

Update to the Strategic Plan of the Children’s Board of Hillsborough County TURN THE CURVE Exercises

The Children’s Board of Hillsborough County, Florida is updating its Strategic Plan. In the wake of steadily decreasing revenues and increasing demand for services, it is imperative that our plan focuses on specific results for children, families and communities and the indicators that will enable us to measure these results over time.

The update process follows a Results Based Accountability™ framework. Results Based Accountability (RBA) was introduced to Children’s Board staff, Board of Directors, program partners and members of the community by the method’s creator, Mark Friedman, during a series of workshops held at the Children’s Board in 2009. “Beginning with the end in mind,” results areas with evidence linking them to the target goal of “Children are Succeeding in School by Third Grade” were investigated. Informed by results areas of other Children’s Services Councils in Florida, the Florida Children’s Cabinet, the Pathways to Outcomes Model, and the California, Connecticut and Colorado state-level program models, the Children’s Board has selected the following four results areas :

- Children are Healthy and Developmentally on Track
- Children are Ready to Learn and Succeed
- Children Have Supported and Supportive Families
- Children Live in Safe and Stable Neighborhoods



An extensive search of peer-reviewed research literature was conducted to identify indicators shown to be directly associated with the four results areas and the overall goal. In addition to the literature search, Children’s Board staff and Board members, community members, and social service providers were invited to participate in a series of RBA “Turn the Curve” exercises around each of the results areas on May 10, 16, and 17, 2011.

The purpose of these “Turn the Curve” exercises was to gather knowledge about conditions in our community to ensure the Children’s Board efforts and investments are best contributing toward measurable improvements for young children and their families in Hillsborough County, Florida. Participants responded the following questions about our community:

1. Experience: How would we recognize “Children are Healthy?” How would we experience “Children are Healthy?” What would we see, hear or feel?
2. Indicators: How do we measure “Children are Healthy?” How would we see these experiences in measurable terms? What do we count?

3. Baselines: Where are we now? Where have we been and where are we headed? What path are we on? Where will we be if we keep doing the things we're doing now?
4. Baseline Stories: How are we doing on these indicators? What are the reasons the indicators look like they do? What are the causes and forces at work?
5. Partners: Who are the partners who have a role to play in making these numbers better?
6. What Works: What would work to make these numbers better? What could our partners do? What could be done at low-cost/no-cost?

The transcriptions of the RBA "Turn the Curve" exercises are appended to this document.

Indicators identified in the RBA "Turn the Curve" exercises were assigned to a Result area based on comparison to indicators from the literature and goodness of fit. For example, participants provided "Child Maltreatment Rates" as an indicator for both Children Have Supported and Supportive Families and Children Live in Safe and Stable Neighborhoods, however based on the literature, this indicator was more closely associated with the Children Have Supported and Supportive Families result area.

Once the indicators were verified by results area, they were then grouped into Headline, Secondary or Data Development Agenda categories.

1. **Headline Indicators**

Headline Indicators (also called Priority Indicators) were selected based on their power to communicate to a broad range of audiences, their ability to say something of central importance about the Result topic, and the availability of quality data on a timely basis.

2. **Secondary Indicators**

Secondary Indicators include all of the other identified indicators for which data are available. These indicators will be used to explain data trends (i.e., why conditions improve/worsen).

3. **Data Development Agenda**

The Data Development Agenda includes indicators for which no data is currently collected or not collected on a regular basis. It also includes data in need of repair (e.g., quality, timeliness)

The recommended Headline Indicators are shown in the illustration below. These will be used to track how well the Children's Board's efforts and investments contribute to measurable improvements for Hillsborough County's young children and their families.

The next steps include:

- Locating additional peer-reviewed studies showing how indicators impact Success in School by 3rd Grade
- Locating available, reliable data sources with at least 2 years of data for selected indicators
- Developing graphs to chart "where we've been" and "where we're headed" on these indicators
- Updating the Children's Board Strategic Investment Plan.

~ document created June 6, 2011

POPULATION LEVEL ACCOUNTABILITY

INDICATORS

RESULTS

GOAL

Children's Board Community Level Results-Based Indicators

(List of Indicators with Evidence Linked to Result)

Children Are Succeeding in School by Third Grade

% meeting High Standards in Reading and Math



Children are Healthy and Developmentally on Track	Children are Ready to Learn and Succeed	Children Have Supported, Supportive Families	Children Live in Safe, Stable Neighborhoods
<p><u>Suggested Headline Indicators</u></p> <ul style="list-style-type: none"> • % low birth weight babies • % children in expected height and weight range for their age 	<p><u>Suggested Headline Indicators</u></p> <ul style="list-style-type: none"> • % children ready for kindergarten • # child care centers/homes with quality rating of 4 or 5 "stars" • Student attendance rates 	<p><u>Suggested Headline Indicators</u></p> <ul style="list-style-type: none"> • Child maltreatment rates (age birth-8) 	<p><u>Suggested Headline Indicators</u></p> <ul style="list-style-type: none"> • Crime rates
<p><u>Secondary Indicators</u> (with evidence associated to Result)</p> <ul style="list-style-type: none"> • % birth to teens • % women receiving late or no prenatal care • Infant mortality rates • Child death rates 	<p><u>Secondary Indicators</u> (with evidence associated to Result)</p> <ul style="list-style-type: none"> • # licensed child care spaces for every 100 children of working parents • % child care slots in accredited programs • Student mobility rates 	<p><u>Secondary Indicators</u> (with evidence associated to Result)</p> <ul style="list-style-type: none"> • % families in poverty with children under age 8 • English proficiency rates • Employment status of parents in families with children under 6, by family type • Highest grade or year of school that parent(s) completed • Unemployment rates 	<p><u>Secondary Indicators</u> (with evidence associated to Result)</p> <ul style="list-style-type: none"> • % Home Ownership • Foreclosure rates • % stable, affordable housing available
<p><u>Data Development Agenda</u> (with evidence associated to Result)</p> <ul style="list-style-type: none"> • % children under 8 years old with a medical home* • % children under 8 years old with health insurance* • # of children developmentally on track* • % children fully immunized by 2 years old • % of discharges from emergency room classified as injury for children 0-8 • Length of time since child's last dentist/dental hygienist visit • % parents reporting their children are in good or excellent health • On-time check-ups 	<p><u>Data Development Agenda</u> (with evidence associated to Result)</p> <ul style="list-style-type: none"> • % and # of students retained (grades 1 & 2)* • % of parents who read to their children in the past week* • % child care providers / Out of School Time staff with education or training related to young children • % child care/Out of School Time programs with low staff turnover 	<p><u>Data Development Agenda</u> (with evidence associated to Result)</p> <ul style="list-style-type: none"> • # homeless children* • # children in homes with domestic violence* • Parent engagement* • Economic supports (Earned Income Tax Credit, Individual Development Accounts (IDAs), affordable consumer financial services, etc.) • % children who, on weeknights during the school year, usually go to bed at the same time each night • % families who eat meals together 	<p><u>Data Development Agenda</u> (with evidence associated to Result)</p> <ul style="list-style-type: none"> • % of children who have moved more than once in the past year* • % adults who report their block is safe. • % parents reporting it is very safe for children to play outside during the day in their neighborhood

* signifies a Priority Data Development Agenda indicator

POPULATION LEVEL ACCOUNTABILITY

INDICATORS

RESULTS

GOAL

Children's Board Community Level Results-Based Indicators

(Working to Locate Data Source and/or Evidence Linked to Result)

Children Are Succeeding in School by Third Grade

% meeting High Standards in Reading and Math

 <p>Children are Healthy and Developmentally on Track</p>	 <p>Children are Ready to Learn and Succeed</p>	 <p>Children Have Supported, Supportive Families</p>	 <p>Children Live in Safe, Stable Neighborhoods</p>
<p><u>Data Development Agenda</u> (working to locate data source and/or evidence associated to Result)</p> <ul style="list-style-type: none"> • # Children in out-of-home placement • Average hospital stay for moms and babies • # of children with Vision/hearing problems • # Children using the emergency room for injuries • # pediatricians using appropriate developmental screenings • # children getting well-child checkups • # children with on-time checkups • Substance exposed newborns 	<p><u>Data Development Agenda</u> (working to locate data source and/or evidence associated to Result)</p> <ul style="list-style-type: none"> • % of students with on-task behaviors • # disruptive behaviors • % scoring on-grade-level using the Stanford score • % students excited about school • % students on RTI • % students scoring on-grade-level • % students who are accelerated readers • % children on-target with letter recognition • # children who get appropriate amount of sleep • # children involved with child welfare • # of referrals to Early Steps (0-3) and Child Find (3-5) • # parents using developmentally appropriate toys • # parents in parenting programs • # child care curriculum instructional assessments • # locations/access for developmental screenings • # of children with character skills • # children with appropriate access to TV (<3 hrs/day) • # Days missed from day care • # children on IEP improvement • # childcare facilities closed for violations • Library usage rates • Passing Grades • School performance scores 	<p><u>Data Development Agenda</u> (working to locate data source and/or evidence associated to Result)</p> <ul style="list-style-type: none"> • % parents attending PTA meetings • Parent/Teacher conference attendance rates • Parent education levels • PTA membership • Utility disconnection rates • Eviction rates • Public Housing (# in, # waitlist) • # diverted from formal systems (diversion rates) • # child abuse hotline calls • Suicide rates / attempts • # Institutional abuse reports • # families with social supports • % of families participating in child's child care/out of school time activities • # parents of young children enrolled in adult education • Parents stress 	<p><u>Data Development Agenda</u> (working to locate data source and/or evidence associated to Result)</p> <ul style="list-style-type: none"> • # code violations / # zoning violations • # of positive businesses • Arts/Culture (<i># of arts and cultural events</i>) • # participants in Neighborhood Associations • Emergency response time (<i>Average by responding agency</i>) • Home / business vacancy rate • Public space utilization rates • # Gangs/gang-related activities • # clubs, associations (how often people come together; social cohesion) • # community gathering places (recognized as "the place") • (# of people who have moved more than once in the past 5 years;) • # of available social resources • # activities in community • # Registered Voters • # new jobs, # new businesses • Reciprocity among neighbors • Neighborhood leadership

Summary of Turn the Curve Results

The following is a summary of the responses of the five “Turn the Curve” exercises held with Children’s Board staff and Board members, providers, and community members. The responses have been summarized by the six questions (described at the beginning of this document) asked of participants during the “Turn the Curve” exercise and grouped into categories based on commonality of responses.

I. The Experience portion of the Turn the Curve exercises asked participants how they would recognize or experience one of the Results areas. This helped participants visualize “the ideal,” (e.g., “*Children are Developmentally On-Track*”) thus setting the stage for thinking about ways to measure the Result. Additionally, discussing the Experience associated with each Result served as an “ice-breaker” to get participants to feel more comfortable participating in the group setting.

II. Headline Indicators selected by participants include:

RESULT: Children are Healthy and Developmentally on Track

Headline Indicator: Percent low birth weight babies

Headline Indicator: Percent of children in expected height and weight range for their age

RESULT: Children are Ready to Learn and Succeed

Headline Indicator: Percent of children ready for kindergarten

Headline Indicator: Number of child care centers/homes with quality rating of 4 or 5 “stars”

Headline Indicator: Student attendance rates

RESULT: Children Have Supported, Supportive Families

Headline Indicator: Child maltreatment rates (ages birth-8 years old)

RESULT: Children Live in Safe, Stable Neighborhoods

Headline Indicator: Crime rates

III. Secondary Indicators and indicators suggested for the Data Development Agenda are shown in the tables on pages 3 and 4 of this document. Before a Secondary or Data Development Agenda Indicator is incorporated into the Children’s Board Updated Strategic Plan, an investigation of peer-reviewed studies showing if and how indicators impact Success in School by 3rd Grade will be conducted. Then, the data for indicators found to be associated with one or more of the Results areas will be located for Baselines.

IV. The Baselines compare where participants think we are now in relation to where the indicators were in the past and then projects where we think we will be if nothing is done to “turn the curve” on the indicators. Participants expressed where they felt the indicators were headed (getting better, getting worse or unknown), but did not have the advantage of having data to see the history of the indicators. This will be completed by Children’s Board Research staff.

V. The Story Behind the Baselines investigates the reasons the indicators look like they do and the causes and forces affecting these indicators. The most common reasons cited for increasingly better and poorer outcomes included:

- Recent economic downturn (e.g., unemployment, foreclosures, predatory lending practices)
- Dwindling community resources for families/inaccessibility (e.g., long waiting lists for services)

- Recent political and legislative decisions (e.g., class size amendment, Voluntary Pre-K program, property tax reductions)
- Funding reductions for services (e.g., government, foundations)

A single agency cannot “Turn the Curve” by itself to make conditions better in a community. In the Partners who have a Role to Play section of this exercise, participants were asked about potential partner who have a role to play in improving outcomes for children and their families in Hillsborough County, Florida. The following were mentioned by participants as possible partners:

- *Educational Institutions*, including private schools, Hillsborough County School District, Parent Teacher Associations, and Colleges/Universities
- *Churches* and faith-based groups
- *Scouts* and other service organizations
- *Government Entities*, such as Parks and Recreation Department, law enforcement, social services, and Community Development organizations,
- *Medical Community*, including pediatricians, hospitals, doulas, OB/GYNs, community health clinics, and mental health centers
- *Private Enterprises*, such as insurance providers, child care providers, professional sports teams, Children’s Museum, and the Chamber of Commerce
- *Parents and caregivers*, extended family, informal supports, and youth
- *Other funders*
- *Neighborhood Associations*, citizen community leaders and children’s “Champions”

VI. The final section, What Works asked participants about ways to make the baseline numbers better and what role could the partners play. Participants were also asked to think of some low-cost/no-cost things that could be done. Some ideas include:

- Various *direct services* for children and families and early access to those services/interventions, such as universal developmental screenings, quality child care/out of school time, and legal assistance
- Various *methods of service delivery*, including home visiting services, case management, and neighborhood service centers/one-stop centers
- *Information*, including social marketing, health fairs, internet resources, workshops for parents; it was noted that this information should be easy to understand and in several languages
- *Educational activities*, such as tutoring, mentoring, literacy, employment coaching, financial management skills, and educations for first-time parents
- *Medical Home*, including reminding parents when it’s time for a “child checkup” and coaching by pediatricians
- *Evidence-based* programs, practices and assessment instruments

No Cost/Low Cost Solutions, included:

- Reduced stigma for parents/children / Breakdown assumptions - everyone needs supports
- Informal Supports, such as neighbors helping neighbors
- Easy Information/Facts in language native language; internet sites
- Better communication and coordination among provider partners
- Shared data across systems (CSI or HIE)
- Family/Parent support groups with such topics as appropriate discipline, reading to children, quality family time, father involvement activities
- Capture and utilize quality and positive stories
- Marketing to and buy-in from business
- Parent Night Out and Social Networking opportunities for families
- Volunteer-driven programs such as Neighborhood Watch, High School Students doing community service projects

Appendix

The following pages contain the results of the Results Based Accountability™ “Turn the Curve” exercises held with Children’s Board staff and Board members, community members, and social service providers on May 10, 16, and 17, 2011.

Turn the Curve Exercise
Children are Healthy

<u>Experience</u>	<u>Indicators</u>	<u>Baselines</u>	<u>The Story Behind the Baseline</u>	<u>Partners who have a Role to Play</u>	<u>What Works to Ensure Children are Healthy</u>
Regular eye & hearing exams	Children in out-of-home placement	↑ anemia rates	Economic decline	PTA	Early detection of risk factors
Proper nutrition & sleep	Average hospital stay for moms and babies	↑ mental health issues	Immigration issues	WIC	Accessible Health Care
Car seat safety	Immunization records	↑ autism	Teens want to have children for unconditional love	Parents	Flexible hours for health care
Appropriate birth weight and gestational age	Meeting developmental stages	? Birth defects	Earlier recognition of mental health issues	Pediatricians	More parks for children to play in
Intended, planned pregnancy	Growth chart	↑ c-section	Diagnosis/awareness of autism	Head Start; EHS	Safe neighborhoods for children to play
Parent education	On time well checkups	↑ abuse/neglect reports	Children are less active	Community Health clinics	Breast feeding
Preventable infant mortality	Teen pregnancy	↑ BMI measures	Children's nutrition	Schools	Universal access
Mothers attend prenatal care	APGAR scores	? homeless children	Economic impact on nutrition	Businesses	Out-of-School Time
Ongoing well-baby checks	Infant mortality rates	? migrant children	Schools impact on nutrition	Out of School Time programs	Structured physical activity
Safe living environment	Days missed from day care and/or school	? teen pregnancy rates	Economic stress creates mental health issues	Insurance providers	Neighborhood service centers
Mother-infant bonding	Vision/hearing results	? ER reports for child injury	Mental health history of parents/family	DCF	Health fairs
No parental depression	Child death rates	? ER use as primary care for children	Parental drug use	Medicaid	Comprehensive Sexual education
Mothers are nursing	★ Low birth weight births	? children involved in activities outside the home	Generational Gap/What is healthy? Ideas hard to break	Parks & Recreation	Free/low cost workshops for parents
Primary medical home	Parental substance abuse		Homeless families with young children	Teen Pregnancy Centers	Better use/knowledge of 211
Mothers/Parents are drug-free	Substance exposed newborns		Children with disabilities	Jobs/Economy	Car Seats
Age of parents	Insurance enrollment rates		Children using hospitals for primary care	Law Enforcement	Transportation that can move families to services
Multiple births/span between births	Sustained insurance coverage		Search Institute Asset studies	Government	Champions for healthy children
Confident parents				Scouts	Parenting classes
Mothers are healthy before pregnancy				Information from Surgeon General	Team activities for health and social development
Co-sleeping rates				Hospitals	
Availability of and low-cost screening				Doulas	
Reduce disparities				Ob/Gyn	No Cost/Low Cost Solutions:
Mom/Dad groups				Early Steps	Informal Supports
Children safe in cars				Media	Easy Information/Facts in language you speak
				Churches	Better communication by partners on behalf of families
				Mental Health Centers	Breakdown assumptions, everyone needs supports
				Shelters	Sites like "texts for babies"
				Childcare Centers	Parent to parent support
				Shelters	Father involvement activities
				Professional Sports Teams	

★ Identified by participants as a possible Headline Indicator

Turn the Curve Exercise
Children Are Developmentally On-Track

<u>Experience</u>	<u>Indicators</u>	<u>Baselines</u>	<u>The Story Behind the Baseline</u>	<u>Partners who have a Role to Play</u>	<u>What Works to Keep Kids Developmentally On-Track</u>
Get well-child check ups	# children "on track" on developmental screening	↓ # children in child welfare system due to new guidelines	Transition from Part C (Early Steps) to Part B (Child Find); children nearing 3 years old are losing time in transition	Early Steps (0-3) IYC	ALL children have access to developmental screening (Universal Access)
Early identification of concerns (e.g., speech)	# children getting well-child checkups	? Kindergarten Readiness Screening results hard to interpret – not measured with same instrument over the years	Pediatricians suggesting to Parent to wait "...the child may grow out of it."	Child Find (3-5)	Home visiting services using developmental curricula
Preschools offer speech, hearing, vision screenings	# children involved with child welfare	↓ # children accessing early intervention services due to funding cuts	Pediatricians may not have knowledge of community resources to assist parents	Quality child care providers	Early Steps assessment before age 3
Children in childcare are appropriately engaged	★ # of children with typical screening results (ASQ, ASQ-SE, etc.)		Pediatricians may not have knowledge of cultural differences	Pediatricians, medical community	Medical Home
Domains on track (cognitive, fine motor, gross motor, language, social-emotional, physical, communication, problem solving)	# of referrals to Early Steps (0-3) and Child Find (3-5)		Well-child checkups don't typically happen between 24-36 months where major developmental delays may not be identified as early as possible	Parents & care givers	Quality child care
Parents have knowledge of appropriate child development	# pediatricians using appropriate developmental screenings		Part C eligibility criteria changes based on available funds	Hillsborough Co Schools Early Learning Program	Evidence-based programs, practices and assessment instruments
Children experience quality childcare	# parents using developmentally appropriate toys		Increased length of time between identification & SUCS to the baseline, especially with developmental gains/child loses in short time	Qualified providers of early childhood services	More communication to families on what is "normal development" and how they can help
Children do not experience maltreatment/abuse/neglect	# parents participating in available parenting programs		Child Find follows school system calendar; not available year-round	Child care-related partners	Reminders to parents for "child checkup"
Intervention screening/assessment services are readily available	# uninsured children		No single place all young children touch (harder to track than school-aged children)	Home-schooled parents/providers	Bi-lingual literature on child development at time of birth (e.g., in hospital)
Broad "net" of screeners for developmental delays	★ # children scoring "ready for school" on Kindergarten assessments		Parents may be in denial of their child's delays and refuse services	Private school parents/providers	Child care curricula & assessment prompt provider to assess developmental progress
Child Care will have proportional males & female care givers	# child care curriculum instructional assessments		Parents do not want their child "labeled"		Assets in the neighborhood/community that are "naturally occurring" & free (e.g., Community Screening Initiative with consistent standards)
Children have unstructured access to outside play	# locations/access points for developmental screenings		Abuse/neglect is under-reported		Tutoring / peer tutoring
Providers are consistently using screening measures (HV programs, child care, child welfare)	# of times developmental screenings are held		More screening & identification now than in the past; consistent across all types of providers		Training for "trauma-informed" practice
Children are happy, healthy, and wanting to learn	# of kids screened with "40 Developmental Assets" instrument		Time for parents to navigate services (proactive vs waiting for parents to participate)		Reduced stigma for parents/children
	# of children with character skills				Education for first-time mothers and dads
	Free/Reduced Lunch rates				Transportation
	# families in affordable housing				No Cost/Low Cost Solutions:
	Employment rate				Shared data across systems (CSI or HIE)
	# families with social supports				Mentors
	# children assessed with "Family Map" instrument				Parent involvement and understanding
	# children with appropriate access to TV (<3 hrs/day)				Appropriate discipline
	# children who get appropriate amount of sleep				Family support groups

★ Identified by participants as a possible Headline Indicator

Turn the Curve Exercise
Children Are Ready to Learn and Succeed

<u>Experience</u>	<u>Indicators</u>	<u>Baselines</u>	<u>The Story Behind the Baseline</u>	<u>Partners who have a Role to Play</u>	<u>What Works to Help Children Learn and Succeed</u>
FCAT scores	ASQ scores	↑ Upward trend in FCAT scores	Economic downturn	Parents	Activate PTAs where they don't exist
Parent involvement	% of students with on-task behaviors	↑ Increase in afterschool programs	County Parks and Recreation pulling out of afterschool	School District	More quality learning programs
Children attend VPK	% parents attending PTA meetings (Parent Involvement)	↑ Increase in research to support early brain development	The Gates Empowering Effective Teachers effects	Pediatricians	Early Access to interventions
Less retention	% of children absent <21 days (Absences)	↑ Increase in quality rating system	Class size amendment	Law enforcement	Coaching by pediatrician
All children are supported	% of students suspended	↓ Decrease in "F" schools	Quality rating – emphasis/awareness of quality on development	POST	Parent knowledge
Safe at home and school	% of students expelled	↑ Increase in 4-year olds being expelled	Community support for quality	Business	Support to parents lacking knowledge and skills
Good social skills ; play well; socially open	# disruptive behaviors	↑ Increase in research and mental health	Increased volunteerism from universities	Faith-based organizations	Establish quality standards across board
Basic needs are met	% scoring on-grade-level using the Stanford score	↓ Some decrease in OST availability in certain areas	Advocacy by parents on behalf of children	Free on-line webinars	Every elementary school should be a magnet
Classroom Behavior (Listen, follow directions, sit still, participate	% students excited about school	↑ Increase awareness of childhood obesity	Implementation of VPK	Sesame Street	Every school should be an "A" school
Access to healthcare	% students on RTI	↑ Increase in healthy nutrition options	Importance/emphasis on early literacy	Accreditation systems	High quality learning experiences for every child
Nourished, rested children	# students reading books at grade level	↑ Increase in structured learning prior to kindergarten	Ms. Obama Let's Move – anti-Obesity campaign	YMCA, BBBS, ELC, Boys & Girls Clubs, Children's Museum, Parents as Partners, Bess the Book Bus	Stable families; Safe and stable home environment
Have uniforms and supplies	% of students promoted to next grade	↑ Increase understanding of cultural issues		Libraries	Educate parents/teachers to be nurturing
Children have two-way communication with adults	★ % children ready for kindergarten			Universities	Every child/family has access to Parents As Teachers
Stress is limited	% students scoring on-grade-level using the FAIR test scores			OT, Speech professionals	Quality teacher-child interaction
High quality school	% students who are accelerated readers			Other funders	No Cost/Low Cost Solutions:
Happy	% children on-target with letter recognition				More coordination by partners
Enthusiasm for school, on time to school	% of children developmentally on target				Parents read to children
Family has constant income, stable housing	% if parents who read to children				Capture and utilize quality and positive stories
	★ # quality child care centers				Quality family time
					Marketing to and buy-in from business
					Low cost tutoring

★ Identified by participants as a possible Headline Indicator

Turn the Curve Exercise
Children Have Supported and Supportive Families

<u>Experience</u>	<u>Indicators</u>	<u>Baselines</u>	<u>The Story Behind the Baseline</u>	<u>Partners who have a Role to Play</u>	<u>What Works to Help Families Feel Supported and Supportive</u>
No abuse/neglect	High School dropout rate	↑ domestic violence	Can still be supportive parent w/o education	Family	flexible dollars
Parents are relaxed	Teen pregnancy rate	↑ utility disconnects	School open flexible hours	Schools	additional resources for schools
Children getting good grades	# licensed childcare facilities (centers, homes)	↑# abuse reports	School has variety of ways to communicate	Family Support programs/centers	Response to Intervention (RTI)
Parents educated	★ Child maltreatment rates	↑ # homeless	Foreclosure rates can be affected by investors	Faith Based organizations	Mentors
Children nurtured	Parents stress	↑# foreclosures	Limited funding for public housing reduces access to amount of available housing	Law Enforcement	Healthy Families
Family has social supports	School attendance (truancy, tardiness) rates	↑ Poverty	Funding reductions affect available resources	Library	Home Visiting Model
Children attend school regularly	Parent/Teacher conference attendance rates	↑↓ School scores	Family more stressed due to economy and fewer supports	Recreation (Little league, scouts)	Response to Intervention (RTI)
Parents involved with school	Passing Grades	? Public Housing waitlist	Young parents don't have less education	Medical Providers	Mental Health Treatment
Parents employed	Parent education levels	↑ abuse reports	No dropout data for Home Schooled	Neighborhood Associations	Parent Support Programs
Parents able to pay bills	PTA membership	Unemployment (too high)		Insurance	Parents as Teachers
No behavior problems	# activities in community			Business/Corporate sector	Afterschool Programs
Parents attentive, one on one time	★ Incidence of Domestic Violence			Extended Family	Ed Venture
Family participates in community activities	Utility disconnection rates			Mental Health Providers	Head Start
Family practices their faith	# of homeless Family			YMCA	One Stop Centers
Family uses community resources	Foreclosure rates			Workforce Development	HIPPY
Parents have access to health/mental health care	Eviction rates			Adult Education programs	PBS
Parents have access to transportation	Public Housing (# in, # waitlist)			Transportation	Case Management
Employers support Family	Unemployment rates			Prevent Child Abuse Florida	FASST
No domestic violence	Poverty rates				Family Team Conferencing
No crime	# Registered Voters				Family Support Centers
No substance abuse in Family	# Family supports used				Social Marketing
Family has prenatal and perinatal supports	211 utilization				Front Porch Programs
Education on child development	Family support center utilization				Community Partnership for Protection of Children
Access to high quality, affordable childcare	# diverted from formal systems (diversion rates)				Neighbors Helping Neighbors
Family accepts services	# child abuse hotline calls				Circle of Parents
	School performance scores				Partner with nontraditional agency
	IEP improvement				
	# new jobs, # new businesses				
	Suicide rates / attempts				
	Adult education enrollment				
	# Institutional abuse reports				
	# childcare facilities closed for violations				No Cost/Low Cost Solutions:
	Library usage				Parent Night Out
	Emergency Room usage				Social Networking opportunities
	Childhood injuries				

★ Identified by participants as a possible Headline Indicator

Turn the Curve Exercise
Children Live in Safe and Stable Neighborhoods

<u>Experience</u>	<u>Indicators</u>	<u>Baselines</u>	<u>The Story Behind the Baseline</u>	<u>Partners who have a Role to Play</u>	<u>What Works to make Safe and Stable Communities for Children</u>
Ask residents for measures of success	★ Crime rates (by adult, juvenile, etc. and by type i.e., violent, nonviolent, Domestic Violence)	↓ Crime in general is going down	Crime:	Adults / Individuals in the Community	Tutoring/mentoring
Trick or Treat	Infant mortality rates	↓ Long-time home stability	Crime is down in general, but criminal activity us going up	Faith-based organizations	Literacy
Parks are full of kids	Student mobility in schools		Domestic Violence and Child Abuse Reporting issues	Family organizations	Employment Coaching
Kids are playing in yards, playing outside	# code violations / # zoning violations	↑ Incidence of Domestic violence is going up		“Guardians”	Skills classes
Parents are stable and drug-free	High school attendance rates	↑ Foreclosure rates are going down	Housing:	Block captains	Education
Walking neighborhoods	PTA /school involvement (<i># families participating in PTAs/schools</i>)	↑ Eviction rates are going down	“Housing bubble” (Inflated house prices)	Community Leaders	Financial Education/Management
Neighbors know children	Access to health care (<i># insured families</i>)	↑ Child abuse	Predatory lending practices	Non-traditional community leaders	Legal Services
Other adults in kids lives	★ Foreclosure rates			Citizen community leaders	Primary Interventions
Feeling of reciprocity between neighbors; give & get among each other	# of positive businesses			Schools	Outreach to Families (wrap around)
Parent engagement	Arts/Culture (<i># of arts and cultural events</i>)			Law Enforcement	Increase protective factors
Long-term residents	# participants in Neighborhood Associations			Park and Rec Dept	Figuring out how to let people help/contribute
People sitting on their porches	Emergency response time (<i>Average by responding agency</i>)			Other funders (BOCC, UWTB)	Search Institute information
Law enforcement is a positive contributor	Home / business vacancy rate			Medical Community	Need a longitudinal study of impact of Domestic Violence prevention curriculum with young children
Healthy homes (mold)	Home ownership rate / renter rate			Mental Health community	
Sidewalks and good lighting	Child maltreatment rates			Social Service agencies	No Cost/Low Cost Solutions:
Local shops	Public space utilization rates			Neighborhood businesses / Chamber of Commerce	Informal supports
Traffic control	Literacy rates			College/University	Volunteer-driven programs
Well-cared-for homes	# Gangs/gang-related activities			Institutional and specialty groups	Churches
Strength of neighborhood schools	Employment rate (adults in stable jobs)			Community Development organizations	Neighbors helping neighbors
Every child is connected with 3 non-family members (adults)	# clubs, associations (how often people come together; social cohesion)			County and Local Government	Scouts
Transportation	Stable and affordable housing (# of people who have moved more than once in the past 5 years; average cost of homes)			Youth	Neighborhood Watch
	# of available social resources (to help when there is a need, responding to emergencies)				High School Students doing community service projects
	# neighborhood child care resources				
	# community gathering places (recognized as “the place”)				
	Neighborhood leadership				
	Reciprocity among neighbors				
	# homeless students (<i>under age 8</i>)				

★ Identified by participants as a possible Headline Indicator

