

# Ready by 5 & Fine by 9

## Connecticut's Early Childhood Investment Plan (Part 1)

FISCAL YEAR 2008 & FISCAL YEAR 2009

Prepared by the Governor's Early Childhood Research & Policy Council  
February 2007

### CO-CHAIRS

Valerie F. Lewis , Commissioner of the Connecticut Department of Higher Education.  
David Nee, Executive Director of the William Caspar Graustein Memorial Fund  
John Rathgeber, President and CEO of the Connecticut Business and Industry Association



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Betty Sternberg	Superintendent, Greenwich Public Schools
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**Representative Richard Belden:** Ranking Member, Finance, Revenue & Bonding Committee

**Senator David Cappiello:** Ranking Member, Appropriations Committee

**Senator Eileen Daily:** Senate Chair, Finance, Revenue & Bonding Committee

**Senator Toni Harp:** Senate Chair, Appropriations Committee  
(Other Committees: Children, Executive & Legislative Nominations)

**Representative Denise Merrill:** House Chair, Appropriations Committee  
(Other Committees: Higher Education & Employment Advancement)

**Senator Bill Nickerson:** Ranking Member, Finance, Revenue & Bonding Committee  
(Other Committees: Transportation, Commerce)

**Representative Cameron Staples:** House Chair, Finance, Revenue & Bonding Committee  
(Other Committees: General Law, Judiciary)



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# EXECUTIVE SUMMARY

The Early Childhood Research and Policy Council was established by Executive Order of the Governor of the State of Connecticut on February 13, 2006. The Governor charged Council members to develop a multi-year investment plan, based on the work of the Early Childhood Education Cabinet, and present that plan to her in the fall of 2006.

In July 2006, the Early Childhood Education Cabinet adopted an early childhood investment framework entitled “Ready by Five & Fine by Nine” and delivered the framework to the Governor, legislators and members of the Research and Policy Council. The Framework identified 50 action items necessary to achieve the following goals for the state’s young children:

- To reach appropriate developmental milestones from birth to age five.
- To begin kindergarten with the knowledge, skills and behaviors needed for success in school.
- To have K-3 education experiences that extend children’s birth-to-five learning and ensure consistent progress in achieving reading mastery.

Before releasing “Ready by Five & Fine by Nine,” Cabinet members prioritized the 50 action items into a set of 10 unranked but essential priorities for the coming biennium, Fiscal Years 2007-08 and 2008-09. The Research and Policy Council then developed specific policy recommendations and employed detailed cost modeling tools to project the fiscal investment necessary to achieve each priority item.

Working in three committees (Cost & Financing; Management & Infrastructure; Research & Accountability), Council members also made a series of policy and fiscal recommendations that addressed other elements of the charge given to it by the Governor. These additional policy and investment recommendations are largely directed at ensuring that the State of Connecticut increases accountability and systems capabilities of the State and the Cabinet to responsibly implement the “Ready by Five & Fine by Nine” framework.

The Early Childhood Investment Plan was delivered to the Governor on December 7, 2006. It recommends the appropriation of \$102 million over the next biennium, \$30 million in Year One and \$72 million in Year Two. Further, it provides a summary of how other states and municipalities have funded significant investments in early childhood, an analysis of improved governance options, and outlines components of an accountability and assessment plan.

Members of the Research & Policy Council stand ready to proceed on other tasks outlined by the Governor as well as to assist the Cabinet and the Executive and Legislative Branches of Connecticut state government in consideration of the financial and policy recommendations brought forward at this time.



**EXECUTIVE SUMMARY TABLE: Early Childhood Investment Plan Summary  
FY2008 (7/07-6/08) through FY2009 (7/08-6/09)**

<b>COMPONENTS</b>	<b>FY 2007-08</b>	<b>FY 2008-09</b>	<b>Biennium Totals</b>
Early Health & Well-Being			
Information about Child Development and School Expectations	\$892,792	\$1,208,975	\$2,101,767
Strategic Plan for Serving Infants and Toddlers	-	-	-
HUSKY Well-Child Visits and Developmental Assessments	-	-	-
Birth-to-Three Expansion	\$1,224,655	\$8,298,652	\$9,523,307
Access to Quality Preschool			
Quality Preschool Expansion	\$13,530,374	\$37,114,618	\$50,644,992
Slot Expansion	\$11,080,374	\$30,514,618	\$41,594,992
Facilities	\$2,450,000	\$6,600,000	\$9,050,000
Program Reimbursement Equalization	\$2,163,495	\$4,456,800	\$6,620,295
Workforce Professional Development	\$1,348,703	\$3,298,387	\$4,647,090
Consultation to Preschool Programs	\$287,000	\$323,000	\$610,000
Kindergarten Assessment	\$1,000,000	\$1,000,000	\$2,000,000
Local Community Planning & Service Accountability			
Local Birth through Eight Councils	\$3,504,770	\$6,991,360	\$10,496,130
Infrastructure Investment in Quality, Systems & Accountability			
Quality Rating System (QRS) / Quality Enhancements (QE)	\$2,618,500	\$3,350,000	\$5,968,500
QRS Development	\$201,000	\$350,000	\$551,000
QE: Grants to Communities	\$1,500,000	\$1,500,000	\$3,000,000
QE: Grants to Programs	\$750,000	\$1,250,000	\$2,000,000
QE: Consultation services	\$167,500	\$250,000	\$417,500
Data Interoperability	\$3,150,000	\$3,550,000	\$6,700,000
Early Childhood Policy & Research Institute	\$703,500	\$1,059,000	\$1,762,500
State Management Structure	\$437,510	\$915,090	\$1,352,600
<b>TOTAL</b>	<b>\$30,861,299</b>	<b>\$71,565,882</b>	<b>\$102,427,181</b>



# SETTING THE CONTEXT

In 2005, just over 41,700 babies were born in Connecticut, reflecting a trend of steadily declining births over about nine years. By many measures, Connecticut's children are thriving compared to those in other states. Yet a substantial number face predictable risks to their health and development in the early years.

Most pervasive is the challenge of living in poverty. Connecticut recognizes two levels of poverty: the Federal Poverty Level, and 185% of the Federal Poverty Level the income below which a child qualifies for the Free and Reduced Price Meals program. The chart to the right shows the income levels associated with each of these two poverty scales.

Fourteen percent of Connecticut children under the age of five live at or below the Federal Poverty Level. At each age, this is equal to about 5,800 children. In the age range birth to five, about 29,000 young children live at or below the Federal Poverty Level in Connecticut.

Nearly three in ten children live in families at or below 185% of the Federal Poverty Level, about 12,000 babies born each year and about 60,500 young children between the age of birth and five.

The scientific literature has amply documented that children in poverty are more likely to have poor health and experience infectious disease, delayed growth and hunger. Children growing up poor in Connecticut also demonstrate much lower levels of academic achievement, beginning at entry to kindergarten and continuing through the K-12 years of schooling. Importantly, while most of the state's low income young children live in just 58 communities, children at risk due to poverty can be found in every community in our state.

Although family poverty is one key factor in predicting the likelihood of developmental and educational challenges, other factors and circumstances also present challenges for young children's health, safety, school readiness and early academic achievement. Family risk factors include homelessness and frequent housing changes, domestic violence, parental incarceration, and single parenthood. Family factors that place young children at risk also include maternal depression, parental substance abuse, having a mother who has not achieved a high school degree (i.e., with less educational accomplishment) and living in a family where English is not the primary home language.

There is also a set of child risk factors that are related to developmental challenges. These include health problems including low birth weight, lead poisoning, childhood asthma, hearing and vision problems. Inadequate access to health care can place a child at risk as does abuse, neglect and developmental disabilities.

The Early Childhood Cabinet's "Ready by Five & Fine by Nine" report recognized that all families caring for young children today need information about the course of normal child development and school expectations about what children need to know in the elementary school years. It also understood that some families and communities will need substantially more help to ensure their children's healthy development, school readiness and academic success.

To accomplish this, "Ready by Five & Fine by Nine" envisioned bringing together agencies and their programs as part of an "early childhood system" covering the period from prenatal development through the third grade of school. The Cabinet drew on the work of the National Governors Association to articulate the role of a "ready State" as a partner in this work. The Governors Association indicates that a "ready State" requires legislative and executive commitment, extensive interagency coordination, integration of data collection and continual review and accountability.

Building on the work of "Ready by Five & Fine by Nine," the Early Childhood Research and Policy Council examined the "return on investment" literature in developing this Early Childhood Investment Plan. This rapidly expanding base of studies and economic analyses<sup>1</sup> reveal that sound investment in early childhood can yield significant returns for all the residents of Connecticut. Importantly, while the benefits return larger savings when targeted toward at-risk children and communities, the return on investment is not exclusive to only these particular populations.

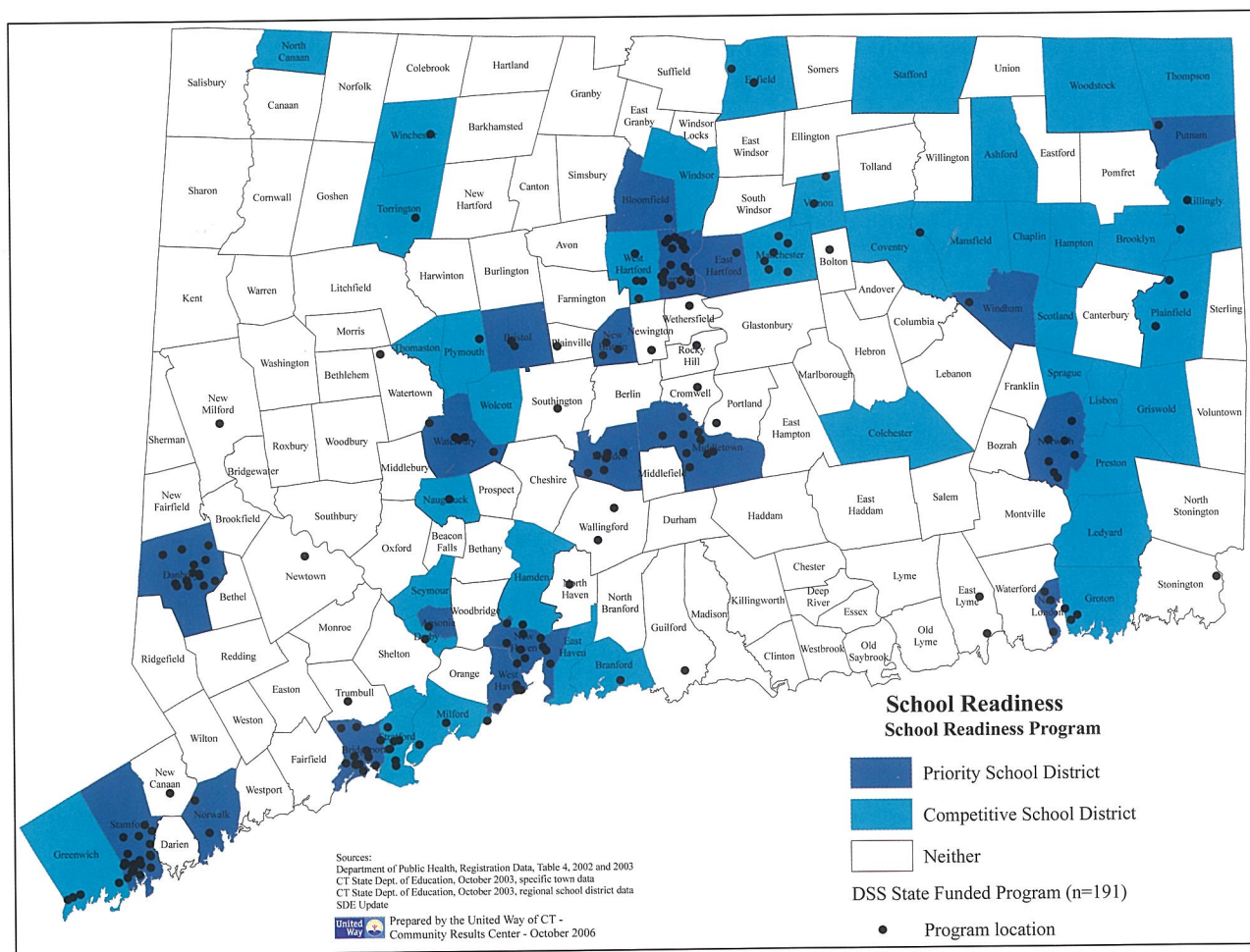
Table 3. 2006 Federal Poverty Guidelines

Size of Family Unit	Federal Poverty Guidelines	185% of Federal Poverty Guideline
1	\$9,800	\$18,130
2	\$13,200	\$24,420
3	\$16,600	\$30,710
4	\$20,000	\$37,000
5	\$23,400	\$43,290

Note: Family of 1 is relevant to children in foster care.

The costs of prevention over remediation have been well documented. Within the context of early childhood investment, economists report that every dollar invested in high quality early childhood programs for at risk children (especially home visiting, parent education, and early education) return between \$8 and more than \$17 to society. These returns include the savings from reduced welfare and incarceration costs as well as increases in wages and taxes paid by persons who successfully complete high school (or beyond) and enter the labor market.

In Connecticut, research on individual school readiness programs indicates that, when properly delivered, they can virtually erase differences in children's preschool skills across race and income groups. A study from Bridgeport also showed that such programs can cut kindergarten retention (that is, holding children back in kindergarten) by nearly 90%. Finally, we have ample data from the Connecticut Birth to Three Program showing that only 50% of the infants and toddlers with disabilities or developmental delays (who receive services from the program) need special education in kindergarten.



## FOOTNOTES

- 1 See the work of the Partnership for a New America.



# DEVELOPING THE EARLY CHILDHOOD INVESTMENT PLAN: PROCESS AND PRODUCTS

Guided by four core values, the Early Childhood Cabinet established a set of goals for young children in Connecticut ages birth to nine years. The first expects the state's young children to reach appropriate development milestones from birth to age five. The second is that all children begin kindergarten with the knowledge, skills and behaviors needed for early school success, and the third expects children to receive educational experiences from kindergarten through the third grade that extend their birth-to-five learning and result in achieving reading mastery by the end of third grade.<sup>2</sup>

The Cabinet established a target timeline for these goals to occur, beginning with young children born in 2006-07. These children will likely enter kindergarten in 2011 and the third grade in 2015.

Fifty action items were identified as necessary to achieve the state's goals for young children, and 10 were prioritized for fiscal attention over the next biennium, FY 2007-08 and FY 2008-09. Information on each priority was transmitted to the Early Childhood Research and Policy Council over the summer of 2006, and the Council set to work to develop a five-year business plan for presentation to the Governor in early December.

Established by Executive Order in February 2006, the Early Childhood Research and Policy Council included leaders from the business, philanthropic, education, local government, workforce and economic development sectors. The Governor also invited participation of legislative leadership, across parties, from the Appropriations and Finance Committees. The Council is chaired by the Commissioner of the Connecticut Department of Higher Education, the Executive Director of the William Caspar Graustein Memorial Fund, and the President and CEO of the Connecticut Business and Industry Association.

Over the period from September through late November 2006, the Council operated through three committees, each one led by one of the chairs of the Council and supported by staff and consultants managed by the United Way of Connecticut. Cost scenarios for the 10 Cabinet priorities were assigned across the three working committees along with a series of tasks outlined in the Executive Order that created the Council. The three working committees are: Cost and Finance; Management and Infrastructure; and Research and Accountability.

These three committees returned to the full Council a set of five-year cost recommendations for program improvement and expansion as specified in the Cabinet's 10 priorities as well as a set of recommendations for strengthened state and local capability for management and accountability. On November 28, 2006, Council members reviewed and adopted the first-ever Connecticut Early Childhood Investment Plan and, on December 7<sup>th</sup>, transmitted a summary of the report to the Governor.

In addition to the program and management recommendations and cost scenarios, the Investment Plan includes a report on financing strategies currently in use in other states and municipalities, a report on governance options for strengthening statewide governance, and a preliminary design for an accountability and assessment system. As part of its continued commitment to public accessibility and transparency, all of these materials are posted to the Early Childhood Research and Policy Council website – [www.ecpolicycouncil.org](http://www.ecpolicycouncil.org).

As summarized earlier, the total investment recommended in the first year of the Early Childhood Investment Plan is \$30,861,200 and in the second year, \$71,565,882. Specific funds by item were presented earlier in this document on page 6.

## FOUR CORE VALUES

Families and communities raise children, with schools and the state as essential partners in early childhood investment.

All families need information in the years of early child development and some families need both information and support to assure that their children reach annual age-appropriate and grade-appropriate developmental milestones.

Learning begins at birth and requires intentional support during the years before schooling begins. All children should have the opportunity to develop the knowledge, skills and behaviors that enable them to be successful in the early years of schooling.

The quality, effectiveness and cultural competence of early childhood experiences are key to assuring children's preparation for success in the first years of schooling.

## FOOTNOTES

- <sup>2</sup> The first and second goals described have since been combined and are being referred to as Goal 1: Ready by 5, and the third is being referred to as Goal 2: Fine by 9.

# EARLY HEALTH & WELL-BEING

Good health is a key indicator of a child's well-being, affecting not only their physical condition but also their social, emotional and academic development. Academic success can hinge on whether a child's basic needs are being met, including the need for proper nutrition, the elimination of environmental dangers and the detection and treatment of chronic conditions and serious illnesses. Poor health in childhood has far reaching consequences. A comprehensive early childhood program must address the many interrelated factors that can affect children's achievement, starting with their physical well-being.

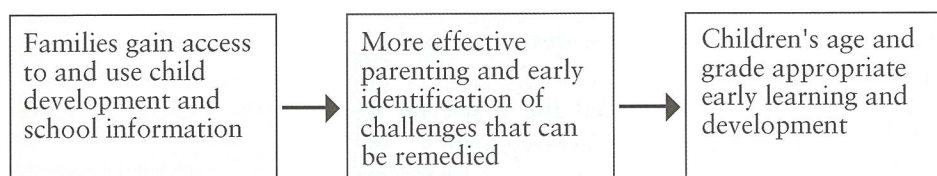
Providing families and caregivers with information about age-appropriate development, developing a strategic plan for serving infants and toddlers, ensuring well-child visits and expanding the eligibility categories for the existing Birth-To-Three program are all strategies that will enhance the state's ability to effectively serve young children.

## Information about Child Development and School Expectations

*Priority: Provide all families and caregivers (including non-custodial parents) with information about child development, prenatal through age eight.*

The 2000 Institute of Medicine report *From Neurons to Neighborhood* presented data showing that positive developmental interactions with parents/caregivers improve young children's social competence and overall capacity to learn. It also showed that most parents welcome more information about how they can help their young children learn. Providing information about child development can be as simple as mailing a brochure or developmental calendar that includes information on specific milestones (e.g., crawling, talking) or as involved as identification, evaluation and referral services due to developmental concerns. Parents who are informed about the school's expectations for their children's grade level are better able to support their children's learning, engage in activities that enhance and extend their children's learning, and afford themselves of opportunities to participate as partners in their children's education.

**Figure 3: Results of Access to Child Development Information**



## Current Environment

Connecticut is fortunate to have a nationally recognized model to build upon for the delivery of information to parents of young children as well for follow up when early developmental challenges are identified. This early childhood “single point of entry” system is supported through funds and programs from four state agencies, shown below with the their associated program:

- Connecticut Children's Trust Fund: Help Me Grow Program
- Department of Mental Retardation (DMR): Birth-to-Three Program
- Department of Public Health (DPH): Children with Special Health Care Needs Program
- State Department of Education (SDE): Preschool Special Education Program

Together, these agencies have collaborated to create the Child Development Infoline, a specialized unit within 2-1-1 at the United Way of Connecticut where anyone in the state who has questions about a child's development or behavior can call toll-free.



2-1-1 Child Development Infoline functions as a single point of entry that is well-integrated with local and regional service systems. While there may be many kinds of agencies and programs that could meet their needs, there are also frequently barriers that make access to these services difficult. These barriers include strict eligibility criteria, transportation and language problems and financial challenges. Since its inception four years ago, Help Me Grow has provided information and referrals to over 8,000 families through the Child Development Infoline. When there is a need for a referral of a family and young child to one of the other programs in this early child development system – from DMR, DPH or SDE – Help Me Grow’s trained consultants assist families in those referrals for service.

Connecticut is the only state that provides universal access to an on-going child development monitoring system called the Ages & Stages Questionnaire (ASQ). ASQ is a parent-completed questionnaire that serves as a developmental screening, monitoring, and health promotion system for children ages birth to five. Anyone in the state can access this free service by calling 2-1-1 Child Development Infoline. ASQ is also used in other settings such as child care centers, family resource centers and in home visiting programs.

With support from the Commonwealth Fund, Connecticut’s pediatric practices have been learning how to better solicit information from parents about their child’s overall development. The Help Me Grow program has trained more than 150 pediatric settings over the past two years to include solicitation of parents’ concerns about their child’s development as a regular part of well-child visits. About half of Connecticut’s pediatric practices remain to be trained in the state’s Help Me Grow and Ages and Stages services. This training is delivered under the umbrellas of EPIC (Educating Practices in the Community) at the Child Health and Development Institute (CHDI).

## Proposal

The Early Childhood Investment Framework calls for increasing access for all parents (and caregivers) of young children to information about child development, as well as information about the knowledge, skills and behaviors expected of children in early elementary school. The intent of this priority is to provide free and easily available information for all families and caregivers, and targeted outreach to those children who are likely to be at risk for poor developmental outcomes, e.g. not being ready for school or not achieving adequate academic performance in the early grades.

The Council recommends that these activities be part of an overall strategic marketing plan to reach all families, which includes at-risk children and hard to reach families. The plan should incorporate strategies that address the ethnic and cultural diversity across Connecticut, and should also include plans for how it will measure its success in reaching these populations. As such, the Council recommends that a marketing plan be addressed by the Statewide Management Issues Working Group of the Cabinet.

We further recommend that this work be linked with other top 10 priorities with which it is related: (a) Building local capacity through birth through eight councils<sup>3</sup>; (b) Early consultation network;<sup>4</sup> and (c) HUSKY enrollment and well-child assessments and follow up.<sup>5</sup>

The recommendations below describe activities the State should consider in FY 2008 and FY 2009 to begin reaching these populations.

1. Continued professional development of child health providers and strengthening connections between child health providers and community-based child care and early education sectors.
  - a. Further expansion of EPIC (Educating Practices in the Community) to reach all pediatric practices. The EPIC program, funded through the Child Health and Development Institute, offers evidence-based information and materials to promote the early detection and prevention of childhood developmental and health problems.
  - b. Connecting child health providers and community-based childcare and early education sectors. Through EPIC training, child health providers are taught the importance of including early care and education providers with the family to address information on child development. Many child care providers are frustrated with the lack of communication by the child health provider when they raise concerns about a child. This training gives providers strategies that help close the gap.

2. Additional support for a coordinated strategic outreach and marketing program through explicit public and private support and partnerships to inform all families with young children and other caregivers (including licensed and unlicensed childcare providers) about the state's free Child Development Infoline, Help Me Grow, and Ages & Stages services and to actively connect high risk families to local and regional early childhood service systems.

In order to provide adequate outreach that will connect with the hard-to-reach populations, additional Child Development Liaisons will be required in communities as well as staff to do direct family outreach with at-risk families (referred to as Intensive Care Coordinators). This team of Liaisons and Coordinators will also connect with faith institutions, immigrant programs/offices, and other potential access points of hard-to-reach families. In addition, they will seek and build partnerships with other outreach efforts targeting similar populations. Based on the anticipated increase in caseloads, additional Care Coordinators and Program Assistants will also be necessary. The Council anticipates a need for 3 additional Child Development Liaisons, 8 Intensive Care Coordinators, 2 Care Coordinators, and 1.5 Program Assistants.

3. The State Department of Education to develop and distribute information materials about school expectations, to families with preschool aged children through third grade on an ongoing basis (minimally annually). The Council recommends SDE produce a strategic distribution plan to the Cabinet by March 30, 2007 that includes partnerships with the Connecticut Association of Public School Superintendents, Connecticut Association of Boards of Education, Connecticut Education Association and American Federation of Teachers – Connecticut.

## Cost

The total additional costs for providing information to at-risk families are \$2,101,767. Costs in FY 2008 associated with hiring new positions have been reduced to account for two-thirds of the year to allow for time to hire staff.

Table 1. Cost for Information to Caregivers		
	FY08	FY09
Professional Development	\$105,800	\$156,200
Outreach	\$661,992	\$952,775
Development and distribution of school expectations materials	\$125,000	\$100,000
Total	\$892,792	\$1,208,975
FY08/FY09	\$2,101,767	

## Strategic Plan for Infants and Toddlers

*Priority: Develop a comprehensive strategic plan for serving infants and toddlers.*

As children's first and most important teachers, parents and guardians provide the foundation for healthy development and later academic success for their children. In Connecticut, these adults have numerous supports and resources available to them. However, infant and toddler programs are spread out across several different agencies, each with their own eligibility requirements, standards and policies that are often not aligned. This fragmentation is often confusing to parents who have limited time and multiple work and family commitments. Often, families do not utilize available services because they cannot navigate the many different paths and rules that exist.<sup>6</sup> In order to fully utilize existing services, and to expand and improve them, Connecticut must develop a comprehensive system that caretakers can understand and access.

## Current Environment

While Connecticut agencies have been involved with several initiatives related to children ages birth to five, including most recently the Early Childhood Partners comprehensive birth to five planning effort, the Department of Social Services (DSS) reports that, at present, there is no statewide comprehensive planning effort focused exclusively on infants and toddlers. Similarly, while there are many services directed at infants and toddlers – including the Connecticut Birth-to-Three System, Early Head Start programs, Nurturing Families Network, Help Me Grow, and the DSS infant-toddler child care and HUSKY programs – Connecticut has not yet addressed how to create a family-driven, comprehensive “system” to deliver these services at the local, or state, level. Importantly, annual reports from Connecticut's 2-1-1 Child Care Infoline suggest that requests for programs serving infants and toddlers remains high.



## Proposal

The Early Childhood Investment Framework recommends the development of a coordinated, comprehensive strategic plan to assist families in the age-appropriate development of their young children, with a special focus on the period birth through three years. The plan, to be issued by July 1, 2007, will need to address the development of effective early childhood “systems” within Connecticut communities as well as across state agencies.

DSS has developed a preliminary list of content areas to be included in the strategic plan:

- Defining, measuring and reporting on young child outcomes
- Early learning guidelines and the CT Preschool Curriculum Framework
- Infant mental health issues
- Early care, including kith & kin issues
- Workforce development
- Leadership development
- Governance and finance

Active work on this plan continues under the joint leadership of DSS and the Commission on Children.

## Cost

Costs for plan development were resourced through existing Cabinet funds.

## Developmental Assessments

*Priority: Ensure HUSKY children receive regular well-child visits and an annual developmental assessment.*

The intent of this priority is to ensure that children ages birth through eight enrolled in the HUSKY program receive timely well-child visits and associated developmental screening, monitoring, and full assessments as outlined in by the American Academy of Pediatrics (AAP) and federal and state EPSDT (Early and Periodic Screening, Diagnosis, and Treatment) program. It is the intent of the Early Childhood Education Cabinet that young children at risk of health or developmental challenges are examined regularly and that such interventions as needed are provided early in the child’s life when the cost is lower and the likelihood of treatment and remediation is higher.

## Current Environment

HUSKY, administered through the Department of Social Services, serves a large proportion of children living at or below 185% of the Federal Poverty Level – the same measure suggested by the Cabinet to ensure fiscal support for serving three- and four-year olds in quality childcare. HUSKY may be the state program that reaches the highest percentage of this target population and offers children and their families the ability to access health care professionals on a regular basis.

Children on Medicaid/HUSKY are eligible to receive a comprehensive set of health services under the Early and Periodic Screening, Diagnostic and Treatment (EPSDT) program. The goal of EPSDT is to ensure that children receive regular well-child care. EPSDT is mandated by the federal government for children on Medicaid/HUSKY. EPSDT is a medical screening that includes a comprehensive health and developmental history, medical exam, immunizations, lab tests, and health education. Under EPSDT, all medically necessary services must be given to children. This *does not* include the use of a standardized tool for developmental screening purposes. DSS encourages contracted physicians to use a developmental screening tool such as PEDS (Parents’ Evaluation of Developmental Status), but it is not a requirement. Physicians cite inadequate reimbursement for these services as a barrier to conducting developmental screenings.

In the event that there is a developmental concern, physicians may make a referral to the Help Me Grow program. Help Me Grow is a statewide program that provides a single point of access for all developmental programs and services for children birth through five-years old through Child Development Infoline. They provide monitoring and screening of a child’s

development through the Ages and Stages Questionnaire (ASQ), a series of standardized tools completed by parents for children four through sixty months. The ASQ is also formally offered through the Birth-to-Three Program.

The rate of well-child care for children enrolled in HUSKY has improved in recent years, but remains of concern. Although 85% of children under 2 received well-child care, the rate drops to under 80% for children 2-5, and then to less than 50% for children ages 6-10.<sup>7</sup> A June 2006 study of HUSKY also revealed that only just over half of babies born in 2003 and covered by HUSKY (55%) had the six well-child visits in the first 15 months recommended under EPSDT guidelines. In the state's largest cities, just 49% had timely well-child visits.<sup>8</sup>

## Proposal

The Council recommends that the Cabinet support State efforts to implement proposed improvements that will lead to increased number and quality of well-child visits and developmental monitoring in the HUSKY program. The Council has identified the following strategies to advance efforts in this area.<sup>9</sup>

1. Work to ensure continuous eligibility for children in the HUSKY program to facilitate continuous and appropriate care. This would help to avoid costs due to lack of preventive care and care management, and reduce administrative costs associated with re-enrollment.
2. Use techniques like the Educating Practices in their Communities (EPIC) program to ensure that all medical personnel are:
  - Fully familiar with the American Academy of Pediatrics periodicity schedule and EPSDT requirements for well-child visits and follow-up care;
  - Committed to providing developmental screening and monitoring and familiar with the codes used to submit charges for both screenings and more in depth developmental assessments when indicated; and
  - Familiar with community resources available for families and children requiring other services and maintaining practice systems for connecting children to services
3. Establish in state policy and regulation:
  - Required practice for well-child visits.
  - Required screening and assessment tools for young children.
  - Annual statewide data analysis and reporting on young child screening, assessments and related follow-up care, including child outcome measures and program provision measures.
  - Implementation of the Promoting Healthy Development Survey<sup>10</sup> to capture the status and changes in developmental surveillance in the state.
4. Train care and education settings and family resource centers in use of the Ages and Stages Questionnaire with results tabulated regularly to measure the developmental status of children in Connecticut.
5. Pursue planned electronic medical record development to facilitate quality assurance, coordination of care, and planning.
6. Pursue planned Medicaid pay-for-performance policies to provide incentives for the Managed Care Organizations and providers to improve their performance on meeting the needs of children.

## Cost

No cost estimates have been prepared since so many efforts are in process by others and have not yielded specific cost figures. Investments in improved data management and physician training are anticipated to improve child outcomes.



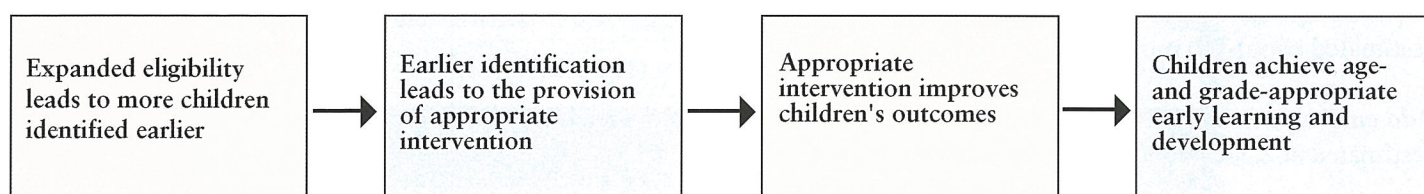
## Birth-to-Three System Expansion

*Priority: Expand eligibility categories in the Birth-to-Three program to include mild developmental delays and environmental risks.*

The Cabinet seeks to expand eligibility in the Connecticut Birth-to-Three System in order to better meet the needs of young children with developmental challenges. Young children whose development is behind by age three are less likely to participate fully in the kindergarten experience. For example, reading skills are dependent on early language skills, and children whose speech and language is already mildly delayed by age two are at greater risk for reading difficulties when they reach school age.

National research indicates that high quality early intervention programs can have very positive results for those children receiving services.<sup>11</sup> These results include increases in short and long term academic achievement, reduction in grade retention rates and reductions in special education referrals.

**Figure 4: Early Intervention Leads to Age-Appropriate Achievement**



### Current Environment

For the past ten years, the State of Connecticut has operated the state's Birth-to-Three System through the Department of Mental Retardation. The purpose of the system is to strengthen the capacity of families to meet the developmental and health-related needs of their infants and toddlers who have significant developmental delays or disabilities. The system serves children from birth through the age of two years and is regulated by state statute as well as the federal Individuals with Disabilities Education Act (IDEA) Part C (Infants & Toddlers with Disabilities).

Connecticut's eligibility criteria are fairly narrow compared to other states in the country. As an example, Birth-to-Three programs from 24 states include children who are mildly delayed, and seven states include children at environmental risk for development delay. However, although the IDEA Part C encourages states to serve children that are "at risk" for developmental delay, there are no federal laws or regulations stipulating what conditions represent "significant development delays," "have a high probability of resulting developmental delay," "mild developmental delay," or "environmental risk." These are all terms defined by each state, either through statute and regulation or through program policy.

The Connecticut Birth-to-Three Program currently serves 3.1% of children under age three (3,970), based on a one-day count.<sup>12</sup> By contrast, in 2004, Massachusetts – which serves children with a broader spectrum of developmental challenges (beginning with mild delay) – served a total of 5.7% of children under three.

If Connecticut were to expand its eligibility to incorporate both mild developmental delays and environmental risks, we may expect to serve 5% of all children under the age of three.

The good news is that the Connecticut Birth-to-Three System has a well-developed management structure and data system, and has access to federal funds that can be used in the areas of administration, training, data reporting, public awareness, and quality assurance. These federal resources can be tapped to assist in the infrastructure needed for program expansion.

## Proposal

The Council has reviewed and forwards the proposal from the Birth-to-Three Program administration for the following expansions in eligibility and services.

**Change definition of delay.** Change the definition of developmental delay to more than 1 Standard Deviation (SD) below the mean in two areas (from the present 1.5) or 1.5 SD below the mean in one area (from the present 2.0). (An alternative would be to define delay in terms of percent delay and define eligibility as greater than a 25% delay).

**Change diagnosed conditions.** Change diagnosed conditions list to:

- Restore eligibility for preemies under 1000g in weight and less than 27 weeks gestation (estimated 144 more children each year).
- Add children with mild and unilateral hearing loss (estimated about 50 more children each year).
- Add children testing with lead levels of 25 µg/dL (micrograms of lead per deciliter of blood) or more, with automatic eligibility at 45 µg/dL (estimated about 50 more children each year).

**Restore eligibility.** Restore eligibility for children with significant delays in expressive language only with biological factors (estimated about 110 more children each year).

**Add environmental risks.** Add children in families with four or more environmental risks who are deemed at risk for delay (estimated at 2,300 additional children to be served per year).

These changes would expand the average caseload by about 228 in FY 2008 and 1,500 in FY 2009 as new cases are phased in over each year. All these groups would be fully phased in by the third year for an estimated total of about 2,650 children per year.

## Cost

Total new funds recommended for FY 2008 and FY 2009 are \$9,523,307. The table on page 17 shows the estimated costs per child as well as aggregate net costs per year from FY 2008 through FY 2012.



**Table 2. Caseload Estimate and Service Cost  
Associated with Birth-to-Three Eligibility Expansion**

	FY08	FY09	FY10	FY11	FY12
Total new children	228	1,500	2,652	2,652	2,652
Average \$ per child for annual services	\$ 8,112	\$8,355	\$8,606	\$8,864	\$9,130
Average \$ per child (hearing impaired)	\$9,483	\$9,767	\$10,061	\$10,362	\$10,673
Less Insurance and Parent Contributions (11.95%)	\$969	\$998	\$1,028	\$1,059	\$1,091
Net Annual Cost per Child	\$7,143	\$7,357	\$7,578	\$7,805	\$8,039
Subtotal, additional budgeted services	\$1,628,531	\$11,035,442	\$20,095,981	\$20,698,861	\$21,319,827
Projected Medicaid Reimbursement	\$403,876	\$2,736,790	\$4,983,803	\$5,133,317	\$5,287,317
Annual % Increase in Cost		3.0%	3.0%	3.0%	3.0%
Net Cost to State	\$1,224,655	\$8,298,652	\$15,112,178	\$15,565,543	\$16,032,510
FY08/FY09 Cost	\$9,523,307				

## FOOTNOTES

- 3 See page 35.
- 4 See page 30.
- 5 See page 13.
- 6 "First Words, First Steps: The Importance of the Early Years." CT Department of Social Services and the CT Commission on Children. Draft document, 2006.
- 7 Ambulatory Care Utilization By Children Enrolled in HUSKY A in 2004. Connecticut Voices for Children, September 2005.
- 8 "Impact of Pregnancy-Related and Maternal Factors on Well-Baby Care in HUSKY A for Babies Born in 2003," Connecticut Voices for Children, June 2006.
- 9 These strategies could be pursued through partnerships among the DSS Medicaid administration, Managed Care providers, consumers, and intermediary groups like the Child Health and Development Institute of Connecticut (CHDI).
- 10 Survey administered to parents/guardians of young children (3-48 months) who have been continuously enrolled in Medicaid to assess the quality of preventive care provided to the children and their families.
- 11 Jack P. Shonkoff and Deborah A. Phillips, eds., *From Neurons to Neighborhoods: The Science of Early Childhood Development*. (Committee on Integrating the Science of Early Childhood Development, National Research Council and Institute of Medicine, 2000). Lynn A. Karoly and C. Peter Rydell, *Investing in Our Children: What We Know and Don't Know about the Costs and Benefits of Early Childhood Interventions* (RAND Corporation, 1998). Lynn A. Karoly and M. Rebecca Kilburn, *Early Childhood Interventions: Proven Results, Future Promise* (RAND Corporation, 2005).
- 12 The Census Bureau's 2004 estimate of the number of Connecticut children under three was 127,491. The 2005 estimate is not available.

# ACCESS TO QUALITY PRESCHOOL

The availability of preschool and the quality of the preschool experience are critical issues for many of Connecticut's children. Quality early care and education programs prepare our state's youngest citizens for academic success, and for satisfying and productive adult lives. In order to provide quality early childhood education for *all* Connecticut children, the Cabinet recommends expanding the preschool slots in the School Readiness Initiative and ensuring that those slots are in high quality programs. In doing this, recommendations are made to address the credentials and training of the early childhood workforce, to develop an interdisciplinary consultation network to enhance the skills of directors and teachers as well as to redress the funding inequities between state-funded programs. In addition, the Cabinet recommends the establishment of a kindergarten assessment tool to measure the effectiveness of state-funded early childhood education programs.

## Fiscal Support for Expansion

*Priority: Assure fiscal support for high quality preschool for all 3- and 4-year olds in families at or below 185% of the Federal Poverty Level, and increase this income eligibility standard as state resources permit.*

Based on parent reports, about 75% of the state's four-year old children currently have a formal preschool experience. However, current programs serving these children vary by hours and weeks of operation as well as by program quality. ***It is not possible, at the present time, for Connecticut to assert that all children attending preschool as four-year olds are enrolled in high quality programs.***

Preschool attendance varies widely by community, ranging from about 98% in some Connecticut towns to just over 50% in other communities. Communities with the lowest levels of reported preschool attendance are the very communities identified by the Connecticut Early Childhood Investment Framework as having many children at risk of inadequate school readiness and poor Connecticut Mastery Test (CMT) performance in the third and fourth grades.

## Current Environment

In 1997, the Connecticut General Assembly established the CT School Readiness Initiative. This initiative aimed to make a full-day, full-year experience available to all three- and four-year old children in communities with significant educational challenges. Nearly all children in families with incomes at or below 185% of the Federal Poverty Level (93%) reside in communities currently participating in the CT School Readiness Initiative. Nearly eight in ten (78%) reside in the 19 former or current Priority School Districts.

The Strategic School Profiles from the State Department of Education reports that not all children in priority school districts are enrolling in school readiness programs. Furthermore, data from 2-1-1 Child Care Infoline demonstrates that there are open slots in school readiness programs in the priority school districts. However, these open slots alone will not meet the goal of serving all unserved three- and four-year olds at this time, or in the future.

Currently, the CT School Readiness Initiative awards grants to local School Readiness Councils. The Councils award grants to early care and education (ECE) programs in their district. Programs must meet the quality standards set by the School Readiness Initiative. Each program is funded to serve a specific number of 3- and 4-year old children. Programs in Priority School Districts are reimbursed based on reports of the actual number of children served and the child's schedule (part day/part year, school day/school year, full day/full year).

Currently, the Connecticut State Department of Education Bureau of Early Childhood, Career and Adult Education manages this program. It awards the grants to Councils, keeps data on the programs receiving the grants in each district, requires



programs to submit monthly reports on the number of children served and annual reports on quality indicators, and oversees quality improvement needs and projects. The Department of Social Services (DSS) also funds Quality Enhancement grants to local School Readiness programs.

In addition to the School Readiness Initiative, Connecticut children from low-income families are served by a mixed model of preschool delivery.

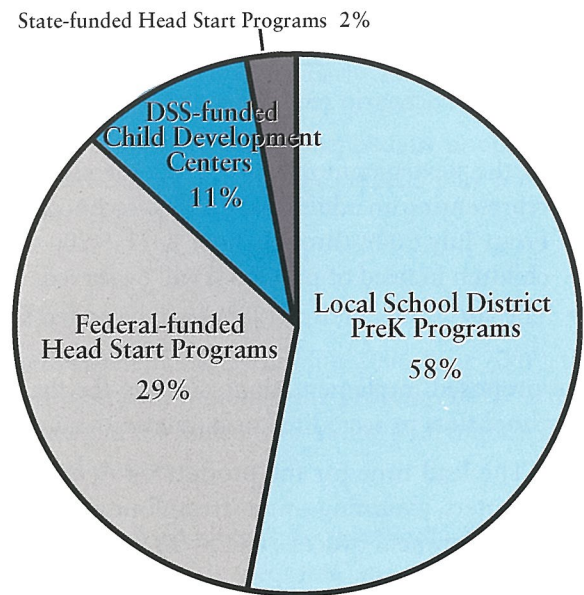
## Proposal

To meet the Cabinet’s goal of serving all children in Priority School Districts and all children in the balance of the state living in families with incomes at or below 185% of the Federal Poverty Level (FPL), the Council estimates a need for 12,944 additional program slots as follows:

- 7,763 three- and four year olds currently un-served in the 19 Priority School districts. This target is based on the 2005 State Department of Education (SDE) report to the legislature, netting out slots that were added in school year 2006-2007.
- 5,181 three- and four year olds in all other communities who live at or below 185% of the Federal Poverty Level (including 3,421 children in the 39 districts which currently receive School Readiness funds through the Competitive Grant program<sup>13</sup>). See Figure below.

While some of this need can be met by filling unused slots in existing school readiness programs, new slots will need to be added to meet the goal of providing a quality preschool experience for all three- and four-year olds in families at or below 185% of the Federal Poverty Level.

**Figure 3: Mixed Model Preschool Delivery**



**Table 3. 2006 Federal Poverty Guidelines**

Size of Family Unit	Federal Poverty Guidelines	185% of Federal Poverty Guideline
1	\$9,800	\$18,130
2	\$13,200	\$24,420
3	\$16,600	\$30,710
4	\$20,000	\$37,000
5	\$23,400	\$43,290

Note: Family of 1 is relevant to children in foster care.

**Increase investment in operating and capital funding.** The Council proposes to meet the objective of the “Ready by 5 & Fine by 9” Framework for preschool expansion through a five-year program of increased investment in operating and capital funding for the School Readiness Initiative beginning in FY 2008 and running through FY 2012. The State will also need to make strategic investments to expand the capacity of current facilities and the early education workforce with the appropriate credentials to teach in a greatly expanded early education system.

In order to improve and expand the School Readiness Initiative both in terms of the number of children served and the quality of the services offered, the Council recommends that Connecticut develop a coordinated Early Childhood System with the capacity to serve the School Readiness expansion initially. As quickly as feasible, however, this system should incorporate

all publicly funded ECE programs in the State with a focus on enhancing the quality of ECE programs available to all of Connecticut’s children.

The Council proposes to phase in CT School Readiness expansion in order to provide time for the marketplace and the ECE sector to respond to the increased demand for high quality services. It would not benefit children if expansion was so rushed that it became difficult for parents to find programs meeting quality requirements in facilities, staffing, and program. It is also imprudent to propose slot expansion where there may be inadequate space available to house the new programs. The Council assessed various slot expansion schedules in coming to this recommendation using a detailed Early Care and Education Cost Estimate Tool<sup>14</sup> developed for this purpose.

**Expansion projections.** The Council constructed three expansion scenarios. The Baseline Scenario proposes to meet the Cabinet goal within five years. A more gradual scenario meets the goal over seven years and the most ambitious proposal would meet the goal over three years.<sup>15</sup>

The Baseline Scenario recommended by the Council involves increasing slots as follows:

- In the next biennium (July 2007 through June 2009), 32% of the need for new preschool slots will be addressed, representing an additional 4,100 preschoolers served across the two years.
- From July 2009 through June 2011, 5,200 additional children will be served. When this is complete, about 72% of children in need of preschool will be served.
- The last 3,700 children (28%) will be added between July 2011 and June 2012, for a total over the five years of 13,000.<sup>16</sup>

The proposed implementation schedule for the new slots was determined by the time needed to increase the supply of preschool slots in accredited programs with adequate facilities and staffing.

- The lead time for the production of new center-based slots is estimated at about two years for community-based centers, assuming some streamlining of the current Connecticut Health and Education Finance Authority (CHEFA) development process, and up to five years for slots in new school facilities.
- School-based programs located in existing schools or leased space could be brought on line more quickly but will still require adaptation of classrooms, bathrooms, and playgrounds among capital renovation costs.

The recommended Baseline Scenario assumes that in the next biennium the majority of the new slot commitments will be accommodated in existing programs or facilities (see additional information under Note on Facility Considerations page 22.)

## Implementation Strategies

**Expand School Readiness Program Slots.** In keeping with current practice, the Council recommends increasing the number of spaces funded through contracts with municipalities as the primary mechanism for increasing family participation in the School Readiness Initiative in the 19 Priority School Districts. In the remaining School Readiness Initiative eligible districts, a portion of the new slots would be made available in this manner depending on local preferences and capacity. This approach provides the assurance of continuous funding required to support the financing of new facilities.<sup>17</sup>

**Early Education Grants.** The Council also recommends that a portion of the new slots be offered as Early Education Grants to families earning at or below 185% of the federal poverty level in order to maximize parent choice and provider participation.<sup>18</sup> These Early Education Grants would be offered to eligible families to allow them to enroll their children in an ECE program of their choice as long as the program meets the quality standards of the School Readiness Initiative. Unlike the grants given to School Readiness programs, the family-based grant program will allow families to purchase a single slot from a qualified center. Similar to other educational grant programs, the grant would be paid directly to the qualified center.

Families in school districts participating in the School Readiness Initiative that meet income eligibility may apply for an Early Education Grant from the state pool of funds established for that purpose if:

- The School Readiness Council in their community has documented that School Readiness Programs are at full capacity, **or**
- The family seeks to enroll their child in a qualified preschool program in another community, for example, to accommodate a parent's work schedule or location.

Families that meet income eligibility requirements but who live in communities in which there is currently no School Readiness program may apply for an Early Education Grant to purchase high quality child care services in existing programs meeting state quality standards.



The Council recommends that funding for 30% of the slots in the Priority School Districts be made available as Early Education Grants and that funding for 50% of the slots to families in Competitive Grant Districts be made available as Early Education Grants. All of the remaining 20% of slot commitments for the estimated 1,761 children at or below 185% of the Federal Poverty Level in the remaining 111 towns would be made available as Early Education Grants.

Administrative decisions about where to house the Early Education Grant program would be dependent upon overall governance of the new Early Childhood System. It is also recommended that School Readiness Councils play a role in recruiting providers to enroll children from families receiving Early Education Grants.

## Cost

***New state funds needed to pay for additional slots in FY 2008 and 2009.*** In the present fiscal year (July 2006-June 2007), the State of Connecticut will expend \$59,400,000 on the CT School Readiness Initiative to fund existing program slots. These are funds now in the budget of the CT State Department of Education. In addition, the State is expending \$1.3 million from the DSS budget for quality improvement for School Readiness Program funded centers.

**Table 4. Summary of Proposed New Funds in Next Biennium for Preschool Slot and Facility Expansion**

	FY 2008	FY 2009
Slot Expansion	\$14.8 million	\$15.3 million
Facility Expansion	\$ 2.0 million	\$ 4.0 million

In the first year of the coming biennium (July 2007 – June 2008), the proposed Baseline Scenario requires an additional \$14.8 million to pay for children in 2,045 new preschool slots and an additional \$2.0 million to the facilities debt subsidy fund.

In the second year of the coming biennium (July 2008-June 2009), the proposed appropriation for School Readiness would increase by another \$15.3 million for slots and an additional \$4.0 million would be added to the facilities debt subsidy fund to ramp up facility construction.

If the Baseline Scenario is accepted, a total of 4,100 additional preschoolers will have access to preschool during the next biennial budget period, reaching about 32% of the total need for new programs over this first two year period.

***Increased Reimbursement to Address Increased Staffing Requirements.*** The Council recommends an increase in slot reimbursement to cover costs of workforce improvements (such as increased teacher education, training and credentials as required by state law and national program certification). The changes will go into effect in two phases: credential requirements beginning 2010 and state legislative requirements in 2015.

The Council has relied on the cost model developed through the Early Care and Education Cost Estimate Tool in estimating the required increase in per slot reimbursement. This model projects that the full cost of an early education slot in 2010-2011 will be approximately \$11,000. Assuming that parent fees hold steady at an average of about 10% of total cost, this suggests the need for a Full Day/Full Year reimbursement rate of \$10,000 in that year.

To meet the costs associated with workforce improvements will require an increase in per slot reimbursements of 3% each year for the first two years. In the third and fourth year, per slot reimbursement would rise by 6.2% and 10.6% respectively. Current estimates of increases needed to meet the 2010 staff credentialing goal are shown below.

**Table 5. Estimated Fiscal Increases to Meet Staffing Enhancements**

Fiscal Year	% Increase in Rates	Actual Full-day/ Full-year Reimbursement
2007-08	3%	\$8,266
2008-09	3%	\$8,514
2009-2010	6.2%	\$9,042
2010-2011	10.6%	\$10,000
2011-2012	3%	\$10,300

***Hours/Day Proposal.*** The Council recommends changing the School Readiness schedule options. It recommends eliminating the 2.5 hour/part-day option because it is not long enough to meet the needs of children and families. The 6 hour/day and 10 hour/day options would be retained and a 4 hour/day option would be available to up to 20% of families by special request. These options would be available for either the school year (180 days) or the full year (50 weeks) depending on family needs.



In addition, the committee recommends a “teaching team” staffing model. Each School Readiness classroom is to be staffed with an appropriately qualified “lead” teacher who supervises the assistant teacher(s) who are also appropriately qualified. A “lead” teacher must be scheduled to be with the children for the majority of the 6 hour/day schedule and for a minimum of 6 hours/day for the 10 hour/day schedule. The remaining hours of the 10 hour/day may be staffed by assistant teachers who are closely supervised by the “lead” teacher.

The Council recommends that these changes be instituted as soon as reasonable.

**Summary of Baseline Scenario Costs.** In the first year of the new Biennium, it is recommended that an additional 2,045 preschoolers be served at a total new cost of \$14.8 million. Also, the Council recommends continued investment in facility expansion, requiring an additional \$2.0 million. Together, this represents an increase of 27.7% over FY 2006-07 funding. The total appropriation (base and new funds) is estimated at \$82,456,000. (see table 6)

In the second year of the Biennium (FY 2008-09), it is recommended that the number of new children served increase again by 2,045 and that facility expansion grow to accommodate increased slots. The total second year appropriation of new funds represents an increase of 24.4% over the prior year. The total in new funds required is \$19.3 million. The projected total appropriation (base and new) is estimated at \$104,032,000. (see table 7)

**Funds projected for the balance of the five-year plan.** Estimates are presented below for the continued preschool expansion for three additional years, in order to reach 100% of the 13,000 three- and four-year old children identified per the Early Childhood Investment Framework: Ready by 5 & Fine by 9.<sup>19</sup> (see table 8)

## Facility Considerations

In addition to state funds for the operation of the expanded number of programs, fiscal support will be required to support the construction or renovation of additional space in which the programs will be operating. This continues a policy now in effect through CHEFA, where the State of Connecticut covers the cost of debt service for early learning centers expanded or renovated as part of the School Readiness Initiative.

A total of \$4.5 million has already been appropriated to a fund which covers the debt service on bonds issued to build early learning facilities. The last \$1 million of this fund will be committed through a Request for Proposals being issued soon.

**Short Term Space Strategies.** The Baseline Scenario assumes that -- due to the lead time to develop new facilities -- the majority of the new slot commitments in the next biennium will be accommodated in existing programs or facilities. This includes:

- Facilities that can be relatively quickly pressed into service with minor renovations
- Licensed capacity in accredited programs that is not utilized, and
- Vacant spaces.

	Continue the Base	Allocate New
Slot funding	\$61,182,000	\$14,774,000
Debt subsidy funding	\$4,500,000	\$2,000,000
Subtotal	\$65,682,000	\$16,774,000

	Continue the Base	Allocate New
Slot funding	\$75,956,000	\$15,298,000
Debt subsidy funding	\$6,500,000	\$4,000,000
Subtotal	\$82,456,000	\$19,298,000

	SFY 2009-2010	SFY 2010-2011	SFY 2011-2012
Slots Added	2,589	2,589	3,676
Incremental New Operations Cost	\$20,612,150	\$22,786,393	\$33,412,118
Incremental New Debt Service Subsidy Funds	\$4,000,000	\$4,000,000	0
Total New Funds Over Prior Year Base	\$24,612,150	\$26,786,393	\$33,412,118
Total Estimated Operations Cost	\$119,943,217	\$155,443,592	\$193,519,018
Total Estimated Debt Service	\$14,500,000	\$18,500,000	\$18,500,000
Total Program Cost	\$134,443,217	\$173,943,592	\$212,019,018



While these resources are limited and must be approached with caution, data from the 2-1-1 Child Care Infoline indicates that, beyond the 19 Priority School Districts, there are:

- Nearly 700 vacancies within full-time accredited programs, *and*
- A total licensed capacity of 728 slots more than the actual number of children served in these programs.

Another potential source of new quality slots are the 21,500 full time slots in programs that are not accredited, with a vacancy rate of 14.7%. These programs could be encouraged to seek accreditation and participate in School Readiness. The licensed capacity of these Centers is also 3,342 spaces larger than the number of children they say they could currently serve (“desired capacity”).

While some of this space should probably not be used in a quality program (because, for example, quality standards exceed a number of licensing standards), a portion of these spaces could probably be used until more adequate spaces are secured, assuming they reached the quality standards. Efforts to move more of these spaces through the accreditation process would expand supply while reducing out the need to construct new facility capacity in the short term.

**New Facility Development.** Without including replacement of inadequate facilities now in use, the state will require a substantial number of new facilities to accommodate the 13,000 additional children participating in the School Readiness Initiative. The Baseline Scenario projects the need for about 3,500 spaces in new facilities with state funding support.

Approximately 865 preschool spaces now under development through the CHEFA Bonding Program are projected to come on-line in the second year of the biennium (FY 2008-09). However, only 148 (17%) of these are new slots; the rest are upgrades or replacement of current slots that are below standard. Similarly, just 628 new slots out of a total build up of 938 slots in new and renovated facilities already in the pipeline will be available in FY 2009-10. Going forward, the Council recommends that one third of all slots funded through the Bond Program be replacement of existing slots and that two-thirds result in new capacity.

Another potential facility resource consists of new preschool classrooms under construction through the State Department of Education School Construction Program. Several examples are illustrative. Space for a combined total of 306 preschool-aged children was recently completed in Middletown and New Haven. Space for an additional 114 children is projected to come on line in September 2007, and space for 278 children will come on line in September 2008. It is not known how many of these spaces represent new capacity or are replacement facilities.

Solving the preschool space challenge will require a rapid expansion of new facility planning in the first year of the biennium. This will involve continuation and significant expansion of the present debt service subsidy program and technical assistance to non-profit developers of new high quality facilities. Beyond space expansion within the present School Readiness Program, offering Early Education Grants to families of a projected 5,400 children will also create market demand for additional facility construction.

Three basic strategies are suggested to accelerate production of high quality facilities for School Readiness Programs.

*1. Continued expansion of the CHEFA program for preschool providers to build their own facilities. A number of technical refinements will unlock increased production through this program:*

- One variation pursued recently in Norwalk is to make this program available to municipalities to create facilities that can be leased to community preschool programs. This has the advantage of providing leverage to ensure that a quality program occupies the space.
- The availability of new slot reimbursement commitments should unlock a number of projects that have not been feasible without them. The State should consider appropriating funding for more slots than can be used in a given year so they can be committed to leverage construction of new facilities with reimbursements flowing when the facility is completed 18-24 months later.

- Expand access to predevelopment loans and recoverable grants to facilitate providers' efforts to assemble sites and plan their projects. The LISC Children's Investment Partnership is a willing partner who has pioneered this approach in Connecticut and other states.

The Council recommends implementing a two-step award process for allocating capital resources to ensure that appropriate providers are selected and supported with upfront technical assistance and project planning resources; and to make sure that project costs, which are constantly rising, are fully covered by bond awards.

- **Step One:** A conditional commitment of capital subsidy, based on the need for facilities in the community and the quality of the program proposing the project. The conditional commitment would give the project sponsor a certain number of months to gain site control, have its architect prepare design plans, etc. This conditional commitment should come with project-specific technical assistance and pre-construction planning funds to enable smaller and less-adequately resourced but high-quality programs to participate.
- **Step Two:** Once it is determined that the project is feasible and plans are far enough along to generate a more accurate cost estimate, the state would then make a final commitment and revise the award level based on a more accurate estimate of the eventual cost.

## *2. Tap new development capacity through a skilled development entity with the capacity to produce efficiently multiple facilities around the state.*

The Council recommends serious and immediate exploration of new approaches to provision of high quality community early education facilities that mobilize facility development skills that can quickly be assembled by a specialized non-profit or private sector developer. While the current model of supporting non-profit providers in the construction of new facilities remains an important model where capacity exists, the rate of development called for by the Cabinet's goals suggests a need to look at ways to increase the volume of production.

The Council has examined several approaches which would involve tasking a specialized entity with development expertise to building facilities of high quality and leasing or "turn-keying" them to providers of preschool services. Options include:

- **CHEFA creates or contracts for a development arm.** CHEFA has been authorized by the Legislature to create a subsidiary to construct and own new facilities and lease them to programs. CHEFA could form a development arm or could contract with a private construction manager manage the process, an approach used successfully in the extensive New Haven School Construction process.
- **Identify a skilled non-profit to develop facilities.** There is state precedent for this strategy. The Center for Independent Living served this function for DMR group homes to facilitate closing of state residential facilities. One example specific to preschool expansion is Georgia's Early Learning Property Management (ELPM) corporation, a non-profit entity that provides safe and adequate facilities for high quality early learning programs and activities that foster early child development for underprivileged children. ELPM conducts searches for locations, acquires re-zoning when necessary, purchases, constructs, renovates, leases, owns, and manages long term facilities used by pre-qualified, non-profit early learning providers to conduct high quality programs to serve community needs.
- **A State Construction Authority** could be created to build the facilities, an approach used to meet the Abbott requirements in New Jersey. Private developers are brought in to build them and lease to providers. This would assume a sharing of risks and costs appropriate to the level of state subsidy provided. This is how retail chains generally develop new facilities to take advantage of the expertise and time savings gained by working with a skilled developer.

## *3. Continue the practice of encouraging school districts to include preschool classrooms in school construction projects.*

The increased emphasis on preschool and the provision of a 5% reimbursement bonus on preschool classrooms has led to inclusion of these facilities in 24 recent state-supported school construction projects. This should be continued.

The full implementation of these three strategies will enable the state and communities to produce the facilities required to serve an expanded School Readiness Initiative.



## Payment Rate Equity

*Priority: Address state reimbursement inequities for state-funded center-based preschool programs.*

In the early care and education sector, nationally and in Connecticut, there is a gap between what programs are paid and what it actually costs to deliver high quality services. This results from a patchwork of funding mechanisms (including payment by parents) as well as the inability of programs to identify and charge at “real cost levels.”<sup>20</sup> When funding levels do not reach the actual costs of providing a quality service, ECE programs (like other service industries) make adjustments (often reducing quality) or simply go out of business.

A “true cost” model of quality preschool programs is in progress in Connecticut, but is not complete at this time. The Early Care and Education Cost Estimate Tool estimates that a 2005 full-day, full-year preschool slot in the community sectors costs \$8,511 per year based on current staffing patterns. “Full day/full year” programs serve children for 10 hours a day, 50 weeks a year. Slots provided through public schools were estimated to cost nearly double this amount (\$16,555) due to the use of certified teachers with BA degrees and receiving public school wages and benefits.

	Community-based Preschool Slot	Public School Pre-K Slot
Full Day	\$8,511	\$16,555
Part Day	\$1,741	\$3,746
School Day	\$4,603	\$9,030

## Current Environment

Center-based preschool programs in Connecticut currently receive fiscal support from several state, local and federal sources including federal and state Head Start funds, CT School Readiness funds, Child Development Center funding through DSS, Care4Kids subsidies through DSS and funding by local boards of education.

Based on our evolving knowledge of how centers actually budget, it appears that **preschool programs piece together portions of their revenues from these varied programs, each of which may have different payment schedules and levels as well as different reporting requirements.** Over the past two legislative sessions, there has been considerable attention to disparities in payments to programs funded through the CT School Readiness Program, the DSS Child Development Center Program and the DSS Care4Kids child subsidy program.

Preschool Program (State Agency)	Parental Pay Requirements
CT School Readiness Program (SDE)	The School Readiness fee schedule is based on “per family” fee and not a “per child” fee except for children with Care4Kids subsidies. Parental pay requirements for these children follow the Care4Kids subsidy scale.
DSS Child Development Centers	DSS uses a “sliding scale fee schedule” based on a per child schedule that varies based on income, family size and age of child.
Care4Kids Child Subsidy Program (DSS)	The schedule ranges from 0-10% of household income and is factored against the maximum reimbursement rate. The fee is family-based and does not change if family has multiple children in care.

At present, the Department of Social Services (DSS) provides funding to community agencies to offer full day, center-based preschool to an estimated 2,414 children ages 3 and 4. All participating centers are accredited by the National Association for the Education of Young Children (NAEYC). The average reimbursement rate for these slots is \$6,304<sup>21</sup> compared to \$8,025 per slot for centers participating in the CT School Readiness Initiative<sup>22</sup>. Both programs require parents to contribute toward the total cost on a sliding scale (see Table 10).

## Proposal

The Framework proposes to expand access to quality preschool experiences for all children in the 19 Priority School Districts and living in families at or below 185% of the FPL through its existing School Readiness Initiative and access to center-based preschool education programs. To achieve this objective, we must address funding differences for state-supported preschool services and to improve and simplify the funding process.



**Increase Reimbursement Rate.** The Council proposes that the reimbursement rate for DSS-funded slots be increased to the rate for slots funded under the CT School Readiness Initiative. As a condition of receiving the higher reimbursement, programs will agree to comply with all the requirements of the School Readiness Initiative. The Council also encourages the State of Connecticut to examine reimbursement rates for infant/toddler slots in the DSS Child Development Centers and adjust them as required to avoid reductions in services to this critical population.<sup>23</sup>

## Cost

The incremental and total appropriation required to serve preschool age children in the DSS Child Development Centers at the same reimbursement level as the School Readiness Initiative is in Table 11. These figures are based on the same annual increase in reimbursement rates proposed for the School Readiness Initiative in the Baseline Scenario. The total cost for FY 2008/2009 would be \$6,620,295. FY 2008 figures below reflect costs for half the year to allow for phase-in. The increment needed to meet School Readiness reimbursement rates would increase if those rates were increased more rapidly to respond to requirements for increased staff credentials.

Fiscal Year	Full day/Full Year Current DSS Rate, escalated 3% each year	Fiscal Increment to Reach School Readiness Program Rate	Total Proposed Full day/Full year Rate	Total Incremental Appropriation to Achieve Rate Equity (\$ in millions)	Total Appropriation for DSS Child Development Centers (Preschool only) (\$ in millions)
2007-08	\$6,493	\$1,773	\$8,266	\$4.33	\$20.18
2008-09	6,688	1,826	8,514	4.46	20.78
2009-10	6,889	2,153	9,042	5.26	22.07
2010-11	7,095	2,905	10,000	7.09	24.41
2011-12	7,308	2,992	10,000	7.30	25.14
2012-13	7,527	3,082	10,609	7.52	25.90
2013-14	7,753	3,174	10,927	7.75	26.67

## Early Childhood Workforce

*Priority: Develop a multi-year early childhood workforce professional development plan to assure compliance with state law and selected national certification programs.*

Studies have demonstrated that more highly qualified teachers contribute significantly to better outcomes for children. Teachers who have bachelor's degrees and specialized training in early childhood education are better able to meet the school readiness needs of preschool children<sup>24</sup>. In a 2004 policy paper entitled "Better Teachers, Better Preschools: Student Achievement Linked to Teacher Qualifications," The National Institute for Early Education Research summarized the findings of this body of research as follows:

*"Both general education and specific preparation in early childhood education have been found to predict teaching quality. Better-educated teachers have more positive, sensitive and responsive interaction with children, provide richer language and cognitive experiences, and are less authoritarian, punitive and detached. The result is better social, emotional, linguistic and cognitive development for the child."*<sup>25</sup>

## Current Environment

Currently the ECE workforce in Connecticut does not meet the standards set by this research. A survey conducted in 2005 indicated that less than half (43%) of the ECE teachers in Connecticut have a bachelor's degree and not all of these degrees are in early childhood education.<sup>26</sup>

At this time, only teachers in some types of programs are required to have bachelor's degrees because there are different standards for ECE teachers in different sectors of the system. All teachers in public schools, including public school preschool teachers, are required to have a bachelor's degree (120 college credits) and specialized training (a state teaching certificate).

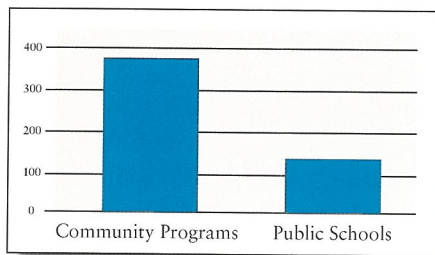
Requirements for teachers in community programs are significantly lower and they vary by program type, funding source or administrative auspices. For example, teachers in community programs that receive CT School Readiness funds are only



required to have a minimum of 12 college credits and a Child Development Associate credential (CDA). The CDA is a credential awarded by a national organization upon completion of a local program. It is roughly equivalent to 6-12 college credits.

In response to the research on early childhood teacher qualifications, there is increasing attention to upgrading ECE teacher standards. The State of Connecticut, the federal Head Start Administration, and the national professional organization for early childhood educators – the national Association for the Education of Young Children (NAEYC) – have all called for increasing the minimum standards for early childhood teachers. A new state law in Connecticut requires ECE teachers in some community programs to have bachelor's degrees by 2015. Specifically, Public Act 05-245 calls for each "school readiness" classroom to have an individual with a bachelor's degree.<sup>27</sup>

**Figure 5: Number of Teachers Currently in the CT School Readiness Programs (in Priority School Districts)**



This statute is in keeping with the national trend. Of the 38 states that have state-funded preschool programs, almost half (17) of them require teachers to have a bachelor's degree, and this number is increasing each year.<sup>28</sup> Importantly, these 17 states require bachelor's degrees for teachers in both community programs and public school programs.

Five of our neighboring states have state preschool programs (New Hampshire and Rhode Island do not) and four of these require teachers in both community and public school programs to have bachelor's degrees (Maine, New Jersey, New York and Vermont). Massachusetts is the only one of our neighboring states that has different requirements for teachers in community programs and teachers in public schools. Massachusetts currently requires public school teachers to have a bachelor's degree and teacher certification; teachers in community programs will

be required to attain an associate's degree by 2010.

It is important to recognize that state-funded preschool programs across the country are quite different in size and in delivery site. Some state preschool programs are delivered primarily in community programs; other states deliver preschool services primarily in public schools.

Connecticut's formal School Readiness program is delivered in both public schools and community-based settings, but the majority of sites are community settings. The School Readiness Program is presently concentrated in the 19 Priority School Districts, and is primarily delivered in community programs in these districts.

There are currently 522 teachers who teach in classrooms supported by the CT School Readiness program in Priority Districts, and 71% of these teachers are in community programs. The other 29% are certified teachers in public school preschools.

Pursuing the Cabinet's goal of increasing the State's commitment to providing access to preschool programs will involve increasing the number of preschool-age children served in both public schools and community programs. Estimates of the need based on the Baseline Scenario are in Table 12.

Table 12. Estimating the Need (for School Readiness the next 5 years)					
	2006 - 2007	2007 - 2008	2008 - 2009	2009 - 2010	2010 - 2011
Number of Children	8,600	8,600 + 2,050 = 10,650	10,650 + 2,050 = 12,700	12,700 + 2,600 = 15,300	15,300 + 3,700 = 19,000
ECE Staff	Current	Projected Need (including attrition)			
Public School Teachers	145	+20	+20	+26	+37
Community Administrators	148	+40	+40	+46	+64
Community Teachers	578	+131	+135	+149	+198
Community Assistants	532	+174	+181	+206	+286

\*Additional Enhancement of DSS State Funded Centers: Staff in State Funded Child Care Centers will be also expected to meet the standards for School Readiness programs. This will create an additional need for qualified staff.



About 160 students graduate from CT higher education institutions each year with an early childhood teaching certificate. This is more than enough to meet the need for public school preschool teachers each year. While there are more than enough the large number of qualified teachers for the public schools, it will be a challenge to obtain qualified teachers for community programs as called for in Table 12.

## Proposal

Given Connecticut's law requiring a bachelor's degree by 2015 for teachers in school readiness programs and the fact that fewer than half of the ECE teachers in the state currently meet this requirement, there is a clear need for a statewide action plan. This plan must specify how Connecticut will enhance the educational level and teaching skills of the current ECE workforce as well as attract additional qualified teachers over the next 9 years.

**Enhanced Qualifications for 2010.** In order to move teachers to the 2015 requirements, the Council proposes an intermediate benchmark requiring teachers in community programs to have an Associate's degree by 2010. Furthermore, degrees alone do not ensure better teaching so an outcomes-based credential is proposed for teachers as well as degree requirements. In addition, the Council has proposed new educational requirements for program administrators and assistant teachers.

<b>Staff Position</b>	<b>July 2010</b>	<b>July 2015</b>
<b>Program Administrator</b>	Associate's degree 24 credits in ECE CT Director's Credential	Bachelor's degree 9 credits in administration 24 credits in ECE CT Director's Credential
<b>Teacher</b> (currently required to have a CDA in School Readiness programs)	Associate's degree 24 credits in ECE Initial Birth-age-5 Credential	Bachelor's degree 48 credits in ECE Full Birth-to-age-5 Credential
<b>Assistant Teacher</b>	Child Development Associate credential 12 credits in ECE Language & literacy requirement	Associate's degree 24 credits in ECE

Assistant teachers will also have to demonstrate the language and literacy skills to communicate with children and families.

Table 13 is the proposal for enhancing staff qualifications.

**Workforce Registry.** In order to make a realistic workforce development plan and be accountable to that plan, we will need better data about the ECE workforce in all sectors of the system. To this end, the Council proposes a Workforce Registry, which would validate and maintain a record of ECE employees and their credentials. The registry will be mandatory for all employees of program participating in the School Readiness

Initiative and voluntary for other members of the ECE workforce. The registry will allow us to monitor the qualifications of individual workers and to eventually require an individual license or credential for all teaching and administrative staff in ECE programs. The registry should be developed during FY 2007, piloted in FY 2008, and fully implemented in FY 2009.

**Early Childhood Professional Development Center.** The Council also proposes that a new Early Childhood Professional Development Center be established to address issues of workforce development. This Center does not necessarily imply a building or structure, but may be virtual and/or collaborative in nature. This center would monitor and coordinate the professional development of the early childhood workforce.

Specifically, the center would be responsible for:

1. Monitoring ECE workforce supply and demand (with the registry and institutions of higher education).
2. Creating and implementing a workforce plan to ensure that supply keeps up with demand.
3. Recruiting new workers into ECE positions and career paths.<sup>29</sup>
4. Providing career counseling for ECE workers and those interested in working in ECE.
5. Assisting students in accessing scholarships, loans and loan reimbursement programs.
6. Managing a bonus program for ECE workers who meet the new 2010 qualifications before July of 2010.

**Scholarships, Loans and Loan Reimbursement Programs.** Most current ECE workers will need some sort of financial assistance to take the courses they need to enhance their qualifications. In addition, many will be able to take only one or two courses at a time, thus making them ineligible for many types of tuition assistance. Incentives such as loan reimbursements and bonuses should be used to attract new qualified workers to the field.



The Council makes the following recommendations for support:<sup>30</sup>

- *Scholarship pathway* for early childhood students to allow students to be eligible even if they are taking one course at a time. The Council also supports the establishment of a fund to help with other related expenses such as childcare and books.
- *Loan reimbursement program* to attract recent college graduates to teach in ECE programs for up to three years.
- *Early Childhood Minority Teacher Incentive Program* to be extended to apply to students who wish to study early childhood education at 4-year institutions of higher education.
- *Child Development Associate (CDA) support fund* to provide sufficient funds to support 185 persons in obtaining the CDA each year.
- *A bonus program* for School Readiness staff that meet the new 2010 qualifications before July of 2010.

**Collaborative of Higher Education Institutions.** The proposed requirements for ECE staff in 2010 and 2015 will require changes in the early childhood programs offered in institutions of higher education in the state.

The Council recommends a Collaborative of Higher Education Institutions be developed in order to maximize the potential to offer quality programs at a variety of institutions. This collaborative will perform the following functions:

1. Develop distance learning courses to be offered at remote locations and used to meet the requirements of the new AS, BA and professional development programs.
2. Propose requirements for the Birth-to-Age-Five Teaching Credential.
3. Issue an RFP in order to facilitate the development of alternative routes for experienced teachers to obtain the Birth-to-Age-Five Credential.
4. Train assessors to implement the observational assessment, which will serve as the criteria for the initial and full Birth-to-Age-Five Credential.
5. Institute a language and literacy requirement for assistant teachers as well as CDA.

## Recommendations Not Impacting FY 2008 and FY 2009 Budget

**Increased Reimbursement for Salary Scale Adjustments.** The reimbursement rate to programs in FY 2011 will need to be increased so that programs can pay staff at a level commensurate with their degrees. As of 2004-2005, teachers (required to have CDA, but 72% had AS or higher) had an average salary of \$22,000 and assistant teachers (required to have a high school diploma, but 51% have CDA or higher) had an average salary of \$17,000.

By 2011, it is estimated that staff salaries should be at approximately \$30,000 for AS level teachers, \$35,000 for BA level teachers, \$23,000 for CDA assistant teachers and \$26,000 for AS level assistant teachers. The per-child cost would be \$10,526 - \$12,016 at those salary levels. To account for this, an \$11,000 cost per child for full day/full year programs might be a reasonable assumption for the state. With an average parent contribution of \$1,000, this would require a state reimbursement rate of \$10,000 per slot for full day/full year programs. There are no cost implications until FY 2011 depending on how the state chooses to phase in this increase.

**Survey of teachers in DSS State-funded centers.** There are currently about 110 DSS State-funded centers, which meet NAEYC accreditation standards. Beyond knowing the NAEYC standards, the current number of workers and their qualifications are not

	FY08	FY09	FY10	FY11	FY12
Workforce Registry	\$95,125	\$117,500	\$107,035	\$109,646	\$112,335
Professional Development Center	\$146,328	\$224,952	\$231,701	\$238,652	\$245,811
Scholarships	\$381,000	\$929,060	\$1168581	\$1,365,362	\$1,465,412
Loan Reimbursement	\$57,500	\$162,500	\$162,500	\$300,000	\$300,000
Incentive Program	\$56,250	\$139,375	\$166,306	\$168,295	\$170,344
Staff Bonuses	\$75,000	\$150,000	\$150,000	\$150,000	\$150,000
Collaborative of Higher Education	\$537,500	\$1,575,000	\$1,575,000	\$1,575,000	\$1,575,000
Total	\$1,348,703	\$3,298,387	\$3,561,123	\$3,906,955	\$4,018,903
FY08/FY09	\$4,647,090				

known. The Council recommends the Cabinet commission a survey of the teachers in these State-funded centers in FY 2007 so that a plan can be made to bring the teachers in these programs up to the current School Readiness criteria as quickly as possible.

## Cost

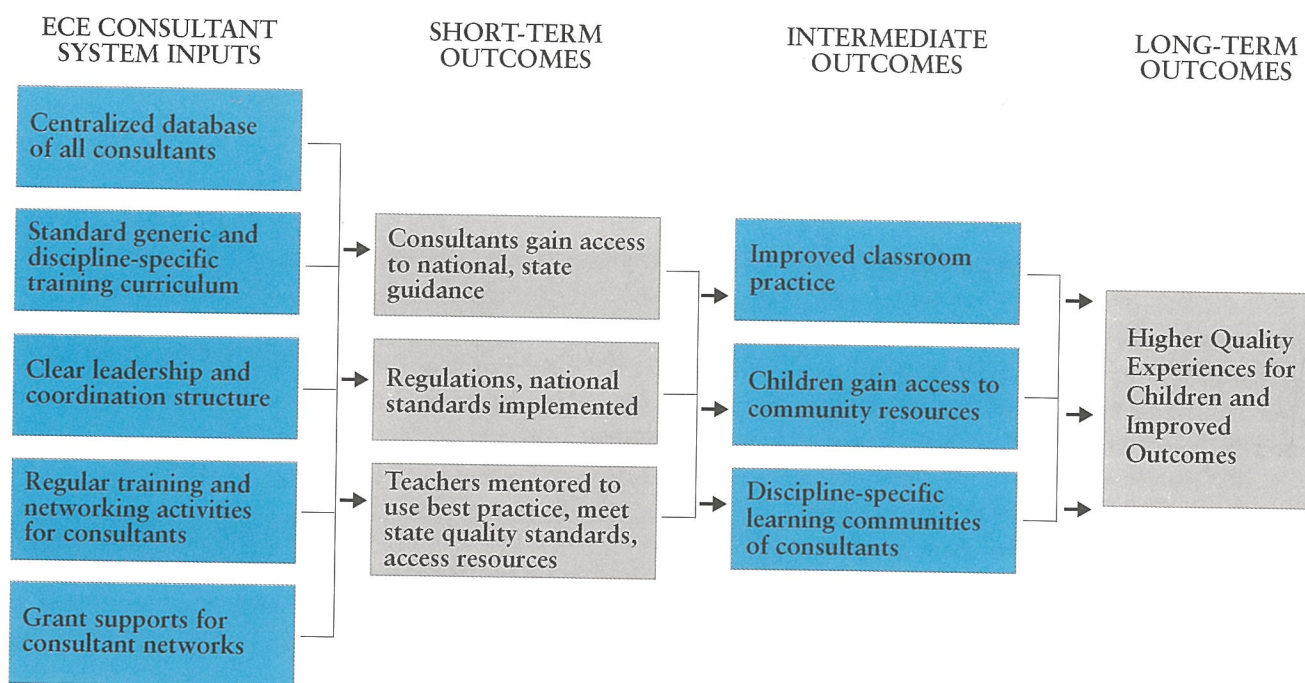
The total proposed cost of the workforce development plan for FY 2008/2009 is \$4,647,090. Portions of the FY 2008 budget are reduced to account for phasing in time necessary for components.

## Consultation Network

*Priority: Provide health, mental health, and education consultation to preschool programs to enhance the skills of directors and teachers for meeting the comprehensive needs of children.*

To meet the varied needs of young children, ECE staff must be regularly informed about current best practices and research findings. They also need ready access to materials, resources and guidance across several disciplines, including health and mental health, social services, and early education.

**Figure 8: Early Childhood Consultation Network Outcomes**



Research has shown that consultants with expertise in their respective fields *and* experience working with young children can support teachers and broaden their knowledge base by providing guidance, technical assistance, and access to specialized interventions as needed. The end result will be improved learning experiences for young children, early identification of their special needs, better health in their early years, better care coordination across services, and improved school readiness.

The use of interdisciplinary consultants is well established in the field of early education. The federal Head Start program and the United States military child care program are the largest early childhood systems using consultant networks to support classroom practices. The New Jersey Department of Education uses a team model of consultants from the various disciplines throughout its state preschool program, and Rhode Island contracts with local agencies to employ interdisciplinary teams for publicly-funded early childhood programs serving children birth to five.



## Current Environment

In Connecticut, regulations for licensed child care centers require that programs engage consultants in health, education, dental, social services, and – for programs serving meal – nutrition. Adding mental health to the list is currently under consideration. Larger programs may employ part-time or full-time staff to fulfill these functions; smaller programs generally contract with independent consultants. In both cases, the cost of consultation is largely borne by the setting and the use of consultants is often constrained by the agency's fiscal resources.

*Although Connecticut requires consultation, there is no state funded infrastructure to support this public policy,* and there are few requirements defining the frequency and duration of this consultation. Similarly, where training for health, education or social service consultants is provided, attendance is not mandatory. No system exists to monitor or promote the training of consultants or the quality of consultation.

Health and mental health consultation systems are the most advanced in their development and as a result are the disciplines most frequently secured by early learning settings. The delivery of consultation in early education, social services, dental and nutritional services are much less frequently called upon, largely because there are no structure or supports that would assure their quality and easy access.

Within the area of health consultation, Connecticut is seen as a leader in both discipline-specific and interdisciplinary consultation led by the work of the Child Health and Development Institute (CHDI) in collaboration with Healthy Child Care Connecticut and the Head Start State Collaborative. With appropriate, sustainable state funding the health consultation area can quickly grow into a solid component of the Consultation Network.

Mental health consultation has also grown rapidly over the past few years. One of the primary vehicles for this services is the Early Childhood Consultation Partnership (ECCP). Eleven consultants provide support, education and consultation to child care providers to address the social/emotional needs of children birth to five. Training opportunities are not as well developed for social service consultation, although it is required by state regulation.

A Connecticut Interdisciplinary Early Childhood Consultation Network could pull together the pieces of a currently required, but fragmented early childhood consultation system, providing higher quality service to Connecticut's children.

## Proposal

The Framework envisions establishing an interdisciplinary consultation network to bring the coordinated support of specialists from several key fields to early learning settings<sup>31</sup> serving children from birth through age eight.

The Framework recommends a Connecticut Interdisciplinary Early Childhood Consultation Network that would help identify issues in the program or in the family that may be impeding children's optimal development, including environmental risks present in the home; conduct interventions of appropriate intensity with the center and with individual families as needed; and connect centers and families with a coordinated continuum of community based services and supports services.

To achieve efficiency and ensure effectiveness, this consultation network requires:

- A designated centralized leadership and coordination infrastructure with statutory responsibility to organize and implement a system
- Specification of the frequency, duration and expected outcomes of the consultant activities in early childhood settings
- A centralized database of information on available consultants
- Training for health, education, mental health and social services consultants that ensures a consistent knowledge base that aligns with best practices, state early learning guidelines and state goals for children
- Ongoing professional development from Network consultants within and across disciplines
- Fiscal resources to support the operation of the Network and the use of consultants within early childhood programs
- A method of public accountability for child and system results



A Connecticut Interdisciplinary Early Childhood Consultation Network could pull together the pieces of a currently required, but fragmented early childhood consultation system, providing higher quality service to Connecticut's children.

The Council recommends investments in the following areas over the next two years to continue development of the Network: staffing, establishment of a database of available consultants, interdisciplinary training events, and research and evaluation on the effectiveness of the Network and network consultants. An early agenda item of the Network will be to define the need and preferred mechanisms for and to seek additional financing for expanding consultation services to early care settings.

At least one full-time equivalent staff position will be required in the short term to coordinate the implementation of the Network and connect and leverage the work of each state department and private partner.

As part of the Network the Council also recommends the development of a comprehensive database of available consultants. This could be built on the current Department of Public Health database or other data management system that emerges.

Funding will be required to expand sessions of the interdisciplinary training currently offered through the Connecticut Nurses Association as well as to conduct additional training events. This would include two five-day courses for 30-50 people and associated curriculum development, trainers, materials, space and food, national speakers, technology, and evaluation including data analysis and reporting. Additionally, the Network will develop with other New England states an interdisciplinary online curriculum for all consultants.

## Cost

Research and evaluation on the effectiveness of the Network and network consultants will be an important component of the Network. Past history has suggested that the cost should be budgeted at 7% to 10% of the total cost of the network, including service costs.

The proposed funding for network development for the next biennium totals \$610,000, which is detailed below. The cost for FY 2008 reflects a salary for two-thirds of the year to allow for hiring.

Table 15. Cost of Consultation to Preschool Programs			
Component	FY 2008	FY 2009	FY 2010
<i>Network Staffing</i> The staff and work group would develop (1) plan for Certification / Registration, (2) Development of Standards, and (3) a funding plan	\$67,000	\$103,000	\$106,000
<i>Training / Continuing Education</i> , building on current work (see above)	\$150,000	\$150,000	\$150,000
<i>Database Development and Maintenance</i> Searchable web-based database of all consultants to serve as a planning tool for the Network and a referral tool for Centers and others	\$25,000	\$25,000	\$25,000
Research and Evaluation. Contract with evaluator and support for data collection.	\$45,000	\$45,000	\$45,000
TOTAL	\$287,000	\$323,000	\$326,000
FY08/FY09	\$610,000		

## Kindergarten Assessment

*Priority: Support the design and implementation of the kindergarten assessment (Statewide implementation due Fall 2009).*

The design and implementation of a kindergarten assessment is one part of a larger assessment and accountability system for preschool and kindergarten. There is currently a tool available for preschool teachers but not for kindergarten teachers. It is important that the standards for preschool and kindergarten are closely aligned in the development of the kindergarten assessment.



## Current Environment

Each year, kindergarten teachers are confronted by a unique classroom of children with vastly different experiences and skills. Until the passage of Public Act 05-245, school districts in Connecticut were not required to conduct a kindergarten assessment. A survey of Connecticut superintendents conducted in 2005 by the State Department of Education indicated that there are inconsistent practices across the state in the implementation or lack of implementation of an assessment by school districts.

While some schools reported that they did not administer any assessments, those that do use a wide variety of commercial or district developed tools for many different purposes. These purposes range from decisions on whether age-eligible children are "ready" for kindergarten, to placement decisions such as transitional or two-year kindergarten classrooms.

Currently, while the kindergarten assessment is being developed, the State Department of Education has developed a kindergarten assessment proxy, based on the State's expectations for children entering kindergarten as outlined in the Connecticut Preschool Curriculum Framework. This proxy was distributed in September 2006 to all kindergarten teachers in the state. It will be followed by a similar survey in the spring that will look at the progress of children in their class.

## Proposal

The Council proposes that a kindergarten assessment framework be developed that is aligned with the Preschool Assessment Framework. It is also proposed that State Department of Education continue to provide professional development to teachers on the use of the Preschool Assessment Framework.

The kindergarten assessment proposed here is intended to improve teaching and learning in kindergarten and to insure alignment between preschool and kindergarten. Other components of the assessment and accountability system are proposed to meet the other two purposes (evaluating and improving programs and establishing accountability for the early childhood initiative). These other components are included in the proposal for the Early Childhood Policy and Research Institute (see page 42).

## Cost

It is recommended the state invest \$1,000,000 per fiscal year for a total of **\$2,000,000** for FY 2008/2009. This figure is based on the budget request placed by State Department of Education for the upcoming biennium. The figure only includes professional development costs and did not include development expenses.

## FOOTNOTES

- 13 The Competitive Grants program is open to the 50 communities with the lowest wealth rank used in the state's Education Cost Sharing and to communities with a school in which 40% or more of students live in families with incomes at 185% or less of the FPL. Each community in this program receives a base grant of \$107,000.
- 14 The Early Care and Education Cost Estimate Tool was developed as a joint project between the Connecticut Health and Education Finance Authority (CHEFA) and the Hartford Child Care Collaborative.
- 15 See Appendix B for a summary of the baseline (5-year) plan as well as the seven and three year plans that were examined.
- 16 The Council rounds up to 13,000 for estimating purposes.
- 17 Under the CHEFA debt service subsidy program used by providers to underwrite the cost of new facilities, state reimbursements for preschool services need be committed to the project for the term of the bonds in order for the bonds to be marketable.
- 18 Committee staff and some Council members participated in a call with Senior Economist Arthur Rolnick from the Federal Reserve Bank of Minneapolis where a public/private partnership, the Minneapolis Education Trust, is launching a similar grant program targeted initially to 1,000 families at or below the federal poverty level that will also be supported with a family mentor starting at birth who will assist them in navigating the early care system. Similar programmatic connections can be made in Connecticut.
- 19 Appendix C details the appropriations associated with the three scenarios analyzed. Additional funds will be required in all years for Quality Enhancement initiatives of the School Readiness Councils.
- 20 Oliveira, P. "Child Care Center Operating Budget Basics: Defining Expenses and Revenues to Estimate the Cost of Child Care." Connecticut Voices for Children, March 2006. <http://ctkidslink.org/publications/ece05operating06.pdf>
- 21 The current rate includes a 14% increase awarded FY 2005 to begin to address rate inequity challenges that threatened closure of some centers.
- 22 This work has focused on the two main state funded programs, the CT School Readiness Program within the State Department of Education and the Department of Social Services' Child Development Centers. Head Start was not included in this analysis as 90% of its current funding comes directly to programs from the federal government.
- 23 The Department of Social Services has submitted a budget option to the State for FY 2008 to increase slot reimbursements for infant/toddler slots.
- 24 Whitebrook, Marcy. (2003). Early Education Quality: Higher Teacher Qualifications for Better Learning Environments – A Review of the Literature. Washington, DC: The Education Trust
- 25 Barnett, W. Steven. (2004). "Better Teachers, Better Preschools: Student Achievement Linked to Teacher Qualifications" National Institute for Early Education Research. Page 4.
- 26 Workforce data from "Shaping Young Lives: A Profile of Connecticut's Early Care and Education Workforce" prepared by Early Childhood DataCONNECTIONs.
- 27 Public Act 05-245 states that, "As of July 1, 2015 each school readiness classroom must have an individual with at least (1) a bachelor's degree from an accredited institution in early childhood education, child development, or other related field approved by the Commissioner of Education, or (2) a teaching certificate with an early childhood or special education endorsement." NAEYC 2015 minimum standard for teachers is an Associate's degree, with 50% having a bachelor's degree. It is unclear if this requirement is meant to apply to classrooms that are funded through the CT School Readiness Program or all publicly funded preschool classrooms. Legislative clarification is required in order to determine how many teachers will be required to meet the bachelor's degree requirement.
- 28 National data are from National Institute of Early Education Research "2005 State of Preschool Year Book."
- 29 There are two alternate routes into the preschool education field currently in their planning stages to be implemented in FY 2008. One is for elementary school teachers who wish to gain sufficient content to obtain a teaching endorsement that extends to preschool age children, and the other is for those who hold a BA degree in a "related field" that need further training and application skills to obtain a Nursery to Grade 3 teaching certificate.
- 30 The Council recognizes there are other financial supports currently available to students and suggests the recommended supports be considered after these existent options.
- 31 Early childhood consultation models and progress in strengthening consultation in Connecticut are discussed in a report entitled "Building a Multidisciplinary System of Early Childhood Consultation in Connecticut." (Farmington, CT: Child Health and Development Institute of Connecticut, 2005). Online at [http://www.chdi.org/files/10262005\\_93815\\_901828\\_.pdf](http://www.chdi.org/files/10262005_93815_901828_.pdf)



# LOCAL COMMUNITY PLANNING & SERVICE ACCOUNTABILITY

The Cabinet's first core value requires attention to the role of local communities in achieving the healthy development, school readiness and academic achievement of our state's young children.

*"Families live – and children grow up – in neighborhoods and communities, where informal and formal supports and services assist them. Through effective community collaboration, 'ready communities' identify the needs of families with young children, assess the effectiveness and availability of essential services, develop strategic plans to guide service improvement, and make sustained resource investments in an early childhood system at the local level."*

- Connecticut's Early Childhood Investment Framework.  
October 2006

## Local Partnerships

*Priority: Support local communities in developing Birth-through-Eight Local Councils (e.g., using School Readiness Councils) for planning and monitoring early childhood services.*

## Current Environment

In Connecticut today, there are two main vehicles for fostering local collaborative work on behalf of early childhood -- School Readiness Councils and the William Caspar Graustein Memorial Fund's Discovery Initiative.<sup>32</sup>

Local leadership and governance is an essential part of an early childhood education infrastructure. Therefore, the 1997 legislation creating Connecticut's School Readiness Program required the chief elected officials and superintendents of schools in each participating community to convene a School Readiness Council to guide implementation of the programming their community. The original program was made available to Priority School Districts, and now 19 current or former Priority School Districts participate in the program. As of 2006, the legislature has expanded the program on a competitive basis to all communities that have at least one school in which 40% or more of the students are eligible for federal free and reduced lunch program (students in families with income at or below 185% of the federal poverty level) and to the 50 communities ranking lowest on the wealth index used to compute the education cost sharing (ECS) formula. Currently there are 19 present or former Priority School Districts and 39 Competitive Districts participating in the program.<sup>33</sup>

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Local Councils will have the capacity and authority for policy and program planning; system development; leadership; public accountability; and resource allocation.

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## Proposal

**Local Early Childhood Councils.** The Early Childhood Education Cabinet has identified a need for local councils to perform a broad role of planning and monitoring early childhood services in order to meet the Cabinet's goals for children to be "ready by five and fine by nine." The direction suggested to the Research & Policy Council is to build on a substantial base of local work by expanding the mandate of the local and regional School Readiness Councils to address the needs of children from birth through age eight while still fulfilling the roles of the existing School Readiness Councils. This will necessitate a strong connection to the local K-12 education system. The Council recommends that by FY 2011 all communities that are legislatively mandated to have a School Readiness Council will form a local early childhood governance structure and will develop and implement community-wide strategic plans.

Local Councils will have the capacity and authority for policy and program planning; system development; leadership; public accountability; and resource allocation. The Research & Policy Council also makes specific recommendations for infrastructure requirements to include leadership, membership, staff support, access to technical assistance, and access to flexible, non-categorical funding. Incentives will encourage communities to form multi-town councils incorporating other towns with needs beyond the 58 districts currently participating in the School Readiness Initiative.

## Functions of Local Early Childhood Councils

**Policy and Program Planning.** Local councils would produce a three-year community-wide strategic plan and an ongoing planning process that is informed by parents, child outcome data, a local needs assessment, an inventory of community assets, state and local data, and an environmental scan of trends that impact young children and their families. The plan would follow a template created under the guidance of the Cabinet and include the following:

- a. An analysis of system-wide gaps and barriers
- b. A set of clear child and family outcomes and associated benchmarks aligned with the Early Childhood Investment Framework and legislative requirements
- c. Measurable objectives and strategies to address system gaps and barriers including: (i) family support; (ii) aggressive outreach; (iii) parent engagement; (iv) service enhancement and reduced duplication of services; (v) literacy development; (vi) cultural competence, and (vii) leadership development
- d. An assignment of implementation responsibilities to system partners
- e. A process to ensure ongoing refinement based on community input and feedback that is inclusive of parents and caregivers
- f. A financing plan that identifies and aligns local/state resources across categorical funding streams
- g. An evaluation plan that provides for the ongoing collection of data and measurement of child and family outcomes

**System Development.** The Local Councils would oversee the development of a seamless, accessible system of services that is responsive to family needs encompassing the areas of early care and education, social, emotional, behavioral and physical health, and family supports. The local councils will be the primary point of interface with all state agencies and the Governor's Early Childhood Cabinet. The local councils will work closely with the Local Education Agency (LEA) on questions of transition to kindergarten and preschool special education and to ensure that community services are available as required to families with children enrolled in the K-12 system to support their success.

**Leadership.** Local Councils will have the capacity and authority to provide leadership in the local or regional community in advocating for early childhood programs at the community and state level.

**Public Accountability.** Local Councils will track and report child and family outcomes and hold public and private programs and systems accountable for results through systematic data collection and ongoing analysis of barriers and system gaps.

**Resource Allocation.** A main function of the Local Councils will be to align local, state and private resources in support of the community plan including: the disbursement of school readiness and quality improvement funding and any new resources.

**Infrastructure Requirements.** Since local ownership is vital to the achievement of improved outcomes for children, the Superintendent and Chief Elected Official (or their designees) will convene and provide leadership for the Local Councils and approve the resulting strategic plan.

The membership of the Local Councils will consist of a minimum of 12 members including the chief elected official; the superintendent of schools; and at least three parents representing the cultural and ethnic composition of school age children in the community. Members should be drawn from the following constituencies as required to provide broad based support for the plan in accordance with local needs: community health care; early care and education providers



(public, private, center, group and family-based); Birth-to-Three providers; family support providers; other service provider networks; higher education; police and fire departments; business; philanthropy; libraries; and citizens at-large.

To fulfill their mandated responsibilities the Local Councils will require dedicated staff support in managing the collaborative process. The Local Councils must also have access to state/local resources and staff supports to continually outreach to parents, families and citizens; to implement a results-based accountability system;<sup>34</sup> and to leverage public will for ongoing investments in early care and education. State financial support should be flexible and non-categorical to allow the Councils to fulfill their responsibilities.

Local Councils will also require supplementary support to develop and implement a community-wide plan. These supports may include data collection/analysis, planning frameworks, collaborative management, and on-site content and process consultation related to the topics above (e.g. parental involvement, cultural competence, literacy).

## State Roles and Responsibilities

***Flexible Implementation.*** The Cabinet or other designated state structure shall receive the local/multi-town plans and after careful consideration shall align state resources with those plans to the extent feasible and make policy recommendations to assist in implementation of the plan. The Cabinet shall report to the Joint Standing Committee of the General Assembly with cognizance of matters relating to human services, education, and appropriations and the General Assembly's Select Committee on Children with matters relating to Children on progress achieved by the local/multi-town early childhood councils in reaching outcomes for children and families established by the cabinet. The Cabinet members who are Department heads shall enter into Memoranda of Understanding and develop interagency protocols deemed necessary to implement and support the local/multi-town plans.

***Technical Assistance.*** The Council recommends establishing or designating and funding a statewide technical assistance entity or process to provide supportive planning and implementation assistance to Local Councils serving both communities participating in the School Readiness Initiative and all other communities in their effort to achieve desired child outcomes. This quasi public entity (e.g., CT Development Authority) or non-profit entity that is funded through a public/private partnership would be charged to:

- Develop common planning approach and assist in the collection of standardized data.
- Provide on-site technical assistance and support in the areas of collaborative management, strategic planning/needs assessment, leadership development, cultural competence, and parent engagement.
- Serve as intermediary between the state management structure and the Local Councils to address systemic issues and adjust service approaches as identified by Local Councils.
- Leverage partnerships between and among service system components (e.g. Help Me Grow, Birth-to-Three, KidCare Systems of Care, and Accreditation Facilitation Project).

***A roll-out process.*** The Council recommends that the State develop a “roll-out” process that is responsive to the needs and local conditions of all communities who participate in the School Readiness Initiative as follows:

- In year 1, offer competitive grants to 25 communities to support the development of strategic plans and/or the roll-out of existing plans. Up to 10 of the applications that are deemed “ready” based on pre-defined criteria receive implementation (purchase of service) funding. Up to 15 applications receive planning grants to develop their strategic plan.
- In year 2, the planning grant cohort from previous year receives implementation funding and 15 additional communities are offered competitive planning/implementation grants.
- In year 3, the balance of communities, are brought “on-line” and the year 2 planning grants receive implementation funding.

The application process will be managed by the Governor's Early Childhood Cabinet, or other entity as the Cabinet, Governor or Legislature may designate.

## Costs

Total costs for supporting Local Councils for FY 2008/2009 are \$10,496,130. Costs in FY 2008 in state level technical assistance has been reduced to reflect costs for two-thirds year to account for hiring time.

Table 16. Cost of Local Birth through Age Eight Councils					
	FY08	FY09	FY10	FY11	FY12
Grants to School Readiness Communities					
Council Support	\$1,500,000	\$1,620,000	\$2,030,000	\$2,100,000	\$2,100,000
Planning Support	\$750,000	\$750,000	\$900,000	\$100,000	-
Implementation Funds	\$1,000,000	\$4,000,000	\$8,750,000	\$13,250,000	\$13,750,000
Grants to Other Communities	\$100,000	\$200,000	\$300,000	\$300,000	\$300,000
State Level Technical Assistance	\$154,770	\$421,360	\$481,001	\$490,931	\$501,159
Total	\$3,504,770	\$6,991,360	\$12,461,001	\$16,240,931	\$16,651,159
FY08/FY09	\$10,496,130				

## FOOTNOTES

32 Beginning in 2001, the Discovery Initiative has provided funds and technical support to local collaboratives in 50 Connecticut communities originally designated by the State Department of Education as priority districts, transition districts, or districts with severe needs schools. The Discovery Initiative's objectives are to expand the supply of high quality early childhood education, increase the quality of existing early childhood education, build strong connections between early care and elementary education, improve students' social, emotional and academic performance.

33 See Appendix D for a table of priority and competitive grant districts.

34 During the 2006 legislative session, the Connecticut General Assembly's Appropriations Committee adopted a new framework for budget presentation and analysis, called Results-Based Accountability (RBA). Developed by Mark Friedman of the Fiscal Policy Studies Institute, RBA has been used across the nation as a systematic, outcomes- and results-driven framework. The Appropriations Committee selected two topics as first "case examples" for use with the RBA framework, one of which is the early childhood work of the Connecticut Early Childhood Education Cabinet. Online at <http://www.resultsaccountability.com>. "Connecticut's Early Childhood Investment Framework," October 2006.



# THE INFRASTRUCTURE INVESTMENT IN QUALITY, SYSTEMS & ACCOUNTABILITY

In addition to the ten investment priorities adopted by the Early Childhood Cabinet and estimated as part of the Investment Plan, the Early Childhood Research and Policy Council also prepared analyses and budget information for additional challenges related to essential infrastructure improvements including items to enhance assessment and accountability opportunities. This portion of the Plan includes recommendations for establishing a Quality Rating Scale for early care and education programs, resolving ongoing data challenges, establishing a network of early childhood research scientists and for developing a statewide governance structure to manage the early childhood system framed by the Cabinet.

## Quality Indicators

*Additional Challenge: Advise on establishment of a Quality Rating Scale for early care and education center-based programs, including requisite component elements such as a data registry for the ECE workforce.*

A Quality Rating Scale (QRS) assesses the quality of early care and education (ECE) programs and this information can be used to award grants and scholarships, to monitor quality improvements, to guide quality enhancement efforts and to provide parents with information when making decisions for their children. Currently, the State Department of Education (SDE) through the School Readiness Councils is responsible for ensuring that programs meet the School Readiness standards for quality.

## Proposal

**Quality Rating Scale.** The Council recommends that the quality monitoring of School Readiness programs and State-funded centers become the responsibility of a Quality Rating Scale (QRS). In order to participate in the School Readiness Initiative, early childhood education programs must be rated by the QRS and achieve a specific quality rating (e.g., 4 stars). The School Readiness Initiative will use the QRS to validate the quality of programs and determine their eligibility for School Readiness grants or to serve families with access to Early Education Grant. After the QRS is fully implemented, other ECE programs in the State may participate in the QRS on a voluntary basis so that it will serve as a quality indicator for all parents statewide. (Following from other Council recommendations, this assumes that all early childhood education programs receiving state funding will meet requirements equivalent to those of School Readiness programs.)

**Interim process.** As the QRS is being developed there will be a need to establish the quality of the State-funded programs and new programs that want to become eligible for the School Readiness Initiative. It is proposed that the group that is developing the QRS also manage the interim process to certify programs for eligibility for School Readiness grants from local councils or to serve families with access to Early Education Grant and Department of Social Services state-funded Child Development Centers that wish to be eligible for the School Readiness reimbursement rate. The criteria for validation will be:

- NAEYC (or other) accreditation and
- Teachers meeting current School Readiness qualifications (CDA with 12 credits)

**Early Childhood Education Improvement Project.** The Council further recommends the creation of a central early childhood education Program Improvement Project that is tied to the QRS but has a regional system of support for programs to work on quality enhancement projects. Programs would be required to develop improvement plans based on their quality rating evaluation and the Project would provide technical and financial support for these activities. The Project should work collaboratively with or be associated with accreditation support and interdisciplinary consultation initiatives and the proposed Early Childhood Policy and Research Institute (see page 42.)

The Council recommends that initial planning of the QRS begin in the second half of FY 2007 by the Early Childhood Cabinet, in order for it to be piloted in FY 2008 and implemented in FY 2009.

## Cost

Table 17. Quality Rating Scale Development & Improvement Project					
	FY08	FY09	FY10	FY11	FY12
QRS Development	\$201,000	\$350,000	\$350,000	\$350,000	\$350,000
Quality Enhancement					
Grants to Communities	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000	\$1,500,000
Grants to Programs	\$750,000	\$1,250,000	\$1,625,000	\$1,875,000	\$1,875,000
Consultation services	\$167,500	\$250,000	\$250,000	\$250,000	\$250,000
Total	\$2,618,500	\$3,350,000	\$3,725,000	\$3,975,000	\$3,975,000
FY08/FY09	\$5,968,500				

## Coordinating Data

*Additional Challenge: Integrate the many separate datasets maintained by a variety of state and local governmental agencies to create a readily accessible data system to support public policy, organizational management and individual case management decisions. Determine what other data not currently captured needs to be maintained in a new integrated data system.*

## Current Environment

Over the past 12 to 24 months, a significant number of initiatives have been launched to address data challenges related to better serving children, youth and adults within the State of Connecticut. These efforts involve many state agencies (and units within state agencies) as well other branches of government and the private sector. This work results from an understanding that the state faces significant data and accountability challenges. Beyond the key issues of what we need to know about population needs and outcomes, there are also persistent challenges related to the ways in which we define, collect, analyze and report data and the information that it represents.

## Proposal

The Council recommends that the State work toward the integration, where appropriate, of these eleven initiatives to improve its overall data management infrastructure.

**Data Interoperability.** The State should develop interoperability standards between and amongst public and private healthcare and educational entities. The Council recommends that the State support the efforts of e-Health Connecticut to become a statewide Healthcare Information Exchange (HIE) capable of making available critical health information from multiple sources and presenting that information to authorized parties in a usable format to support sound decision-making about health and health care by providers, consumers, public health officials, researchers, policy makers and other relevant parties.



A secure, statewide, interoperable health and education information exchange should have the following goals:

- To foster interoperability and open-systems architecture;
- To seek in good faith to integrate existing information systems;
- To provide expert personnel to support activities in the spirit of collaboration;
- To support policies to protect intellectual property;
- To encourage a competitive environment for the development of the information, and telecommunications industries in Connecticut; and
- In all of the foregoing, to proceed in a secure manner so as to provide appropriate protections for the confidentiality of data and other information.

The Council also supports the development of an organization similar to the HIE - to become a statewide public/private education information network.

**Operationalize data collection and linkage to facilitate research and analysis.** The Council proposes to create technical capability to link databases that currently exist and to identify gaps in needed data across public and private data sources on both an ad hoc and ongoing basis. This project should create or consolidate databases where necessary to capture cluster data and to integrate, link, fill gaps, and build data to have appropriate public and private childhood development and elementary education datasets. A focus on access to and quality of services, child outcomes (e.g., health, development, educational success), facilities availability and quality, and workforce availability and quality linked to the Cabinet's three goals is vital.

The Council recommends that the State provide support to expand its capacity for public and private networks, expand data warehousing capacity, and to provide for a sort of portal connect and provide access as needed to specific datasets. There should be a two-tiered approach that incorporates identifying necessary data, through Results Based Accountability that can be joined for specific use for planning, programming and accountability. The approach should also include processes that seek to connect state agency databases through a federated, or distributed, database architecture in a secure networked environment, such as the work being undertaken by the Connecticut Health Information Network (CHIN). It should be a priority of this effort to link early childhood data from other state agencies to the State Department of Education's Public School Information System (PSIS).

**Other improvements.** The Council also recommends that the State improve the availability, quality and analysis of data for the purposes of intervention and accountability. *See recommendation for the Early Childhood Research and Policy Institute on page 42.*

## Cost

Table 18 .Cost of Data Interoperability		
	FY08	FY09
Development of parallel eHealthCT structure for education	\$500,000	\$1,000,000
Indicator locating and linking	\$1,020,000	\$950,000
Establishing federated database architecture	\$630,000	\$600,000
SDE (expansion of PSIS to SR and DSS-funded programs)	\$1,000,000	\$1,000,000
<b>Total</b>	<b>\$3,150,000</b>	<b>\$3,550,000</b>
FY08/FY09	\$6,700,000	

## Knowledge Development

*Additional Challenge: Establish a functioning network of early childhood researchers.*

The Connecticut Early Childhood Investment Plan assumes an evidence-based decision making model that will require ongoing research. Some of this research will be to provide accountability data and other research will inform policy decisions as the initiative moves forward.

### Proposal

**Early Childhood Policy and Research Institute.** The Council proposes the creation of an Early Childhood Policy and Research Institute, a network of early childhood researchers, that will make decisions about what policy-related research is needed, will be able to perform some on-going research (data analysis and reporting), and will contract for special research projects as needed. This Institute will have access to data from multiple sources and build the capacity to link these data.

**Implementing Results Based Accountability.** One of the main activities performed by the Early Childhood Policy and Research Institute will consist of implementing Results Based Accountability for School Readiness and other aspects of the early childhood initiative – all 3 of the Cabinet’s goals.<sup>44</sup> The Institute will conduct or prepare Requests for Proposals (RFPs) for all aspects of an Assessment and Accountability System and oversee this work.<sup>45</sup>

- School Readiness Accountability Project. Both child and program measurements are needed for accountability purposes. Some of these data would be used in the Results-Based Accountability (RBA) system as population indicators and program performance measures.
- Implementation of Early Development Instrument (EDI) as the kindergarten benchmark for accountability, replacing the assessment proxy currently in use. The EDI is a population measure of children’s development done in the kindergarten year which could serve as a baseline assessment for the primary grades that could be compared to the Mastery test results in 3<sup>rd</sup> grade. The EDI could also be used as an indicator of children’s readiness for school.
- Longitudinal study that tracks children from preschool entry through early elementary grades to measure annual progress in relation to their participation in School Readiness programs.

For other assessment and accountability aspects of the early childhood initiative, the Institute will:

- Identify the indicators to be reported on annually.
- Ensure the availability and quality of data for the population indicators and program performance measures.
- Analyze the data and prepare annual reports for the General Assembly that track changes in the population indicators.

**Conducting policy-relevant research.** As the School Readiness Initiative is expanded to serve more children, we will need various types of data for planning and policy purposes.

**State and Local Planning Data.** The evolution of early childhood systems will require state and local planning and decision-making. The Institute would need to take leadership in ensuring that the data systems are in place to provide the needed information, in monitoring the analysis of the data, in making data available to state and local communities. The Institute will participate in the development of early childhood data standards and efforts to build linking and integrating capacity for state databases. The Institute would work with the proposed technical assistance entity to put this data to use in local planning processes undertaken by Local School Readiness Councils.



*Policy Research.* The Institute will identify policy questions and fund special projects to address these questions.

- Return on Investment Study
- Research on family and child needs and preferences

## Cost

The state should fund and request proposals for an Early Childhood Policy and Research Institute to begin in FY 2008. The cost for establishing the Institute and conducting the articulated projects is estimated at **\$1,762,500** for 2008/2009. Costs in FY 2008 reflect two-thirds year costs to allow for phase-in.

Table 19. Early Childhood Education Policy & Research Institute		
	FY08	FY09
Institute management and staffing	\$201,000	\$309,000
Research Projects	\$502,500	\$750,000
Total	\$703,500	\$1,059,000
FY08/FY09	\$1,762,500	

## Improving Statewide Governance

*Additional Challenge: Address state structural and management issues in expanding programs and services.*

The State of Connecticut recognizes the importance of the period from before birth through age eight in children's lives in determining their later success in school and life. Since the passage of the landmark School Readiness legislation in 1997, many efforts have been directed at creating a seamless infrastructure to support improved outcomes for families and their young children across the state and to support effective transitions for children at each stage in their development from birth through age eight. The Early Childhood Education Cabinet's Investment Framework and the subsequent Early Childhood Research & Policy Council's Investment Plan are the latest and most comprehensive expression of this ambitious goal.

At the core of the Council's recommendations lies the need for a state management *structure* with the authority to work across state agencies and budgets. Without an integrative structure, it will be difficult to carry out the rapidly expanding investment that the Framework envisions and the Investment Plan details.

Currently, Connecticut's early childhood *environment* is an array of programs and services that are administered and supported by different agencies. A mixed model of preschool service delivery as well as a wide variety of developmental and health services for young children often hinders effective communication and coordination and makes assessment and accountability exercises difficult.

## Proposal

The new Early Childhood System should be based on coordinated and accessible data, continuous research and knowledge development, standardized assessment tools, and universal benchmarks for accountability. A successful system requires a quality rating system and should receive support for program improvements, including enhancements of the early care and education (ECE) workforce. An interdisciplinary consultation network would bring the coordinated support of specialists from several key fields to early learning settings. The system should utilize new models for state and local partnerships and be expanded to serve all identified at-risk children in Connecticut.

The initial functions to be served by a **coordinated Early Childhood System** include:

- *School Readiness Program Management:* Managing the School Readiness Initiative (e.g. setting standards and awarding grants and scholarships)
- *Early Childhood Facility Development Program:* Expanding the debt service subsidy program of the CT Educational and Health Facilities Authority (CHEFA) and exploring new ways to increase new facilities
- *Data and Research Institute:* Assuring that the School Readiness Initiative is achieving the intended results and that research is conducted to answer policy-related questions
- *Early Childhood Professional Development Center:* Assuring workforce supply meets demand and providing career counseling and support to ECE staff
- *Early Childhood/Higher Education Collaborative:* Ensuring that the higher education programs meet the professional

development needs of the workforce

- *Quality Rating System*: Validating the quality of ECE programs
- *Quality Enhancement Program*: Enhancing the quality of programs
- *Workforce Registry*: Validating the credentials of individuals in the ECE workforce
- *Interdisciplinary Consultation Network*: Supporting ECE programs with the services of consultants as needed

The Council conducted a scan of seven different state management structure possibilities<sup>46</sup> that included:

- Expanded Early Childhood Cabinet
- Early Childhood Office within Governor's Office
- New entity within the Office of Policy and Management
- New Department of Early Childhood
- Quasi-public authority
- Non-profit organization
- Endowed trust fund

The Council refrains from recommending a particular management structure out of respect for the prerogatives of the Governor. That said, the Council offers the following comment for consideration. There is a tension between the kind of structures that are strongest in authority and those strongest in attracting private investment, and it is the Council's view that authority matters most. It is paramount that there is an entity at the state level with strong authority to work across state agencies and budgets. To the extent private investment is desirable, there could be a tandem structure as a paired Office for Early Childhood in the Governor's Office and an associated non-profit public/private partnership to enlist private investment, with officials from the legislative and executive branches as appointing authorities to a governing board. (This is offered as an example, not a recommendation.)

We recommend that the Governor immediately consult with legislative leaders in the further design and development of the system management structure. While the Governor may address many issues through her own executive authority, the Council finds that the future stability of the investment requires that the new structure be embedded in law. The Council stands ready to support further design work for the Governor and General Assembly.

## Cost

The Council recommends an investment of **\$1,352,600** for FY 2008/2009. This includes \$437,510 for FY 2008 and \$915,090 for FY 2009. FY 2008 costs reflect expenses for two-thirds of the year to allow for phase-in.

Early Childhood Education Infrastructure		
	FY08	FY09
Staffing (Executive, Project Manager, Data Manager, Administrative Assistant)	\$270,010	\$415,090
Special Projects	-	\$250,000
Public/Private Partnership	\$167,500	\$250,000
Total	\$437,510	\$915,090
FY08/FY09	\$1,352,600	

## FOOTNOTES

<sup>35</sup> Some of this research may be done by the Institute or may be contracted by the Institute.

<sup>36</sup> See Appendix E for Assessment and Accountability System details.

<sup>37</sup> See Appendix F for scan details



## CONCLUDING REMARKS

The Early Childhood Education Cabinet has identified 50 specific actions necessary to support the development of Connecticut's young children from birth through age eight.<sup>47</sup> From these priorities, the Cabinet ranked 10 as high priorities, requiring immediate attention. These ten priorities will form the foundation for a coordinated and comprehensive system of services for the early care and education of Connecticut's children. The Framework states that "the remaining 40 action items must also be addressed as part of both the Cabinet's ongoing implementation work and the Early Childhood Research and Policy Council's multi-year Investment Plan."

Each of the action items – the 10 priority items and 40 additional items – are interrelated. Finding solutions that leverage existing services and strengths, complement one another, and focus resources will be of critical importance going forward. In order to accomplish this task, it will be necessary to institute a new Early Care and Childhood Education System. Implementing the investments outlined in this plan gives Connecticut the opportunity to build on our national reputation for commitment to young children, provide a better life for our youngest citizens, and a stronger, more prosperous state for all of us.

## FOOTNOTES

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38 A list of the 50 Action Items can be found in Appendix G.

# APPENDIX A

## OPTIONS FOR FINANCING EARLY CARE AND EDUCATION<sup>1</sup>

### Who currently finances early care and education?

National studies show that in the aggregate, parents provide the single largest source of payment for child care services. Parents pay about 60% of the total costs of child care in America, with government picking up about 39% of the costs. By contrast, in higher education parents contribute about 35% of its actual cost, with the government contributing 49% of the remainder.<sup>2</sup>

In Connecticut, even very low income families who qualify for state subsidies pay for a portion of their children's care. In the 2006 fiscal year, parent fees generated about \$6 million dollars as part of the state's School Readiness Initiative. For many parents, the substantial expense of early care comes at the very point in their "earning career" when family income is the lowest. For families living at or below Connecticut's self-sufficiency level, child care is second only to housing in terms of family expenses.

Both federal and state financial supports for early care focus on the lowest income families. Because these financial supports are means-tested and limited to families living at or near the Federal Poverty Level,<sup>3</sup> families earning just above that level may actually face the greatest challenge in affording quality early care and education. And while families below a state's median income level are sometimes deemed eligible for support "on paper," such programs are often insufficiently funded to allow these populations to actually benefit.<sup>4</sup>

### Recent Trends in Early Care and Education Funding

Three recent national reports have documented a dramatic trend of increasing state fiscal support for early education:

- *Quality Counts 2002: Building Blocks for Success*, published by Education Week
- *The State of Preschool: 2005 State Preschool Yearbook*, published by the National Institute for Early Education Research<sup>5</sup>
- PreK Now's 2006 Votes Count report tracking state fiscal commitments to early education<sup>6</sup>

The past decade has seen a dramatic increase in public policy attention to early care and education financing. In fiscal year 2007, not a single state legislature decreased its investment in pre-kindergarten. At the same time, more states than ever before – 31 and the District of Columbia – increased their financial commitments to early education. Over the past two years state pre-kindergarten investments have grown by more than \$1 billion. Also of note are the trends toward access for all three and four year olds and toward improved quality. By 2006, 40 states were providing some level of state funding for pre-kindergarten programs with a total contribution of \$4.2 billion, a 33% increase over state funding in FY05.<sup>7</sup>

### Key Principles in Developing Funding Packages

A review of the rapidly accumulating literature on financing strategies (summarized below) reveals a single key principle essential to building a solid, outcomes-based early childhood investment system. First, while programs may be built or expanded with demonstration funds from a wide variety of sources, stability in funding over time is the key to ensuring strong, positive early childhood health, safety and learning outcomes and, ultimately, to improving K-12 education.<sup>8</sup> Second, because of current federal budget circumstances and changes in federal policy priorities over time, state leaders have learned that they cannot rely on federal funds as the basis for establishing or expanding a high-quality, public preschool program. Third, state policymakers have found that they need to allocate substantial, sustainable state funds that can be increased over time.<sup>9</sup>

### Leveraging Federal Funds

In an attempt to accommodate publicly-supported preschool programs within the confines of limited state budgets, policymakers leverage states' general revenue dollars through a variety of federal and local contributions to fund pre-



kindergarten. These include federal childcare grants, Title I education grants, Individuals with Disabilities Education Act (IDEA), Even Start federal funding, Temporary Assistance for Needy Families (TANF), and Head Start funds to help build their pre-kindergarten systems.

## **Tax- and Fee-Based Revenue Strategies**

Property and sales taxes. Seattle, San Francisco, Portland, Oregon and counties in Florida collect and allocate a percentage of their local property taxes specifically to support children's services, including early care and education. Aspen, Colorado allocates a specific percentage of its local sales tax to provide affordable child care and housing.<sup>10</sup> In Austin, Texas child care is part of the city's economic development program. This program provides substantial property tax abatement and sets aside part of local corporate property taxes to support job training and the cost of child care. Three California cities – San Francisco, Concord, and Santa Cruz – enacted a statutory requirement that new real estate development make space available for a child care center or “pay an extraction tax to help fund child care facilities.”<sup>11</sup>

Sin taxes. California and Arkansas have levied excise taxes on cigarettes and beer and allocated a portion of the revenue to support and expand early care and education. California's sin tax revenue is managed by the Children and Families Trust Fund.

Gaming and lottery revenues. Georgia, North Carolina, and Tennessee earmark funds from their state lotteries to support each state's pre-kindergarten program. Missouri is the only state to invest non-lottery gambling revenue for pre-kindergarten.

Child care and earned income tax credits. By 2004, 27 states had enacted child care tax credits, often linked to the federal tax code. Thirteen of these states provide refundable tax credits to families, even if the family has no current tax liability.<sup>12</sup> By 2004, 16 states had enacted state earned income tax credits, with 12 offering refundable credits.<sup>13</sup> Connecticut is one of 20 states that offer neither an earned income tax credit nor a child and dependent care tax credit.

Corporate tax credits. Over the past decade, 28 states have experimented with some form of corporate tax credit for onsite child care, investments in the early care industry or contributions to child care.<sup>14</sup> A 2002 study of corporate child care credits revealed that in 16 of these states, five or fewer corporations claimed the credit. In five states, no corporation made a claim.<sup>15</sup>

Fees. Kentucky has enacted a voluntary motor vehicle surcharge to raise child care funds. Tennessee and Massachusetts added a special fee to license renewals to do the same.

## **Government Program Funding Strategies**

Education funding. Several states including Maine, Wisconsin, Texas and West Virginia have increased their K-12 education budgets to support the enrollment of four-year-olds in district pre-kindergarten programs. Other states, such as Connecticut, include preschool programs in their state general fund education budgets, but not as a specific school readiness or pre-kindergarten line item. Georgia funds a universal pre-kindergarten program through its education department, but revenue is derived from the Georgia Lottery for Education.

Additional support for pre-kindergarten programs comes from both federal and local governmental funds. In a recent NIEER (National Institute for Early Education Research) report, 24 state programs of the 44 surveyed utilized IDEA<sup>16</sup> funding and others utilized Elementary and Secondary Education Act Title I funds earmarked for children in low-income communities. Some used both sources of federal funding. Most of the states' pre-kindergarten programs utilize local funds, and a specific match to state funds is required by only eight state programs. The contribution of local funds to pre-kindergarten programs varies from 11% in New York to 40% in Arkansas.

Human service funding. The predominant source of human service funding for early care and early education at the state and local levels is a combination of federal Head Start, TANF (Temporary Assistance for Needy Families) welfare funds, and the federal Child Care Development Fund (CCDF). Most states in the NIEER survey indicated utilizing these funds but few could specify the amount by source. Additional resources are provided by states in the form of maintenance-of-effort allocations. States and communities also allocate funds to a variety of welfare programs for very low income families, some

of which subsidize child care. Also, the federal Early Learning Opportunities Act (ELOA) authorizes multi-year discretionary grant funding for programs with an emphasis on child literacy.<sup>17</sup>

Health funding. Three states – Kentucky, Maine and Kansas – allocated tobacco settlement funds for early care and education. In 2005, Kansas added \$804,000 in tobacco money to its \$12.8 million pre-kindergarten budget, and the state expects to retain that funding structure for the next few years.<sup>18</sup> Louisiana used \$1.5 million in tobacco settlement money to supplement its \$58 million pre-kindergarten program, LA4, in 2004. Rhode Island ensures health care coverage for certain child care providers through its publicly-funded health insurance program.

Higher education and crime prevention funding. At least seven states allocate higher education funds to support early care and early education programs on or near college campuses. Similarly, states like Colorado and New York utilize federal and state crime prevention and justice funds to support facility development, subsidize early care, and provide a range of out-of-school time programs and prevention services.

## **Non-Government Program Funding Strategies**

Philanthropic initiatives. Philanthropic organizations across the nation have, for the past decade, allocated substantial fiscal support for early care and education at the local, state and national level. Nationally, much of the financial support is provided for systems development, quality improvement, public education and public will-building campaigns, research and evaluation – that is, efforts to improve quality and encourage federal, state and local investment.<sup>19</sup> Within states, community, family and corporate foundations along with the United Ways provide similar support. In addition, they assist local providers to deal with such immediate crises as making payroll when state funds are late.

In Connecticut, these types of initiatives include the William Caspar Graustein Memorial Fund's Discovery Community initiative; the Hartford Foundation for Public Giving's Brighter Futures program; the Community Foundation for Greater New Haven's First Years First effort; the Children's Fund of Connecticut; the Connecticut Health Foundation's Promoting Health and Learning Initiative; and a number of United Way community-based Success by Six initiatives.

Employer initiatives. While employers contribute only about 1% of aggregate funds for early care and education, they contribute in other ways. A recent survey of business and employer engagement in early care and education<sup>20</sup> found six categories of activity:

- Establishing corporate collaborations to advance dependent care
- Building business-to-business mentoring relationships
- Designing and implementing large-scale media campaigns
- Providing leadership in mobilizing community efforts
- Serving as public policy analysts
- Engaging in funding partnerships, such as participation on United Way Boards of Directors across the nation and contributing to annual United Way fundraising

As one example of a funding partnership, in Alabama, the Employers' Child Care Alliance raises money and contributes to funding services such as resource and referral networks, after-school and summer programs, and child care at non-standard hours. More than three-quarters of the funding is contributed by employers, with additional support provided by AmeriCorps and the National Association of Child Care Resource and Referral Agencies. The initiative is credited with improving the quality of child care for employee children and children in surrounding communities. Other examples of public-private partnerships to improve and expand child care have been chronicled by the Child Care Partnership Project.<sup>21</sup> Employer involvement in early care policy issues often comes within the context of family-work initiatives.<sup>22</sup>



## FOOTNOTES

- 1 This Appendix is an updated version of Section V of *Meeting the Need, Accepting the Challenge: The Connecticut Early Care and Education Cost Model*. The Early Care and Education Finance Project of the Connecticut Early Childhood Alliance, October 2005. The Education Finance Project, a working group of the Connecticut Early Childhood Alliance. More than thirty public and private agencies and organizations contributed to this work, with the goal of calculating the costs of a comprehensive, integrated system of services that support the growth, development and learning of young children.
- 2 *Learning Between Systems: Adapting Higher Education Financing Methods to Early Care and Education*. (July 2001). Lumina Foundation for Education. Online at [www.luminafoundation.org/publications/researchreports/mainLBS.pdf](http://www.luminafoundation.org/publications/researchreports/mainLBS.pdf).
- 3 The Federal Poverty Level is currently about \$19,500 for a family of four, in all states regardless of cost of living differences in those states.
- 4 Oliveira, P. (June 2005). *Separating Fact from Fiction: Myths About the Adequacy of Funding for Care4Kids*. Online at [www.ctkidslink.org/publications/ece05factfiction05.pdf](http://www.ctkidslink.org/publications/ece05factfiction05.pdf).
- 5 Online at [www.nieer.org/yearbook](http://www.nieer.org/yearbook).
- 6 Online at [www.preknow.org/documents/LeadershipReport.pdf](http://www.preknow.org/documents/LeadershipReport.pdf).
- 7 *Votes Count: Legislative Action on Pre-K Fiscal Year 2007*. [www.preknow.org/documents/LeadershipReport.pdf](http://www.preknow.org/documents/LeadershipReport.pdf). Also see Stoney, L. & Edwards, K. (2001). *Child Care Financing Matrix*. Online at <http://nccic.org/pubs/ccfinancingmatrix.html>.
- 8 *Funding the Future: States' Approaches to Pre-K Finance*. Pre-K Now Research Series. Diana Stone, J.D., Washington Appleseed, Seattle, Washington
- 9 Online at [http://www.clasp.org/publications/universal\\_prek.pdf](http://www.clasp.org/publications/universal_prek.pdf).
- 10 Online at <http://nccic.org/pubs/ccfinancingmatrix.html>.
- 11 *Finding the Funds: Opportunities for Early Care and Education*. Human Services Policy Service Center. (January 2003). Online at [www.ncsmartstart.org/national/financing/findingthefunds.pdf](http://www.ncsmartstart.org/national/financing/findingthefunds.pdf).
- 12 States with refundable child care tax credits are: Arkansas, California, Colorado, Hawaii, Iowa, Louisiana, Maine, Minnesota, Nebraska, New Mexico, New York, Pennsylvania, and Vermont. Data from the National Center for Children in Poverty. Online at [www.nccp.org/media/state\\_tax\\_credits\\_trend.xls](http://www.nccp.org/media/state_tax_credits_trend.xls).
- 13 States with credits, indicating "yes" if also offering refundability: DC (yes), Illinois (yes), Indiana (yes), Iowa, Kansas (yes), Maine, Massachusetts (yes), Minnesota (yes), New Jersey (yes), New York (yes), Oklahoma (yes), Oregon, Vermont (yes), and Wisconsin (yes). Online at [www.nccp.org/media/state\\_tax\\_credits\\_trend.xls](http://www.nccp.org/media/state_tax_credits_trend.xls).
- 14 Connecticut was one of these states, but the program has since been discontinued.
- 15 *The Little Engine that Hasn't: The Poor Performance of Employer Tax Credits for Child Care*. National Women's Law Center. (November 2002). Online at [www.nwlc.org/pdf/TheLittleEngine2002.pdf](http://www.nwlc.org/pdf/TheLittleEngine2002.pdf).
- 16 IDEA is the Individuals with Disabilities Education Act. Online at [www.ed.gov/policy/speced/guid/idea/idea2004.html](http://www.ed.gov/policy/speced/guid/idea/idea2004.html).
- 17 Several Connecticut municipalities have received time-limited competitive ELOA awards of \$550,000 to \$1,000,000.
- 18 *Funding the Future: States' Approaches to Pre-K Finance*. (February 2006). Pre-K Now. Online at [www.preknow.org](http://www.preknow.org).
- 19 As examples, see online at [www.preknow.org](http://www.preknow.org), [www.buildinitiative.org](http://www.buildinitiative.org), [www.wkkf.org/SPARK](http://www.wkkf.org/SPARK).
- 20 Gruendel, J., Orlick, H. and Kantor, A. (June 2003). *Business and Early Care and Education*. CT Voices for Children. Online at [www.ctkidslink.org/publications/ece03Business06.pdf](http://www.ctkidslink.org/publications/ece03Business06.pdf).
- 21 Sponsored by the U.S. Department of Health and Human Services, the Administration for Children and Families, and the Child Care Bureau Online at <http://nccic.org/ccpartnerships/home.htm>.
- 22 Online at [www.cvworkingfamilies.org](http://www.cvworkingfamilies.org). One example of a national corporate collaboration established for that purpose is Corporate Voices for Working Families, a nonprofit "corporate partnership organization created to bring the private sector voice into the public dialogue on issues affecting working families." Its 47 corporate members include Bank of America, Deloitte & Touche, and IBM. Corporate Voices for Working Families has issued national reports on early care and education, held forums, testified in Congress and authored an annual EITC Toolkit.

# APPENDIX B

## Projected Preschool Slots by Funding Strategy and Facility Construction Needs Associated with Three Preschool Expansion Scenarios

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2010- 11	FY 2011-12
Scenario A- Base Case					
Incremental New Slots Added	2,045	2,045	2,589	2,589	3,676
Cumulative Slots Added	2,045	4,091	6,679	9,268	12,944
Cumulative Slots Funded with Early Ed. Grants					
Number	820	1,639	2,649	3,814	5,438
Percent of All Slots	40%	40%	40%	41%	42%
Contracted Slots - Cumulative	1,226	2,451	4,030	5,454	7,507
In Existing Facilities	961	1,922	2,450	2,722	2,918
New or Replacement Slots Constructed					
In New Community Facilities (including replacements)	162	320	1,159	2,070	3,458
In New School Facilities	79	163	514	917	1,671
Scenario B- Seven Year Build					
Incremental New Slots Added	1,515	1,515	1,942	1,942	1,942
Cumulative Slots Added	1,515	3,029	4,971	6,912	8,854
Cumulative Slots Funded through Early Ed Grants	0	0	0	0	0
Number	596	1,192	1,950	2,824	3,698
Percent of All Slots	39%	39%	39%	41%	42%
Contracted Slots - Cumulative	918	1,837	3,021	4,089	5,156
In Existing Facilities	658	1,158	1,554	1,758	1,860
New or Replacement Slots Constructed					
In New Community Facilities (including replacements)	154	411	988	1,617	2,268
In New School Facilities	91	264	527	829	1,225
Scenario C- Three Year Build					
Incremental New Slots Added	4,659	4,659	3,627	0	0
Cumulative Slots Added	4,659	9,317	12,944	12,944	12,944
Cumulative Slots Funded through Early Ed Grants	0	0	0	0	0
Number	1,437	2,873	5,050	5,050	5,050
Percent of All Slots	31%	31%	39%	39%	39%
Contracted Slots - Cumulative	3,222	6,444	7,895	7,895	7,895
In Existing Facilities	2,331	4,662	5,605	5,605	5,605
New or Replacement Slots Constructed					
In New Community Facilities (including replacements)	405	808	1,599	2,420	3,035
In New School Facilities	348	698	825	825	825



# APPENDIX C

## Projected Appropriations Associated with Three Preschool Expansion Scenarios

	FY 2007-08	FY 2008-09	FY 2009-10	FY 2010-11	FY 2011-12
Scenario A- Base Case					
Incremental New Slots Added	2,045	2,045	2,589	2,589	3,676
Incremental Additional Appropriation Operations	14,773,832	15,297,571	20,612,150	22,786,393	33,412,118
Additions to Debt Service Fund	2,000,000	4,000,000	4,000,000	4,000,000	0
Total Additional Appropriation	16,773,832	19,297,571	24,612,150	26,786,393	33,412,118
Total					
Total Operations	75,955,832	93,532,078	119,943,217	155,443,592	193,519,018
Total Debt Service Subsidy Fund	6,500,000	10,500,000	14,500,000	18,500,000	18,500,000
Total Program Cost	82,455,832	104,032,078	134,443,217	173,943,592	212,019,018
Scenario B- Seven Year Build					
Incremental New Slots Added	1,515	1,515	1,942	1,942	1,942
Incremental Additional Appropriation Operations	10,954,922	11,345,304	15,466,391	17,121,030	17,634,661
Additions to Debt Service Fund	2,000,000	4,000,000	4,000,000	4,000,000	0
Total Additional Appropriation	12,954,922	15,345,304	19,466,391	21,121,030	17,634,661
Total					
Total Operations	72,136,922	85,646,334	106,465,621	135,031,705	156,717,316
Total Debt Service Subsidy Fund	6,500,000	10,500,000	14,500,000	18,500,000	18,500,000
Total Program Cost	78,636,922	96,146,334	120,965,621	153,531,705	175,217,316
Scenario C- Three Year Build					
Incremental New Slots Added	4,659	4,659	3,627	0	0
Incremental Additional Appropriation Operations	34,258,891	35,555,072	27,554,745	0	0
Additions to Debt Service Fund	2,000,000	4,000,000	4,000,000	4,000,000	0
Total Additional Appropriation	36,258,891	39,555,072	31,554,745	4,000,000	0
Total					
Total Operations	95,440,891	133,859,190	169,780,134	188,031,499	193,672,444
Total Debt Service Subsidy Fund	6,500,000	10,500,000	14,500,000	18,500,000	18,500,000
Total Program Cost	101,940,891	144,359,190	184,280,134	206,531,499	212,172,444

# APPENDIX D

## School Readiness Initiatives Priority and Competitive Grant Districts

### Priority Districts

Ansonia  
Bloomfield  
Bridgeport  
Bristol  
Danbury  
East Hartford  
Hartford  
Meriden  
Middletown  
New Britain  
New Haven  
New London  
Norwalk  
Norwich  
Putnam  
Stamford  
Waterbury  
West Haven  
Windham

### Competitive Districts

Ashford  
Branford  
Brooklyn  
Chaplin  
Colchester  
Coventry  
Derby  
East Haven  
Enfield  
Greenwich  
Griswold  
Groton  
Hamden  
Hampton  
Killingly  
Ledyard  
Lisbon  
Manchester  
Mansfield  
Milford  
Naugatuck  
North Canaan  
Plainfield  
Plymouth  
Preston  
Scotland  
Seymour  
Sprague  
Stafford  
Stratford  
Thomaston  
Thompson  
Torrington  
Vernon  
West Hartford  
Winchester  
Windsor



# APPENDIX E

## Proposal for an Assessment and Accountability System For Connecticut's School Readiness Initiative and Kindergarten

### School Readiness Initiative

An assessment and accountability system for Connecticut's School Readiness (SR) program would support evidence-based decision-making at every level of the initiative.

- It would allow teachers to make evidence-based decisions which are in the best interest of the children in their classrooms.
- It would allow program administrators and principals to make evidence-based decisions about the best way to enhance the quality of their classrooms and programs.
- It would allow policy- and law-makers to make evidence-based decisions about the best use of state resources to achieve their goals for children.

In order to meet these purposes data must be collected at two levels:

- Child-level
- Classrooms and schools/ECE programs-level

These three purposes and the two levels of data collection are summarized in the charts below with recommendations for how this should be done. Each of these projects is described in the text that follows the charts. The discussion and recommendations for preschool and kindergarten through grade 3 are presented separately. Finally, research on the impact of preschool and school programs is discussed in the section on a proposed longitudinal study.

	PURPOSE		
	Improving Teaching and Learning	Program Evaluation and Improvement	System Accountability
Child level	o Preschool Assessment Framework	o <i>School or Program determined</i> <sup>1</sup>	o SR Accountability Project: Children o Longitudinal study (see kindergarten)
Classroom and school/program level	o NA	o SR Program Improvement Project	o SR Accountability Project: Programs

### Preschool Assessment Framework

It is recommended that we continue to require preschool teachers in programs supported by the CT School Readiness initiative to conduct ongoing performance assessments of children in their classrooms for instructional purposes using the CT Preschool Assessment Framework (PAF) or another system aligned with the CT Preschool Curriculum Frameworks. Systematic professional development on this assessment model should continue to be made available.

### School Readiness Program Improvement Project

A general early care and education and targeted School Readiness Program Improvement Project is needed. Program improvement includes standards, assessment and quality improvement components. Ideally there should be one coherent set of standards and one self-assessment process for programs. Currently NAEYC accreditation or an SDE approval is

required for all programs receiving School Readiness and DSS center funds and that accreditation or approval serves as a major way of setting standards and assessing of programs, though not the only way. It is recommended that we maintain this requirement for at least the next year or two while a Quality Rating System (QRS) is developed.

The short term plan for program improvement (next 1 to 2 years) would be to support current and prospective SR programs to meet the new NAEYC accreditation criteria as they undergo re-accreditation. The Accreditation Facilitation Project (AFP) model of providing regional support networks should be maintained to assist programs in conducting the self-assessments and in addressing needs that are revealed in this process.

At the same time a QRS would be developed as a vehicle for both evaluating and enhancing the quality of programs. As the QRS is put in place then the relationship between the accreditation/approval requirement and process and the QRS can be reevaluated. The QRS will take on a greater role for program evaluation and improvement at that time and the role of NAEYC accreditation in quality assessment and improvement for SR programs will be clarified.

As the QRS is developed there should be an effort to integrate the School Readiness self-report and the accreditation self study so that programs are doing one self-assessment. This self assessment should provide the basis for program enhancement plans and support for quality improvements. The Program Improvement Project must have additional resources to help programs improve their staffing and other program components.

The QRS will assign a quality rating to each participating ECE program on the basis of established criteria. These ratings will have some high stakes consequences for programs participating in the School Readiness initiative; there will be a level of quality that has to be met for a program to be eligible for a SR contract or to serve children who have SR scholarships. In addition, there might be a differential rate of reimbursement to programs depending on their rating on the QRS.

### School Readiness Accountability Project

Both child and program levels of measurement are needed for accountability purposes. Together they would constitute the School Readiness Accountability Project. Some of these data would be used in the Results-Based Accountability (RBA) system as population indicators and program performance measures.

Children: A sample of children will be assessed by trained assessors using several standardized instruments. These assessments will take place at the beginning and end of each preschool year. Statewide results will be reported each year to track trends and to inform policy decisions (e.g., part-day versus full-day).

Programs: A sample of programs will be assessed by trained assessors using standardized observational instruments (e.g., ECERS, ELLCO or SELA). The statewide results of these assessments will be reported each year to track trends. These assessments might ultimately become incorporated into a Quality Rating System (QRS) or replaced by something else when the QRS is instituted. This data can be used at a state level to determine what is needed to enhance the quality of programs in the State.

### Kindergarten through Grade 3 Assessment and Accountability

	PURPOSE		
	Improving Teaching and Learning	Program Evaluation and Improvement	System Accountability
Child level	o Kindergarten Assessment Framework	o <i>School determined</i>	o Early Development Instrument o 3rd grade Mastery o Longitudinal study
Classroom and school level	o <i>School determined</i>	o <i>School determined</i>	



## Kindergarten Assessment Framework

It is recommended that a performance assessment be developed for kindergarten with the purpose of improving teaching and learning in kindergarten classrooms. This assessment should be aligned with the Preschool Assessment Framework and the state standards. Part of the development of this instrument might involve adjusting the PAF so that they are perfectly aligned. All kindergarten teachers would use the tool to assess their children and use the information to address the learning needs of the classrooms. The observations for the assessments would be made continuously, but teachers would formally record them twice a year in preparation for conferences with parents.

## Kindergarten Benchmark for Accountability

State and local policymakers need a kindergarten benchmark to determine whether children are starting school ready to succeed. The Early Development Instrument (EDI) is serving this purpose in Canada, Australia and some US states and communities. The EDI is a population measure of children's development done in the kindergarten year by the kindergarten teacher. It could serve as a baseline assessment for the primary grades that could be compared to the Mastery test results in 3<sup>rd</sup> grade.

The EDI could also be used as an indicator of children's readiness for school. Annual trends in the EDI could be reported to track changes in readiness for school in the population. The EDI should be coupled with demographic information<sup>2</sup> on the child such as:

- Gender
- Race/ethnicity
- Prior early care<sup>3</sup>
- Special education (children who are receiving special education services)
- Limited English proficiency
- Enrollment in free and reduced priced meals program

The EDI information for each of these demographic groups could then be reported at both the state and local level. The State, school districts and local councils could use these results for policy and planning purposes. In addition, the results from Connecticut could be compared with those from other states and countries which are using the same instrument. It should be very clear that the results of the EDI cannot be used for high stakes evaluation of particular preschool programs because there is no comparable baseline indicator of the children when they enter particular programs. Early childhood programs serve children who have varying degrees of risk; if the EDI were used to evaluate particular programs without a baseline it would create a disincentive for programs to serve children at greatest risk.

The EDI could take the place of the kindergarten proxy done by kindergarten teachers in 2006-07. The kindergarten proxy is to be done both in the fall and spring but the EDI would only need to be administered once in the kindergarten year for the purposes proposed here<sup>4</sup>. It will need to be administered after the children have had sufficient time to adjust to the kindergarten experience and the teacher has had sufficient time to get to know the children.

## Longitudinal Study

In addition to tracking child and program results from year to year, it will be highly useful to follow the same children overtime. This could be accomplished with a longitudinal research study that would follow a sample of children from preschool through third grade. The children will be assessed each year using a variety of standard instruments done by trained assessors. The EDI in kindergarten and the 3<sup>rd</sup> grade mastery scores could also be part of this data set. The programs and schools in which the focus children participate will be identified and significant elements described in order correlate the outcomes with these inputs. This will provide a more detailed examination of the annual progress children make from preschool entry through the primary grades and the relationship of participation in School Readiness to school performance for various subsets of children.

## FOOTNOTES

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- 1 There is not a state requirement to collect child data for program evaluation or improvement. Individual schools/programs may elect to do this on their own.
- 2 These categories are those used in the Maryland School Readiness annual report.
- 3 Maryland identifies the type of early care and education experienced by the child in the 12 month period prior to starting kindergarten. The prior care types are: Head Start, public school preschool, child care center, family child care, non-public nursery school, home or informal care by parent or relative. Connecticut could add School Readiness as a prior care category.
- 4 The intent of repeating an assessment at the end of kindergarten would be to assess the progress children make during the kindergarten year. However, the results of a pre and post assessment could also be used as a high stakes evaluation of the kindergarten teacher. This creates a reliability challenge when the instrument (such as the Proxy and the EDI) used to assess the children depends on teachers' observations and impressions.



# APPENDIX F

## MEMORANDUM

**To:** David Nee  
**From:** Kim Bohen  
**Date:** October 27, 2006  
**Subject:** Management and Governance Options for Connecticut's Early Childhood Investments

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Attached please find my report to the Council's Subcommittee on Management and Infrastructure. The report examines seven specific alternatives put forth by the committee, in the context of current literature on the subject and interviews with a variety of individuals identified as resources. This paper is intended to highlight the salient considerations and jumpstart the committee's thinking about optimal alternatives. The committee will want to consider further the required functions of the new management/ governance entity(s) and consult key players with a deep understanding of the Connecticut context.

# An Examination of Management and Governance Options for Early Childhood Investments in Connecticut

*Prepared for the Subcommittee on Management and Infrastructure,  
Connecticut Governor's Early Childhood Research and Policy Council,  
By Kim Bohen, Consultant, October 27, 2006*

**Background:** The Subcommittee on Management and Infrastructure of the Connecticut Early Childhood Research and Policy Council requested a brief examination of seven potential governance/management options to administer the state's anticipated new early childhood investments stemming from the work of the Governor's Early Childhood Education Cabinet. This analysis was drawn from a review of the literature on early childhood systems-building and interviews with a select group of individuals from both inside and outside the state (see end of document for a list of sources).

The analysis contains four parts:

- I. Lessons from the field – a general discussion culled from the literature and interviews on important considerations in making decisions about management and governance
- II. Examination of options – a chart outlining the relative merits of the seven options the committee requested be considered
- III. Selected state models – summaries of intriguing management and governance developments in five other states
- IV. Conclusions

## I. Lessons from the Field

The central rule in management and governance considerations is that “form should follow function.” The critical questions are “what will this entity do?” and/or “what needs to be done that is not currently being done?” Will the entity be setting policy or running programs? Or both? Based on the criteria identified by the committee, the following are anticipated functions of the new “entity” in Connecticut. While this list may capture the main functions, these questions deserve additional consideration by the Council to identify more precisely the required functions in order to inform the choice of an optimal management/governance structure.

Function	Description	Current	Considerations
<i>Leadership</i>	Champion improved outcomes for young children and associated public investments	Dispersed among Governor and several Commissioners	Empowerment of a leader with ability to draw others into the work is crucial.
<i>Policy</i>	Review and recommend improvements across the early childhood system	Early Childhood Education Cabinet	Difficult to sustain with the current Cabinet model
<i>Planning and System Building</i>	a) Foster state-level cross-agency collaboration b) Support local capacity development/system-building	No entity has this charge	Crucial function given importance of local early childhood work and need for capacity building
<i>Resource Allocation</i>	Secure, blend and disburse new resources to meet needs	Divided among many agencies	Local communities have strong desire for flexible, decategorized funds
<i>Program Management</i>	Manage new program implementation (e.g. local capacity building, data management and outcome measurement, evaluation)	Divided among many agencies - many anticipated and necessary efforts not currently managed	This function could be handled directly or through oversight of other entities
<i>Fundraising</i>	Attract and manage private funds	Very limited effort at present	Opportunity to leverage and focus new resources from multiple sources
<i>Accountability</i>	a) Establish clear outcomes and measurable objectives for new investments b) Track and report outcomes through systematic data collection and analysis	Ostensibly part of budget process, not fully realized	Aligns with Legislative RBA initiative
<i>Communications</i>	Build knowledge of early childhood among parents and general public, and regarding new investments	Fragmented with no coherent plan or responsibility	Important function of new entity



In addition to the questions of *function*, the following issues surfaced in the research and are important considerations:

1. *No Best Answer* – A consistent message from all sources is that there is no “right answer” to the questions about structure and governance. The best choice depends on a given state’s vision and goals, existing structures, system elements under consideration, political context, state/local balance of authority, as well as formal and informal sources of influence.<sup>1</sup> Basic attributes of good governance include: representative, legitimate, sustainable (across changes in leadership), effective (flexible, accountable, capable of learning), authoritative (capable of marshalling resources).<sup>2</sup>
2. *Solutions are Evolutionary* – The optimal governance structure is likely to shift over time, and timing affects feasibility and ease of implementation. Something that may work in the long term may not be possible to implement in the short term; likewise, something that works in the short term may not be the best long term solution.
3. *Leadership Is Vital* – Any management and governance structure is ineffective in the absence of strong leadership from both the key political and budgetary decision-makers (the Governor and the Legislature), as well as the person(s) charged with leading the new structure(s). Leadership in this context also means *accountability*: desire and willingness to take responsibility for outcomes. While strong and assertive leadership is necessary, another crucial point is that “governance requires the consent of the governed” and that successful change requires the inclusion of both those responsible for implementation and those for whom the system is designed.<sup>3</sup>
4. *Authority* – For any governance structure, it is important to think through questions of authority: How much power does this entity have? Who makes the decisions? Who enforces them? Who can “undo” them?
5. *Build on Strength* – Certain structures lend themselves more readily to certain functions. For example, government is best equipped to make decisions about public investments, program goals and objectives, regulation, and the like. Likewise, it makes sense for a non-profit entity to have functions related to the strengths of the private sector: philanthropic partners are especially well suited to contribute to community capacity building, quality improvement and evaluation; business partners can contribute their expertise in professional development, marketing/communications, and accountability.
6. *Flexibility versus Stability* – Consider whether to create something time-limited (a temporary commission or a new office with a sunset provision) or something with a longer horizon (i.e. something created in statute or an entirely new entity, e.g. a non-profit or a new Department). There are arguments on both sides of the question: e.g. statutory authority insulates and protects; time-limits force evaluation of effectiveness and allow for mid-course corrections.
7. *Don’t reinvent the wheel* – Look at existing organizations both within and outside government that may have the desired capabilities. For example, instead of creating a *new* non-profit organization, investigate whether there is an existing organization that has the capacity to manage certain tasks, thereby securing significant savings in time, capacity-building, administrative overhead, etc. Similarly, look to other states for valuable models (e.g. Smart Start’s performance measurement system).

## I. Examination of Options

The pros and cons of the seven options that the committee is considering are outlined in the following chart. The first four options under consideration are entities that exist or would be created *within* state government. The last two are not governance structures per se, but rather free-standing non-profit organizations that would have their own governance structures, i.e. a Board of Directors, and a best suited to manage programmatic aspects of the undertaking. The fifth option, the quasi-public agency, is a hybrid that would be governed by an independent Board of Directors, but the Board would be appointed in whole or in part by the Governor and the Legislature.



OPTION	PROS	CONS	Functions Best Suited to Perform	DISCUSSION
Early Childhood Education Cabinet with expanded staff for policy and operations	<ul style="list-style-type: none"> <li>- Cabinet already exists in statute</li> <li>- Has some experience with planning, policy analysis and cross-agency collaboration</li> </ul>	<ul style="list-style-type: none"> <li>- Multiple-member body diffuses authority and leadership</li> <li>- Limited jurisdiction over state agencies/ local decision-making</li> <li>- New programmatic functions require additional staffing which begs the question of where to locate the new entity</li> </ul>	- Policy	The Cabinet as currently configured and staffed cannot manage anticipated new early childhood investments. However, if certain functions were handled by another entity, the policy and planning functions could potentially still be handled by a modified Cabinet. Enlarging the Cabinet staff, however, raises the question of where the new staff would reside, which leads to the consideration of other options.
Office for Early Childhood in the Governor's Office	<ul style="list-style-type: none"> <li>- High visibility/ authority of the Governor</li> <li>- Cross-agency reach</li> <li>- Quick, easy to launch</li> </ul>	<ul style="list-style-type: none"> <li>- Dependent on will and authority of the Governor/vulnerable to future shifts in political priorities</li> <li>- Governor's Office does not generally manage programs, not well-suited to house substantial staff</li> <li>- Potentially lose some independence and ability to advocate</li> </ul>	<ul style="list-style-type: none"> <li>- Leadership</li> <li>- Policy</li> <li>- Planning and system building - state level</li> </ul>	Creation of a new entity within the Governor's office would provide substantial visibility and political clout to the early childhood agenda. For political and practical reasons, however, the location would limit the size of the staff, requiring that some of the functions be farmed out to other entities. As early childhood has gained a higher profile nationally, many states have planning entities located within their governor's offices. Rarely, however, do these entities have programmatic functions. If pursuing this option, some suggest creating the entity with a sunset provision (5-8) years to allow for evaluation and evolution.
New commission, office or division within the Office of Planning and Management (OPM)	<ul style="list-style-type: none"> <li>- OPM's budget authority would give new entity influence within government</li> <li>- OPM has leverage over existing funding streams</li> <li>- OPM has stated mission of planning, policy development and interagency coordination</li> </ul>	<ul style="list-style-type: none"> <li>- OPM's fiscal management priorities may limit its advocacy/leadership function.</li> <li>- OPM does not generally manage programs</li> </ul>	<ul style="list-style-type: none"> <li>- Policy</li> <li>- Planning and system-building-state level</li> <li>- Resource allocation</li> <li>- Accountability</li> </ul>	OPM has an existing Policy Development and Planning Division, the stated mission of which covers many of the functions under discussion, including: planning, interagency coordination, data collection and analysis, and policy development. The authority accrued to a new early childhood entity through attachment to OPM would be significant given its budgetary power. However, any potential clout afforded by association with OPM might be mitigated by OPM's emphasis on fiscal management. OPM may not be currently configured to manage the local systems development work, and is unlikely to attract private investment.



OPTION	PROS	CONS	Functions Best Suited to Perform	DISCUSSION
New Department of Early Childhood	<ul style="list-style-type: none"> <li>- Consolidates power and authority in one location</li> <li>- Streamlines system for early childhood services</li> <li>- Elevates visibility of early childhood agenda</li> </ul>	<ul style="list-style-type: none"> <li>- Consolidation in one system creates fragmentation in other systems</li> <li>- Potentially very time-consuming, expensive, and politically charged</li> <li>- Little historical appetite in CT for new Departments</li> </ul>	<ul style="list-style-type: none"> <li>- Leadership</li> <li>- Policy</li> <li>- Planning and system-building-state level</li> <li>- Resource Allocation</li> <li>- Accountability</li> </ul>	<p>A growing number of states have created new Departments of Early Childhood that attempt to consolidate early childhood programs under one roof, sometimes as a separate, free-standing agency and sometimes as a division within an existing agency that already contains a significant share of the early childhood programmatic and budgetary pie. No two states include all the same pieces, however. Even in states that create a single entity, concerns remain that creating a seamless early childhood system by definition creates disruption/discontinuity within other systems, such as education, social services, HUSKY, etc.</p>
Quasi-Public authority	<ul style="list-style-type: none"> <li>- Greater flexibility than government, less red-tape</li> <li>- Easier, quicker to launch than a non-profit, especially if located within an existing authority</li> <li>- Strong accountability mechanisms, experience measuring returns on investments</li> </ul>	<ul style="list-style-type: none"> <li>- Existing CT quasi-publics operate primarily as alternative financial institutions, not managers of programs</li> <li>- Not highly experienced working with communities.</li> </ul>	<ul style="list-style-type: none"> <li>- Planning and system-building-local level</li> <li>- Accountability</li> <li>- Communications</li> </ul>	<p>Quasi-public authorities have dexterity and largely positive reputations with regard to financial issues and accountability, but less is known about their ability to run programs and work with communities. With the exception of Michigan, which is just getting its model off the ground, quasi-public authorities have not been tried in other states for early childhood investments. To the extent that support exists for this entity, many advise locating it within an existing quasi-public such as CHEFA or CDA.</p>
Non-profit organization	<ul style="list-style-type: none"> <li>- More flexible, nimble than government</li> <li>- Independence, some insulation from political climate/changes, can play strong advocacy role</li> <li>- Especially attractive to philanthropy and other private funders</li> </ul>	<ul style="list-style-type: none"> <li>- Lack of authority within government to engage state agencies in collaborative work</li> <li>- Time-consuming and expensive to set up unless located within existing 501c3</li> </ul>	<ul style="list-style-type: none"> <li>- Planning and system-building-local level</li> <li>- Fundraising</li> <li>- Accountability</li> <li>- Communications</li> </ul>	<p>An appropriate role for non-profits is in supporting and improving public systems. The success and proliferation of North Carolina's Smart Start model suggests that a non-profit entity is especially well-suited to support community-level systems building work. The depth and reach of the local partnerships in North Carolina have also proven valuable in insulating statewide investments in early childhood against threats from political and budgetary jockeying. Conversely, its external status has hamstrung its efforts to influence state decisions about Pre-K investments and limited its connection to the school system.</p>
Endowed Trust Fund	<ul style="list-style-type: none"> <li>- Attractive to private funders, especially business</li> <li>- Funding is protected for specified early childhood uses - i.e. "lock box"</li> <li>- Self-sustaining in long term</li> </ul>	<ul style="list-style-type: none"> <li>- Huge initial fundraising task to secure endowment</li> <li>- No authority/leverage over existing public investments</li> <li>- No authority/limited leverage to engage state agencies in collaborative work</li> </ul>	<ul style="list-style-type: none"> <li>- Planning and system-building-local level</li> <li>- Fundraising</li> <li>- Accountability</li> </ul>	<p>The trust fund is a variation on the non-profit option with the distinction of its funding mechanism. While there may be specific functions of the CT system that it would make sense to establish a designated fund for, there is substantial skepticism that CT could raise sufficient private and/or public funds to create a sizable endowment, as well as questions whether this would actually change the size of the overall investments in early childhood or just shift their locus.</p>



## Summary of Form Versus Select Criteria

●= High \*= Medium ○=Low

Functions	Expanded ECE Cabinet	EC Office within Governor's Office	New entity within OPM	New Department of EC	Quasi-Public authority	Non-profit	Endowed Trust Fund
<i>Leadership</i>	*	●	*	●	*	○	○
<i>Policy</i>	●	●	●	●	○	○	○
<i>Planning and system building – state level</i>	*	●	●	●	*	○	○
<i>Planning and system building – local level</i>	○	○	○	○	●	●	●
<i>Resource Allocation</i>	○	*	●	●	*	○	○
<i>Program management</i>	○	*	*	*	*	*	*
<i>Fundraising</i>	*	○	○	○	*	●	●
<i>Accountability</i>	○	*	●	●	●	●	●
<i>Communications</i>	○	*	○	*	●	●	*
<b>Other key criteria:</b>							
<i>Ease of implementation</i>	*	●	●	○	*	*/○	○
<i>Authority</i>	○	●	●	●	*	○	○
<i>Flexibility</i>	●	●	●	○	●	*	○
<i>Stability</i>	○	○	*	●	*	*	●

As discussed, some structures are better suited to certain programmatic aspects than others, so no single entity gets a “High” mark overall.

Ease of implementation is higher if utilize an existing 501(c)3.

## I. Selected State Models

While every state is different, there is growing interest across the nation in the integration of early childhood system components<sup>1</sup> and a number of states are specifically focused on simultaneously building both state and local systems and enhancing collaboration. While it is useful to look at experiences and models from other states, there is no state in which the vision, existing system, political context, etc. are exactly the same as Connecticut's. That said, the following summaries of five state models may be of particular interest to Connecticut.<sup>2</sup>

### Georgia

In Georgia, *Bright from the Start*: the Department of Early Care and Learning is an independent state department with an oversight board. The department includes Pre-K, licensing, quality initiatives, Head Start, Birth to 3 and nutrition programs. Child care subsidies and early intervention remain in the Department of Human Resources and Early Childhood Special Ed remains at the Department of Education. Georgia provides a school-day, school-year pre-kindergarten program for all four-year-olds in the state funded by the Georgia Lottery. The state also has a public/private initiative focused on 0-3 called *Smart Start Georgia* that focuses on child care quality through state and local partnerships.

### Michigan

The Michigan Office of Early Childhood Education and Family Services is located in the Department of Education and houses state-funded Pre-K, preschool special education and Even Start, as well as some child abuse prevention and parenting programs. The Department of Human Services administers child care licensing and subsidies. In 2003, Michigan's Governor Jennifer Granholm announced the creation of the *Great Start System*, a community-based approach to enhancing local systems of early care and education. In February 2005, the state created a new public-private entity, the Early Childhood Investment Corporation (ECIC), to coordinate the *Great Start System*. This quasi-public authority is governed by a 15 member executive committee appointed by the governor, and its mission is to: optimize state investments; support, sponsor, and fund partnerships with communities to promote broad-based programs that provide universal access to quality early education and care for all children from birth to kindergarten; and serve as a central statewide clearinghouse for information, resources, and best practices related to early childhood development, educational opportunities and qualifications for child care providers, community activities that promote early childhood education and care, and parent information and support. The ECIC appointed a new director in May 2006 and is just getting off the ground.



## Minnesota

In Minnesota, private foundations have spearheaded efforts at local-level early childhood system-building. The Minnesota Early Childhood Initiative (MECI) was launched in 2003 through a collaborative venture between the McKnight Foundation (Minnesota's largest foundation) and six independent foundations serving six regions outside the Twin Cities. The model is a community-driven, early childhood planning and coalition building effort. The MECI provides technical assistance as well as funds to help implement local coalition projects. MECI and the local coalitions also work with Ready 4K, a statewide advocacy organization focused on school readiness. To date, MECI has had very little connection to state government. While it sees advantages in being buffered from political winds, it acknowledges that the lack of connection to state agencies limits its ability to diffuse innovation and influence state policy.

Launched in 2005, the Minnesota Early Learning Foundation (MELF) is a new nonprofit organization that is seeking to enhance school readiness among the state's most disadvantaged children. MELF aims to raise money (ultimate goal \$2.6 billion) to create an endowed trust fund that would: 1) provide intensive mentoring (case management) to families from the prenatal period through age 8 to support children's optimal development, and 2) provide scholarships for two years of high quality preschool to enhance the most vulnerable children's readiness for school. The model has a strong "market" orientation built on the premise that financial incentives and performance standards for child care providers based on school readiness indicators will produce results. The plan is to raise money in equal thirds from state, federal and private (business and philanthropic) sources. The MELF Board has impressive representation from the business community and has already succeeded in raising \$10 million. MELF seeks to launch three pilots to test its model in the next year.

## North Carolina

The North Carolina Partnership was created in 1993 under former Governor James Hunt to oversee the Smart Start Initiative. This public/private partnership is incorporated as a 501(c)3 and is governed by a 25-member board appointed either by the Governor or the Legislature. Through the Smart Start Initiative, 82 local partnerships share in a \$200 million appropriation designed to help communities plan and implement programs that support the development of local early childhood systems. The local partnerships focus on child care quality, affordability and accessibility, as well as access to family support and health services; each local partnership is also a separate 501(c)3. The Partnership has oversight over local plans and has a sophisticated performance-based incentive system to evaluate partnerships based on statewide standards and demonstrated improvements. The Partnership has been very successful at raising private resources to support the local systems-development work, as well as to finance its National Technical Assistance Center.

In July 2005, North Carolina established a new Office of School Readiness (OSR) within the Governor's office to consolidate all the state and federally funded Pre-K programs (including Head Start) that previously resided in three different agencies (governor's office, education and social services). In July 2006, in the interest of strengthening the connections between early childhood and the school system, the Legislature approved moving OSR into the state education department (Department of Public Instruction). The Division of Health and Human Services currently handles all child care subsidies, licensing and quality enhancement initiatives through its Division of Child Development, as well as the Infant-Toddler special education, through the Division of Public Health. The state has been in discussions about consolidating the subsidy and licensing operations with the other early childhood components, but although there is legislative interest in this idea, the current Governor is not supportive. As an interim strategy the state is considering a proposal to create an Early Learning Council to improve coordination among the different system components.

## Pennsylvania

In 2005, Pennsylvania launched a comprehensive early learning initiative, but it did not create a new agency. Rather, Pennsylvania created a multi-agency Governor's Early Learning Team. The Team oversees the Governor's new investments in early childhood and is chaired by a new early childhood policy director. The director jointly reports to two state departments: Public Welfare and Education and is a Deputy Secretary (equivalent to a Deputy Commissioner in CT). Pennsylvania started with a *program* office in Public Welfare and a *policy* office in Education, but they are moving to change the Education office to a *program* office to reconcile the fact that they are already running programs (the new state-funded Pre-K), and to provide more direct managerial control over pre-existing early childhood programs in the Education department. When the new office was launched, DPW reorganized and streamlined operations to consolidate subsidy, licensing, early intervention and quality initiatives under the new office. They also reorganized a variety of local consultative groups into new regional planning bodies. There is little connection now between these regional entities and the local education system but the Deputy Secretary hopes to promote greater connections with the schools in the future. In addition, the Early Learning Team

is working as part of the Build Initiative on public-private system-building and collaborative planning.

## II. Conclusions

In shaping its recommendations on management/governance options for Connecticut’s early childhood investments, the committee should:

- Thoroughly analyze anticipated functions and match form to function
- Consider multiple, connected structures
- Maintain flexibility and recognize evolutionary nature of the undertaking
- Build on current centers of strength within and outside State government
- Pay particular attention to leadership

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### *Selected Interviews:*

- Charles Bruner, Child and Family Policy Center
- Gerry Cobb, North Carolina Partnership for Children, Smart Start
- Jeff Daniels, Jeff Daniels Consulting
- Harriet Dichter, Deputy Secretary, Office of Child Development, Pennsylvania Department of Public Welfare & Policy Director, Pennsylvania Department of Education
- Rich Gray, Connecticut Health and Educational Facilities Authority
- Janice Gruendel, Senior Advisor for Early Childhood, Governor’s Office
- Mary Ann Hanley, Connecticut Office of Workforce Competitiveness
- Sharon Lynn Kagan, National Center for Children and Families, Columbia University
- Vicky Marchand, Pathways Mapping Initiative
- Marie O’Brien, Connecticut Development Authority
- Art Rolnick, Minnesota Early Learning Foundation

## FOOTNOTES

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- |   |   |   |   |
|---|---|---|---|
| 1 | Anna Lovejoy, “Governing Early Childhood Systems,” National Governor’s Association, Center for Best Practices, Presentation, National Early Childhood Comprehensive Systems meeting, September 2005.<br><a href="http://www.hsrnet.net/ECCS/materials/lovejoy.ppt">http://www.hsrnet.net/ECCS/materials/lovejoy.ppt</a> | 3 | <i>Ibid.</i>  |
| 2 | Charles Bruner, Child and Family Policy Center, <i>Building Comprehensive Systems for Early Childhood</i> , Presentation, National Early Childhood Comprehensive Systems meeting, September 2005.<br><a href="http://www.hsrnet.net/ECCS/materials/bruner.ppt">http://www.hsrnet.net/ECCS/materials/bruner.ppt</a>      | 4 | “School Success for All: Reorganization Strategies to Strengthen the Early Care and Education System,” Report to the North Carolina General Assembly, April 2006. |
|   |   | 5 | The state summaries were culled from sources cited at the end of this report, interviews and state websites.  |



# APPENDIX G

## Early Childhood Cabinet Strategies

### Immediate Action Items

1. Assure fiscal support for high quality preschool for all 3 and 4 year olds in families that are at least at or below 185% of FPL and increase this income eligibility standard as state resources permit
2. Provide health, mental health, and education consultation to preschool programs to enhance the skills of directors and teachers to meet the comprehensive needs of children
3. Support the design and implementation of the entry to K assessment (Statewide Implementation due Fall, 2009)
4. Develop a comprehensive strategic plan for serving infants and toddlers
5. Address state reimbursement inequities for center-based preschool programs
6. Provide all families/caregivers (including non-custodial parents) with information about child development, prenatal through age eight
7. Support local communities to develop birth-to-eight local councils (e.g. using School Readiness Councils) for planning and monitoring early childhood services
8. Expand eligibility categories in the Birth-to-3 program to include mild developmental delays and environmental risks
9. Ensure HUSKY children receive regular well child visits and an annual developmental assessment
10. Develop a multi-year early childhood workforce professional development plan to assure compliance with state law and selected national certification programs

### Remaining Recommendations

#### Ready Families

- Provide all families with information about how to choose high quality early care and education programs for children ages birth to five
- Increase family access to child development monitoring and early identification systems
- Provide all families with information about developmental and academic expectations for children in grades K-3
- Increase family access to training for parent engagement and leadership development

#### Ready Communities: Building Community Capacity

- Build local capacity to create an early childhood investment plan for each community
- Review “family service hub” models to determine their effectiveness in engaging families, making successful referrals to service providers, providing interagency case coordination and program monitoring, and expand as appropriate
- Research and support implementation of successful practices at the local level that assure efficient cross-agency information sharing, case management, and family involvement in service planning and delivery

## **Ready Communities: Early Screening and Prevention**

- Engage healthcare providers and community groups to increase screening of at risk children
- Expand access to home visitation programs
- Increase access to adult literacy programs and other support services for parents and caregivers of young children

## **Ready Communities: Healthy Development**

- Ensure all HUSKY eligible children are enrolled
- Pilot and evaluate the effectiveness of “medical homes” for at risk children
- Expand pediatric offices use of outreach programs to encourage parents to read to their children

## **Ready Communities: Quality Family Care for Infants and Toddlers**

- Revise and implement CT draft Infant and Toddler Guidelines for early care providers
- Provide sufficient state payment rates for licensed family care for infants and toddlers in families that are at least at or below 185% of the federal poverty level
- Expand support networks for licensed and kith & kin family child care providers
- Assist unlicensed family care providers to become licensed

## **Ready Communities: High Quality Preschool**

- Foster educational models in at risk communities that link preschool and early elementary education, including magnet and charter schools
- Require that all centers receiving state funds implement the Framework or state-approved curriculum within three years
- Provide all preschool programs with the CT Preschool Curriculum Framework and with state-supported training opportunities
- Develop a center-based preschool facility expansion plan that supports public-private development
- Promote cross-income enrollment and family choice of providers
- Support co-location of preschool and kindergarten sites in eligible communities that do not have full-day kindergarten
- Provide technical assistance and venture funding for centers who develop innovative management and fiscal strategies



## **Ready Schools: Transition to School**

- Ensure vertical alignment of preschool curriculum with K-3 framework
- As a readiness proxy measures, conduct annual survey of kindergarten teachers' perceptions of child readiness (2006 through 2008)
- Implement standard process for transition from preschools to kindergarten
- Continue to provide incentive funds for all-day kindergarten for all students

## **Ready Schools: Every Child a Successful Reader**

- Include parents as partners in their child's education through support of opportunities and enhancement of effective, proven adult and family literacy skills
- Track and report on children's grade-appropriate reading progress at the end of K, 1<sup>st</sup> and 2<sup>nd</sup> grades
- Expand role of community and school libraries in public engagement

## **Ready State**

- Create a process for ongoing collaboration among all state agencies with early childhood responsibilities
- Develop a data system that integrates student specific information on preschool and other early childhood experience(s) into the CT Public School Information System or other data management system
- Implement an accountability system that clearly communicates results to the general public
- Implement a public quality rating system for early care and education
- Develop a process – in partnership with higher education -- by which research and other “knowledge development activities related to early childhood investment can be shared with parents, providers and policy makers
- Explore pilot strategies that would permit funding to follow the child

## **Ready Workforce**

- Implement scientifically-based reading research, including on the teacher mentor model, and train all CT preschool and kindergarten teachers in how children learn to read
- Provide training in developmental assessment and early intervention for health care, child care and social service providers
- Increase professional development opportunities for licensed family care providers

*‘Policies and programs aimed at improving the life chances of young children all share belief that early childhood development is susceptible to environmental influences and that wise public investments in young children can increase the odds of favorable developmental outcomes.’*

*National Research Council and Institute of Medicine  
Neurons to Neighborhoods, 2001*

*Connecticut’s Early Childhood Investment Plan (Part I) was prepared and delivered to Governor M. Jodi Rell on December 7, 2006.*

