

# **KECCS Stakeholder Meeting**

## **Welcome**

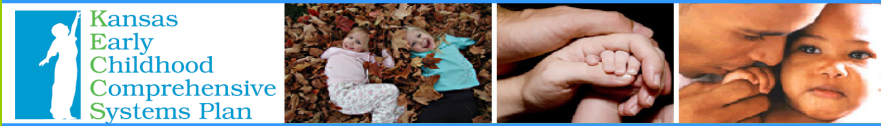
**November 16, 2006**  
**Salina, Kansas**



**Welcome**

# **KECCS Stakeholder Meeting**

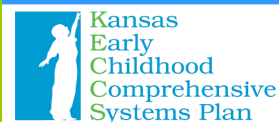
**November 16, 2006**  
**Salina, KS**



# **KECCS Indicators, Outcomes, and Progress**

**November 16, 2006 – Salina, Kansas**

**Jackie Counts, MSW  
Institute for Educational Research & Public Service  
University of Kansas**



## **Objectives**

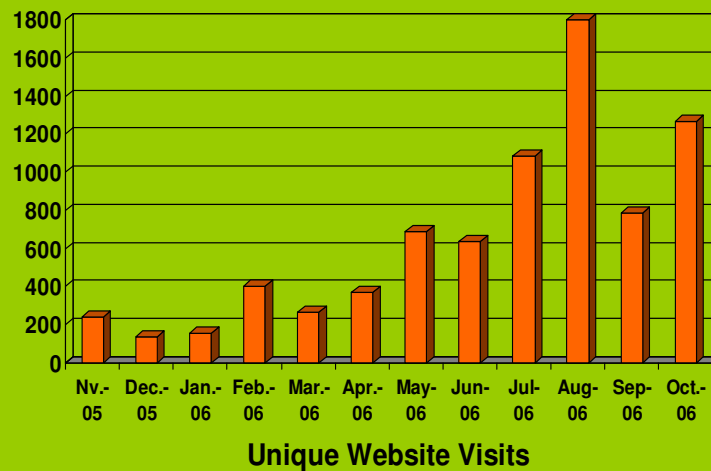
- Provide an update on:
  - Growth
    - Agency participation
    - Website usage
  - Progress toward the five goals
    - Activities and tasks
    - Outcome and process indicators

## Website Usage

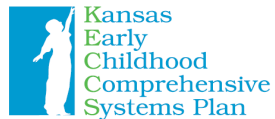
- Statistics since November 2005:
  - Number of unique website visits: **7917**
  - Number of individuals visiting the website: **2196**



## Website Usage



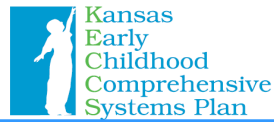
## Website Usage



## Website Facelift

- Initial purpose
  - Communication tool between stakeholders
  - Implementation tracking tool
- New expanded roles
  - Information Gateway
    - Kansas officials and legislators
    - Community members
    - Other states





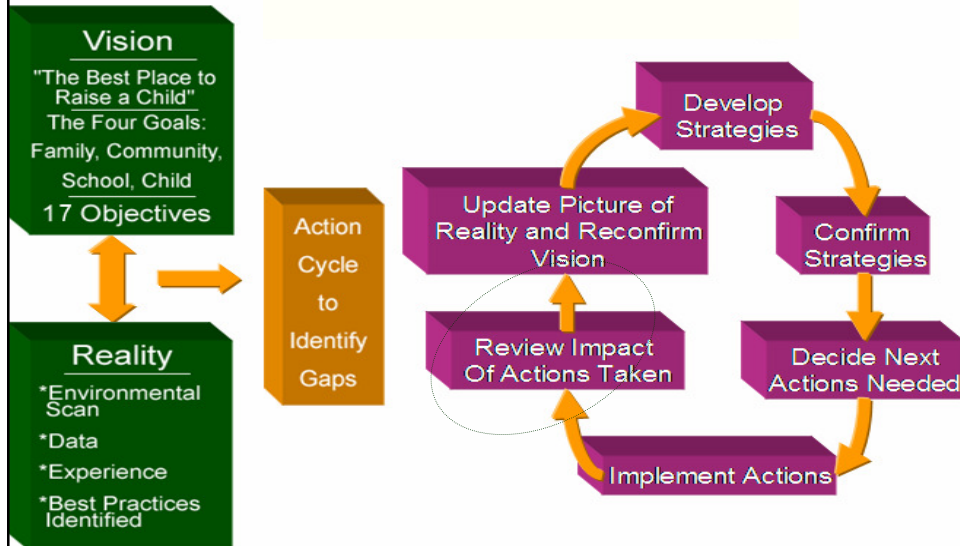
## Continuing Competition

- Grant award received
- Participation in quarterly conference calls
- National evaluation
- Roundtable discussions
- Kansas and the KECCS Plan identified as Best Practice State for collaboration and partners

## ELCC Leadership

- The ELCC:
  - ❖ Meets monthly
  - ❖ Posts meeting minutes on the website [www.keccs.org](http://www.keccs.org)
  - ❖ Initiates strategies in the Plan

## Planning Progress



## Progress Update

- Total progress on the Plan:
  - Total number of activities: **202**
  - Total number of tasks: **139**
- You can view updated progress at:

<http://www2.ku.edu/cgiwrap/%7Eeccs/TRACKINGREPORT.php>


## Goal 1: Health Insurance and a Medical Home

Progress: 45 Activities / 27 Tasks

### Objective 1.1

Increase the percent of births to women having received adequate prenatal care (81.1% in 2003, Vital Statistics).





#### Strategies

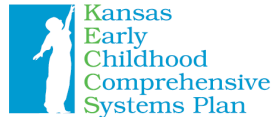
-  Assure outreach, education and ongoing support for pregnant women in underserved populations through collaboration with community providers.
-  Ensure that all women receive early and comprehensive health care before, during and after pregnancy through public awareness.
-  Expand State-funded insurance to provide coverage to all uninsured pregnant women.

### Objective 1.2

Increase the number of children in Kansas who have medical insurance and a medical home.

#### Strategies

-  Assure outreach and enrollment of all children eligible for HealthWave (Medicaid/SCHIP program).
-  Assure that all children, including children with special needs, have care and have a regular source of care (medical home).
-  Strengthen health programs to expand access to services (i.e. oral and mental health.)
-  Develop a health consultation model in Kansas.



## Goal 1: Medical Ins. Med Home Outcome / Process Indicators

### Objective 1.1 Increase the percent of births to women having received adequate prenatal care.

Baseline Outcome Indicators	Value	Goal	Year
Infant Mortality (Per 1000 births)	7.2	▼	2004
Babies with low birth weight	7.3%	▼	2004
Children age 0-8 who are uninsured	7%	▼	2003
Children age 0-8 below 150% federal poverty level and enrolled in State Children's Health Insurance Program	16,263	▼ / ▲	2006
Process Indicators			
Increased the number of Title 19 dental providers from 482 to 522			2005-06
Increased the number of Title 19 medical providers from 11,307 to 11,935			2005-06
Implemented presumptive eligibility determination at 16 Kansas safety net clinics and 3 regional hospitals			2005-06

**Objective 1.2 Increase the number of children in Kansas who have medical insurance and a medical home.**

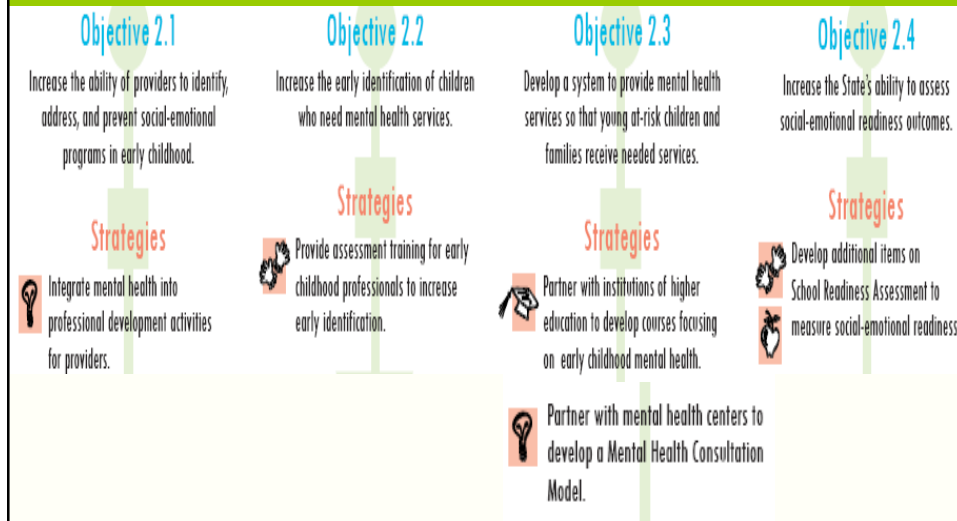
<b>Baseline Outcome Indicators</b>	<b>Value</b>	<b>Goal</b>	<b>Year</b>
Children 0-18 with Special Health Care Needs within a medical home (data not collected regularly)	58.9%	▲	2000
Training offered to child care providers by Kansas Association of Child Care Resources Referral Agencies (total in-service hours)	3843	▲	2005
Training offered to child care providers by Kansas Association of Child Care Resources Referral Agencies (in-service hours for infant-toddler care)	1294	▲	2005
Number of requests for child care placements for children with special needs received by Kansas Association of Child Care Resources Referral Agencies	822	▼ / ▲	2005
Pediatric telemedicine consultations	1100	▲	2005
Children with dental sealants (by 3 <sup>rd</sup> grade)	30%	▲	2004

**Objective 1.2 Increase the number of children in Kansas who have medical insurance and a medical home.**

<b>Process Indicators</b>	<b>Year</b>
<i>Submitted a CATCH grant that would evaluate the needs and barriers to medical home and follow up care for infants and toddlers identified with vision and/or hearing impairments. Award notification will be made by 12/31/06.</i>	2006
<i>Designed and distributed 30,000 Teeth for Two brochures and over 1500 Teeth for Two flipcharts to agencies serving pregnant women and over 100 dental hygienists. Information is also available and distributed in Spanish.</i>	2006
<i>Opened dental clinic in collaboration with Fort Scott Community College Dental Hygiene School</i>	2005
<i>Partnership in Mitchell County with a local dentist to provide oral health education to children and families</i>	2005
<i>Provided fluoride varnishes to 100 children under the age of 5</i>	2006

## Goal 2: Mental Health and Socio-Emotional Development

Progress: 26 Activities / 16 Tasks



 <b>Goal 2: Mental Health / Socio-Emotional Outcome / Process Indicators</b>	
<b>Objective 2.1 Increase the ability of providers to identify, address, and prevent social-emotional problems in early childhood.</b>	
<i>Process Indicators</i>	<i>Year</i>
<i>Held 20 local professional development events on the topic of infant mental health/social-emotional development</i>	2006
<i>Contributed of over \$75,000 in the past 2 years to expand the knowledge base of mental health center staff working with young children.</i>	2006
<b>Objective 2.2 Increase the early identification of children who need mental health services.</b>	
<i>Process Indicators</i>	<i>Year</i>
<i>Issued an RFP to expand or enhance community based mental health services for very young children who experience or are at risk to experience a serious emotional disturbance.</i>	2006
<b>Objective 2.4 Increase the State's ability to assess social-emotional readiness outcomes.</b>	
<i>Process Indicators</i>	<i>Year</i>
<i>Completed review of measures from different states and research projects</i>	2006
<i>Created and administered social-emotional items for School Readiness Assessment based on research</i>	2005-06

## Goal 3: Early Childhood Care and Education

Progress: 93 Activities / 56 Tasks

### Objective 3.1

Increase the number of children receiving high quality early childhood education.

#### Strategies

Implement Kansas Quality Rating System statewide.

Maintain, and where possible, expand the current *Professional Development Initiative*.

Strengthen community collaboration to promote and ensure high quality childcare.

Coordinate public awareness campaigns and messages to increase public and political investment in early childhood development.

Support the needs of providers who serve children with special needs to identify and increase quality services.

Support community economic development.

### Objective 3.2

Increase the number of early childhood programs that are available.

#### Strategies

Promote universal all-day, every day, voluntary kindergarten

Promote universal community-based, school-based, and faith-based preschool programs.

Promote early intervention for children with special needs.

Promote early intervention for children at-risk.

Provide adequate funding for core childcare services of quality early child care, health care, developmental intervention, and education.

### Objective 3.3

Increase the number of schools that provide high quality learning environments.

#### Strategies

Provide developmentally appropriate, inclusive and culturally sensitive training for teachers.

### Objective 3.4

Increase the quality of classroom learning environments.

#### Strategies

Utilize Early Learning Guidelines to align curriculum and standards between community and early childhood programs and public education to cover developmental domains.

Utilize Kansas Quality Standards and Core Competencies for early childhood programs to promote high quality, developmentally appropriate learning environments.

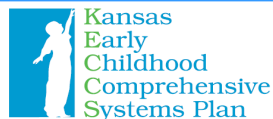
### Objective 3.5

Strengthen relationships schools have with families and communities.

#### Strategies

Develop local and regional range of options for promoting and providing high quality learning environments through collaborations with local school districts.

Target hard-to-reach parents and engage them in the education of their children.



## Goal 3 : Early Childhood Care / Education Outcome / Process Indicators

### Objective 3.1 Increase the number of children receiving high quality early childhood education.

Process Indicators	Year
<i>Trained child care providers on the ASQ and ASQ:SE to administer the ASQ with parents to children</i>	2006
<i>Eight providers attended KQRS training class (Finney, Seward and Scott counties)</i>	2006
<i>Four providers attended a class regarding infant mental health (Finney and Grant counties)</i>	2006
<i>50 providers attended a mini-conference on different aspects of early childcare (Seward, Finney, Stanton, Stevens, Hamilton, and Grant counties)</i>	2006
<i>22 providers attended a class on infant mental health</i>	2006
<i>24 early childhood educators attended a class regarding EXCEL. (Finney County)</i>	2006
<i>Created a coordinated training calendar for childcare providers (Crawford County)</i>	2006
<i>Developed a booklet for early childcare providers about inclusion; provided onsite consultation and support</i>	2005-06
<i>Completed public awareness and TV campaign</i>	2005
<i>Created a Development Wheel for parents</i>	2005
<i>Completed strategic plan to serve children in the least restrictive environment</i>	2005

**Objective 3.2 Increase the number of early childhood programs that are available.**

<b>Baseline Outcome Indicator</b>	<b>Value</b>	<b>Goal</b>	<b>Year</b>
<b>Increase in Part C referrals</b>	<b>5340</b>	<b>▲</b>	<b>2005</b>
<b>Process Indicators</b>			<b>Year</b>
<i>Research on all-day kindergarten made available</i>			<i>2006</i>
<i>Increased at-risk grant by 80 additional students in 3 locations</i>			<i>2005</i>
<i>Increased number of at-risk children served by 6 kids</i>			<i>2005</i>
<i>Hired 2 full-time educators with Safe Schools</i>			<i>2005</i>

**Objective 3.3 Increase the number of schools that provide high quality learning environments**

<b>Process Indicators</b>	<b>Year</b>
<i>Provided training for ECE providers</i>	<i>2005</i>
<i>Completed 6 ESL endorsements</i>	<i>2005</i>
<i>Established 2 new early childhood sites serving 29 infants and toddlers</i>	<i>2005</i>
<i>Made ITV and online training available for participating kindergarten and four-year-old at risk teachers on the school readiness project process of completing data collection</i>	<i>2006</i>

**Objective 3.4 Increase the quality of classroom learning environments.**

<b>Process Indicators</b>	<b>Year</b>
<i>Received child literacy grant that will provide 7 preschools with a literacy coach</i>	<i>2005</i>
<i>Completed Early Learning Guidelines</i>	<i>2005</i>

## Goal 4: Parent Education

Progress: 15 Activities / 22 Tasks

### Objective 4.1

Increase the number of programs that promote parent education on the school readiness developmental domains: physical health, social-emotional development, communication and literacy, mathematical knowledge, and symbolic development.



### Strategies

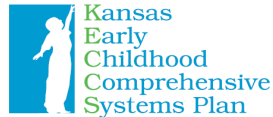
Promote school readiness on the developmental domains.

### Objective 4.2

Increase the quality of parent education programs.

### Strategies

-  Promote, evaluate, and enhance Parents as Teachers and Early Head Start programs.
-  Implement evidence-based practices that increase parental involvement.



## Goal 4 : Parent Education Outcome / Process Indicators

**Objective 4.1** Increase the number of programs that promote parent education on the school readiness development domains: physical health, social-emotional development, communication and literacy, mathematical knowledge, and symbolic development.

Process Indicators	Year
Disseminated at least 1000 updates to inform parents of school readiness	2005
Disseminated chart of developmental milestones that children need to meet to be ready for school, including guidelines and activities for parents to follow/implement with their children	2005
Completed 12 early literacy workshops with 230 parents through 7 public libraries (Butler County)	2005
Developed and distributed brochure on the School Readiness framework and developmental domains	2004
Kansas Reads to preschoolers yearly statewide program	2005
Received Growing Young Readers – Training, Implementation, and Resources grant (Butler County)	2005
Coordinated with pediatricians at KU medical Center to provide parent education	2005

Objective 4.2 Increase the quality of parent education programs.			
Baseline Outcome Indicator	Value	Goal	Year
Children under age 5 visiting ER (Per 10,000 children)	1,074	▼	2004
Process Indicator			Year
Administered parent self-assessment of home strategies to support child learning and literacy as part of the annual School Readiness assessment			2005

## Goal 5: Family Resources

Progress: 23 Activities / 18 Tasks

### Objective 5.1

Increase the number of mothers who are high school graduates.

#### Strategies

- Provide comprehensive services to pregnant and parenting youth to help them complete their high school education.
- Provide funding for child care for all youth with children to complete their high school education.

### Objective 5.2

Increase the number of children living in homes free of violence.

#### Strategies

- Develop a State comprehensive Child

### Objective 5.3

Increase the number of children living in families that can afford basic necessities.

#### Strategies

- Partner with Kansas Department of Social and Rehabilitation Services (SRS) to ensure that eligible families are receiving services.
- Improve efficiencies in referrals to food assistance programs.

### Objective 5.4

Increase the affordability of early childhood programs.

#### Strategies

- Define financing structures for early childhood services including both public and private financing.
- Remove policy barriers to funding at the State and Federal levels.



## Goal 5 : Family Resources Outcome / Process Indicators

**Objective 5.2 Increase the number of children living in homes free of violence.**

<i>Process Indicators</i>	<i>Year</i>
<i>Completed environmental scan of state child abuse and neglect prevention organizations</i>	2006
<i>Presented the Strengthening Families model and ways to support families from a strengths-based perspective to agencies who have received Community-Based Child Abuse Prevention grants</i>	2006

**Objective 5.3 Increase the number of children living in families that can afford basic necessities.**

<i>Baseline Outcome Indicator</i>	<i>Value</i>	<i>Goal</i>	<i>Year</i>
Foster children enrolled in Head Start	193	▲	2004
Low income children receiving subsidized child care	19527	▲	2006
Eligible Kansans who do not receive food stamps	43%	▼	2004

**Objective 5.3 Increase the number of children living in families that can afford basic necessities.**

<i>Process Indicators</i>	<i>Year</i>
<i>Distributed HealthWave applications to families in 11 county area using bilingual staff to provide translation for Spanish speaking families</i>	2005
<i>Developed a protocol for children found in drug endangered situations (Thomas County)</i>	2005
<i>Developed a map available online to show community food resources in each county with links to other state agencies' websites</i>	2005
<i>Increased Food Stamp assistance by 9.6% (cases) and 7.2% (persons) and 15.6% in dollars issued monthly</i>	2006
<i>Developed and distributed brochure comparing the 8 federal/state funded food assistance programs, eligibility requirements, types of benefits available, and where to apply or obtain more information.</i>	2005
<i>Advocated for Senate Bill 243/HB2861 Assistance to Drug Felons to help stabilize families as parents leave prison and reunite with their children</i>	2006
<i>Provided subsidies for 7 toddler slots (Bourbon County)</i>	2006

- Facilitated discussions
  - Parental Involvement
  - Child Care Health Consultation
  - Child Maltreatment Prevention/Early Childhood Partnerships
  - Website recommendations