

Leadership Agenda and Strategic Progress Report 2007-2008

Early Childhood Iowa Leadership Agenda and Strategic Progress Report

Vision: Every child, beginning at birth, will be healthy and successful.

Results Areas	Purpose	Guiding Principles
 Healthy Children Children Ready to Succeed in School Secure and Nurturing Families Safe and Supportive Communities Secure and Nurturing Early Care 	Be a catalyst in the development of Iowa's comprehensive, integrated early care, health, and education system.	 Broad Based Representation Respect Responsiveness Informed Decision Making Agent of Change

Who we are:

Early Childhood Iowa (ECI) is an alliance of stakeholders in early care, health, and education that affect children age zero to five in the State of Iowa. Its purpose is to support a comprehensive, integrated early care, health and education system for Iowa. All activities of the system are aligned around a common vision for Iowa: *Every child, beginning at birth, will be healthy and successful.*

How we do our work:

and Education Environments

Membership is voluntary and open to anyone self-identifying as a "stakeholder" in Iowa's early care, health, and education system. The process for membership will be with as few barriers or constraints as possible. Individuals seeking membership should agree to the vision for an early care, health, and education system in Iowa and to the principles and core beliefs of the ECI Stakeholders.

The structure of ECI includes six system component groups that describe the necessary elements of an effective and comprehensive early care, health, and education system, as well as a State Agency Liaison group and a Co-chairs group. Membership in each component group is open to anyone with an interest in the unique responsibilities of a implementing an early care, health and education system.

**Result Areas = The desired conditions of well-being that we want for our children, families, and communities as a result of the early care, health, and education system in Iowa.

Significance of Goal Measures and Indicators:

Result indicators depict a momentary snapshot of the state's status in specific measurable areas, which allows for analysis of trends over time. Indicators are linked to the result area which is most appropriately connected to the measure. Indicators do not necessarily capture an all-inclusive population set. Goals and measures differ from indicators in that ECI has defined measurable goals of the early care, health, and education system in relation to the result areas. Each measurable system outcome was decided following systemic goal prioritization based upon existing and emergent needs evaluation. Indicators, goals, and goal measures in combination reveal strengths, weaknesses and progress in the existing early care and education system. Analysis of this data directs actions and counsels early childhood decision makers to move forward in early childhood system development.

Desired Results and Priority Goals:

Desired Result	Priority Strategic Goals
Healthy Children	 Increase access to and utilization of social, emotional and mental health services Increase access to and utilization of preventative health care services
Children Ready to Succeed in School	 Increase access to affordable quality early learning environments for all children Increase the capacity of schools to be ready to meet the educational needs of all children
Secure & Nurturing Families	 Increase positive relationships between children and parents Increase effective opportunities to learn about child development and parenting skills
Safe & Supportive Communities	 Increase the safety of young children and families in their communities Increase community investment in the early care, health and education system
Secure & Nurturing Early Care & Education Environments	 Increase the number of quality early care and education environments for all children Increase parent and community demand for quality in early care and education environments

T	These ECI Strategic Plan goals were prioritized by the Early Childhood lowa stakeholders on September 12, 2007.	
Result Area:	Healthy Children	
Result Indicator	Indicator: Low Birth Weight Percent of Low Birth Weight Source: Vital Statistics (2006) Iowa Department of Public Health	Low Birth Weight (Live Births under 2,500 grams) 7.50% 7.00% 6.50% 6.50% 6.00% 5.50% 2001 2002 2003 2004 2005 2006
	Infants born weighing less than 2,500 grams (5.5 pounds) are at greater risk for physical and developmental problems than infants of normal weight. Children who are born at a low birth weight are at higher risk for long-term illness or disability and are more likely to be enrolled in special education classes or to repeat a grade.	Short Term Trend: After two years of increased percentages of low birth rate the trend has decreased to 6.95%. The trend downward may be contributed to improved quality of care and increase access to service and care to improve health behaviors of mothers.
Result Indicator	Indicator: Immunized Children Rate of Immunization by age 2 Source: Iowa Department of Public Health Bureau of Immunization (2006	Immunizations (Public Clinics Only) 100.0% 95.0% 90.0% 88.0% 91.3% 90.0% 85.0% 80.0% 2001 2002 2003 2004 2005 2006
	Late or missing immunizations can result in preventable illnesses that can lead to long-term physical and developmental problems. Receipt of timely, age-appropriate immunizations may indicate that a child has access to regular medical care.	Short Term Trend: Immunizations rates are steadily improving and the data suggests Iowa's 2 year olds are adequately immunized. However, the data are only reflective of the public sector and not the private sector. Iowa needs to continue current strategies and support linkages between public and private sector data.

Result Area:	Healthy Children	
	 Priority Strategic Goals Increase access to and utilization of social, emotional and mental health services Increase access to and utilization of preventative health care services 	
Goal and Measure	GOAL: Increase access to and utilization of social, emotional, and mental health services MEASURE: Percent families reporting access to behavioral health services Sources: Iowa's Child and Family Household Health Survey 2000 & 2005).	Children Needing Care for Behavioral or Emotional Problems Iowa's Child and Family Household Health Survey 20.0% 15.0% 10.0% 2.9% 2.5% 0.0% 2005
	In Iowa, 18,000 children ages birth to three need social or emotional services each year. This means one in five young Iowans experience the early signs and symptoms of mental disorders.	Short Term Trend According to the survey conducted with families, they reported having mediocre access to behavioral health services. This survey was conducted in 2003. Since then, 1st Five Healthy Mental developmental screening initiative estimates that between FY 06 and FY 07, 22,000 children 0-5 yrs. were impacted by enhanced developmental screening. By the end of FY 08, an estimated 20,000 additional children will be impacted by 1st Five.
Goal and Measure	GOAL: Increase access to and utilization of social, emotional and mental health services MEASURE: Percent of children 0-3 years old utilizing Early ACCESS (DE)	Early ACCESS Percent of Children 0-3 years-old utilizing Early ACCESS 3.00% 2.50% 2.00% 1.70% 1.50% 1.00% 0.50% 2.002 2003 2004 2005 2006

Result Area:	Healthy Children	
	Early ACCESS, or Part C of IDEA, provides services and service coordination to children under the age of three and their family who experience a 25% delay in one or more areas of growth or development or have a condition or disability that is known to have a high probability of later delays if early intervention services are not provided.	Short Term Trend: The state goal has been increased to 2.5% of all children, 0 –3 years old being served by Early ACCESS. Since 2001, Early ACCESS has seen increased program participation. In 2006, the state goal was exceeded. Source: Early ACCESS, 2006
Goal and Measure	GOAL: Increase access to and utilization of preventive health care services MEASURE: Percent of children reporting access to health care	Access to Health Care Child and Family Household Health Survey 94% 93% 92% 91% 90% 89% 88% 2000 2005
	Children without health coverage are less likely to have a regular source of medical care, are more likely to receive care in a hospital emergency room and are less likely to receive treatment for injuries or to be immunized. Healthy, insured children perform better in school because they are less likely to suffer from treatable conditions such as asthma, ear infections and vision problems that interfere with classroom participation and attendance.	Short Term Trend The percent of families (children) declaring access to health care has decreased since 2000 by an estimated 3 percent. Using population estimates; approximately 17,400 of Iowa's youngest children were not covered by private or publicly funded health insurance at any point during the year. Source: Kids Count 2006; Woods and Poole Population Estimate, 2004

Result Area:	Healthy Children	
Goal and Measure	GOAL: Increase access to and utilization of preventive health care services MEASURE: Early Periodic Screening Diagnosis & Treatment (EPSDT) screening rates	Children Receiving EPSDT Screen (Medicaid Children only) 100% 100% 100% 97% 100% 100% 90% 80% 70% 2002 2003 2004 2005 2006 2007
	EPSDT Screening is a comprehensive screen to identify health related conditions and provide referrals for diagnosis and treatment.	Short Term Trend According to the CMS 4.16 Report, 100% of the children 0-5 years received an EPSDT screen. Only in 2005 did the measure waiver from a consistent 100% screening rate. These rates capture only children utilizing Medicaid. *Data varies from previous reports because compilation methods have shifted slightly.

Result Area:	Children Ready to Succeed in Schools	
Result Indicator	Indicator: Pre-Literacy Skills Percent of children entering kindergarten who are proficient in "Beginning Sounds" and "Letter Naming" Source: Project Easier (2006-2007) Iowa Department of Education	Children with Preliteracy Proficiency Skills 80% 60% 40% 20% Beginning Sounds ■FY 2004 ■FY 2005 ■FY 2006
	Many Iowa Districts use DIBELS to assess the school readiness of children entering kindergarten. Research indicates that DIBELS is predictive of a child's future reading success. The measurement denotes the percent of children who are proficient in recognizing beginning sounds (benchmark = 8) as measured by DIBELS	Short Term Trend: In the fall 2006, 56% of children entering kindergarten were proficient in recognizing beginning sounds on the DIBELS. This is a slight, 3%, increase from fall 2005 and indicates upward movement toward the 2004 percentage of 66%. The data demonstrates the need for additional high quality, early learning programs with an emphasis on research-based early literacy strategies to better prepare children for school success. Source: Iowa Department of Education, BEDS (Results Iowa Website), 2006
Result Indicator	Indicator: Children enrolled in Quality Preschools Percent of 3 and 4 year old children participating the preschool program that is NAEYC accredited, meets Head Start performance standards and/or consistently implements QPPS Source: Iowa Department of Education	Children in Quality Preschools 40.00% NAEYC/ Head Start
	Research has established a clear and compelling connection between the quality of children's early learning experiences and later success in school and in life. By achieving NAEYC accreditation, meeting Head Start Program Performance Standards or consistently implementing the QPPS standards and criteria, programs are providing quality early learning experiences that promote positive outcomes for children and reduce the achievement gap when they enter kindergarten.	Since 2002, there has been an increase in children enrolled in preschools employing the NAEYC/Head Start standards or QPPS standards. This indicates an increase in the desire for quality care and school readiness on both the part of the provider and parent. Enrollment has increased by over 100% between 2002 and 2006.

Children Ready to Succeed in Schools	
 Priority Strategic Goals Increase access to affordable quality early learning Increase the capacity of schools to be ready to mee 	
GOAL: Increase access to affordable quality early learning environments for all children MEASURE: Average child care cost Sources:1) National Association for Child Care Resource and Referral Agencies. (2003-2007). The High Price of Child Care. Retrieved on February 26, 2008 from: http://www.naccrra.org/randd/program.php?Page=1 2) Department of Human Services, Market Survey	Average Monthly Cost of Child Care in Iowa \$625 \$550 \$475 \$400 \$325 \$250 Preschool Center-Based Preschool In- Home ————————————————————————————————————
Iowa generally leads the nation in percentage of working parents of children ages 0-5. Parents surveyed said that two-thirds of children ages 0-5 had spent time in child care the week previous to the survey.	Short Term Trend: The upper graph shows the average cost of child care in Iowa throughout center-based and home-based care. The reimbursement rates fall far below the actual average cost of child care. The data shows that between FY03-FY05 the average reimbursement in child care increase slightly over 1%, while between FY05-FY07 the rate increased 15.5%. Sources: Iowa Child and Family Household Health Survey, 2005. (Iowa Department of Public Health) and Iowa Department of Human Services market survey, 2007.
GOAL: Increase the capacity of schools to be ready to meet the educational needs of all children MEASURE: Percent of children in preschools meeting voluntary programs standards	Children in Quality Preschools 40% 30% 7.51% 10% 14.89% 18.55% 19.66% 20.63% 2002-2003 2003-2004 2004-2005 School Year ■NAEYC/Head Start ■QPPS
Providing children with access to high quality preschools is Iowa's best and most cost-effective long-term investment in reducing future costs for academic remediation, in building a quality workforce, and in supporting the quality of family	Short Term Trend Only 38% of Iowa's preschoolers are in a preschool program meeting NAEYC accreditation or Head Start program standards or other comparable standards sector data. Source: Iowa Departments of Education and Human Services (Results Iowa Website), 2006
	Priority Strategic Goals Increase access to affordable quality early learning Increase the capacity of schools to be ready to mee GOAL: Increase access to affordable quality early learning environments for all children MEASURE: Average child care cost Sources:1) National Association for Child Care Resource and Referral Agencies. (2003-2007). The High Price of Child Care. Retrieved on February 26, 2008 from: http://www.naccrra.org/randd/program.php?Page=1 2) Department of Human Services, Market Survey Iowa generally leads the nation in percentage of working parents of children ages 0-5. Parents surveyed said that two-thirds of children ages 0-5 had spent time in child care the week previous to the survey. GOAL: Increase the capacity of schools to be ready to meet the educational needs of all children MEASURE: Percent of children in preschools meeting voluntary programs standards Providing children with access to high quality preschools is Iowa's best and most cost-effective long-term investment in reducing future costs for

Result Area:	Children Ready to Succeed in Schools	
Goal and Measure	GOAL: Increase the capacity of schools to be ready to meet the educational needs of all children MEASURE: Percent of child care and preschool settings with accreditation (DHS/NAEYC) Source: National Association for Child Care Resource & Referral Agencies. (2004-2006). Child Care Capacity Studies. Retrieved on February 28, 2008 from: http://www.naccrra.org/randd/program.php?Page=1	Percent of Accredited Center-Based Child Care Programs 40.0% 30.0% 20.0% 10.0% 2004-2005 2005-2006
	Child care centers that are accredited by NAEYC standards are measured against very high, comprehensive standards. Accreditation represents efforts to provide the highest quality care for the children served. Quality early care benefits the child by preparing them to be ready to succeed in school.	Short Term Trend: The number of accredited programs increased between 2004 & 2006. Schools will benefit from the children that are receiving higher quality early care and education.
Goal and Measure	GOAL: Increase the capacity of schools to be ready to meet the educational needs of all children MEASURE: Number of children enrolled in Early Childhood Special Education (DE)	Number of Children (3-5yrs) enrolled in Early Childhood Special Education 6,500 6,250 6,000 5,750 2004 2005 2006
	Early childhood special education services for children, three to five years of age and their families are provided by area education agencies and local school districts. Early childhood special education professionals provide training and serve as a resource to early childhood providers in community settings such as preschool, child care and Head Start programs to meet the developmental learning needs of young children.	Short Term Trend: Enrollment of children in Early Childhood Special Education increased by just over 2% from 2004 – 2006.

Result Area:	Children Ready to Succeed in Schools	
Goal and Measure	GOAL: Increase the capacity of schools to be ready to meet the educational needs of all children MEASURE: Percent of children, ages 3-5 with a disability educated with non-disabled peers, to the maximum extent appropriate, including preschool (DE)	Percent of Children with Disabilities Ages 3-5 Served in Least Restrictive Environment 47.47% 47.02% 47.54% 46% 44% 42% 40% 1999- 2000- 2001- 2002- 2003- 2000 2001 2002 2003 2004 Source: Iowa Department of Education State Performance Plan
	Children 0-3: According to the Individuals with Disabilities Education ACT (IDEA), PART C, Natural Environments are settings that are natural for children of the same age who have no disabilities or developmental delays. Children 3-5: According to the Individuals with Disabilities Education Act (IDEA), Part B, the Least Restrictive Environment (LRE), is the environment where appropriate activities occur for children of similar age without disabilities or developmental delay. Source: Iowa Department of Education: Brochure on Early Childhood Inclusion found at: http://www.iowa.gov/educate/content/view/863/1083/	Short Term Trend: Trend data indicates a stable LRE percent though some slight increase has occurred across six years. The percent LRE has increased 3.82%, from 43.72% in FFY 1999 (1999-2000) to 47.54% in FFY 2003 (2003-2004).
Goal and Measure	GOAL: Increase the capacity of schools to be ready to meet the educational needs of all children MEASURE: Percent of children, ages 3-5, receiving special education and related services demonstrating improved skills	SEA Percent of Preschool Children with IEPs who Demonstrate Improved Acquisition and Use of Knowledge and Skills (2006-2007) 100 80 40 40 21.43 23.81 11.9 Did Not Improve Improved but not Improved and Improved and Maintained Comparable Nearer to Peers Comparable Source. Information Management System Data Report, FFY 2006 (2006-2007).

Result Area:	Children Ready to Succeed in Schools	
	Teachers and associates in early childhood settings need support and professional development in the use of various forms of assessment. There are a variety of tools available for different purposes ranging from published assessment tools to observational recording systems that can be implemented to enhance decision-making. Much data is collected through Iowa's Information Management System (IMS).	<u>Short Term Trend:</u> Trend data not available.

Result Area	Secure and Nurturing Families	
Result Indicator	Indicator: Incidence of Child Abuse Child Abuse and Neglect Incidence Rates Source: Iowa Department of Human Services (Child Abuse Statistics) Retrieved on February 7, 2008 from: http://www.dhs.state.ia.us/Partners/Reports/ChildFamilyReports/ChildFamilyReports.html	Incidence of confirmed or founded abuse of children 5 or younger younger 29 39.4 33.8 40 20 2004 2005 2006 Percent of all confirmed or founded child abuse victims that were 5 or younger 48% 44% 44% 40% 36% 2003 2004 2005 2006
	Abuse and neglect are strongly linked with many negative outcomes for children including poor school performance, frequent grade retention, juvenile delinquency and teenage pregnancy.	Short Term Trend: The effects of abuse on young children have a significant effect on later social, behavioral and cognitive development Source: Iowa Department of Human Services, 2006
Result Indicator	Indicator: Teen Births Teen Birth Rates (Births per 1,000 females ages 15-17) Source: Kids Count	Teen Births 9.2% 9.1% 9.0% 8.8% 8.7% 8.70% 8.6% 8.4% 8.2% 2002 2003 2004 2005 2006
	Children born to teen mothers are more likely to be born with low birth weight, suffer poor health, experience behavior problems, and have limited language and literacy skills.	Short Term Trend Fortunately the trend in teen births has decreased, just like the national statistics, however, birthrates amongst Latina women have increased including teen births. The only area of the United States to see an increase in births is Western states that have a higher Latino population. Source: Iowa Vital Statistics Provisional Data, Iowa Department of Public Health, 2005

Result Area	Secure and Nurturing Families	
Result Indicator	Indicator: Teen Births Percent of all births to mothers under age 20 Source: Iowa Dept. of Public Health – Vital Statistics Kids Count	Percent of Births to Mothers under age 20 18% 13% 8% 8.72% 8.55% 2003 2004 2005 2006 Year
	Children born to teen mothers are more likely to be born with low birth weight, suffer poor health, experience behavior problems, and have limited language and literacy skills.	Short Term Trend: The rate of births to mothers under the age of 20 has hovered between the 8.5% and 8.72% for the past 4 years.
Result Indicator	Indicator: Children in Poverty Percent of children, under 6, living in poverty Source: United States Census: www.census.gov	Percent of children, under age 5, living at of below poverty level 20.0% 15.0% 10.0% 5.0% 2002 2003 2004 2005 2006
	"Young children are disproportionately low income. 43% of children under age 6—more than 10 million—live in low-income families." Poverty can hamper children's ability to learn and have negative implications on proper social, emotional, and behavioral development. Poverty also can be a factor leading to poor health and mental health outcomes. Risks are greatest for children who experience poverty when they are young and/or deep and persistent poverty. Source: National Center for Children in Poverty. Retrieved on February 7, from: http://www.nccp.org/topics/childpoverty.html	Short Term Trend: There has been no significant improvement on the percent of young children living in poverty. In 2005 and 2006 between 15-20% of Iowa's youngest children were living in poverty.

Result Area	Secure and Nurturing Families	
	Priority Strategic Goals Increase positive relationships between child and parents Increase effective opportunities to learn about child development and parenting skills	
Goal and Measure	GOAL: Increase positive relationships between children and parents MEASURE: Incidence of child abuse by family member Source: Iowa Department of Human Services reports on Child Abuse	Incidence of confirmed or founded abuse of children 5 or younger were 5 or younger were 5 or younger 47% 48% 44% 40% 36% 2004 2005 2006
	Child abuse has serious consequences that may remain as indelible pain throughout the victim's lifetime. The violence and negligence of parents and caretakers serve as a model for children as they grow up. The child victims of today, without protection and treatment, may become the child abusers of tomorrow.	Short Term Trend: In 2005-2006 the rate of child abuse was higher than 2004. Date trends Children ages 0-5 make up nearly half of all confirmed or founded child abuse victims through age 18.
Goal and Measure	GOAL: Increase positive relationships between children and parents MEASURE: Incidence of children, under 6 years of age, entering foster care (DHS)	No data available
	"Many foster children are kids who have been abandoned, abused or neglected, and their families can't provide them with a safe and nurturing home. The foster care system steps in to make sure these children are safely cared for until they can either return home to their families or find a new permanent home through adoption. Foster care is a temporary home for the child with a licensed and caring family." <i>Source</i> : Iowa KidsNet Retrieved on February 7, 2008 from: http://www.iakids.org/index.cfm?fuseaction=home.theprocess	Short Term Trend: No trend data available.

Result Area	Secure and Nurturing Families	
Goal and Measure	GOAL: Increase positive relationships between children and parents MEASURE: Percent of children not re-entering foster care (DHS)	Children 1-5 y.o. who have not Re-entered Foster Care (Target 82%) 95.0% 90.0% 85.0% 80.0% 75.0% 70.0% Jul-Dec Jul-Dec Jul-Dec Jul-Dec Jan- Jul-Dec 03 04 05 06 Jun 07 07
	A child does not needing to re-enter foster care, indicates that the conditions of the home have improved such that the child is able to remain in the home.	Short Term Trend: Since 2003, the re-entrance rate has declined significantly and stabilized around the 88-90 th percentile.
Goal and Measure	GOAL: Increase effective opportunities to learn about child development and parenting skills MEASURE: Average monthly FIP cases with children ages 0-5 in the home (DHS)	Average Monthly FIP Cases (with children 0-5 years old) 13000 12000 11000 9000 8000 7000 2003 2004 2005 2006 2007
	The Family Investment Program (FIP) is Iowa's Temporary Assistance to Needy Families (TANF) program. FIP provides cash assistance to needy families, as they become self-supporting so children may be cared for in their own homes or in the homes of relatives	Short Term Trend: 2003-2005 the average number of families with children 0-5 accessing FIP remained just over 12,000. Since 2005, the numbers have been decreased around 15 percent.

Result Area	Safe and Supportive Communities	
Result Indicator	Indicator: Employment Rate The percentage of Iowan's 16 and older who are employed Source: Iowa Work Force Development, Annual Average Labor Force Summaries	Employment Rate 2006 2004 95.2% 2002 95.9% 96.7% 2000 94.0% 95.0% 96.0% 97.0% 98.0%
	Employment is an important factor today and in the future. Access to jobs with living wages, family friendly work environments, and access to child care are factors for today's families. Access to opportunities to lifelong learning will be important in preparing children for employment in the 21 st century.	Short Term Trend After several years of employment decrease between FY04 and FY06, the trend has changed in the positive direction. It is important to note that over 70% of young children have all parents in the home with some type of employment Source: Iowa Work Force Development, Annual Average Labor Force Summaries
Result Indicator	 Indicator: Crime Rate/Juvenile Crime Rate The rate of serious crime per 100,000 population total arrests Total Arrests per 100,000 estimated juvenile population (children 18 years old and under) Source: Iowa Department of Public Safety 	Serious Crime/Juvenile Arrests 4,000 2,000 1,000 2001 2002 2003 2004 2005
	Safe communities contribute to a family's sense of security for their children.	Short Term Trend: While there was a steady rise in serious crimes from 1999-2002, the rate dropped in 2003 and 2004. While this is a positive direction, this will need to be monitored. While the juvenile arrest rate has remained steady in recent years, it would be anticipated that increasing community supports for young children will move the trend in positive direction Source: Iowa Department of Public Safety, Iowa Uniform Crime Reports, 2004

Result Area	Safe and Supportive Communities	
Result Indicator	Indicator: Child Deaths The number of child deaths due to accidents Source: Iowa Dept. of Public Health – Vital Statistics Decedents Aged <1-4 ×2000 US Standard Million Population Aged <1-4 IA Midyear Pop. Aged 1- <4	Child Deaths due to Unintentional Injuries (below 5 years old) 46.2 43.6 37.5 38.8 2001 2001 2002 2003 2004 2005 2006
	Accidental means the death resulted from some unintentional act. This manner of death is most effectively reducible through education of all care providers of children to provide a safe environment with adequate supervision. SIDS and other sudden unexpected infant deaths may be prevented by improving education for parents and caregivers about the risk factors identified by the Child Death Review Teams for these types of deaths. Source: Iowa Child Death Review Team 2005 Annual Report	Short Term Trend: Although there is not a bold trend, the vital statistics show that the unintentional injuries is the leading cause of death of children 1-4 years old, while for children under age 1 the least influential cause of death behind health conditions, mostly originating in the Perinatal Period.

Result Area	Safe and Supportive Communities	
	 Priority Strategic Goals Increase the safety of young children and families in their communities Increase community investment in the early care, health and education system 	
Goal and Measure	GOAL: Increase the safety of young children and families in their communities MEASURE: Percent of state budget for early childhood programs	Percent of Iowa State Budget for Early Childhood Programs 20% 16% 12% 8% 4% 0% FY 2006 FY 2007 FY 2008 Source: Legislative Fiscal Bureau
	Research has revealed through projects such as the Perry Preschool Program and Parent Child Centers in Chicago, that investment into young children, produces fewer remedial costs later in life as well as lower crime rates, higher literacy rates, lower welfare payments, etc.	Short Term Trend: No trend data available Source: Heckman, J. & Masterov, D. The Productivity of Investing in Young Children, 2007. Retrieved from http://jenni.uchicago.edu/human-inequality/papers/Heckman_final_all_wp_2007-03-22c_jsb.pdf on March 12, 2008
Goal and Measure	GOAL: Increase the number of quality early care and education environments for all children MEASURE: Ratio of Community Empowerment local cash investments to state and federal investments (CE)	Investments into Community Empowerment (in millions) 100% 80% 60% 445.6 20% 20% 2006 \$45.6 \$45.6 Local Investments Local Investments
	Community Empowerment was founded on the premise that communities and state government can work together to improve the well being of our youngest children. Community Empowerment's efforts unite agencies, organizations and community partners to speak with a shared voice to support, strengthen and meet the needs of all young children and families. Source: Iowa Community Empowerment	Short Term Data: Community Empowerment Areas receive nearly 40% of their budgets from local cash and in-kind cash investments. From 2006, the local cash investment increased 1.4% from 36.1% to 37.5%

Result Area	Secure and Nurturing Early Care and E	ducation Environments
Result Indicator	Indicator: Availability of Child Care Number of licensed and registered child care slots Source: Iowa Department of Human Services	Availability of Child Care \$\begin{array}{c} \text{50} & 160,000 & 140,000 & 120,000 & 100,000 & 80,000 & 40,000 & 40,000 & 200,000 & 200,000 & 1
	Having children in licensed and registered care provides assurance that providers and practitioners open to meeting basic safety requirements for children in their care	Short Term Trend: Since 2004, the summer of known (i.e., maximum legally allowed capacity) licensed and registered child care slots has remained steady. Source: Iowa Department of Human Services, 2006
Result Indicator	Indicator: Child Abuse in a Child Care Setting Number of confirmed of founded child abuse by home or center-based child care provider Source: Iowa Department of Human Services	Child Abuse in Center-and Home-based Child Care (Calendar Year) 86 70 86 40 2002 2002 2003 2004 2005 Center-Based Home-Based
	Child abuse has serious consequences that may remain as indelible pain throughout the victim's lifetime.	Short Term Trend: There are fewer confirmed child abuse cases for center-based child care settings are fewer than home-based settings.

Result Area	Secure and Nurturing Early Care and Education Environments	
Result Indicator	Indicator: Working parents Percent of children, under 6 years old, with all parents in work force Source: American Community Survey: www.cenusus.gov	Percent of families with children under six with all parents in the work force 81% 78% 75% 72% 69% 66% 63% 2000 2001 2002 2003
	Working parents must find care for their children during hours they are unable to be present for care, which highlights the importance for available, affordable, quality early care and education settings.	Short Term Trend: From 2000-2003, the percentage of families with all parents in the workforce decreased by nearly seven percent.

Result Area	Secure and Nurturing Early Care and Education Environments	
	 Priority Strategic Goals Increase the number of quality early care and education environments for all children Increase parent and community demand for quality in early care and education environments 	
		Percent of Child Care Settings with Accreditation
Goal and Measure	GOAL: Increase the number of high quality early care and education environments for all children. MEASURE: Percent of child care centers with accreditation (DHS/NAEYC)	15% 10% 5% 0% 2004 2005 2006
	Program accreditation requires providers to maintain a specified set of minimum standards in health, education and safety, helping achieve higher quality early care and education.	Short term trend: The number of licensed child care centers in Iowa as of March 2008 is right at 1500 centers. The data shows that at most 150 of those centers are accredited.
Goal and Measure	GOAL: Increase the number of high quality early care and education environments for all children. MEASURE: Percent of licensed/registered child care providers provided training through CCR&R	Number of Providers Trained Through the CCR&R Network 60000 50000 40000 30000 20000 10000 0 2005 2006 2007
	Iowa Child Care Resource & Referral (CCR&R) agencies are community-based organizations that lend a helping hand to people who care for and about children. By providing resources, education and advocacy, CCR&R helps meet your community's need for affordable and accessible child care.	Short term trend: In 2006 & 2007, the number of providers trained through CCR&R exceeded 47,000. That was an average 20% increase over since 2005.

Result Area	Secure and Nurturing Early Care and Edu	cation Environments	
Goal and Measure	GOAL: Increase the number of high quality early care and education environments for all children. GOAL: Increase parent and community demand for quality in early care and education environments MEASURE: Percent of child care settings in the upper tiers of the Child Care Quality Rating System (DHS)	Percent of Child Care Settings in the Upper Tiers of the Child Care Quality Rating System (QRS) 1.40% 1.20% 1.00% 0.80% 0.40% 0.20% 0.00% Homes Centers Total Child Care Settings Child Care Quality Ratings (December 6, 2007) Child Care Quality Ratings (December 6, 2007) 100% 18.8% 17.2% 18.8% 18.8% 17.2% 18.8% 18.8% 17.2% 18.8% 18.8% 17.2% 18.8% 1	
	The voluntary, child care Quality Rating System (QRS) was implemented in March of 2006. The QRS was developed to raise the quality of child care in Iowa, through a guided system, to increase the number of children in high-quality child care settings, and to educate parents about quality in child care	Short Term Trend: The child care Quality Rating System was implemented in March 2006. By, June 30, 2006 three centers and 23 child development home providers had completed the process to receive a rating. (As of October 2006, 29 center-based and 142 family-based providers had completed the process.) Source: Iowa Department of Human Services, 2006	
Goal and Measure	GOAL: Increase parent and community demand for quality in early care and education environments MEASURE: Percent of eligible Families receiving child care assistance	Child Care Assistance Utilization Rate SFY 2004- SFY 2007 75% 70% 65% 60% 55% 50% FY 04 FY 05 FY 06 FY 07	

Result Area	Secure and Nurturing Early Care and Education Environments		
	The goal is to support low-income families to achieve and maintain self-sufficiency, to ensure children are cared for in settings that meet minimum health and safety standards, and to promote high quality childcare.	Short term trend: The child care assistance rate remains just over 70% eligible families utilizing child care assistance over the past four years.	
Goal and Measure	GOAL: Increase the number of high quality early care and education environments for all children. MEASURE: Number of bachelor degrees awarded for early childhood education (Regents Universities)	120 100 80 60 40 20 2007 2008	
	Bachelor's degrees educate future providers on child development, child psychology, literacy, nutrition, etc, preparing them to provide quality care and education for young children.	Short Term Trend: UNI reports show approximately 125-135 graduates 10 years ago, but after budget crunches and tuition increases the number has decreased and stabilized to about 100 graduates per year. (UNI)	
Goal and Measure	GOAL: Increase the number of high quality early care and education environments for all children. MEASURE: Placement rate of bachelors degree graduates in early childhood education graduated in Iowa (Regents Universities)	No Data Available	
	The University of Northern Iowa approximates that in recent years that nearly 80% of graduates with teaching degrees have found positions as educators, citing that the majority of others decide to pursue other careers. Source: http://www.uni.edu/majors/coe/ci/index.shtml	Short Term Trend: No trend data available: Post graduation data at large a university is difficult to collect for several reasons including: decentralization, expense, and timing. With no central placement office, each college within the university colleges and maintains data in a variety of manners. It is costly and time consuming to gather data that is both reliable and comprehensive.	

Result Area	Secure and Nurturing Early Care and Education Environments	
Goal and Measure	GOAL: Increase the number of high quality early care and education environments for all children. MEASURE: Number of associates degrees awarded for early childhood education in Iowa (Community Colleges)	Early Childhood Awards in all lowa Community Colleges FY 2006-2007 (Total Awards = 193*) Indian Hills Community College (IHCC) Iowa Western Community College (IWCC) Western lowa Community College (WITCC) Eastern lowa Community College (COL) Hawkeye Community College (EICCD) Iowa Valley Community College (IHCC) Iowa Community College (IHCC) I
	Students are able to earn a diploma in early childhood education and/or an associate degree in early childhood education. (See: http://www.dmacc.edu/pibs/earlychldhdedassoc.pdf for examples of plan of study)	Short Term Trend: No trend data available, however the total number awards is 193 with 60 persons receiving more than one award time. Thus, the unduplicated count of awardees is 133.

Result Area	Secure and Nurturing Early Care and Education Environments	
Goal and Measure	GOAL: Increase the number of high quality early care and education environments for all children. MEASURE: Placement rate of associate degree graduates in early childhood education in Iowa (Community College)	No Data Available
		<u>Short Term Trend:</u> No trend data available