowledge and vocabulary.					
STRATEGY 2: Provide a guaranteed viable curriculum, delivered through high quality instruction and ensured through a variety of assessments, to which every student has access and multiple opportunities to achieve.					
Develop and Implement a reading and language arts curriculum based on national and state standards.					Vernon Public Schools curriculum specialist takes lead role
Provide opportunities for teachers to develop and expand their instructional practices					Vernon Public Schools takes lead role
Differentiate instruction for each learner to ensure that every student has access to the curriculum.					Vernon Public Schools takes lead role
Develop and implement common assessments that measure student achievement of the curriculum and report the results.					Vernon Public Schools takes lead role

Financial Plan

YOUTH 9-18

JUVENILE RISK	Base Investment	FY 2012-13	FY 2013-14	FY 2014-15	Additional Detail
<p>STRATEGY 1: Design a positive youth development system focused on preventing criminal and unsafe behaviors.</p> <p>Continue to strengthen the capacity of the Juvenile Review Board.</p>	\$7,500	\$7,500			Cost for case management services
<p>Conduct adult volunteer recruitment and training around mentoring and peer-support for youth and families.</p> <p>Create neighborhood-based safe places with adult supervision, with a centralized location for accessibility.</p>	\$26,000	\$26,000	\$20,000	\$13,000	Implementation Coordinator coordinates with faith community and KIDSAFE CT & cost for training and supervision
<p>Maintain and expand the summer youth employment program of the Vernon Youth Services Bureau.</p>	\$18,000	\$58,100	\$58,100	\$58,100	Implementation Coordinator coordinates convenes meetings to facilitate this action step
<p>Create Youth Emergency Services or similar community-based respite programs.</p>	\$20,000	\$20,000	\$23,000	\$58,100	\$1,000 per student in employment costs & skills training costs
<p>Expand hours of the Vernon Public Schools Expulsion Center.</p>	\$58,100	\$58,100	\$58,100	\$58,100	Implementation Coordinator researches funding options
<p>STRATEGY 2: Encourage child and youth-serving organizations to promote <i>Developmental Assets</i> (Search Institute.)</p> <p>Provide professional development opportunities on the <i>Developmental Assets</i> for those who work with Vernon youth.</p> <p>Provide parents, civic and faith organizations, and other caring adults training in the <i>Developmental Assets</i>.</p>					Consult with VPS superintendent
	\$3,000	-0-	-0-	\$3,000	Search Institute provides initial training and year 3 refresh
	\$3,000	-0-	-0-	\$3,000	Search Institute provides initial training and year 3 refresh

SCHOOL ATTENDANCE	Base Investment	FY 2012-13	FY 2013-14	FY 2014-15	Additional Detail
STRATEGY 1: Expand <i>School-Family-Community Partnership</i> Project into all of the Elementary schools, Vernon Center Middle School and Rockville High School.	\$11,000	\$44,000	\$44,000	\$44,000	Current staff funded for 10 hours/week
STRATEGY 2: Implement the <i>Attendance, Achievement, Attainment</i> framework targeted on parents engaged as partners.	\$11,000	\$44,000	\$44,000	\$44,000	School/community partnership staff
Create an action plan that specifies steps to fully implement the 3 A's.	\$11,000	\$44,000	\$44,000	\$44,000	School/community partnership staff
Expand the role of the Youth Services Bureau (YSB) Counselors in the Vernon school system.	\$45,000	\$70,000	\$70,000	\$70,000	
Explore reinstating Teen-Parent Program at Rockville High School.	-0-				
STRATEGY 3: Encourage child and youth-serving organizations to promote Developmental Assets (Search Institute).					
Provide professional development opportunities on the Developmental Assets for those who work with Vernon youth.	Included in Juvenile Risk section				Search Institute contracted to provide initial and refresh training
Provide parents, civic and faith organizations, and other caring adults training in the Developmental Assets.	Included in Juvenile Risk section				Search Institute contracted to provide initial and refresh training
DATA DEVELOPMENT: Recognize <i>Social Capital</i> and connect youth to community. • Develop and conduct a survey of youth on community connectedness relative to <i>Social Capital</i> to establish a baseline.	\$5,000	-0-	-0-	-0-	VCN mails survey to Vernon residents on random basis. Contract with UConn staff and interns to tabulate survey results

COMMUNITY

POVERTY	Base Investment	FY 2012-13	FY 2013-14	FY 2014-15	Additional Detail
STRATEGY 1: Develop a coordinated system of need based identification and service delivery designed to reduce the impact of poverty.	-0-				
Determine existing points of intake (e.g. local agencies, schools, hospitals, faith communities, etc.) and inventory existing intake procedures and forms.	-0-				
Inventory available physical facilities in town and those accessible from the Town of Vernon, that may serve as a "one-stop" location for service needs and delivery.	-0-				
Research Geographical Information System (GIS) for creation of a virtual "one-stop" location to be available at each partner organization.	\$32,000	\$32,000			Town funded GIS coordinator position
Create a uniform intake procedure and corresponding documentation.	-0-	\$58,100	\$58,100		Implementation Coordinator
Utilize multi-media venues such as email, internet, and local cable access.	-0-	\$58,100	\$58,100		Implementation Coordinator
Track cases and follow up.					
STRATEGY 2: Develop a comprehensive mentoring system to provide enhanced case management and social connectedness for children and families.					
Inventory existing children's mentoring programs.	-0-	\$58,100			Implementation Coordinator
Identify gaps in mentoring programs and create new resources.	-0-	\$58,100			Implementation Coordinator
DATA DEVELOPMENT: Social Capital • Baseline will be developed by conducting a town-wide random sampling survey in 2011.	-0-	\$5,700			Contract with UConn to implement survey

GOVERNANCE

Critical to the improvement of outcomes for Vernon children and youth is the implementation of, and accountability for this baseline Plan. It was developed by a variety of key stakeholders, with input from the community-at-large by using an inclusive community decision-making process. That same level of representation and shared leadership is important to successful strategy implementation and overall impact on the Headline and Secondary Indicators – our measures of success. The Vernon Community Network (VCN) serves as the local governance partnership for this effort. It is comprised of a variety of local and state government, private sector, not-for-profit organizations, and community members.

The VCN will: 1) serve as the catalyst and focal point for all of the membership to work together to implement strategies and actions; 2) provide for on-going data collection and analysis; 3) serve as a forum for community conversations on issues relevant to the Plan; 4) serve as the overseer for accountability to the greater community.

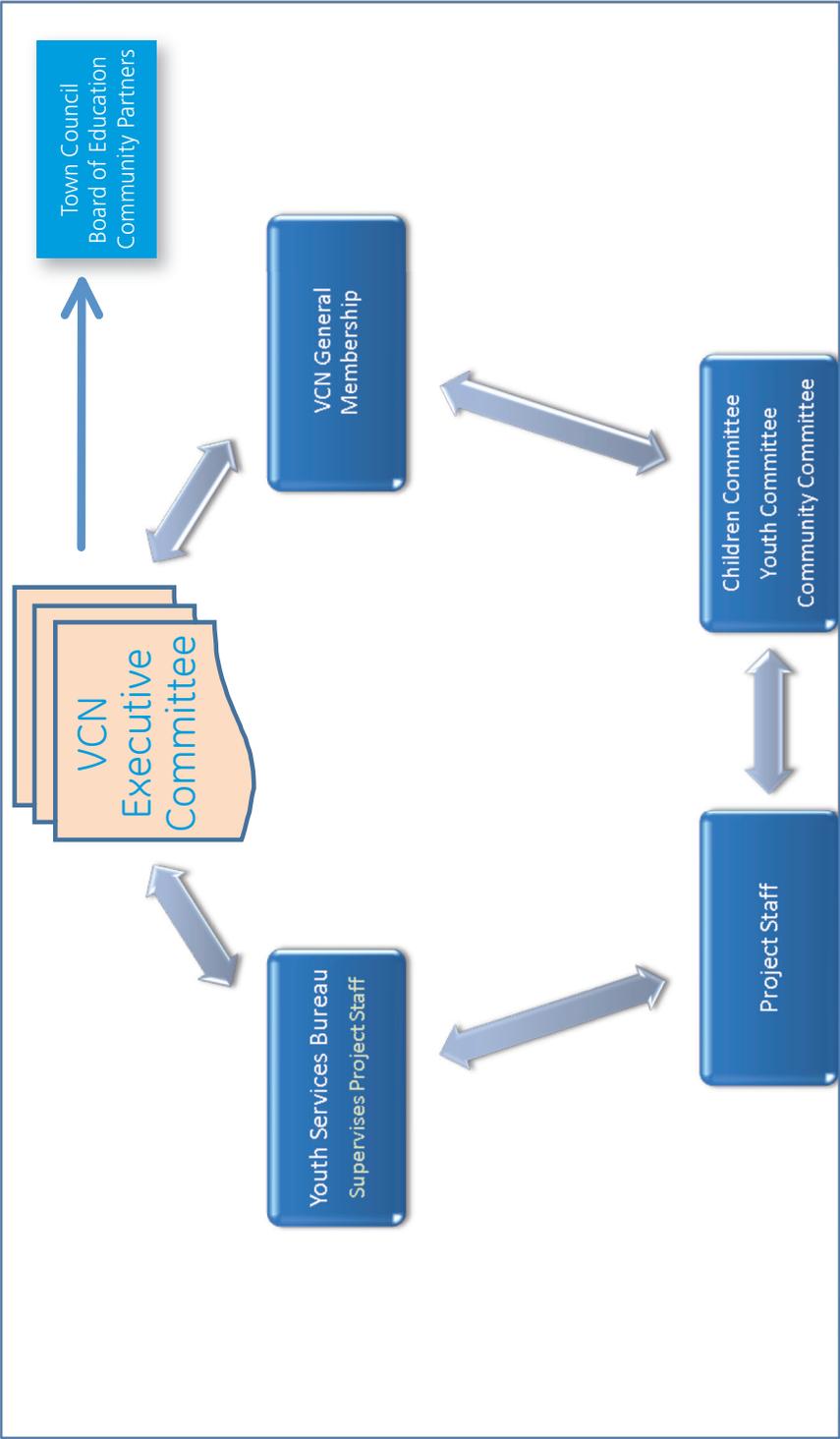
The Vernon Community Network (VCN) is operated via the Bylaws using the “Roberts Rules of Order.” The Executive Committee is comprised of a President, Vice President, Treasurer, Secretary, At-Large, Membership, and Past President positions. These are elected by the whole membership.

The Executive Committee functions as the community planning oversight committee. As depicted in the following chart, communication by all parties involved in the Plan implementation is dynamic and founded on two-way communication lines. The Executive Committee sets implementation steps and further planning into motion.

The Vernon Youth Services Bureau supervises the **Project Implementation Coordinator (PIC) and Data Specialist** positions. The PIC holds the responsibility to direct the VCN committee work and receive feedback on that work. The Coordinator provides support to each of the three committees – *Safe, Healthy, Productive* – and in turn the committees report their respective work to the VCN General Membership.

The General Membership provides feedback to the committees and the Executive Committee. The VCN Executive Committee reports progress on the Plan implementation to the **Town Council, Board of Education and Community Partners**. This administrative and operational structure is intended to be fluid thereby offering the greatest opportunity for feedback and support of all implementation and future planning.

VERNON COMMUNITY PLAN GOVERNANCE STRUCTURE



APPENDIX

- Fiscal Scan
- Focus Group & Interview – Rationale and Approach

TO: Vernon Early School Readiness Executive Committee
From: Jim Farnam, Farnam Associates
Date: November 10, 2010
Re: Update on Fiscal Scan Results To Date

The Vernon School Readiness Executive Committee enlisted our firm (formerly I was with Holt, Wexler & Farnam, LLP which has been restructured) to assemble and analyze financial information on programs and policies affecting young children (birth to age 8) in the Town of Vernon to provide a financial context to existing efforts in early childhood and identify funding opportunities in support of blueprint development.

The Committee asked us to include in the scan where available funding for services to children age 9-17 as well so the Vernon Community Network can have the complete picture for both early childhood services and services for older children and youth. When we looked back at the data, many of the funding sources we had collected related to all children and we had broken out the services for ages 0-8 so we could proceed to include the services to children ages 9-17 without too much additional work.

This memorandum summarizes data collected to date for the Fiscal Scan for Vernon. We have based our analysis on the State Fiscal Year 2008-2009 because that was the last complete fiscal year for which data was available when we commenced our research. While the SFY2009-2010 has since finished, much of the final state spending data for that year are still not available.

We have identified to date a total of \$63.6 million invested in services for children in Vernon across the domains of your plan – Healthy, Productive, and Safe (see table below). \$24.4 million is attributed to the 0-8 age group and \$39.3 million to the 9-17 age group. We prorated funding data for specific programs to pull out the portion that was going to benefit families of children of each age group based on reasonable estimates of the populations benefitted. Note

- A large portion of these funds support K-12 education (we did not include the \$7.3 million in State funds that was received for the School Construction Program).
- In health, the Medicaid line item (Husky) is under health but also funds behavioral health which is not possible to break out from the total.
- Most of these funds are dedicated to ongoing programs so are not for the most part available to address newly identified needs. Some reallocation may be appropriate based on a review of the effectiveness and reach of the program.

Summary of Funding Identified by Plan Domain, Fiscal Year 2008-2009

Row Labels	Values		
	Sum of Total, Ages 0-8	Sum of Total, Ages 9-17	Sum of Total, Ages 0-18
Healthy	\$ 3,520,060	\$ 2,961,403	\$ 6,481,463
Productive	\$ 16,501,486	\$ 32,795,030	\$ 49,296,515
Safe	\$ 4,340,053	\$ 3,528,005	\$ 7,868,058
Grand Total	\$ 24,361,599	\$ 39,284,438	\$ 63,646,036

NOTE: Main difference from September total of \$45 million is the addition of \$25 million in local spending on education and several programs of KIDSAFE and the ECHN Family Development Center

These figures are for Federal, State, and Philanthropic funds and include town funds for education and a small amount for youth services and family support.

Please forward to us any information about other private funders we may not have come across in our research that are active in supporting Vernon services for children and we will add them to this list (send to jf@farnamllc.com)

We will continue to work with the Committees to understand, interpret and enhance the analysis we are preparing to make sure it informs your planning work to the fullest degree possible. Thank you.

Estimated Funding for Childhood Services in Vernon, Fiscal Year 2008-2009

Domain, Source and Program	Sum of Total, Ages 0-8	Sum of Total, Ages 9-17	Sum of Total, Ages 0-18
Healthy	\$ 3,520,060	\$ 2,961,403	\$ 6,481,463
Health	\$ 3,464,030	\$ 2,805,875	\$ 6,269,906
Federal	\$ 2,850,842	\$ 2,400,000	\$ 5,250,842
DSS	2,850,842	2,400,000	5,250,842
HUSKY- Medicaid	2,850,842	2,400,000	5,250,842
State	\$ 613,189	\$ 405,875	\$ 1,019,064
DDS	436,500	-	436,500
Birth to Three	436,500	-	436,500
SDE	176,689	405,875	582,564
Child Nutrition State Matching Grant	5,092	11,698	16,790
Healthy Foods Grant	11,241	25,821	37,062
National School Lunch	123,228	283,070	406,298
Nonpublic Health Services	3,051	7,009	10,060
School Breakfast Program	27,297	62,705	90,002
Special Milk Program For Children	396	910	1,306
State School Breakfast	3,465	7,961	11,426
Summer Food Service Prog - Admin	232	533	765
Summer Food Serv. Prog - Operation	2,686	6,169	8,855
Behavioral Health	\$ 56,030	\$ 155,528	\$ 211,557
State	\$ 56,030	\$ 155,528	\$ 211,557
DCF	56,030	155,528	211,557
Care Coordination	7,416	11,125	18,541
Emergency Mobile Psychiatric Serv	9,750	14,625	24,376
Enhanced Care Coordination	6,662	9,993	16,655
Intensive Home Based Serv: FFT	-	19,902	19,902
Intensive Home Based Serv: IICAPS	-	13,362	13,362
Intensive Home Based Serv: MDFT	-	25,142	25,142
Int. Home Based Serv: MDFT FSATS	-	1,230	1,230
Intensive Home Based Services: MST	-	11,847	11,847
Outpatient Psych Clinic for Children	28,932	43,398	72,330
Residential Subs Abuse Treatment	1,068	1,602	2,670
Emrg Mob Psych/Care Coord Startup	2,201	3,301	5,502
Productive	\$ 16,501,486	\$ 32,795,030	\$ 49,296,515
Education	\$ 16,501,486	\$ 32,795,030	\$ 49,296,515
Federal	\$ 771,905	\$ -	\$ 771,905
HHS-Head Start	771,905	-	771,905
Head Start	621,605	-	621,605
Early Head Start	150,300	-	150,300
Philanthropic	\$ 67,773	\$ -	\$ 67,773
George A. & Grace L. Long Foundation	1,000	-	1,000

Domain, Source and Program	Sum of Total, Ages 0-8	Sum of Total, Ages 9-17	Sum of Total, Ages 0-18
Hockanum Valley CommCouncil	1,000	-	1,000
Hartford Foundation for Public Giving	34,273	-	34,273
Hockanum Valley CommCouncil	34,273	-	34,273
Graustein Memorial Fund	32,500	-	32,500
Collaborative Support	32,500	-	32,500
State	\$ 7,955,864	\$ 15,093,540	\$ 23,049,404
SDE	6,611,219	14,993,804	21,605,023
Education Equalization	5,327,152	12,237,116	17,564,268
IDEA- Part B- Section 619	14,571	33,472	48,043
IDEA-Part B- Section 611	232,357	533,753	766,110
Open Choice Progr-Receiving Dist.	26,905	61,803	88,708
School Readiness	107,000	-	107,000
Spec Ed-Ag Placemnts & Excess Cost	306,052	703,040	1,009,092
Spec Ed-Ag. Placemnts & Excess Cost	272,350	625,622	897,972
Title I Improving Basic Programs	128,152	294,382	422,534
Title II- D- Enhanc. Educ. Thru Tech.	13,648	31,352	45,000
Title II Part D Technology	455	1,045	1,500
Title II-Part A Teachers	46,044	105,768	151,812
Title IV - Safe & Drug Free Schools	3,625	8,327	11,952
Title V-Innovative Educ. Strategies	1,504	3,456	4,960
Transport Of School Children-Public	106,130	243,793	349,923
Transportation-Nonpublic	-	20,450	20,450
Young Adult Learner	-	70,000	70,000
Young Parents Program	16,380	-	16,380
Youth Service Bureau	6,997	16,072	23,069
Youth Service Bureau-Enhancement	1,896	4,354	6,250
DSS	1,344,645	99,735	1,444,381
Care4Kids	1,040,645	99,735	1,140,381
Child Development Centers	304,000	-	304,000
Town	\$ 7,705,944	\$ 17,701,490	\$ 25,407,434
Town of Vernon	7,705,944	17,701,490	25,407,434
Local Contribution to Education	7,705,944	17,701,490	25,407,434
Safe	\$ 4,340,053	\$ 3,528,005	\$ 7,868,058
Family Support	\$ 4,340,053	\$ 3,528,005	\$ 7,868,058
Philanthropic	\$ 70,786	\$ 68,489	\$ 139,275
George A. & Grace L. Long Foundation	764	736	1,500
Exchange Club Center for the Prevention of Child Abuse, Rockville	764	736	1,500
Hartford Foundation for Public Giving	60,003	57,772	117,775
Exchange Club Center for the Prevention of Child Abuse, Rockville	60,003	57,772	117,775

Domain, Source and Program	Sum of Total, Ages 0-8	Sum of Total, Ages 9-17	Sum of Total, Ages 0-18
Macy's Foundation	1,019	981	2,000
Exchange Club Center for the Prevention of Child Abuse, Rockville	1,019	981	2,000
Service Clubs	9,000	9,000	18,000
Kidsafe - Parent and Youth Support	9,000	9,000	18,000
State	\$ 4,255,017	\$ 3,459,516	\$ 7,714,533
DCF	2,423,076	2,450,816	4,873,892
Child Protective Services	1,002,773	998,770	2,001,543
Community Life Skills	2,129	3,194	5,323
Family Support Team	29,262	43,893	73,155
FAST	7,067	10,600	17,666
Foster care	889,309	885,759	1,775,069
Foster Care Clinic	1,853	4,324	6,177
Integrated Family Violence	5,305	7,957	13,262
Intensive Family Preservation	29,501	9,834	39,335
Intensive Safety Planning	3,723	5,584	9,307
Multidisciplinary Team	1,628	2,442	4,070
Parent Aide	6,864	10,296	17,161
Parent Aide/Conference	48,342	32,228	80,569
Parent Education Assess Service	38,251	42,857	81,108
Positive Youth Development	1,446	8,192	9,637
Purchased Services	294,743	293,566	588,309
Reconnecting Families Program	3,368	5,052	8,420
Respite Care Services	265	398	663
Sexual Abuse Evaluation	2,567	3,851	6,418
Short Term Assessment & Respite	53,291	79,936	133,227
Temporary Child Care	1,388	2,082	3,470
SDE	77,600	158,809	236,409
ASTE-Vocational Agriculture	-	118,455	118,455
Carl Perkins Career & Tech. Educ. Act	-	40,354	40,354
Family Resource Center	77,600	-	77,600
DSS	1,280,341	849,891	2,130,232
Food Stamps	634,665	634,665	1,269,331
Temporary Family Assistance(TANF)	645,676	215,225	860,901
DPH	313,600	-	313,600
WIC	313,600	-	313,600
Children's Trust Fund	160,400	-	160,400
Nurturing Families Network	160,400	-	160,400
Town	\$ 14,250	\$ -	\$ 14,250
Town of Vernon	14,250	-	14,250
Parent Education and Support	14,250	-	14,250
Grand Total	\$ 24,361,599	\$ 39,284,438	\$ 63,646,036

Glossary

Intensive Home Based Serv: FFT	Functional Family Therapy
Intensive Home Based Serv: IICAPS	Intensive In-Home Child and Adolescent Psychiatric Services
Intensive Home Based Serv: MDFT	Multi-disciplinary Family Therapy
Int. Home Based Serv: MDFT FSATS	Multi-disciplinary Family Therapy- Family Substance Abuse Treatment Services
Intensive Home Based Services: MST	Multi-systemic Therapy
Emrg Mob Psych/Care Coord Startup	Emergency Mobile Psychiatric Response teams and Care Coordination teams (part of CT Children's Behavioral Health Partnership)
WIC	Nutrition supplement for Women, Infants, and Children

CURRENT COMMUNITY PERSPECTIVES

FOCUS GROUP & INTERVIEWS

RATIONALE and APPROACH

At the core of a community planning and decision-making process is an inclusiveness of key stakeholders in each stage of the work. This creates a sense of ownership of the resultant comprehensive plan, as well as legitimacy to the work. Built into the Vernon Community Network approach is a *continual community feedback loop* to support this framework.

Phase I of such a system includes both qualitative and quantitative data collection and analysis. This in turn is further developed by examining the “stories” that lie behind the data, initiated by conducting a force field analysis of the raw data.

In line with this approach, the Vernon Community Network Leadership Work Group conducted 10 focus groups in the Vernon community, getting input from nearly 60 residents. The questions posed to each group were:

1. From your perspective what makes a child: Safe? Healthy? Productive?
2. What does Vernon have to offer families with children birth-17?
3. What are the major unmet needs of families with children in our community?
4. From your perspective what services would benefit families with children?
5. Who else should we ask to participate in a Focus Group?

Additionally it is recognized that there are individuals in the community who hold positions of leadership who were interviewed asking the following set of questions:

1. What services and programs are you aware of or have used that benefit families with children in Vernon?
2. What are your recommendations for what should be done to improve services for families with children in one or more of the following areas: Education, K-12, Health, and Child Development, Family Support, Early Childhood, Other?
3. What are the major unmet needs of families with children in Vernon that this plan must address? (Refer to Result Statement)
4. What services would address those needs?
5. What are your thoughts regarding how to fund and support these services? (Include low- and no-cost ideas such as shared resources or redeployment of existing allocations)?
6. What role do you see yourself/your organization playing in achieving our end result?
7. Who else should we interview?

LETTERS OF SUPPORT

Government Agency/Organization
Governor's Office
General Assembly
<ul style="list-style-type: none"> ▪ Joint Committee on Appropriations
<ul style="list-style-type: none"> ▪ Education Committee
<ul style="list-style-type: none"> ▪ Human Services Committee
<ul style="list-style-type: none"> ▪ Committee on Children
<ul style="list-style-type: none"> ▪ Commission on Children
Government Agencies, Quasi-State Agencies and Advisory Councils
<ul style="list-style-type: none"> ▪ Office of Early Childhood
<ul style="list-style-type: none"> ▪ State Department of Education
<ul style="list-style-type: none"> ▪ Office of Policy and Management
<ul style="list-style-type: none"> ▪ Head Start Collaboration Office
<ul style="list-style-type: none"> ▪ Connecticut Health and Educational Facilities Authority
<ul style="list-style-type: none"> ▪ State Education Resource Center
<ul style="list-style-type: none"> ▪ Child Poverty and Prevention Council
<ul style="list-style-type: none"> ▪ Connecticut Early Childhood Cabinet/State Advisory Council
Philanthropy
<ul style="list-style-type: none"> ▪ Graustein Foundation
<ul style="list-style-type: none"> ▪ United Way of Connecticut
Business
<ul style="list-style-type: none"> ▪ Connecticut Business and Industry Association
Advocacy Organizations
<ul style="list-style-type: none"> ▪ Connecticut Voices for Children
<ul style="list-style-type: none"> ▪ Connecticut Parent Advocacy
<ul style="list-style-type: none"> ▪ Connecticut Parent Power
<ul style="list-style-type: none"> ▪ Connecticut Association for Human Services
<ul style="list-style-type: none"> ▪ Connecticut Early Childhood Alliance
<ul style="list-style-type: none"> ▪ Connecticut Family Resource Center Alliance
Other Organizations and Associations
<ul style="list-style-type: none"> ▪ Connecticut Association for Education of Young Children
<ul style="list-style-type: none"> ▪ Connecticut Association of Public School Superintendents
<ul style="list-style-type: none"> ▪ Connecticut Council of Administrators of Special Education
<ul style="list-style-type: none"> ▪ Connecticut Head Start Association
<ul style="list-style-type: none"> ▪ Advanced Behavioral Health, Inc.
<ul style="list-style-type: none"> ▪ Teach For America Connecticut
<ul style="list-style-type: none"> ▪ Connecticut Children's Investment Partnership
<ul style="list-style-type: none"> ▪ Training, Education and Manpower, Inc.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Health & Safety

Criterion: Safety of the Physical Environment

Rationale/Link with Child Outcomes: Prevention of injury in a safe environment ensures that all children will be healthy and able to benefit from learning experiences. Maintaining a safe environment includes appropriate supervision of children and capacity to identify and respond to possible risk conditions and emergency situations. Particular attention to injury prevention may be needed for children with disabilities or special health care needs as well as for other children who may be especially susceptible to injury, including infants and toddlers.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>All staff complete approved training* on CT DPH statutes and regulations and are able to identify potential hazards (indoor and outdoor) and proactively report hazards to be rectified.</p> <p>All staff know and follow safety regulations and emergency plans, including those specific for children with disabilities.</p>	<p>The program uses a nationally recognized health and safety checklist# developed for use in early childhood programs (indoor and outdoor).</p> <p>The program's improvement plan# incorporates goals and actions based on results of checklist review and in conjunction with the program's approved health consultant, to improve health and safety policies and practices.</p> <p>The program has a written plan# for a range of emergency situations.</p>	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Health & Safety

Criterion: Health Practices

Rationale/Link with Child Outcomes: Using procedures that prevent transmission of disease and promote physical and social-emotional health ensures that children will be healthy and able to attend and benefit from learning experiences. Particular attention to disease prevention and health promotion may be required for children with disabilities or special health care needs as well as for other children who may be especially vulnerable, including infants and toddlers.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>Risk assessment screening for communicable diseases# is conducted for all staff annually.</p> <p>All staff complete approved training* in Standard Precautions.</p> <p>To ensure that all children are able to fully participate, including those with disabilities and special health care needs, there is one staff member certified* to administer medications available on the premises at all times.</p> <p>The program's approved health consultant* provides written recommendations for improvement, based on observation and records review, with special attention to the care of infants and toddlers and children with disabilities and special health</p>	<p>The program documents compliance with and implements corrections according to the recommendations of the consultant (or consultants). The program's approved health care consultant monitors compliance with recommendations.</p>	<p>Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.</p>

Connecticut QRIS Standards, Criteria and Indicators

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
		care needs. Each classroom has a first aid kit with contents specified by DPH.*		

Connecticut QRIS Standards, Criteria and Indicators

Standard: Health & Safety

Criterion: Nutrition and Physical Activity

Rationale/Link with Child Outcomes: Nutritious food and opportunities for physical exercise in the early childhood setting, and provision of information on nutrition and physical activity to families, promote child health and development so that children will be able to benefit from learning experiences. Understanding the food preferences of individual children and families from different backgrounds enables programs and providers to provide nutritious meals during care while reinforcing healthy practices in families. Particular attention to provisions for physical exercise may be required for children with disabilities or special health care needs as well as for infants and toddlers.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>Program provides staff and families with written information# on established guidelines on nutritious meals and/or snacks and on physical activity.</p> <p>When provided by the program, program staff follow instructions for offering appropriate meals for children with special dietary needs.</p> <p>Program provides a comfortable place for breastfeeding and coordinates feedings with the infant's mother.</p> <p>Full-day (8 or more hours) programs offer toddlers and preschoolers at least 60 minutes of indoor and outdoor physical activity daily; part-day programs offer toddlers and preschoolers at least an equivalent pro-rated number of minutes of indoor and outdoor physical activity daily.</p>	<p>All program staff complete approved training* on health, nutrition, and physical activity for the prevention against obesity and other health issues i.e. diabetes etc.</p> <p>Families are offered opportunities to participate in training on health, nutrition, and physical activity.</p> <p>When food is provided by the program, program requests information from families on cultural and individual preferences and ensures that food served to children reflects the cultural diversity of enrolled families.</p>	<p>Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.</p>

Connecticut QRIS Standards, Criteria and Indicators

Standard: Learning Environment

Criterion: Environmental Supports for Development & Learning

Indicator Description: Arrangement of Learning Space

Rationale/Link with Child Outcomes: Spaces with materials designed to promote learning and development goals, including those for children with disabilities, provide children with opportunities for self-directed exploration. Children from diverse backgrounds are encouraged to use learning spaces when these areas provide materials and support experiences that are familiar to them. Assessment of the learning environment using a standardized observational measure of environmental quality gives programs and providers a comprehensive and rigorous approach to identifying specific areas and strategies for improvement.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	Program conducts a self-assessment using an approved observational tool# to assess its learning environment and uses the results to set goals and actions in the program's improvement plan.#	Program is assessed by an external observer* using an approved observational tool# to assess its learning environment and uses the results to set goals and actions in the program's improvement plan.#	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Learning Environment

Criterion: Caregiver- teacher/child interactions and relationships

Rationale/Link with Child Outcomes: Research indicates that children’s social-emotional development is promoted by nurturing relationships with caring adults, that social-emotional development is correlated with learning, and that intentional practices are needed to support development across all domains and to facilitate learning. Programs and providers that develop individual relationships with children by being responsive, attentive, consistent, comforting, supportive, and culturally sensitive, and use intentional strategies to communicate effectively and build relationships with each child, based on knowledge of individual child interests and needs, support social-emotional and language development as well as reinforce engagement in learning experiences. Assessment of adult-child interactions and relationships using a standardized observational measure of environmental quality gives programs and providers a comprehensive and rigorous approach to identifying specific areas and strategies for improvement.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>Program conducts a self-assessment using an approved observational tool# to assess teacher-child interactions and uses the results to set goals and actions in the program’s improvement plan.#</p> <p>Policies for staff assignments and children’s schedules maximize the consistency and continuity of teacher-child relationships and peer group composition.</p>	Program is assessed by an external observer* using an approved observational tool# to assess teacher-child interactions and relationships and uses the results to set goals and actions in the program’s improvement plan.#	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Learning Environment

Criterion: Learning goals and experiences

Indicator Description: Planning Intentional Learning for Children

Rationale/Link with Child Outcomes: Research indicates that learning outcomes are facilitated when experiences are planned and intentionally aligned with learning goals. The following elements are critical in planning intentional learning: high expectations for all children, a learning-oriented environment, engaging activities, and thoughtful questioning and feedback. Learning experiences should be intentionally planned to address the knowledge and skills defined in state early learning and development standards and should be responsive to the needs of specific groups of children and individuals, including infants and toddlers, children with special needs or disabilities, children from culturally or linguistically diverse backgrounds, children of color, children from immigrant families, children in foster care, and children from low-income families. The implementation of specific tools and resources should be done in an intentional, responsive, and reflective manner.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>Classroom staff complete approved training* on the Early Learning and Development Standards# and selected curriculum, materials and tools.#</p> <p>The Early Learning and Development Standards# are used in planning classroom experiences.</p> <p>Planned experiences reflect the diversity of the children and families served.#</p>	<p>Classroom staff complete approved training* on differentiating learning experiences to meet individual child learning goals.</p> <p>Program implements learning experiences (curriculum) aligned with the Early Learning and Development Standards. Plans describe the learning experiences and goals, specify adults' role in supporting learning, reflect the needs and interests of individual children, and indicate how families will be involved.</p>	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Learning Environment

Criterion: Child observation & assessment

Indicator Description: 1-Conducting Observation and Assessment

Rationale/Link with Child Outcomes: Information on children’s progress assists programs and providers as they structure their environments and experiences to support individual development and learning. Working with families and other organizations serving enrolled children ensures that programs and providers better understand children’s needs and can reinforce and supplement experiences in other settings to maximize development and learning. Observation and assessment methods should allow programs and providers to understand individual developmental progress and needs for all children, including infants and toddlers, children with special needs or disabilities, children from culturally or linguistically diverse backgrounds, children of color, children from immigrant families, children in foster care, and children from low-income families.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>Program conducts and documents observations# related to the Early Learning and Development Standards of all children on a regular basis.</p> <p>Observations are conducted during typical classroom experiences.</p> <p>Program collects family observations/ reports# on individual children’s interests, preferences, and developmental progress.</p> <p>If any concerns about a child’s development are identified, the program refers families to the Help Me Grow system or conducts a basic developmental screening using an approved tool.#</p>	<p>Program conducts and documents periodic assessment of all children’s progress in development and learning, using an approved formative assessment tool.#</p> <p>With parental permission, program gathers information on child’s development from other programs serving the child.</p>	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Learning Environment

Criterion: Child observation & assessment

Indicator Description: 2-Using Observation and Assessment Information

Rationale/Link with Child Outcomes: Information on children’s progress in the care setting assists programs and providers as they structure their environments and experiences to support and foster individual development and learning. Observation and assessment methods should allow programs and providers to understand individual children’s developmental progress and needs for all children, including infants and toddlers, children with special needs or disabilities, children from culturally or linguistically diverse backgrounds, children of color, children from immigrant families, children in foster care, and children from low-income families. Working with families and other organizations serving enrolled children ensures that programs and providers better understand children’s needs and can reinforce and supplement experiences in other settings to maximize development and learning.

Setting/ Program	Licensing Requirements	Good Practice	Better Practice	Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	Information from observations is used in classroom-wide planning for learning experiences.# NOTE: Indicators in the Family Engagement and Support Standard refer to program sharing of individual child observation and assessment information with families.	Information from observation and assessment, along with other information from related service providers when appropriate, is used to individualize curriculum, teaching strategies, and classroom support.#	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Family Engagement & Support

Criterion: Reciprocal Communication

Rationale: As their first teachers and most effective advocates, families are the strongest influence on their children’s development and learning. Programs and providers that establish partnerships with families through knowledge of and responsiveness to their diverse strengths and needs are the most effective in supporting children’s development and learning. Effective programs and providers engage in mutual, two-way respectful communication with families that reflects their cultural and linguistic preferences and recognizes the roles of families and of programs and providers in supporting individual children’s development and learning.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>Program provides opportunities for families to share information about their children’s specific interests, needs, and development and about their own interests, talents, preferences, and goals for their children.#</p> <p>Program regularly shares information with families about their children’s experiences, development, and learning in the program.#</p>	<p>Program staff meet with families as requested to share information on their children’s experiences, development, and learning in the program, particularly when the child has special needs or the parent or staff has special concern related to any domain of development.</p> <p>Provides opportunities at mutually convenient times at least twice a year for families and staff to share information on their children’s experiences, development, and learning in the program.</p> <p>Program shares written information with families on child’s developmental progress# at least twice a year.</p> <p>Program uses a variety of resources* to provide written materials in languages and</p>	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

/CT QRIS 5 Standards Criteria and Indicators.docx

Notes: * = system infrastructure; # = template and/or example in toolkit

Connecticut QRIS Standards, Criteria and Indicators

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
			<p>communication styles/preferences meaningful to the families enrolled.</p> <p>Provides opportunities at mutually convenient times at least twice a year for families and staff to share information on their children's experiences, development, and learning in the program.</p>	

Connecticut QRIS Standards, Criteria and Indicators

Standard: Family Engagement & Support

Criterion: Connecting families with community resources and services

Rationale: Early learning and development programs and providers are a critical resource for families that can have a strong and lasting impact on children’s development and learning. Programs and providers have relationships with families that provide opportunities to share information with and link families to community resources. To do this effectively, programs and providers must be knowledgeable of and have connections to community resources and services that are responsive to the needs and circumstances of all children and families, especially high-need children and families.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	Staff have knowledge of community resources, agencies, and services and of state and federal benefits, and shares this information with families.	The program participates in a community or state organization, group, or network* that facilitates access of families to services and programs as needed.	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Family Engagement & Support

Criterion: Family involvement and leadership

Rationale: Families’ active involvement is critical in supporting their children’s development and learning and in enhancing and extending the impact of early care and education programs and providers. Programs and providers that are effective in strengthening family involvement create a welcoming and inviting environment that offers opportunities for all families to become involved in a variety of ways that are responsive to and respectful of the diversity of family backgrounds, interests, skills, talents, preferences, and availability.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>Programs offer opportunities for parents to participate in their child’s classroom and program activities.</p> <p>Programs share information with families on how to reinforce at home specific skills identified in the Early Learning and Development Standards.#</p>	<p>Programs use a nationally recognized tool to self-assess their policies and practices regarding family involvement and engagement, particularly for families from diverse backgrounds, and uses the results to set goals and actions in the program’s improvement plan.#</p> <p>Programs offer family involvement activities, events, or experiences# at least twice a year, tailored to the specific needs and interests of the families served.</p>	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Workforce Qualifications & Professional Development

Criterion: Education & Credentials – Teaching Staff

Indicator Description: Education and Credential Requirements for Teaching Staff

Rationale: Research indicates that children in early care and education settings with adults who have demonstrated knowledge and skills through formal education and credentials in child development and early education have better learning experiences and outcomes. The greater the level of knowledge and skills, the more positive the children’s experiences and outcomes. These knowledge and skills include understanding child development and strategies to promote development and learning for all children, including infants and toddlers, children with special needs or disabilities, children from culturally or linguistically diverse backgrounds, children of color, children from immigrant families, children in foster care, and children from low-income families.

See chart on following page for indicators.

Connecticut QRIS Standards, Criteria and Indicators

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>The program's Head Teacher who does not have a CDA or degree in early childhood education has credits in the following areas:*</p> <ul style="list-style-type: none"> • Introduction to Early Care & Education, • Child Growth & Development, • Family Engagement & Support, and • Working with Children from Diverse Backgrounds and Children with Special Needs. <p>All teaching staff in the program are entered in the CT Workforce Registry.</p>	Each group of children in the center- or school-based setting has at least one teacher who meets the requirements of Level 2*.	<p>Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.</p> <p>Programs with state or federal funding are required to meet the educational qualifications specified in the relevant regulations and/or policies.</p>

Connecticut QRIS Standards, Criteria and Indicators

Standard: Workforce Qualifications & Professional Development

Criterion: Professional development

Indicator Description: Continuing Education and Training

Rationale: Research indicates that children in early care and education settings with adults who have demonstrated knowledge and skills in child development and early education have better learning experiences and outcomes. Ongoing professional development opportunities for program staff and providers ensure that their knowledge and skills are reinforced and up-to-date, particularly those related to supporting the development and learning of high-risk children. Using approved trainers and aligning training content with identified improvement goals maximizes the benefits of professional development.

Setting/ Program	Licensing Requirements	Good Practice	Better Practice	Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>For each member of the staff:</p> <ul style="list-style-type: none"> • Minimum of 10 hours per year of competency-based training aligned with CKCs* • Minimum of 35% or more of all annual hours by state approved trainers* • Annual training topics to include supporting young children including infants and toddlers and children and families who are culturally, linguistically and ability diverse. • Membership in a national or state early childhood professional organization 	<p>For each member of the staff:</p> <ul style="list-style-type: none"> • Minimum of 15 hours per year of competency-based training aligned with CKCs* • Minimum of 50% or more of all annual hours by state approved trainers* • Aligned to program professional development plan and performance review process# 	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Connecticut QRIS Standards, Criteria and Indicators

Standard: Workforce Qualifications & Professional Development **Criterion:** Education & Credentials – Program Administrators

Indicator Description: Education and Credential Requirements for Program Administrators

Rationale: Consistency of high quality care has been demonstrated to be related to children’s development and learning. Program administrators and family child care providers are responsible for ensuring that children in their care have consistently high quality experiences. This requires knowledge and skills related to child development and to management of a business organization and identity as an early care and education professional.

Setting/ Program	Licensing Requirements	Good Practice	Better Practice	Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>The Program Administrator shall have:</p> <ul style="list-style-type: none"> • six credits in Administrative and Leadership^ and • six credits in early childhood education and • completed training on emergency preparedness.* <p>(^credits must meet Connecticut Director Credential competencies.)</p> <p>The Program Administrator is familiar with IDEA requirements and procedures.</p>	<p>The Program Administrator shall hold:</p> <ul style="list-style-type: none"> • an Associate’s degree or higher and • a current CT Director’s Credential at the Initial Level or higher. 	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Leadership & Management

Criterion: Financial & legal management

Indicator Description: Sound financial management

Rationale: Consistency of high quality care has been demonstrated to be related to children’s development and learning. Program administrators and family child care providers are responsible for ensuring that children experience consistently high quality early education experiences. This includes managing finances so that the setting is financially stable and has the resources to provide high quality care.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	Program has a budget with itemized income and expenditures.#	<p>Program reconciles its budget by comparing income and expenditures quarterly.</p> <p>Program conducts legal and financial risk assessment# annually.</p>	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Leadership & Management

Criterion: Recordkeeping

Indicator Description: Recordkeeping system

Rationale: Consistency of high quality care has been demonstrated to be related to children’s development and learning. Program administrators and family child care providers are responsible for ensuring that children experience consistently high quality early education experiences. Accurate, up-to-date, and complete records support compliance with licensing requirements and therefore continued operation, as well as access to information on children and families needed for curriculum planning, child observation and assessment, and response to family interests and needs.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	Program implements a system# for ensuring confidentiality, maintenance, and updating of all required records.	Program implements an annual review# of all required records.	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Leadership & Management

Criterion: Staffing & staff management

Indicator Description: 1- Staff Performance Reviews

Rationale: Research indicates that children in early care and education settings with adults who have demonstrated knowledge and skills in child development and early education have better learning experiences and outcomes. Consistency of high quality care also has been demonstrated to be related to children’s development and learning. Providing all adults working with children with information about their responsibilities and expectations, and with feedback on their performance regarding those responsibilities and expectations, is one strategy for ensuring high quality, consistent experiences. These responsibilities and expectations include those related to responding appropriately to the specific needs and circumstances of all enrolled children, including infants and toddlers, children with special needs or disabilities, children from culturally or linguistically diverse backgrounds, children of color, children from immigrant families, children in foster care, and children from low-income families.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	<p>Program conducts annual performance reviews# for all staff based on job descriptions# and information provided during orientation and in updates on program expectations for staff. Performance reviews are used to develop professional development plans.#</p> <p>Program ensures that all staff are enrolled in the CT Early Childhood Professional Registry.</p>	Annual performance reviews of job-related performance goals are conducted for all staff and include staff self-assessment.#	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Leadership & Management

Criterion: Staffing & staff management

Indicator Description: 2 -Access to resource staff and consultants to meet the needs of children and families

Rationale: Children in early care and education settings may have conditions or experiences that affect their development and learning, but are beyond the knowledge and skills of staff and providers to address. In order to provide the most effective learning environment, programs and providers need access to specialized knowledge and skills from other professionals, particularly in appropriately responding to the needs and circumstances of high-risk children. Also, early care and education programs and providers have information and insights regarding the children in their care that can inform and guide the work of other professionals with those children, increasing opportunities to support and promote their development and learning.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	Program provides opportunities for staff to participate in and/or provide input to child-related meetings with resource staff or consultants, as requested by the child's family.	Program ensures that there are annual observations and consultations with one or more approved consultants* related to the program's improvement plan.	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.

Connecticut QRIS Standards, Criteria and Indicators

Standard: Leadership & Management

Criterion: Self-assessment and improvement

Indicator Description: System for self-assessment and improvement

Rationale: Consistency of high quality care has been demonstrated to be related to children’s development and learning. Early care and education programs and providers that routinely assess key elements of quality using standardized instruments, use multiple sources of input and information, and develop and implement action plans for quality improvement are likely to provide higher quality and more consistent experiences for the children they serve. In order to support the development and learning of all children, self-assessments should include attention to how well the program or provider is responding to the needs and circumstances of all children, including infants and toddlers, children with special needs or disabilities, children from culturally or linguistically diverse backgrounds, children of color, children from immigrant families, children in foster care, and children from low-income families.

Setting/ Program	Level 1 Licensing Requirements	Level 2 Good Practice	Level 3 Better Practice	Level 4 Best Practice/ National Standards
Center-based programs.	Level 1 requires compliance with Dept. of Public Health regulations. Monitoring of Level 1 programs is performed by DPH.	Program conducts an annual self-assessment using an approved instrument or process*# that comprehensively examines operations, policies, handbooks or manuals, procedures, and practices and uses the results to set goals and actions in the program’s improvement plan.#	Program’s annual self-assessment includes input from staff, families, and other stakeholders.# Program regularly monitors progress on its improvement plan and adjusts actions steps as necessary.	Programs at this level are Head Start approved or meet NAEYC Accreditation. Monitoring of Level 4 programs is conducted by national organizations.



Substitute House Bill No. 5530

Public Act No. 14-178

**AN ACT CONCERNING THE DEPARTMENT OF PUBLIC HEALTH'S
RECOMMENDATIONS REGARDING BULK WATER HAULERS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (NEW) (*Effective from passage*) (a) On and after October 1, 2014, no person shall act as a bulk water hauler unless such person has obtained a license issued by the Department of Public Health in accordance with this section. For purposes of this section: (1) "Bulk water hauling" means transporting water to a water company or a consumer of a water company, in bulk by any means, where such water is to be used for public drinking water supply purposes; (2) "bulk" means two hundred fifty gallons of water or more; (3) "consumer" has the same meaning as in section 25-32a of the general statutes; (4) "water company" has the same meaning as in section 25-32a of the general statutes; and (5) "commissioner" means the Commissioner of Public Health or the commissioner's designee.

(b) Each person seeking licensure as a bulk water hauler shall make application on a form prescribed by the department, pay an application fee of one hundred dollars and present evidence satisfactory to the commissioner that the applicant has the qualifications necessary to engage in bulk water hauling.

(c) The commissioner shall establish (1) the qualifications to obtain a license as a bulk water hauler, and (2) requirements designed to ensure that any water transported by a bulk water hauler is fit for human use and consumption.

(d) Licenses shall be renewed once every two years in accordance with the provisions of section 19a-88 of the general statutes. The fee for renewal shall be one hundred dollars.

No license shall be issued under this section to any applicant who has been the subject of professional disciplinary action relating to the hauling of bulk water in this or any other state or jurisdiction.

(e) Any water transported by bulk water hauling shall meet the requirements of section 25-32 of the general statutes and regulations adopted thereunder. No bulk water hauler shall deliver water to a consumer of a water company without first notifying the water company of such delivery. Bulk water hauling to a water company or a consumer of a water company shall be permitted only as a temporary measure to alleviate a water supply shortage.

(f) The commissioner may periodically inspect any equipment or material used in connection with bulk water hauling, may investigate any water supply from which a bulk water hauler obtains water in accordance with section 25-34 of the general statutes and may issue any order necessary to protect the public health. Any order issued under this subsection shall not be stayed upon any appeal by a licensee under section 25-34 or 25-36 of the general statutes.

(g) The commissioner may adopt regulations, in accordance with the provisions of chapter 54 of the general statutes, to implement the provisions of this section.

(h) The commissioner may take any disciplinary action set forth in section 19a-17 of the general statutes against a bulk water hauler for any of the following reasons: (1) Fraud or deceit in obtaining or renewing a license to act as a bulk water hauler; (2) fraud or deceit in rendering services under the license; (3) negligent, incompetent or wrongful conduct in rendering services under the license; or (4) violation of any provision of this section or regulations adopted under this section. The commissioner may take action pursuant to said section 19a-17 after providing notice and an opportunity for a hearing on any contemplated action under said section 19a-17.

(i) Any person who violates any provision of this section shall, for each offense, be guilty of a class C misdemeanor.

Approved June 11, 2014



Senate Bill No. 424

Special Act No. 14-22

AN ACT CONCERNING ACCESS TO PRESCHOOL PROGRAMS FOR CHILDREN IN THE CARE AND CUSTODY OF THE DEPARTMENT OF CHILDREN AND FAMILIES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

Section 1. (*Effective July 1, 2014*) (a) For purposes of this section:

(1) "Preschool-aged child" means any child age three to five, inclusive, who is placed in out-of-home care by the Commissioner of Children and Families pursuant to an order of commitment under section 46b-129 of the general statutes and who is not enrolled in a preschool program or kindergarten at the time of such placement; and

(2) "Eligible preschool program" means (A) a school readiness program, as defined in section 10-16p of the general statutes, (B) a preschool program offered by a local or regional board of education or regional educational service center, (C) a preschool program accredited by the National Association for the Education of Young Children, (D) a Head Start program, or (E) any preschool program that the commissioner deems suitable to meet the needs of the child.

(b) Not later than January 1, 2015, the Commissioner of Children and Families, in consultation with the Office of Early Childhood, shall (1) adopt policies and procedures that maximize the enrollment of eligible preschool-aged children in eligible preschool programs, and (2) submit such policies and procedures to the joint standing committees of the General Assembly having cognizance of matters relating to children, human services, education and appropriations, in accordance with the provisions of section 11-4a of the general statutes.

Sec. 2. (*Effective from passage*) Not later than January 1, 2015, the Commissioner of Children and Families, in consultation with the Office of Early Childhood, shall submit a report, in accordance with the provisions of section 11-4a of the general statutes, to the

joint standing committees of the General Assembly having cognizance of matters relating to children, human services, education and appropriations concerning (1) the number of eligible preschool-aged children, as defined in section 1 of this act, who are enrolled in an eligible preschool program, as defined in section 1 of this act, at the time that such children are placed in out-of-home care by the Commissioner of Children and Families pursuant to an order of commitment under section 46b-129 of the general statutes, (2) the number of eligible preschool-aged children who are not enrolled in an eligible preschool program at the time of such placement, (3) the number of children age birth to three, inclusive, who are placed in out-of-home care by the Commissioner of Children and Families pursuant to an order of commitment under section 46b-129 of the general statutes, (4) the number of eligible preschool-aged children who require special education and related services and the number and percentage of such children who enrolled in a preschool program, (5) an analysis of the availability of spaces in eligible preschool programs in relation to the geographic placement of eligible preschool-aged children described in subdivision (2) of this subsection, (6) an analysis of the availability of spaces in eligible preschool programs in relation to the nature of such eligible preschool program and the cost of such eligible preschool program to the Department of Children and Families, (7) an analysis of eligible preschool programs and transportation options that will minimize costs to the department, including eligible preschool programs that provide transportation or whose geographic proximity to a child's placement is such that the provision of transportation by a foster parent or caregiver is considered within the reasonable expectations of the duties of such foster parent or caregiver, and (8) a plan to provide priority access to eligible preschool-aged children described in subdivision (2) of this subsection at state and federally-funded preschool programs.

Approved June 13, 2014

Office of Early Childhood (OEC)

Title of Position: *Family Engagement/Community Outreach Specialist*

Overview of Role:

The Family Engagement/Community Outreach Specialist will apply expertise and experience in the area of effective family engagement and early childhood program improvement to provide training, technical assistance, and coaching focused on building the capacity of early childhood communities to connect to the schools and state initiatives. The position will effectively assist school readiness liaisons in their efforts to connect to hard-to-reach families. The position will report to the Manager of the Quality Rating and Improvement System.

Duties and Responsibilities

- Provide training and coaching that builds capacity for implementing family engagement best practice models with fidelity that promotes quality improvement of early childhood programs throughout the state.
- Assist communities in assessing current family engagement practices and to build on practices that have demonstrated success; while supporting modification and/or revision of those that need improvement.
- Support and lead the work of the school readiness liaisons in developing a comprehensive family engagement plan that is based on best practice models and is ready for implementation.
- Support each community early childhood collaboration with the schools in the effort to raise awareness of the importance of early childhood programs and services among school leaders, teachers and parents.
- Develop effective communication mechanisms or systems to facilitate coherent and effective communication between the early childhood community and the schools, families and the community at large.
- Engage in reflective practices to continually monitor the levels of family and community engagement as such initiatives are implemented.

Office of Early Childhood (OEC)

- Integrate family engagement best practices into community early childhood plans and link such practices to the schools plans.
- Convene four meetings a year with all participating communities focused on best practices in family engagement, which address strategies tailored to the local needs of the community.
- Support and guide seamless birth to eight continuums at the local level to assist families transitioning to the local school system.
- Lead efforts in collection of data that indicates outcomes for family/community engagement efforts.
- Lead community coordination efforts related to social service activities and programs including referral information for families.
- Develop and revise the OEC family engagement policy rubric and provides technical assistance when applicable.
- Assure that there is on-going methodology in each community to listen to parents routinely as customer. Assess need, priorities, policy direction based on annual parental input.
- Assure that parents serve on all policy bodies pertinent to young children, across health, safety and learning, with the skills to serve substantively.
- Align OEC policies across various funding streams that relate to family engagement and leadership to maximize resources, access points, and depth engagement.
- Assure participation of fathers in preschool programs and education.
- Link family education and engagement to home visiting, after school, and other support and family strengthening services.
- Assure bi-lingual information and access points for all families in each community, as needed.
- Link communities to the Parent Trust Act for opportunity to build parent leaders locally in early care and education.

Office of Early Childhood (OEC)

- Develop fact sheets for parents with customer friendly information in how to choose quality preschool programs, early language development, the role of attachment in child cognition and social emotional growth.
- Assure that family engagement is part of the OEC data provided to the children's report card and a key metric for improved child outcomes.
- Assist communities to link and assure optimal parent leadership and engagement to transition to school, chronic absence, early literacy, and safe school culture.

Office of Early Childhood (OEC)

Title of Position: Preschool Development Grant Accountability and Reporting Coordinator

Overview of Role:

The Accountability, Monitoring and Reporting Coordinator will apply expertise and experience in the area of effective program and grants management related to the Preschool Development Grant. The position will coordinate, monitor and supervise program development, data collection and reporting. The position will provide technical support to the systematic gathering and documentation of evidence from Subgrantees and their early learning providers in order to improve program quality through learning as well as to address accountability requirement. The position will report to the Manager of the Quality Rating and Improvement System.

Duties and Responsibilities

- Coordinate, monitor, and supervise data collection efforts of all funded programs.
- Coordinate, develop and complete all federal reports under the above mentioned grant.
- Coordinate professional development activities for the Subgrantees and their early learning providers.
- Convene and hold regular Continuous Quality Improvement (CQI) Team composed of the school readiness liaisons from each of the participating communities.
- Develop and make policy and practice recommendations that will align research with practice and improve collective understanding of high quality preschool programs.
- Provide capacity building support to the communities and identify further training needs and opportunities for program improvement that may be disseminated statewide.
- Support data analysis at the community and state levels to assist in reporting, decision making, accountability, and lessons learned.
- Coordinate with school readiness liaisons and community program/research teams in developing best practices and sharing lessons learned and experiences between Subgrantees.

Office of Early Childhood (OEC)

- Collect and analyze all data from Subgrantees that will lead to identification of strengths and improvement strategies.
- Utilize community based and participative monitoring and evaluation approaches.
- Apply procedures and knowledge of accountability standards and accreditation systems to the improvement of program quality and for optimal monitoring of grant programs.
- Design and prepare assessment, accountability, achievement and demographic reports in order to disseminate information to stakeholders and meet state and federal requirements.
- Interprets and implements legislative requirements to assure compliance with all local, state and federal laws.
- Instructs and provides assistance to county, district and school personnel on how to perform the tasks related to assessment and accountability of the grant funded programs.
- Develop and implement staff training regarding assessment and accountability data collection and procedures.

Subgrantees – Letters of Support

The following communities have agreed to participate as Subgrantees and have submitted letters of support:

- Bridgeport
- Derby
- East Haven
- Griswold
- Groton
- Hamden
- Hebron
- Killingly
- Manchester
- Naugatuck
- Seymour
- Torrington
- Vernon
- Wolcott

General Policy 14-10 Appendix
Roles and Responsibilities in the Administration, Coordination and Evaluation of the School Readiness Program

The designated person(s) responsible for coordination, program evaluation and administration and who acts as liaison between the local or regional School Readiness Council and the Connecticut Office of Early Childhood shall:

Maintain ongoing communication between the Connecticut Office of Early Childhood, the local or regional School Readiness Council, the Mayor (or designee) the Superintendent (or designee) and the sub-grantees.

- Staff the School Readiness Council and be responsible for:
 - Meeting minutes
 - Creating meeting agenda
 - Completing reports - unmet needs, utilization, fiscal, school readiness monthly reports, annual Quality Enhancement report and Connecticut School Readiness Preschool Program Evaluation System (C.S.R.P.P.E.S.)
 - Maintaining Council membership
 - Communicating legislative requirements of the School Readiness grant
 - Providing resources to and guiding, reviewing and updating policy and procedure development with the Council
- Oversee the School Readiness and Quality Enhancement grant application processes using the Connecticut Office of Early Childhood template and following local bidding processes:
 - Author the Community School Readiness and Quality Enhancement grants
 - Coordinate the development of the Letters of Agreement
 - Organize the grant application review of proposals and submit program allocation recommendations to the School Readiness Council for approval
 - Manage the delivery of the award letter to the city for the local acceptance and approval process
 - Provide Technical Assistance to individual programs applying for School Readiness funds
 - Work with the local fiscal agent to insure the proper expenditure of School Readiness funds
 - Develop contracts with School Readiness sub-grantees
- Provide outreach to the community to assist families in the enrollment process for School Readiness and other early care opportunities.
- Meet regularly with providers to provide a forum to:
 - Share information and best practices
 - Review and clarify policies and regulations
 - Disseminate information
 - Assess needs and set priorities
 - Problem solve
 - Share resources
 - Develop collaborative initiatives
 - Provide technical assistance on policies and practices related to the School Readiness quality components or seek those with expertise that can provide such assistance

- Conduct regular site visits* to monitor compliance with all of the School Readiness grant regulations and develop action plans when appropriate. The areas to be regularly monitored include:
 - Fiscal and policy compliance
 - Staff qualifications
 - Attendance
 - Parent fees
 - Curriculum and assessment
 - Accreditation and approval timelines
 - Licensing
 - Professional development
 - Program adherence to all School Readiness Components: health, family literacy, nutrition, etc.

*The School Readiness Liaison is ultimately responsible for monitoring the individual sub-grantees. While monitoring activities may be subcontracted out, those indicators related to the areas of Curriculum and Assessment must be assessed by someone with early childhood expertise and experience.

- Collaborate with local school systems and early care and education programs to develop and implement the local transition to kindergarten plan.
- Manage, maintain and archive records.
- Attend scheduled liaison meetings to exchange information with Connecticut Office of Early Childhood and respond to Connecticut Office of Early Childhood requests for information
- Support the development and ongoing implementation of the community's early childhood plan.
- Represent the School Readiness Council in the community and across the state.

Developed collaboratively by the Connecticut Office of Early Childhood and School Readiness Council Liaisons

5/2011

L. **Required Language (Non-discrimination)**

References in this section to “contract” shall mean this grant agreement and to “contractor” shall mean the Grantee.

(a) For purposes of this Section, the following terms are defined as follows:

- i. "Commission" means the Commission on Human Rights and Opportunities;
- ii. "Contract" and “contract” include any extension or modification of the Contract or contract;
- iii. "Contractor" and “contractor” include any successors or assigns of the Contractor or contractor;
- iv. "Gender identity or expression" means a person's gender-related identity, appearance or behavior, whether or not that gender-related identity, appearance or behavior is different from that traditionally associated with the person's physiology or assigned sex at birth, which gender-related identity can be shown by providing evidence including, but not limited to, medical history, care or treatment of the gender-related identity, consistent and uniform assertion of the gender-related identity or any other evidence that the gender-related identity is sincerely held, part of a person's core identity or not being asserted for an improper purpose;
- v. “good faith” means that degree of diligence which a reasonable person would exercise in the performance of legal duties and obligations;
- vi. "good faith efforts" shall include, but not be limited to, those reasonable initial efforts necessary to comply with statutory or regulatory requirements and additional or substituted efforts when it is determined that such initial efforts will not be sufficient to comply with such requirements;
- vii. "marital status" means being single, married as recognized by the state of Connecticut, widowed, separated or divorced;
- viii. "mental disability" means one or more mental disorders, as defined in the most recent edition of the American Psychiatric Association's "Diagnostic and Statistical Manual of Mental Disorders", or a record of or regarding a person as having one or more such disorders;
- ix. "minority business enterprise" means any small contractor or supplier of materials fifty-one percent or more of the capital stock, if any, or assets of which is owned by a person or persons: (1) who are active in the daily affairs of the enterprise, (2) who have the power to direct the management and policies of the enterprise, and (3) who are members of a minority, as such term is defined in subsection (a) of Connecticut General Statutes § 32-9n; and
- x. "public works contract" means any agreement between any individual, firm or corporation and the State or any political subdivision of the State other than a municipality for construction, rehabilitation, conversion, extension, demolition or repair of a public building, highway or other changes or improvements in real property, or which is financed in whole or in part by the State, including, but not limited to, matching expenditures, grants, loans, insurance or guarantees.

For purposes of this Section, the terms "Contract" and “contract” do not include a contract where each contractor is (1) a political subdivision of the state, including, but not limited to, a municipality, (2) a quasi-public agency, as defined in Conn. Gen. Stat. Section 1-120, (3) any other state, including but not limited to any federally recognized Indian tribal governments, as defined in Conn. Gen. Stat. Section 1-267, (4) the federal government, (5) a foreign government, or (6) an agency of a subdivision, agency, state or government described in the immediately preceding enumerated items (1), (2), (3), (4) or (5).

- (b) (1) The Contractor agrees and warrants that in the performance of the Contract such Contractor will not discriminate or permit discrimination against any person or group of persons on the grounds of race, color, religious creed, age, marital status, national origin, ancestry, sex, gender identity or expression, mental retardation, mental disability or physical disability, including, but not limited to, blindness, unless it is shown by such Contractor that such disability prevents performance of the work involved, in any manner prohibited by the laws of the United States or of the State of Connecticut; and the Contractor further agrees to take affirmative action to insure that applicants with job-related qualifications are employed and that employees are treated when employed without regard to their race, color, religious creed, age, marital status, national origin, ancestry, sex, gender identity or expression, mental retardation, mental disability or physical disability, including, but not limited to, blindness, unless it is shown by the Contractor that such disability

prevents performance of the work involved; (2) the Contractor agrees, in all solicitations or advertisements for employees placed by or on behalf of the Contractor, to state that it is an "affirmative action-equal opportunity employer" in accordance with regulations adopted by the Commission; (3) the Contractor agrees to provide each labor union or representative of workers with which the Contractor has a collective bargaining Agreement or other contract or understanding and each vendor with which the Contractor has a contract or understanding, a notice to be provided by the Commission, advising the labor union or workers' representative of the Contractor's commitments under this section and to post copies of the notice in conspicuous places available to employees and applicants for employment; (4) the Contractor agrees to comply with each provision of this Section and Connecticut General Statutes §§ 46a-68e and 46a-68f and with each regulation or relevant order issued by said Commission pursuant to Connecticut General Statutes §§ 46a-56, 46a-68e and 46a-68f; and (5) the Contractor agrees to provide the Commission on Human Rights and Opportunities with such information requested by the Commission, and permit access to pertinent books, records and accounts, concerning the employment practices and procedures of the Contractor as relate to the provisions of this Section and Connecticut General Statutes § 46a-56. If the contract is a public works contract, the Contractor agrees and warrants that he will make good faith efforts to employ minority business enterprises as subcontractors and suppliers of materials on such public works projects.

- (c) Determination of the Contractor's good faith efforts shall include, but shall not be limited to, the following factors: The Contractor's employment and subcontracting policies, patterns and practices; affirmative advertising, recruitment and training; technical assistance activities and such other reasonable activities or efforts as the Commission may prescribe that are designed to ensure the participation of minority business enterprises in public works projects.
- (d) The Contractor shall develop and maintain adequate documentation, in a manner prescribed by the Commission, of its good faith efforts.
- (e) The Contractor shall include the provisions of subsection (b) of this Section in every subcontract or purchase order entered into in order to fulfill any obligation of a contract with the State and such provisions shall be binding on a subcontractor, vendor or manufacturer unless exempted by regulations or orders of the Commission. The Contractor shall take such action with respect to any such subcontract or purchase order as the Commission may direct as a means of enforcing such provisions including sanctions for noncompliance in accordance with Connecticut General Statutes §46a-56; provided if such Contractor becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction by the Commission, the Contractor may request the State of Connecticut to enter into any such litigation or negotiation prior thereto to protect the interests of the State and the State may so enter.
- (f) The Contractor agrees to comply with the regulations referred to in this Section as they exist on the date of this Contract and as they may be adopted or amended from time to time during the term of this Contract and any amendments thereto.
- (g) (1) The Contractor agrees and warrants that in the performance of the Contract such Contractor will not discriminate or permit discrimination against any person or group of persons on the grounds of sexual orientation, in any manner prohibited by the laws of the United States or the State of Connecticut, and that employees are treated when employed without regard to their sexual orientation; (2) the Contractor agrees to provide each labor union or representative of workers with which such Contractor has a collective bargaining Agreement or other contract or understanding and each vendor with which such Contractor has a contract or understanding, a notice to be provided by the Commission on Human Rights and Opportunities advising the labor union or workers' representative of the Contractor's commitments under this section, and to post copies of the notice in conspicuous places available to employees and applicants for employment; (3) the Contractor agrees to comply with each provision of this section and with each regulation or relevant order issued by said Commission pursuant to Connecticut General Statutes § 46a-56; and (4) the Contractor agrees to provide the Commission on Human Rights and Opportunities with such information requested by the Commission, and permit access to pertinent books, records and accounts, concerning the employment practices and procedures of the Contractor which relate to the provisions of this Section and Connecticut General Statutes § 46a-56.
- (h) The Contractor shall include the provisions of the foregoing paragraph in every subcontract or purchase order

entered into in order to fulfill any obligation of a contract with the State and such provisions shall be binding on a subcontractor, vendor or manufacturer unless exempted by regulations or orders of the Commission. The Contractor shall take such action with respect to any such subcontract or purchase order as the Commission may direct as a means of enforcing such provisions including sanctions for noncompliance in accordance with Connecticut General Statutes § 46a-56; provided, if such Contractor becomes involved in, or is threatened with, litigation with a subcontractor or vendor as a result of such direction by the Commission, the Contractor may request the State of Connecticut to enter into any such litigation or negotiation prior thereto to protect the interests of the State and the State may so enter.

OTHER ASSURANCES

- M. The grant award is subject to approval of the Connecticut Office of Early Childhood and the availability of state and/or federal funds;
- N. The applicant agrees and warrants that Sections 4-190 to 4-197, inclusive, of the CGS concerning the Personal Data Act and Sections 10-4-8 to 10-4-10, inclusive, of the Regulations of Connecticut State Agencies promulgated thereunder are hereby incorporated by reference;
- O. Grant funds should not be committed until an official grant award letter is received;
- P. The grantee agrees to other attestations and special assurances, particular to the requirements of CGS Sections 10-16o through 10-16r for grantees or state agencies that require grantee or subgrantee participation or compliance;
- Q. The signature of the chief elected officials on the Statement of Assurances Signature Page indicates the intent to comply with the provisions referenced in each section. Assurances not agreed to by the chief elected official of the town must be identified on a separate sheet with a rationale for the disagreement; and
- R. The Grantee/applicant acknowledges that funds supporting this contract may be provided by various Federal agencies, including but not limited to the United States Department of Health and Human Services through a number of grants, block grants, and grants-in aid, including, but not limited to the Social Services Block Grant (“SSBG”), Child Care and Development Block Grant (CCDBG) and/or the Temporary Assistance for Needy Families Block Grant (TANF). Each federal block grant has a federal Catalog of Federal Domestic Assistance (CFDA) number, which provides relevant information about federal requirements specific to each block grant. The CFDA numbers are as follows: SSBG - 93.667, CCDBG - 93575 and TANF - 93.558. The Grantee (or Applicant) agrees that it shall communicate the above language to all sub-contractors that perform services as delineated in a subcontract agreement. The Grantee (or Applicant) agrees that it shall also maintain and require all sub-contractors to maintain any necessary data and documentation required for auditing of any of the grant funds.
- S. The Office of Early Childhood reserves the right to negotiate terms, including the withholding of funds, based on the grantee's inability with the assurances.
- T. The Office of Early Childhood reserves the right to de-fund subgrantees of the School Readiness Council based on the subgrantee's inability to comply with School Readiness General Policies.
- U. The Office of Early Childhood reserves the right to negotiate terms, including the withholding of funds, based on the grantee's inability to comply with these assurances.

PRIORITY SCHOOL READINESS

STATEMENT OF ASSURANCES SIGNATURE PAGE

We, the undersigned authorized officials, do hereby certify that these assurances shall be fully implemented.

Signature of Chief Elected Official: _____

Name: (please type) _____

Title: (please type) _____

Date: _____

Signature of Superintendent: _____

Name: (please type) _____

Title: (please type) _____

Date: _____

To Be Signed if the Fiscal Agent is other then the Municipality or the School District:

Signature of Fiscal Agent: _____

Name: (please type) _____

Title: (please type) _____

Date: _____



ENGAGE PARENTS AS PARTNERS AND LEADERS
A GUIDE FOR EARLY CHILDHOOD PROVIDERS...



“The most honest moments I’ve had with parents have been in the hallway outside the classroom after they’ve dropped off their child, that’s when they open up and tell me what’s really going on, not when they are on the other side of the desk in my office.”

Head Start Family Service Provider

Dear Early Childhood Provider,

We appreciate and applaud how much you dedicate every day to your work with children and families. We applaud your efforts and celebrate your accomplishments.

The CT Early Childhood Education Cabinet’s Family Involvement/Home Visiting workgroup in partnership with the Hartford Area Child Care Collaborative, interviewed early childhood providers like you to learn your hopes and needs to partner with parents for the best child outcomes.

As Connecticut moves forward with great momentum under the leadership of the new Office of Early Childhood, it is exciting to bring forth and highlight your successes and needs. Many providers shared extensively their goals for children and for the field, and articulated the tools desired for family partnerships. Take a moment and read through the findings and the research on parent engagement. This is surely a positive trend in family engagement that the early childhood providers and parents make real.

This is one step forward to make the parent engagement successful, recognizing your commitment to the family as well as the many responsibilities you have as strong early childhood providers. Enjoy!

Thank you.



Elaine Zimmerman
Chair, Family Involvement/Home Visitation Workgroup
CT Early Childhood Education Cabinet



Elena Trueworthy
Director
Hartford Area Child Care Collaborative





CT EARLY CHILDHOOD EDUCATION CABINET

WWW.CTEARLYCHILDHOOD.ORG

The Early Childhood Education Cabinet was reformed in January 2010 and designated by Governor M. Jodi Rell to be the State Advisory Council specified in the Head Start Act of 2007. The purpose of the Early Childhood Education Cabinet is to develop a high-quality, comprehensive system of early childhood education among the wide array of early childhood programs in the state (including Head Start, child care and School Readiness). The Early Childhood Education Cabinet plays a key role in advancing the integration of services for young children and families.

The Cabinet works within these priority areas through intensive workgroup activity: Quality Data Systems, Early Learning Standards, Family Involvement/Home Visitation, Professional Development/Workforce, Health Promotions, Public/Private Partnerships, and QRIS

Family Involvement and Home Visitation Workgroup

The Cabinet's Family Involvement and Home Visitation Workgroup seeks to systemically embed family engagement and parent leadership in the early childhood system. Strategies have included working with professionals on how to maximize parents as partners and central assets for improved child outcomes in health, safety and learning. Professionals include early care providers, health care providers, school teachers and community leaders. Additionally, the Workgroup has prepared a continuum of family engagement and leadership opportunities for parents and other caregivers, created a fatherhood audit for agencies to see how they might maximize father engagement, and developed a home visitation system for new families.



HARTFORD AREA CHILD CARE COLLABORATIVE

WWW.HACCC.INFO

(860) 241-0411

The Hartford Area Child Care Collaborative works in partnership with a diverse group of cross-sector providers, agencies, state departments, institutions of higher education, students, parents, home visiting programs, and others to ensure children and families have access to high quality early learning experiences. Created in 1987, the Collaborative seeks to continually assess the early childhood needs, gaps and barriers, and works in partnership to find and implement solutions to give the children and families, and the staff who work with them, the quality of programming and support they all deserve.

The Hartford Area Child Care Collaborative is an initiative of the Hartford Foundation for Public Giving and a United Way of Central and Northeastern CT partner agency.



SPECIAL THANKS TO THE MANY INDIVIDUALS
AND ORGANIZATIONS THAT CONTRIBUTED TO THIS WORK:

CENTER FOR THE STUDY OF SOCIAL POLICY

CONNECTICUT COMMISSION ON CHILDREN

HEAD START

HARTFORD FOUNDATION FOR PUBLIC GIVING
BRIGHTER FUTURES INITIATIVE

NORWALK COMMUNITY COLLEGE

NORWALK EARLY CHILDHOOD COUNCIL

TORRINGTON EARLY CHILDHOOD COLLABORATIVE

TORRINGTON CHILD CARE CENTER



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— INTRODUCTION —

In August of 2013, the Governor’s Early Childhood Education Cabinet sponsored five focus groups of Early Childhood providers through the Family Engagement and Home Visitation Workgroup. The Hartford Area Child Care Collaborative was asked to coordinate these efforts with the Workgroup. The purpose of these provider focus groups was to:

- 1) gauge their attitudes towards and experiences with parent engagement and leadership in their current roles as early childhood providers
- 2) hear and gather qualitative data from the early childhood community
- 3) create informational materials to support the provider’s perspective as it relates to parent engagement and leadership

Focus groups do not give us a complete understanding of all the perspectives from the field, but they do enable identification of trends and common themes. The findings from the focus groups give us a fresh understanding of current thinking within the field, and provide critical information to policy makers on the needs and interests of the early childhood community.

Why ask early childhood providers about parent engagement and leadership?

Early childhood providers such as child care directors, teachers and support staff, home visitors, and parent educators are a few of the many providers that come in contact with parents on a regular basis during the early years of a child’s life. These providers play a very important role not only with providing high-quality early learning experiences for children, but also in engaging and strengthening the

knowledge, skills, and abilities of the parents. Equally important, the parents of the children help strengthen the quality of the services provided to their children, and they can help support and advocate for the needs of the early childhood field. This reciprocal relationship creates a blanket of support that promotes strong children, families, and communities and better outcomes.

Parent engagement and leadership is a critical component of a high-quality early childhood program.

It is a critical piece of the Head Start philosophy and is mandated through the Head Start Performance Standards, has been incorporated into models such as Abecedarian, outlined in Developmentally Appropriate Practice (DAP), and built into the National Association for the Education of Young Children (NAEYC) standards for programs serving young children.

Two sets of focus groups occurred over the past year. Seven forums were held with parents. Five focus groups were held with providers and directors in early childhood. The findings below reveal a strong opportunity for connection and partnership between families and the early childhood field for children, family and community strengthening.



WHAT PARENTS WANT

Parents were asked what kind of support they needed to help with their efforts on behalf of early childhood care. Seven Forums were held in the fall of 2012 to collect parent input on Connecticut's early childhood system. Led by the Cabinet's Family Engagement and Home Visitation Workgroup, in partnership with many agencies and foundations, parents throughout the state expressed concern about and interest in:

- The cost and availability of quality care.
- The need for respect, activities that embrace and an understanding of the diverse racial and cultural makeup of the families in CT.
- A shortage of information on what makes quality early care and education.
- A need for hubsites and information on what is available for parents in a community and region for children, ranging from leisure, to ways to meet parents to learning what helps a child succeed in school.

- Bilingual programs are in short supply, but necessary.
- Shortage of transportation hinders both choice and access of programs.
- Social Emotional factors are hard to discuss. Parents want to feel safe to discuss behavioral challenges and difficulties at home or at the early care program.
- Parents as Partners. Parents want to learn what they need to know to help their child in every way.

These findings reflect a strong opportunity for early childhood leaders and parents to work together as partners for improved child outcomes.



“Parents came to us because they wanted a cover for their children’s bus stop. We joined their efforts and supported them through the process, and they made it happen!”

— Head Start staff

FOCUS GROUP CONVERSATIONS WITH THE FIELD

Project Methodology

The project consisted of five focus groups, two of which were conducted in Norwalk, two in Hartford, and one in Torrington. Each was facilitated by Elaine Zimmerman, Co-Chair of the Family Involvement and Home Visitation workgroup and consisted of 12 early childhood providers. Each focus group lasted 2 hours.

The basic format was:

- Introductions,
- A chance for everyone to explain what they currently do to engage parents and reflect on how well that was working,
- A visioning exercise that asked providers to think about what would be different at their center and in their community if all parents really understood child development, knew what quality looked like and were articulate, effective advocates to make sure that children got the quality early care and education that they deserve.
- Sharing of what would be different in that vision
- Pairing off to discuss several questions related to working with parents on deepening or expanding partnerships with parents around early care quality and policies to achieve it.
- Sharing highlights of those discussions
- Wrap up.

“Parents drive the center. It is different when parents are truly in the driver’s seat than when policy makers are.

— Family Center Director

Make-up of the focus groups

Care was taken to recruit a total of 60 participants, 12 participants per focus group. The groups included a diverse group of staff from the following programs/ organizations:

- All Our Kin
- Asylum Hill Family Center – Catholic Charities
- Bloomfield Family Child Care home provider
- Bloomfield Family Resource Center
- Brookside Preschool
- Canaan Child Care Center
- Catholic Charities- Triple P
- Community Renewal Team – Head Start
- Education Connection
- El Centro de Desarrollo y Reafirmación Familiar – Catholic Charities
- El Pequeñin
- Even Start
- Family/Children’s Agency
- Fox Run Family Resource Center
- Growing Seeds Preschool
- Hartford Department of Families, Children, Youth, and Recreation
- Hartford Neighborhood Center
- Hartford Public Schools
- Kinder Care Learning Center
- Maria Seymour Brooker Memorial, Inc.
- Mid-Fairfield Child Guidance/Child First
- Norwalk Community College
- Norwalk Community Health Center
- Norwalk Public Schools
- Nurturing Families
- Parker Memorial Family Center – Catholic Charities
- SAND Family Resource Center -Village for Children and Families
- Southside Family Center – Catholic Charities
- The Children’s Playhouse Too
- Torrington Child Care Center
- Torrington Public Schools

The overwhelming majority of the participants were women with male representation from Fatherhood programs. Roughly a quarter of the participants spoke English as a second language with Spanish as their primary language. Almost all participants worked with lower income families in subsidized programs.

“There is so much going on in Hartford. It makes a big difference when everyone is talking about parent engagement and leadership together in a community.”

— Hartford Provider

WHAT EARLY CHILDHOOD THOUGHT LEADERS DISCUSSED - FINDINGS FROM THE FOCUS GROUPS

- **Parent engagement is critically important to early care providers** – All providers expressed by citing the research and through personal stories the importance of working with parents and that parents are the “child’s first teacher.”
- **Culture, Diversity, and Joy** – All focus groups stated that when a parent’s culture and diversity is celebrated and highlighted, meetings, events, or workshops are always more successful with parent participation and engagement.
- **Home visitation offers time and depth** – Providers who have the freedom to engage parents in their home or in the community report that this strategy helps to develop relationships with parents and enables them to engage with parents in meaningful ways. Programs such as Head Start and Nurturing Families are just a few of the types of programs that have this ability.
- **Parents Can Partner in Different Ways** – The term “Parent Engagement” means different things to different people, and is used to describe an array of activities along a continuum. This continuum starts with parents engaging with their own children all the way to parents as leaders in changing public policy.
- **Partnership, Not Services** – Many providers view the parents they work with through a traditional human service lens and see them as people only in need of services. Parent leadership was not a focus area for most early childhood providers.
- **Fathers Matter** – Providers noted that dads play a very important role and are increasingly more present in programs. Providers stated that the dads need to be called out in ways that are respectful and specific to males.
- **Current Practice of Engaging Parents Isn’t That Successful** – Providers care deeply about the children and families they work with, and expressed the vital role parents play within their programs. However, many reported having a tough time in not only getting parents to attend events and meetings, but to engage in meaningful ways – especially in leadership roles such as advisory groups.
- **Build Provider Capacity** – Providers agreed that engaging parents is important and they want to do a better job, however, many expressed the need for training and tools to increase their ability to do it more effectively.
- **Connect with Child Outcomes** – The work of partnering with parents is seen as separate or “another thing to do” and not tied to child outcomes on a systematic level for all providers. Providers acknowledged trying to partner with parents, but that it was many times difficult due to time restraints and responsibilities of their work.
- **Link to Public Policy** – Many of the providers felt disengaged with public policy, with the disengagement growing the closer they worked directly with the children. In general, providers reported that at work, they do not discuss the impact of public policy on the families they serve or its impact on the early childhood field. As a result they felt ill equipped to help parents change policy.
- **Community Together** – Providers greatly appreciated working in partnership with other community providers, and felt the value of collaboration. The whole community needs to be involved and come together to create a fully systematic approach.

RECOMMENDATIONS

Adopt a common framework that defines parent engagement and leadership along a continuum and connects it back to child and family outcomes.

Parent engagement can be framed along a continuum that is tied to positive child outcomes and school readiness goals. Such frameworks already exist, and are being used by some organizations and initiatives in Connecticut. National models include Strengthening Families (www.cssp.org) and the Head Start Parent and Community Engagement Framework (<http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/family>).

Ensure parent leadership is an essential part of the framework

Along the parent engagement continuum, parent leadership is an area that needs to be embedded in the inception and design of all program models that see parents as equal partners at the table. This is a void that Connecticut is well positioned to fill. Connecticut has been on the forefront in developing parent leadership training programs like the Parent Leadership Training Institute (PLTI), People Empowering People (PEP) and Parents Supporting Educational Excellence (ParentSEE). Augmenting parent engagement frameworks, such as Strengthening Families, with a parent leadership component will increase its effectiveness by helping shift the culture of parent engagement to a strength-based lens at all points throughout the continuum. The early childhood field also benefits from the support and advocacy of the families they work with to be able to run high-quality programs. As the cost of care continues to rise and the reimbursements and fees stay the same, programs continually struggle with limited resources to run high-quality programs.

Provide training and support to Parents and Providers

In the focus groups, providers voiced their frustration with their inability to engage many of their parents and asked for training and support to improve their efforts. In order to expand provider efforts to engage parents, programs will need training, support, and tools to achieve successful results. In addition, all providers who work with children and families should have opportunities to convene together routinely to reflect on lessons learned, successes, policies and procedures, and data sharing.

Include parent engagement as an essential piece to all programming and systems building initiatives

Parent engagement, especially as it relates to parent leadership, is many times not a priority when designing and developing programming and infrastructure for children and families. As a result, parent engagement is not implemented as an important part of an overall system of supports for children and families. This is especially true as it relates to families of diverse backgrounds.



What Providers Can Do

- ◆ Offer parent engagement training at least yearly for staff
- ◆ Discuss parent engagement as an agenda topic at every staff meeting with examples of how the work ties back to child outcomes
- ◆ Partner with parents to support their child's learning and development
- ◆ Seek parent input into programmatic decisions
- ◆ Support parents on advisory boards
- ◆ Working with parents on selected community-wide issues
- ◆ Provide parents with access to parent leadership training by offering it on-site, through hands-on project based learning, and by connecting with community based groups and organizations that offer leadership training

What Policy Makers Can Do

- ◆ Continue and maximize the Parent Trust Act, Connecticut's model policy that creates a funding stream for family civics opportunities and skills development on the community level.
- ◆ Ensure the Family Engagement and Support standard of the Quality Rating and Improvement System continues to be a critical component, and is supported by professional development and technical assistance.
- ◆ To support the positive effects that parent leaders bring to a community, a systematic approach that includes local government and Mayors, public schools, early childhood providers, philanthropy, and others needs to be created. Leadership can be sustained and grown by connecting parent leaders to opportunities outside their immediate organization and to higher levels such as boards, commissions, and task forces



Attachment 14

- ◆ Provide, reallocate, or combine funding for:
 - Professional development and support in implementing parent engagement strategies for early childhood providers.
 - Positions within organizations that are specifically geared towards parent engagement and have the freedom to work with parents outside the agency doors.

What the Community Can Do

- ◆ Create a community-wide taskforce committed to parent engagement. This can be through the local municipality, Board of Education, or through a community based initiative.
- ◆ Ensure parent engagement is a focus in every community-wide plan or funding decision that involves children.
- ◆ Publically post leadership positions available in the city or town such as boards, commissions, and political opportunities.
- ◆ Match interested parent leaders with local and state leadership opportunities.

What Parents Can Do

- ◆ Find out how policies related to young children impact your child, your family and your neighborhood.
- ◆ Learn what makes a quality early care program. What does the research say about the components that must be in place?
- ◆ Assure ways to help your child's early care and education setting be excellent. Ask the Director and providers what they do to assure quality and how parents can participate.
- ◆ Celebrate evenings or days that honor different cultures and diversity so children are exposed to different food, dress and songs and learn to embrace the differences that make up your community.

“If this is not a team effort, it is the child that shuts down.”

— Preschool Teacher

WHY ENGAGE PARENTS?

Parents need and want to be involved from the onset in partnerships that serve their children best. Effectively engaging families in partnerships with both organizations and local and state government lays the foundation for positive outcomes.

Benefits to PARENTS:

- builds knowledge and skills
- opens doors for employment opportunities
- creates a sense of belonging
- offers a sense of accomplishment
- provides parents opportunities to effect meaningful change
- increases sense of personal power
- increases confidence in parents’ ability to effect change
- provides parents opportunities to network with other families and providers

* Excerpted from *Making Room at the Table*, Family Resource Coalition of America, 1998.

Benefits to CHILDREN:

- earn higher grades and test scores, and enroll in higher-level programs
- be promoted, pass their classes, and earn credits
- attend school regularly
- have better social skills, show improved behavior, and adapt well to school
- graduate and go on to postsecondary education

Benefits to PROGRAMS

- creates active recipients of care and services
- creates advocates for the program
- creates a positive reputation for the program within the community
- increases market demand for the program
- more support all around for the program by parents
- increases staff morale
- parents provide invaluable insights about family needs and preferences so that programs are truly responsive to consumers. Their insights can help steer the actions aimed at improving quality, increasing public awareness, and enhancing consumer use of high-quality early childhood programs.

Benefits to COMMUNITIES:

- creates a community with leadership role models for other families
- parents continue their engagement with community groups and government, i.e. boards or commission, political positions, task forces, etc.
- parents broaden public support and action through their connections to other families and members of their community
- parents bring unanticipated partners to the table to increase support
- parent voices can also have influence with local officials



Attachment 14

Many early childhood programs have effectively engaged parents. The following strategies reflect their experiences and insights.

EVERY ENCOUNTER COUNTS.

Early childhood providers have very busy jobs. The demands on staff have grown tremendously in response to the recognition of the critical importance of high-quality learning experiences in the early years. Whether teaching staff have a class full of energy filled children, home visitors have a large caseload, or Directors are in the middle of dealing with a crisis, it is critical that staff approach every encounter with parents positively, especially the first one.

Tips:

- 1 Say hello and welcome every family every time. If you work in a classroom, acknowledge every child and family as they drop off or pick up their child. If you are holding a workshop, make sure a staff member is standing by the door to welcome and direct every family.
- 2 When meeting parents, remember something about them, their family, or their child that you can then comment on or ask about the next time you see them.
- 3 Regularly inquire about their lives outside of the program.
- 4 Recognize and acknowledge parents' and/or children's strengths, growth, or efforts at every opportunity.
- 5 Meet parents where they feel comfortable and are equal. All staff, especially those who work in offices, need to leave their desks often and meet parents in less formal settings like the hallway, near their child's classroom, during coffee time, etc.

VALUE AND CELEBRATE CULTURE AND DIVERSITY.

Early childhood programs and services partner with families of many different structures, socioeconomic, racial, religious, and cultural backgrounds. Regardless of the family make-up and background, people are proud and value their culture and diversity.

Tips:

- 1 Recognize groups and offer specialized information – parents feel more comfortable and are more willing to engage when they know ahead of time that they will have something in common with other parents. Offer specialized workshops just for fathers and other male figures, parents of children with disabilities, teen parents, etc.
- 2 Organize smaller, more intimate opportunities for parents to engage. Offer meetings of children within the same classroom, or parents that live in the same neighborhood to get together in a smaller setting where they can get to know each other easier.
- 3 Establish working partnerships with other organizations or groups that have a specialty working with specific populations (Dad's Groups, Latino organizations, military support groups).
- 4 Providers reported overwhelmingly that multi-cultural events turn parents out. Provide a space and invite families to cook a traditional meal from their country or to bring in a traditional object to show. Parents and staff are proud of their heritage, and have an easier time during these opportunities talking and getting to know one another.



“With parent permission, I share the contact information with each family so parents can call each other for child play dates, rides to workshops, or to just to get together outside of the program.”

—Preschool Teacher

LISTEN TO AND LEARN FROM EACH OTHER.

Parents know a lot. They know the most about their children, they know the most about their community, and they know the most about the strengths and needs of the program from a consumer perspective. They have a keen eye to identifying needed changes to programs, policies, or procedures that staff just can't see. Parents not only experience these challenges, but also many times have ideas and solutions to solve those challenges.

Tips:

- 1 Don't ignore a quick comment from a parent – actively listen to what a parent is saying to identify where there might be an issue or an opportunity, and ask probing questions to help gather more information. Then act on the information!
- 2 Give parents your full attention. It can be difficult to have conversations when children are around or when other parents are near. State that their comments are valuable to you and that you want to be available for them. Ask them to come a few minutes early at pick-up time to have the ability to talk privately one-on-one, or schedule a mutually convenient time.

“In the Family Center, we have parent ambassadors who take the lead in making sure new families feel comfortable and are connected right away. Parents feel more comfortable with other parents, and it is our role to support and encourage that.”

— Family Center Director

ENGAGE PARENTS FROM THE BEGINNING.

Make sure that parents are involved from the beginning on opportunities, big or small. Parents are more likely to feel ownership if they are part of the decision making.

Tips:

- 1 Ask parents about their interests and what is important to them. Use a survey or assessment tool to gather this data from parents, and involve parents in analyzing the results.
- 2 Engage parents in helping to plan a workshop that is important to them and based on parent feedback, or having them link you with a community resource they know.
- 3 Learn from parents by asking them about their child's interests, likes, and what works for them.



SUPPORT A COMMUNITY OF CHAMPIONS.

Parents are more likely to feel comfortable and empowered if they are not the only parent and are not expected to speak on behalf of all parents. Adding more parents to a group is not enough. Ensure diversity by balancing experienced parent leaders with those who are new to the role. Include fathers and grandparents as well as mothers. Seek a range of parents from different economic and ethnic backgrounds.

Tips:

- 1 Encourage parents to recruit and mentor other parents, and provide incentives for their efforts.
- 2 Intentionally connect parents who have been in your program with some of the newer parents.
- 3 Acknowledge and reward parents who take on leadership roles and become champions.

MAXIMIZE PARENTS' STRENGTHS.

Get to know the individual strengths of parents. Every parent has strengths no matter their situation. Good organizations and leaders maximize the strengths of all partners, and parents are no exception. Offer a wide range of roles that parents can play to contribute in meaningful ways.

Tips:

- 1 Identify the strengths of parents, even when they are dealing with crisis situations. To help build resilience, help parents see their strengths even in the toughest of times, and celebrate the successes achieved.
- 2 Be aware of how a parent would like to engage, and build from there. Meet parents where they are, support their strengths, and intentionally connect them to opportunities.
- 3 Ensure parent decision making authority at all program levels (with their child, in the classroom, in the organization, and in the community)



“If we want to enable parents to become decision-makers, and participants in children’s programs and policies, we must expand the leadership training programs and develop more methods to increase parent involvement and leadership in children’s health, safety, and learning.”

— Parent

PROVIDE THE NECESSARY SUPPORTS FOR PARENTS TO BE SUCCESSFUL PARTNERS.

Some parents will need guidance to engage and make meaningful contributions. Others will need support in developing the skills necessary to voice their opinions and take action based on their interest and input. Parents of young children lead very busy lives. Family supports such as food, child care, and transportation make it easier for parents to participate. Not only do such supports matter on a practical level, but they also improve group cohesion and morale.

Tips:

- 1 Create a space where parents feel comfortable and valued. The emotional and physical environment should be warm and welcoming.
- 2 Establish open communication channels to be able to respond quickly to parent requests for support.
- 3 Provide hands-on training and guidance for parents taking action.

CONNECT TO THE COMMUNITY.

Be knowledgeable and connect to resources in the community that offer leadership training and action. Share and use this information with parents.

Tips:

- 1 Know what community action groups are formed and active in your town or neighborhood.
- 2 Visit the groups to let them know about the services your program offers, and explore ways to collaborate.
- 3 Bring leadership training and action groups to the parents. If you work at a center, open your doors to these groups.
- 4 Share information of current community issues and discuss with parents.

“I am now going to have the parents design their own space at the center. It will be better than what I or my staff could ever do.”

— Program Director



PARENT LEADERSHIP TRAINING INSTITUTE (PLTI), HARTFORD, CONNECTICUT

The Parent Leadership Training Institute is a training program that seeks to enable parents, grandparents, and others raising children to become leading advocates for children. The program was designed collaboratively by the Connecticut Commission on Children, the American Leadership Forum, and Leadership Greater Hartford.

The goals of the program are to:

- help parents become the leaders they would like to be for children and families;
 - expand the capacity of parents as change agents for children and families;
 - develop communities of parents within regions of the state that will support one another in skill development and successful parent action for children;
 - facilitate systems change for parental involvement with increased utilization of parents in policy and process decisions; and
 - increase parent-child interactions and improve child outcomes through parent involvement.
- In an effort to achieve these goals, parents participate in a comprehensive training that includes a retreat to develop group communication, 10 weeks of classes on self and perception of leadership, 10 weeks on practicing democracy and civic skills, and a graduation at the State Capitol. After they have completed the training, parents serve as mentors and advisors for future training classes. The following states have adapted and are using the PLTI model: California, Illinois, Kentucky, Minnesota, New York, Ohio, Pennsylvania, and Vermont.



ESTABLISH OPPORTUNITIES FOR PARENTS TO MEET DIVERSE CIVIC LEADERS.

Bringing parents together with policy leaders can make parents feel more appreciated for participating in the process and feel more connected to their community.

Tips:

- 1 Link parents and policy leaders together. Policy makers will respond to both formal and informal requests to meet. Organize opportunities for parents to talk with local and state leaders.
- 2 Support parents in attending local and state policy meetings. Organize a group to attend a city council meeting, go tour the Capitol, or attend a Board of Education meeting.
- 3 Support parents in their role as advocates.

Cultivate public attention for the contributions that parents make.

Media outlets often look for stories of parents in leadership roles. Public officials are more likely to respond if parents deliver the message. Look for ways to bring recognition to parents. This not only makes parents feel good, it raises awareness about the work and the important issues.

Celebrate! Celebrate! Celebrate!

Awards dinners, certificates, acknowledgements from prominent businesses or political figures, and small and large efforts are all ways to celebrate the contributions of parents (and other partners). Such occasions build good will and momentum to continue the hard work.



TOOLS FOR ENGAGING PARENTS

This section contains tools and resources that staff, parents, organizations, and communities can use to support and encourage parent engagement and leadership.

1. Tips for Engaging Parents
2. A Sample of Questions to Consider as Thought Leaders in Early Childhood



RESOURCES

Strengthening Families™ A Protective Factors Framework

The Center for the Study of Social Policy

<http://www.cssp.org/reform/strengthening-families>

This website includes information on the Strengthening Families framework that helps to build the five protective factors in families:

1)Parental resilience 2)Social connections 3)Concrete support in times of need
4)Knowledge of parenting and child development 5)Social and emotional competence of children

Strengthening Families has developed an online program assessment tool for early childhood providers that can be found at: http://www.cssp.org/reform/strengthening-families/resources/SF_Program-SelfAssessment_2012.pdf

Head Start Family and Community Engagement Framework and Assessment

<http://eclkc.ohs.acf.hhs.gov/hslc/tta-system/family>

Head Start's National Center on Parent, Family, and Community Engagement created this framework and assessment tool to help programs promote children's well-being by engaging parents and families.

For more information on state-wide resources for parent engagement and leadership, contact the Commission on Children: 18-20 Trinity Street, Hartford, CT 06106-1591. (860) 240-0290 www.cga.ct.gov/coc

“We need to hold ourselves accountable. If the parents aren't engaged, it is on our backs and we need to step it up!”

— Early childhood Provider

TIPS FOR ENGAGING PARENTS

(Excerpted from: *The Child Care Partnership Project: A Guide to Engaging Parents in Public-Private Child Care Partnerships*. U.S. Department of Health and Human Services, Administration for Children and Families Child Care Bureau).

- 1. Consult numerous parents before beginning an action plan.** Seek parent input from those who will be affected by a partnership initiative.
- 2. Listen to parents.** Include parent ideas as regular partnership meeting agenda items. Let parents define goals for action.
- 3. Provide family supports for meetings.** Offer dinner, child care, and transportation.
- 4. Use lay language.** Don't use professional in-house phrases such as "developmentally appropriate practice" when parents care about love, nurturing, and safety.
- 5. Link participation to real change and active leadership.** Parents know what is real and active. They operate within power structures every day at home and at work.
- 6. Offer civic skills and leadership training.** Help parents become leaders by providing them with basic information on budgets, outcomes, media power, how government works, and the policy-making process.
- 7. Do not shy away from religion.** Religion is a mobilizing force in many communities. It is often a base from which parent and community action organizing can take place.
- 8. Have parents recruit and mentor other parents.** Parents are more likely to get involved if they already know someone who is involved.
- 9. Embrace diversity.** Tolerate differences and create agendas and plans that incorporate multiple views within shared values. Bring in the fathers and grandfathers. Include parents who are experienced leaders, as well as those who need experience being leaders.
- 10. Celebrate short-term and concrete successes routinely.** Recognition of small successes builds momentum and general enthusiasm for the partnership goals.
- 11. Create reciprocal relationships.** Share what parents want from the partnership, as well as what the partnership wants from parents.
- 12. Select one or two parents to organize parent feedback on partnership activities in environments where parents can fully share their ideas.** Treat parents' input as primary information. Train parent facilitators to create parent memos with all parent feedback recorded for the partnership to read and discuss.
- 13. Set up parent evaluation teams each year for partnership programs.** Use the opportunity to listen to the language, values, goals, and community expectations of the parents. Assess how and if the values and expectations of partnership leaders and staff correspond with parents' values and expectations.
- 14. Create opportunities for parents to meet one another.** When partnerships just work with parents one on one, the opportunity for parents to meet other parents is diminished. This paints a vertical, individualized interpretation of issues, rather than a horizontal community analysis of gaps in services or needs.
- 15. Create environments where children see their parents as leaders.** Reflect the values of partnership in the environments and initiatives you create. Offer dinners, honorary membership, and awards for family members who contribute to a policy. Invite family and friends to attend the honoring.

QUESTIONS FOR EARLY CHILDHOOD THOUGHT LEADERS

Use these sample questions as an opportunity to open dialogue with parents, staff, and community members about parent engagement and leadership.

YES NO

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Do we provide parents information and guidance on the importance of parent engagement and taking leadership roles with their child's early learning experiences? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do we have a system for personal and ongoing parent outreach to invite and encourage participation and engagement? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do we have an advisory group with parents in leadership roles and with decision making authority? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do we have a process for seeking parent input to plan for program activities and offerings? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do we support and engage parents in planning both staff and parent professional development? |
| <input type="checkbox"/> | <input type="checkbox"/> | Are we as a program connected to groups that inform and shape policy at the state level? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do we connect and support parents in engaging with groups that inform and shape local and/or state policy? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do we provide opportunities for staff and families to work together on community improvement or advocacy projects? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do we ensure that local, state, and federal policy issues that affect the early childhood field are discussed at staff meetings and shared with parents? |
| <input type="checkbox"/> | <input type="checkbox"/> | Do we offer leadership development training, or know of these resources in our community to collaborate with? |



FOCUS GROUP QUESTIONS & PROBES

Focus Group Introduction

Introductions: Name and position

Background introduction: Why we are here

Focus group questions:

Current parent engagement/involvement work

How do you currently engage families with the work you do?

What are some of the most important things you do to engage families?

Do you have examples of ways to engage families that work and that don't work?

Do you rely on any requirements that you must meet that guides your work with parents? (NAEYC standards, HS standards, etc.)

Current shared civic work for children between agency and parents

Imagine that parents understood the components of quality early care and were spokespeople for optimal early childhood opportunity for children. What would change in the child care system? What would change in the community? Why? How?

Do you partner with parents now on early care quality and policy to achieve it? If yes, how? If no, is there a reason why not?

Would you like to partner with parents in community improvements for young children, such as quality early care, when the opportunities avail themselves? If yes, why? If no, why not?

Are there ways you could see deepening or expanding your partnerships with parents around early care quality and policies to achieve it? On other community improvements for young children?

What supports would you need or changes in the environment to have this deeper partnership with the parents of young children?

Do you think there are opportunities to work on a shared community goal with parents? If yes, what kinds of opportunities? If not, tell us about that.

Do you know how change happens for young children in the public sector in policy and budget arena? Do you as staff talk about how to improve the early care and education environment for best child outcomes? Is this something you are interested in? If yes, why? If no, why not?

Probes

What words come to mind when I say “parent leadership”? When we talk about parent leadership, are there other words you use?

Do they think developing and/or supporting parent leadership should be part of your work?

What type of training do you want or think you need to help support parents more in your role? Do you have training in leadership development, whether for yourself or for how to build this with families in your program?

Please tell us what parent leadership resources are in your community. Are there parent leadership trainings available, are their community action groups that you work with?



NOTES

- ⁱ Research News You Can Use: Family Engagement and Early Childhood Education. <http://www.naeyc.org/content/research-news-family-engagement>
- ⁱⁱ *The Child Care Partnership Project: A Guide to Engaging Parents in Public-Private Child Care Partnerships*. U.S. Department of Health and Human Services, Administration for Children and Families Child Care Bureau.
- ⁱⁱⁱ *The Child Care Partnership Project: A Guide to Engaging Parents in Public-Private Child Care Partnerships*. U.S. Department of Health and Human Services, Administration for Children and Families Child Care Bureau.





What is SCHOOL READINESS in Connecticut?

“School readiness includes the readiness of the individual child, the school’s readiness for children, and the ability of the family and community to support optimal early child development. It is the responsibility of schools to be ready for all children at all levels of readiness.”

– American Academy of Pediatrics

Early learning and growth is an ongoing process that begins before birth and is influenced by many factors. Often, attention is given to children’s skills at transition points, such as kindergarten entry, however, no one set of skills at any given time can determine school readiness. When families, communities and schools work together to support children’s early learning and growth:

- Families have the resources and knowledge to support their children’s health and development beginning before birth.
- Communities support families, schools, early caregivers and children in a coordinated way.
- Schools and early learning settings support all children, no matter their background or skill level.
- Children are eager and ready to learn and grow.

SCHOOL READINESS:
It’s not just a program.

Families support school readiness by:

- Helping their children grow and develop.
- Gaining knowledge and accessing necessary community supports.
- Partnering with schools, the community and other caregivers to support children’s growth.
- Advocating in their children’s best interests.
- Supporting their children’s lifelong learning
- Contributing to their children’s health, safety and stability.

Schools and early learning environments support school readiness by:

- Building relationships among everyone interested in supporting families’ and children’s growth and learning.
- Providing a safe, nurturing, culturally open environment.
- Having strong, positive relationships with children and families.
- Viewing children’s learning and growth as a process and not as a point in time.
- Supporting children’s physical, emotional and intellectual growth.
- Welcoming all families and children.
- Using ways of teaching and assessment that meet all developmental needs and learning styles.
- Supporting transitions between programs and grades.

Communities support school readiness by:

- Coordinating the delivery of resources to help families meet basic needs, manage stress, learn about parenting and child development, and create social connections.
- Generating responsive, effective resources.
- Supporting community partnerships.
- Respecting and acknowledging diversity.

When families, communities and schools work together to support school readiness, children will:

- Communicate their thoughts and feelings, through words and actions.
- Be attentive to their surroundings.
- Learn by exploring.
- Show curiosity.
- Have positive relationships with children and adults and learn how to make friends.
- Play, including pretend and interactive games.
- Feel safe and valued.
- Show respect for self and others.
- Solve problems and resolve conflicts.
- Make progress across *all* areas (physical health and motor development; language and literacy; social and emotional development; creative arts expression; cognitive and general knowledge, including science, mathematics and social studies; and approaches to learning). *

** These domains will be addressed by Connecticut’s Early Learning and Development Standards draft expected in late 2013.*

For a list of references and contributors to this document, go to www.ctearlychildhood.org.

Request for Proposals

Creating a Better System of Early Care and Education for Connecticut

RFP Number: OEC 001-2014

Date Issued: June 25, 2014

Due Date: August 8, 2014

Procurement Contact: Loree Armstrong

Email: loree.armstrong@ct.gov

Phone: (860) 713-6411

Mail: Connecticut Office of Early Childhood

ATTN: Loree Armstrong

165 Capitol Avenue, Room G-29,

Hartford, CT 06106



Connecticut Office of
Early Childhood

Myra Jones-Taylor, Commissioner

Connecticut Office of Early Childhood

165 Capitol Avenue | Hartford, CT 06106

www.ct.gov

Scope

The activities described in Section C (Activities) should be undertaken for the following funding sources, early care and education settings, services, entities providing oversight, and major partnerships and collaborations.

1. Funding sources for early care and education for children from birth to age 5 including but not limited to: Care4Kids funding (including contributions from both the federal Child Care Development Block Grant and from the state), Connecticut School Readiness funding, federal and state Head Start and Early Head Start funding, Even Start funding, federal IDEA Part B and C funding, Connecticut Child Development Centers funding, bond funds, public school pre-kindergarten funding, Temporary Assistance for Needy Families, Title I of the Elementary and Secondary Education Act, Child and Adult Food Program, State Head Start Supplement Funds, Nurturing Families Network state funding, Federal CAPTA Grant, Maternal, Infant, and Early Childhood Home Visiting Grant (MIECHV), philanthropy spending, parent fees, philanthropic contributions, municipal funding, and material in-kind contributions from school districts or others for facilities, transportation, administration, etc.
2. Early care and education settings including but not limited to: licensed, unlicensed, and license-exempt settings including, center-based settings, school-based settings, and home-based settings¹ (meaning).
3. Services for children and families related to comprehensive services in early care and education settings including but not limited to: child care and education, transportation, nutrition, screening, health, referral services, mental health, parent engagement, oral health, social services, and other family supports.
4. Entities Providing Oversight that have regulations, policies, governance structures, and monitoring functions that provide direction and oversight to early care and education settings, services, and funding streams. This should include, but not be limited to: state agencies (OEC, State Department of Education, and others), federal agencies, local entities (Health Departments, School Districts, etc.), and other bodies (such as State Funded School Readiness Councils, accrediting bodies such as National Association of Young Children and National Association of Family Child Care). Oversight function to be considered should include but not be limited to: family eligibility, administration

¹ Home Based Settings refers to settings where children cared for in a home with care paid for using state funds. In Connecticut this includes the categories of licensed Family Group Homes and unlicensed Family, Friend, and Neighbor Care. This should not include home visiting services, nannies, or babysitters.

requirements, program quality, reporting and documentation requirements, organization eligibility (to draw down funding or provide services), and training or quality improvement required.

5. Major partnerships and collaborations that contribute to the integration of early care and education settings with other entities including other government agencies (such as Department of Children and Families, State Department of Education, Federal Head Start, Office of Child Care, etc.), municipalities, philanthropy, nonprofits, and school districts.

A. ACTIVITIES

1. **Deliver robust project management support:**
2. **Produce a literature review:**
3. **Facilitate a decision-making process to identify goals, outcomes, and change-strategy:**
 - a. review existing legislation and funding regarding pre-k expansion
 - b. determine the goals and outcomes to which OEC will hold itself accountable in the coming years:
 - c. agree on change-strategy
4. **Assess unmet need and determine additional capacity required for universal access:**
 - a. *What is the current capacity and portfolio of early care and education providers?*
 - b. *How are young children currently cared for in Connecticut??*
 - c. *Which families have or lack access to high quality, affordable, care options?*
 - d. *Which families have or lack access to financial support for child care?*
 - e. *How affordable are early care and education settings for families?*
 - f. *What would be the additional state investment required to achieve universal access to early care and education?*
5. **Conduct an assessment of the current system's structure, administration, and performance:**
 - a. **Assessment of the Current State-Level Program Administration System:**
 - i. *How is the current system structured for administration?*
 - ii. *How is the system currently run at the state level?*
 - iii. *What is the current state of partnerships with entities outside of OEC?*
 - iv. *How well run is the current system, administratively speaking?*

- b. Assessment of the Current Experience for Families Seeking or Relying on Early Care and Education Programs:
- i. *What is required of families to obtain and maintain financial support for child care? How burdensome is this process?*
 - ii. *What is the burden for families accessing multiple sources of support from the state? How well coordinated are different programs?*
 - iii. *What drives parent decision-making regarding their children's care?*
 - iv. *How well does the current system serve eligible families?*
- c. Assessment of the Current Environment for Early Care and Education Providers in Communities:
- i. *What is the current financial environment for early care and education providers? What are the current requirements regarding program design and delivery? What are the current program models implemented?*
 - ii. *What drives the decisions, scope, and practices of programs and communities?*
 - iii. *What drives the makeup of early care and education programs in a community? How do communities currently influence and manage where subsidized care is offered, when, where, and how to expand access, and how to share information within the community and with families?*

6. **Conduct a gap analysis and lead a process to select a high-level system design:**

7. **Write a 5-Year System Reform Plan and Project Impact Report:**

The 5-Year System Reform Plan:

- a. The Changes Required to Implement the State-Level Program Administration System Reforms:
- i. *How will the system be structured for administration?*
 1. Management:
 2. Governance:
 3. Information:
 - ii. *What policies and procedures will be in place to administer this system?*
 - contracting procedures
 - subsidy payment procedures and policies
 - oversight of funding
 - iii. *How will the OEC align to and work with the priorities of other state, federal, and local bodies?*
 - iv. *How will the system administration be monitored for performance?*

- b. The Changes Required to Improve the Experience of Families Seeking or Relying on Early Care and Education Programs:
 - i. *What changes will be made to regulations and processes regarding eligibility and enrollment?*
 - ii. *What will be the cost to families?*
 - iii. *How will the OEC provide information to families? Receive input from families?*
 - iv. *How will the OEC monitor the impact on families? .*
- c. The Changes Required to Improve the Environment for Early Care and Education Providers:
 - i. *What changes will be made to requirements shape program design and delivery? What is the model of care the OEC is supporting and/or promoting?*
 - ii. *How will the new system state harmonize, layer, coordinate, blend, braid, or pool funding? What changes will be made to the financial environment for early care and education providers?*
 - iii. *What will be the community level infrastructure associated with funding?*
 - iv. *What changes will be made to improve the regulatory environment for programs delivering early care and education?*

8. Projected Impact Report:

- a. The Projected Impact of Proposed Changes on the State-Level Program Administration System:
 - i. *How will the administration of the system be better designed to deliver high performance with regard to cost, achieving outcomes, efficiency, or fraud? What are the goals of system administration and the projection of their impact? How are the states policy goals embedded in program design?*
 - ii. *How will the system be aligned with others?*
 - iii. *What is the proposed performance against selected performance measures on system administration?*
- b. The Projected Impact of Proposed Changes on the Experience of Families Seeking or Relying on Early Care and Education Programs:
 - i. *How will young children be cared for in Connecticut in five years?*
 - ii. *Which families will have or lack access to high quality, affordable, care options?*
 - iii. *Which families will have or lack access to financial support for child care?*
 - iv. *How affordable will early care and education settings be for families?*
 - v. *What will drive parent decision-making regarding their children's care after changes are made?*

- vi. *What will be required of families to obtain and maintain financial support for child care? How burdensome will this process be?*
- vii. *What will be the burden for families accessing multiple sources of support from the state? How well coordinated will the different programs be?.*
- viii. *How well will the proposed system serve eligible families?*
- c. **The Projected Impact of the Proposed Changes on the Environment for Early Care and Education Providers in Communities:**
 - i. *How will the proposed system changes impact the current portfolio of early care and education providers from today? .*
 - ii. *How will proposed changes impact the financial environment for early care and education providers?*
 - iii. *How will proposed changes to requirements shape program design and delivery? What will change and what will remain the same?*
 - iv. *How will proposed changes drive the decisions, scope, and practices of programs and communities?*
 - v. *What will drive the makeup of early care and education programs in a community?*

9. **Write an Implementation Plan:**

- a. detailed timeline with process steps,
- b. staffing plan outlining additional staff required and expertise or training needed
- c. management plan to guide implementation of reforms
- d. prioritized and detailed legislative proposals for required changes,
- e. prioritized and detailed portfolio of administrative changes required to operationalize the new system along with recommended language, and
- f. prioritized list of recommendations regarding collaborations with key stakeholders.

10. **Compile all Final Reports:** The Contractor should produce a PowerPoint presentation, executive summary, and a printed compilation of all reports in final form.

B. DELIVERABLES:

The contractor must deliver eight written reports addressing all of the elements required in Section II, part

C. These reports are:

1. A Project Management Plan (Activity 1)
2. A Literature Review (Activity 2)
3. A Universal Access and System Reform Plan (Activities 3 and 4) that would contain
 - a. System goals, outcomes, and change strategy

- b. High-level unmet need summary
 - c. Additional capacity (#'s) the state would require to reach universal access
 - d. The template and plan for future unmet need reports
4. A Full Assessment of the Current System containing results from Activities 2,4,5, and 6)
5. A 5-Year System Reform Plan and Projected Impact Report (including executive summary and PowerPoint presentation) (Activity 7)
6. 18-Month Implementation Plan (Activity 8)
7. A Final Compilation of all Reports (including executive summary and PowerPoint presentation). (Activity 9)

C. TIMELINE:

The anticipated start date of the contract(s) potentially resulting from this RFP is September 1, 2014.

1. A Project Management Plan should be completed by September 15, 2014
2. A literature review should be completed by September 30, 2014
3. A high level Universal Access and System Reform Plan by November 15, 2014 would contain:
 - a. A system goals, outcomes, and change strategy
 - b. A high-level unmet need summary
 - c. The additional capacity (#'s) the state would require to reach universal access
 - d. The template and plan for future unmet need reports
4. A full assessment of the current system March 1, 2015
5. A 5-Year System Reform Plan and Project Impact Report June 1, 2015
6. 18-Month Implementation Plan by August 30, 2015
7. A Final Compilation of All Reports by September 1, 2015



STATE OF CONNECTICUT
OFFICE OF THE STATE COMPTROLLER

55 ELM STREET
HARTFORD, CONNECTICUT
06106-1775

Kevin Lembo
State Comptroller

Martha Carlson
Deputy Comptroller

MEMORANDUM NO. 2014-12

July 1, 2014

TO THE HEADS OF ALL STATE AGENCIES

Attention: Fiscal and Administrative Officers, Business Managers, Payroll and Personnel Officers
Subject: 2014-2015 Fringe Benefit Cost Recovery Rates

The percentage rates for unemployment compensation and the various retirement plans listed on the attached chart are effective July 1, 2014. These rates should be used for any fringe benefit cost recovery taking place on or after July 1, 2014. In 2014-2015, as in the previous fiscal year, there will be no composite rates encompassing all fringe benefit components.

Actual Cost Fringe Benefits

Since November 2003, with the implementation of the Core-CT HRMS module, the state shares of certain fringe benefits have been charged to agencies on an actual cost basis. This includes group life insurance and medical insurance, which are calculated based on the actual cost of the state's share of insurance premiums. In addition, FICA-Social Security and FICA-Medicare have been calculated based on the existing Federal tax rates instead of the percentage rate developed in the past by the Office of the State Comptroller. The actual cost method will continue to be used in Fiscal Year 2014-15.

Fringe Benefit Recovery

All personal service expenditures from Federal and Private Grants and any funds other than the General Fund and Correction Industries Internal Service Fund are subject to fringe benefit recovery.

Charging Employees to the Correct Funding Source

In Core-CT, fringe benefits are charged to the same funding source as the personal services expenditure. If an employee is paid from the correct funding source, Core-CT will charge the actual cost of fringe benefits to the proper funding source. Therefore, coordination is needed between agency payroll and financial staff to ensure every effort is made to pay employees from the correct funding sources.

Fringe Benefits and Overtime Salaries

It has been the State of Connecticut's longstanding policy to distribute a proportional amount of all fringe benefits with overtime salaries. These fringe benefits include group life insurance, medical insurance, unemployment compensation, FICA-Social Security, FICA-Medicare and the applicable retirement plan in which the employee is enrolled. For overtime charged directly through payroll, the applicable fringe benefit rates and Federal tax rates for FICA and Medicare will be applied. In addition, a proportional amount of the employer-share group life and medical insurance will be distributed with the overtime salary based on the employee's coverage. Please note - additional group life and medical premiums are

not generated or charged with overtime. Rather a proportional amount of the total actual employer-share premium is distributed to the funding source where the overtime salary is charged. Journal transfers of overtime salaries and associated fringe benefit adjustments should follow this approach.

Avoiding Temporary Funding Sources

To reduce the number of payroll corrections, agencies are asked to charge payroll expenses to the proper funding sources, even in cases where anticipated funding is not yet available, but is expected within the current fiscal year. In these cases, the account will be allowed to go negative temporarily. However, if the anticipated funding does not become available, the agency will be responsible for addressing the negative balance before the close of the fiscal year.

Salary and Fringe Benefit Payroll Corrections

If an agency pays an employee from the wrong funding source, fringe benefits will be charged to the wrong funding source as well. For corrections, the agency will be responsible for identifying the salary amounts and fringe benefit amounts that need to be transferred.

Salaries can be transferred through spreadsheet journals using the source code of PC, although there are limitations to this approach. In addition, when the salary transfer is between a reimbursable funding source and a non-reimbursable source (e.g., a Grant Fund SID and the General Fund), the agency will need to submit a CO-826 form to identify the fringe benefit amounts to be transferred by fringe benefit account.

NEW: Completed electronic copies of CO-826 forms should be sent by e-mail to the following mailbox for processing: Osc.CO-826@ct.gov. Alternatively, forms may be faxed to (860) 702-3411 or mailed to Office of the State Comptroller, Administrative Services Division, 55 Elm Street, 2nd Floor, Hartford, CT 06106.

The Impact of Payroll Corrections on Financial Reporting

It should be noted that spreadsheet journal transfers of salary and fringe benefits in the Core-CT financials module are not reflected in the HRMS system or in the payroll tables in EPM. Therefore, if using HRMS for reporting purposes, agencies must track the corrections they make through spreadsheet journals and the use of CO-826 forms.

Fringe Benefit Variances - New Requests Required

All variances approved in Fiscal Year 2013-14 or earlier will be deleted for check date August 22, 2014. Variances for Fiscal Year 2014-15 will require a new request.

Full and Partial Fringe Benefit Variances

In most cases, full fringe benefit variances can be accommodated in Core-CT through the use of fringe benefit allocations that run when payrolls are posted. Fully exempted fringe benefit expenditures will be transferred to the appropriate central appropriation.

For partial variances, Core-CT will charge the funding source the full amount for fringe benefits. Agencies with approved partial variances should submit CO-826 forms to recover the portion of fringe benefits that have been exempted.

Deposits to Fund 34005 - Fringe Benefit Recovery Fund

In certain situations, state agencies bill another state agency, municipality or private firm for services provided by an employee. The bill can include both salary and fringe benefit costs to be reimbursed.

Payments for the fringe benefit portion should be deposited or applied to the following coding:

Fund: 34005

SID: 40001
 Account: 44338
 Budget Reference: Current Fiscal Year

In addition, the agency should use its own Department ID, Program and Project values.

Alerting OSC of the Fund 34005 Deposit Using the CO-826 Form

Once a fringe benefit recovery payment is deposited or applied to Fund 34005, the agency should alert the Office of the State Comptroller (OSC) using a CO-826 Reimbursable Cost Recovery Form. This allows OSC to credit the recovery to the proper central fringe benefit appropriations. A sample CO-826 form for Fund 34005 fringe benefit recovery deposits is available as a General Ledger job aid on the Core-CT website at <http://www.core-ct.state.ct.us/user/finjobaids/gl.htm>.

If there are questions, please call the Cost Reporting Unit of the Budget and Financial Analysis Division at (860) 702-3352.

**KEVIN LEMBO
 STATE COMPTROLLER**

KL: REG

Actual Cost Fringe Benefits

Account Code	Fringe Benefit Description	Actual Cost Expenditure Basis
50410	Employer Share Group Life Insurance	State Share Premium
50420	Employer Share Medical Insurance	State Share Premiums for Medical, Dental and Prescription Coverage
50441	Employer Share FICA-Social Security	Federal Tax Rate of 6.2% of applicable wages up to Federal maximum limit.
50442	Employer Share FICA-Medicare	Federal Tax Rate of 1.45% of applicable wages - no maximum limit.

Percentage Rate Fringe Benefits

Account Code	Fringe Benefit Description	FY 2014-15 Rate
50430	Unemployment Compensation	0.15%
50471	Employer SERS Retirement Regular Employee	50.50%
50471	Employer SERS Retirement Hazardous Duty	62.43%
50472	Employer Alternative Retirement Program	11.70%
50473	Employer Teachers Retirement	50.77%

**50474 Employer Judges/Compensation Commissioners
Retirement Plan****56.92%**[Return to Index of 2014 Comptroller's Memoranda](#)[Return to Comptroller's Home Page](#)Fringe Benefit

Category	0.* %
SS	6.2+
Medicare	1.45+
Unemployment Comp	0.15+
Retirement Reg.	50.5+
Sub total	58.30
Est Medical +	<u>21.7+</u>
Grp Life Ins	<u>80.*</u>



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1Q2014 Statewide - Occupational Employment & Wages

Select Occupation 25-2021 Elementary School Teachers, ex. Special Education

State of Connecticut
All Industry

Estimated employment	15,940
Mean wage	\$69,383
Entry wage	\$48,421
10th percentile wage	\$44,718
50th percentile wage	\$70,466
90th percentile wage	\$94,100

Top Employing Industries

Industry	Employment	Percent
Education and Health Services	15,840	99.4%

Best Paying Industries

Industry	Employment	Median Wage
Education and Health Services	15,840	69,393

Note: The mid-wage is the median wage. The average wage is the mean wage. The entry-level wage is equal to the average of the lower third of reported wages for the occupation. The wage range consists of the 10th and 90th percentiles; 80 percent of workers earn between this wage range, 10 percent earn less while 10 percent earn more.

Reference Date: 1st Quarter 2014

Elementary School Teachers, ex. Special Education (25-2021)

Teach pupils in public or private schools at the elementary level basic academic, social, and other formative skills. Exclude "Special Education Teachers" (25-2041 through 25-2043).

Median Wage History

Year	This Occupation	Compared to Occupational Group	Difference
Current	\$69383.45	\$59043.72	\$10339.73
2013	\$69153.89 +3%	\$58848.37 +3%	\$10305.52
2012	\$67833.94 +1.9%	\$57725.12 +1.9%	\$10108.82
2011	\$66513.99 +2.0%	\$56601.87 +2.0%	\$9912.12
2010	\$65480.99 +1.6%	\$55722.81 +1.6%	\$9758.18
2009	\$64333.21 +1.8%	\$54746.08 +1.8%	\$9587.13
2008	\$63644.54 +1.1%	\$54160.03 +1.1%	\$9484.50
2007	\$61750.69 +3.1%	\$52548.42 +3.1%	\$9202.28
2006	\$59684.69 +3.5%	\$50790.29 +3.5%	\$8894.39
2005	\$57389.12 +4.0%	\$48836.82 +4.0%	\$8552.30

Year	This Occupation	Compared to All Occupations	Difference
Current	\$69383.45	\$54962.85	\$14420.59
2013	\$69153.89 +3%	\$54824.64 +3%	\$14329.25
2012	\$67833.94 +1.9%	\$53718.93 +2.1%	\$14115.01
2011	\$66513.99 +2.0%	\$52797.51 +1.7%	\$13716.48
2010	\$65480.99 +1.6%	\$51968.23 +1.6%	\$13512.76
2009	\$64333.21 +1.8%	\$51092.88 +1.7%	\$13240.33
2008	\$63644.54 +1.1%	\$50401.81 +1.4%	\$13242.72
2007	\$61750.69 +3.1%	\$49111.82 +2.6%	\$12638.87
2006	\$59684.69 +3.5%	\$47545.40 +3.3%	\$12139.28
2005	\$57389.12 +4.0%	\$46071.13 +3.2%	\$11318.00

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1Q2014 Statewide - Occupational Employment & Wages

Select Occupation 25-9041 Teacher Assistants

State of Connecticut
All Industry

Estimated employment	20,690
Mean wage	\$29,572
Entry wage	\$20,538
10th percentile wage	\$19,121
50th percentile wage	\$28,095
90th percentile wage	\$41,885

Top Employing Industries

Industry	Employment	Percent
Education and Health Services	20,350	98.4%
Other Services	210	1.0%
Leisure and Hospitality	60	0.3%
Public Administration	50	0.3%

Best Paying Industries

Industry	Employment	Median Wage
Public Administration	50	36,168
Education and Health Services	20,350	29,613
Leisure and Hospitality	60	25,792
Other Services	210	25,125

Teacher Assistants (25-9041)

Perform duties that are instructional in nature or deliver direct services to students or parents. Serve in a position for which a teacher or another professional has ultimate responsibility for the design and implementation of educational programs and services.

Median Wage History

Year	This Occupation	Compared to Occupational Group	Difference
Current	\$29572.44	\$59043.72	-\$29471.27
2013	\$29474.60 +.3%	\$58848.37 +.3%	-\$29373.76
2012	\$28912.02 +1.9%	\$57725.12 +1.9%	-\$28813.10
2011	\$28349.43 +2.0%	\$56601.87 +2.0%	-\$28252.44
2010	\$27909.15 +1.6%	\$55722.81 +1.6%	-\$27813.66
2009	\$27419.94 +1.8%	\$54746.08 +1.8%	-\$27326.13
2008	\$27126.42 +1.1%	\$54160.03 +1.1%	-\$27033.61
2007	\$26319.23 +3.1%	\$52548.42 +3.1%	-\$26229.18
2006	\$25438.66 +3.5%	\$50790.29 +3.5%	-\$25351.63
2005	\$24460.25 +4.0%	\$48836.82 +4.0%	-\$24376.56

Year	This Occupation	Compared to All Occupations	Difference
Current	\$29572.44	\$54962.85	-\$25390.40
2013	\$29474.60 +.3%	\$54824.64 +.3%	-\$25350.03
2012	\$28912.02 +1.9%	\$53718.93 +2.1%	-\$24806.91
2011	\$28349.43 +2.0%	\$52797.51 +1.7%	-\$24448.07
2010	\$27909.15 +1.6%	\$51968.23 +1.6%	-\$24059.08
2009	\$27419.94 +1.8%	\$51092.88 +1.7%	-\$23672.93
2008	\$27126.42 +1.1%	\$50401.81 +1.4%	-\$23275.39
2007	\$26319.23 +3.1%	\$49111.82 +2.6%	-\$22792.59
2006	\$25438.66 +3.5%	\$47545.40 +3.3%	-\$22106.74
2005	\$24460.25 +4.0%	\$46071.13 +3.2%	-\$21610.87

Note: The mid-wage is the median wage. The average wage is the mean wage. The entry-level wage is equal to the average of the lower third of reported wages for the occupation. The wage range consists of the 10th and 90th percentiles; 80 percent of workers earn between this wage range, 10 percent earn less while 10 percent earn more.

Reference Date: 1st Quarter 2014

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1Q2014 Statewide - Occupational Employment & Wages

Select Occupation 25-2051 Special Education Teachers, Preschool

State of Connecticut			Special Education Teachers, Preschool (25-2051)				
All Industry			Median Wage History				
Estimated employment	170		Year	This Occupation	Compared to Occupational Group		Difference
Mean wage	\$67,836		Current	\$67835.52	\$59043.72		\$8791.81
Entry wage	\$47,217		2013	\$67611.09	+3%	\$58848.37	+3% \$8762.72
10th percentile wage	\$43,210		2012	\$66320.59	+1.9%	\$57725.12	+1.9% \$8595.46
50th percentile wage	\$63,870		2011	\$65030.08	+2.0%	\$56601.87	+2.0% \$8428.21
90th percentile wage	\$95,213		2010	\$64020.13	+1.6%	\$55722.81	+1.6% \$8297.31
			2009	\$62897.95	+1.8%	\$54746.08	+1.8% \$8151.87
			2008	\$62224.64	+1.1%	\$54160.03	+1.1% \$8064.61
			2007	\$60373.05	+3.1%	\$52548.42	+3.1% \$7824.64
			2006	\$58353.14	+3.5%	\$50790.29	+3.5% \$7562.85
			2005	\$56108.79	+4.0%	\$48836.82	+4.0% \$7271.97
			Year	This Occupation	Compared to All Occupations		Difference
			Current	\$67835.52	\$54962.85		\$12872.67
			2013	\$67611.09	+3%	\$54824.64	+3% \$12786.45
			2012	\$66320.59	+1.9%	\$53718.93	+2.1% \$12601.65
			2011	\$65030.08	+2.0%	\$52797.51	+1.7% \$12232.57
			2010	\$64020.13	+1.6%	\$51968.23	+1.6% \$12051.90
			2009	\$62897.95	+1.8%	\$51092.88	+1.7% \$11805.07
			2008	\$62224.64	+1.1%	\$50401.81	+1.4% \$11822.83
			2007	\$60373.05	+3.1%	\$49111.82	+2.6% \$11261.23
			2006	\$58353.14	+3.5%	\$47545.40	+3.3% \$10807.74
			2005	\$56108.79	+4.0%	\$46071.13	+3.2% \$10037.66

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1Q2014 Statewide - Occupational Employment & Wages

Select Occupation 21-1029 Social Workers, All Other

State of Connecticut
All Industry

Estimated employment	360
Mean wage	25.21
Entry wage	16.58
10th percentile wage	15.75
50th percentile wage	20.51
90th percentile wage	41.51

Top Employing Industries

Industry	Employment	Percent
Education and Health Services	200	54.6%
Public Administration	110	29.4%

Best Paying Industries

Industry	Employment	Median Wage
Public Administration	110	33.62
Education and Health Services	200	20.37

Note: The mid-wage is the median wage. The average wage is the mean wage. The entry-level wage is equal to the average of the lower third of reported wages for the occupation. The wage range consists of the 10th and 90th percentiles; 80 percent of workers earn between this wage range, 10 percent earn less while 10 percent earn more.

Reference Date: 1st Quarter 2014

Social Workers, All Other (21-1029)
 All social workers not listed separately.

Median Wage History

Year	This Occupation	Compared to Occupational Group	Difference
Current	\$25.21	\$24.76	\$0.46
2013	\$25.13 +3%	\$24.67 +3%	\$0.45
2012	\$24.65 +1.9%	\$24.20 +1.9%	\$0.45
2011	\$24.17 +2.0%	\$23.73 +2.0%	\$0.44
2010	\$23.79 +1.6%	\$23.36 +1.6%	\$0.43
2009	\$23.38 +1.8%	\$22.95 +1.8%	\$0.42
2008	\$23.13 +1.1%	\$22.71 +1.1%	\$0.42
2007	\$22.44 +3.1%	\$22.03 +3.1%	\$0.41
2006	\$21.69 +3.5%	\$21.30 +3.5%	\$0.39
2005	\$20.85 +4.0%	\$20.48 +4.0%	\$0.38

Year	This Occupation	Compared to All Occupations	Difference
Current	\$25.21	\$26.43	-\$1.21
2013	\$25.13 +3%	\$26.36 +3%	-\$1.23
2012	\$24.65 +1.9%	\$25.83 +2.1%	-\$1.17
2011	\$24.17 +2.0%	\$25.38 +1.7%	-\$1.21
2010	\$23.79 +1.6%	\$24.99 +1.6%	-\$1.19
2009	\$23.38 +1.8%	\$24.57 +1.7%	-\$1.18
2008	\$23.13 +1.1%	\$24.23 +1.4%	-\$1.10
2007	\$22.44 +3.1%	\$23.61 +2.6%	-\$1.17
2006	\$21.69 +3.5%	\$22.86 +3.3%	-\$1.17
2005	\$20.85 +4.0%	\$22.15 +3.2%	-\$1.29

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1Q2014 Statewide - Occupational Employment & Wages

Select Occupation 11-9032 Education Administrators, Elementary and Secondary School

State of Connecticut
All Industry

Estimated employment	2,950
Mean wage	\$118,306
Entry wage	\$91,203
10th percentile wage	\$81,621
50th percentile wage	\$122,971
90th percentile wage	\$150,144

Top Employing Industries

Industry	Employment	Percent
Education and Health Services	2,940	99.6%

Best Paying Industries

Industry	Employment	Median Wage
Education and Health Services	2,940	118,310

Note: The mid-wage is the median wage. The average wage is the mean wage. The entry-level wage is equal to the average of the lower third of reported wages for the occupation. The wage range consists of the 10th and 90th percentiles; 80 percent of workers earn between this wage range, 10 percent earn less while 10 percent earn more.

Reference Date: 1st Quarter 2014

Education Administrators, Elementary and Secondary School (11-9032)

Plan, direct, or coordinate the academic, clerical, or auxiliary activities of public or private elementary or secondary level schools.

Median Wage History

Year	This Occupation	Compared to Occupational Group	Difference
Current	\$118305.82	\$126003.45	-\$7697.63
2013	\$117912.12	\$125584.14	-\$7672.02
2012	\$115057.82	\$122544.12	-\$7486.30
2011	\$113187.76	\$120552.39	-\$7364.62
2010	\$111416.13	\$118665.48	-\$7249.35
2009	\$109053.95	\$116149.61	-\$7095.65
2008	\$108266.55	\$115310.98	-\$7044.42
2007	\$104920.13	\$111746.82	-\$6826.68
2006	\$101475.29	\$108077.84	-\$6602.54
2005	\$98424.14	\$104828.16	-\$6404.02

Year	This Occupation	Compared to All Occupations	Difference
Current	\$118305.82	\$54962.85	\$63342.96
2013	\$117912.12	\$54824.64	\$63087.48
2012	\$115057.82	\$53718.93	\$61338.89
2011	\$113187.76	\$52797.51	\$60390.25
2010	\$111416.13	\$51968.23	\$59447.90
2009	\$109053.95	\$51092.88	\$57961.07
2008	\$108266.55	\$50401.81	\$57864.74
2007	\$104920.13	\$49111.82	\$55808.31
2006	\$101475.29	\$47545.40	\$53929.89
2005	\$98424.14	\$46071.13	\$52353.01

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