



2005-2008

**SCOTT COUNTY COMMUNITY EMPOWERMENT**

**RE-DESIGNATION PLAN**

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Scott County Kids  
Community Empowerment Area  
428 Western Avenue  
Davenport, Iowa 52801  
563-326-82221 Ph  
563-328-3224 Fax

[www.scottcountykids.org](http://www.scottcountykids.org)

## **Scott County Kids Vision & Mission for Children**

The **mission** of the Scott County Empowerment Area is “coordination and expansion of resources and services in the community to build environments for young children that enable them to be physically healthy, intellectually curious, emotionally sound and socially competent. Led by citizens, this system of public and private entities provides a continuum of seamless services targeted at helping all children reach their full potential.” Integral to this mission is a commitment to realizing better outcomes for the most vulnerable children in Scott County and making a significant contribution to advancing Iowa’s Early Childhood Vision - “Every child, beginning at birth, will be healthy and successful”. This **vision** was adopted by the Scott County Community Empowerment Board in 2003.

### **Guiding Principles**

The following guiding principles provide the foundation for community goals and activities outlined in the Community Plan:

- ◆ Every child has a right to be safe, healthy, intellectually stimulated, and nurtured
- ◆ Parents are the first and most important teachers of their children and may benefit in learning more effective parenting
- ◆ Every family has strengths that can be enhanced ~ every family is unique
- ◆ All adults in the community are responsible for the well being of children in the community
- ◆ Support, knowledge of child development, and improved parenting skills reduce risk factors and school failure
- ◆ The earlier the intervention occurs to support children and parents, the greater the chances for success
- ◆ A continuum of support for families is essential for all children to be school ready
- ◆ Lasting success for children and families requires coordinated efforts over a continued period of time

### **Overview of the Community Plan**

The Scott County Kids Community Empowerment Area plan outlines a child and family centered framework for building a responsive, effective early childhood system, incorporating strategies designed to make incremental gains in key indicators of child and family well-being. The plan reflects a continuous community-wide assessment process begun in 1998, updated in 2002 and further refined in 2005 to identify a preferred future for the county’s youngest children as well as strategies to bring us closer to that vision. The updated Scott County Kids 2005-2010 plan mirrors the system building framework adopted by the Iowa Early Childhood Iowa Stakeholders group earlier this year.

## **Our Commitment**

As members of the Scott County Kids Community Empowerment Board, we hereby pledge our commitment to advancing our vision that “every child beginning at birth will be healthy and successful” and to that end accept our responsibility to provide collaborative leadership in the development of a comprehensive early childhood system of education and care for the families of Scott County.

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Linda DiMauro, Chairperson  
Ralston Purina Corporation

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Toi Allen  
Elementary Ed Teacher

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Lawrence Barker  
Scott County Health Department

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Dr. Tim Dose, Superintendent  
Education Representative

---

Lori Elam  
Scott County Community Services

---

Wende Galindo  
Parent, Iowa Health Systems

---

Denise Gonzales  
Department of Human Services

---

Sherry Horan  
Parent of Special Needs Children/Early  
Childhood Educator

---

Chuck Keibler  
Genesis Systems Group

---

John Kiley  
United Way

---

Rev. Kenneth Maxwell  
Pastor

---

Amy Schneeberger  
Early Childhood Educator

---

Julie Stark  
Genesis Systems Group, Parent

---

Kristine Teitle  
Parent

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John White  
Alcoa/Labor

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Paul Greufe  
Scott County Administration

## **Scott County's Profile**

Geographically defined by the Mississippi River to the south and east and the Wapsipinicon River to the north, Scott County is a large urban/rural county comprising 465 square miles. It is home to the third largest city in Iowa and is part of a larger bi-state metropolitan region known as the Quad Cities with approximately 360,000 residents. A variety of businesses and industries are represented, but like a vast majority of the state it is predominately agricultural with ninety percent of the county classified as farmland. In 2000 a total of 158,668 people resided in Scott County as documented by the last decennial census including 13,226 children younger than six years of age.

From 2000 to 2004 Scott County experienced moderate growth and became slightly more diverse. According to estimates compiled by the U.S. Census Bureau over the four year period the population increased by 1,410 people and during this time, minority populations continued to make modest gains. Of the 1,410 new residents, 629 or almost 45% were of Hispanic ethnicity and the total number of persons from Asian countries rose by 281 or 11%. The growing diversity is further reflected in the number of languages spoken by ELS (English as Second Language) students attending public schools throughout the Quad Cities – over 25 languages in all including Bosnian, Arabic, Vietnamese, Tagalog, Urdu, and Russian.

Most children in Scott County (73%) are raised in married couple families. Approximately 22% reside in female headed households. Echoing national and state trends, increasingly both parents in a household with young children are working. In 2000, 69.3% of children five years of age and younger living in a family or subfamily had all parents in the labor force (*Office of Social and Economic Trend Analysis, Iowa State University*).

Despite the prevalence of dual income households, 13.7% of families with children younger than 18 years of age were living in poverty and single mothers with children 0 – 5 comprised 55% of all families living in poverty. According to the Department of Education, 33.8 percent of K-12 students in Scott County public schools qualified for free or reduced lunches during the 2003-2004 school year - up from 27.8 in 2000-2001.

Other key indicators of child well-being have fluctuated over a ten year period. After falling significantly in 2003, child abuse rates climbed again in 2004 with denial of critical care representing about 72% of confirmed cases - far outnumbering those of physical abuse. Reported presence of illegal drugs in the home also increased significantly. Juvenile offenses increased slightly from 2001 to 2003 but were still well below numbers reported during the 1990s.

More positive trends in Scott County include the growth in the number of children attending pre-school programs and kindergarten readiness scores. Four public school districts serve the residents of Scott County including Bettendorf with 4436 students, Davenport with 16,544 students, North Scott with 2,973 students, and Pleasant Valley with 3196 students. Pre-kindergarten enrollment in the public schools has grown steadily in the past five years – from 250 in the 2000-2001 school year to 423 in the 2004-2005 school year. In addition, kindergarten teachers report that a majority of students throughout Scott County attended preschool (from 67% to 74% depending on the school district). For parents completing kindergarten enrollment forms, this could mean anything from attendance at a weekly early literacy program to full day care. Likewise, data from the Scott County Empowerment Kindergarten Readiness survey indicates a steady growth in aggregate scores.

## **Overview of Empowerment Goals & Accomplishments**

Scott County first received Empowerment designation and funding in January, 1999 and was re-designated as a Community Empowerment Area in 2002. During the preliminary planning phase which took place in 1998, four major goals and corresponding strategies were adopted targeted drawing from a variety of assessment tools reflecting community needs and priorities. Strategies were subsequently updated for the 2002-2005 plan.

### **Infant and Child Health**

**Goals:** To identify children who may be at risk as early as possible  
To have a continuum of programs to serve at-risk children and families

#### **2002-2005 Strategies**

- Endorse and support increasing the capacity of Home Visitation Programs in the community
- Increase the community's awareness of the effects of alcohol, drug and alcohol use during pregnancy on the health and developmental potential of the newborn
- Broaden the implementation of the Universal Assessment to include the new hospital
- Enroll more families in programs during the prenatal period
- Support the implementation of prenatal at-risk screenings
- Continue to support the addition of a "baby's first book" all Baby Packets
- Translate the Baby Packet into another language
- Continue to provide Baby Go to Sleep tapes to families to relieve stress
- Support improved access to Health Services by providing appropriate waiting room environments for children
- Provide support to the Stork's Nest, a program that provides incentives for young parents to seek appropriate health care for their children
- Support community efforts to increase participation in the HAWK-I insurance program for children
- Support the community's efforts to decrease the number of pregnant women who smoke

#### **Highlights of Accomplishments**

Over the past three years, Scott County Empowerment has supported the development of an early childhood system that will enable the identification of children who may be at risk as early as possible and to have a continuum of programs in place to serve these children and their families.

- Universal assessment of births in Scott County continues to be the foundation for efforts to promote the optimal health and development of young children. Parents are visited prenatally and/or in the hospital after delivery by a medical social worker to determine appropriate services that will foster good child outcomes and provide families with needed support. Prenatal assessments have grown by 25% and participation in the Stork's Nest program for at-risk mothers-to-be has increased by 15%.
- Health promotion visits have been offered to all Scott County families with new babies. Nurses provide this home visits up to six weeks following the birth of a child. A remarkably high percentage of families (66%) with new babies each year accept and benefit from this service.
- Over 1100 families throughout Scott County have been assisted annually in the past three years with home visitation services. The annual number of moderate and at-risk families receiving home visitation services has grown through the Parents As Teachers from 135 in

- 2002 to over 180 in 2005. Expectations for the number of higher at-risk families to be served through Empowerment funding have been adjusted to reflect best practices. The number of high-risk families participating in home visitation services has not grown over the past two years, but outcomes for families in the program have improved. On average over 25 high-risk women are enrolled in the program prenatally, thus fulfilling an important community priority.
- A variety of community outreach activities have increased capacity in the community to identify women who may be at-risk of drug and alcohol use during pregnancy and link them with intervention services. A new screening tool and referral process was developed and introduced to the largest private obstetrical practice in the Quad City area which has since been implemented.
- Over 600 community leaders, child care providers, family support workers, and health and mental health care professionals have attended educational seminars regarding the effects of alcohol, drug and alcohol use during pregnancy on the health and developmental potential of the newborn. Approximately 388 child care providers have attended training sessions with practical information on methods to incorporate care and early learning techniques into early childhood environments.

### **Public Awareness**

**Goal:** To increase awareness of the general population regarding the importance of the early years in a child's later success

### **2002-2005 Strategies**

- Continue the partnership with KWQC for public service announcements to reach large numbers of people with information
- Continue partnership with Lamar Advertising to provide media information via billboards
- Continue the partnership with Scott County to relay information to the community via the web page
- Develop an informational insert on the importance of the early years for local newspapers
- Continue to keep the Empowerment logo and message prominent
- Develop a media campaign to enhance parental choice of quality childcare
- Develop a media campaign highlighting the negative effects of substance use during pregnancy on the life development of the child
- Develop public service announcements for additional media venues

### **Highlights of Accomplishments**

Public awareness of the importance of the early years is critical to achieving better outcomes for young children. Parents and care givers must have information about the significance of early brain growth and the developmental needs of infants, toddlers and preschoolers and resources available to them to maximize the potential of every child. The community at-large must understand why public support for early childhood programs is crucial to ensuring that children are healthy and prepared for a lifetime of successful learning. Scott County Empowerment has enjoyed the support of major media partners to reach a variety of target groups.

- A multi-media campaign to inform parents about the importance of choosing quality child care and a check list to recognize quality child care environments was developed and executed. The local NBC affiliate produced a PSA which was aired 308 times and reached approximately 72% of adults in the Quad City area. A market survey revealed that one-third

of viewers recognized Scott County Empowerment PSA spots. A series of articles appeared in the Quad City Times in conjunction with Week of the Young Child, and a quality child care check list was added to the Scott County Empowerment web site. Lamar Advertising donated artistic time to the development of three related billboard messages which were rotated monthly throughout county and viewed by an average of 33,000 drivers.

- The Scott County Empowerment web site was expanded with in-kind assistance from Scott County information management specialists to relay more information about community resources via the web page.
- Public service announcements regarding the ill effects of substance use during pregnancy on the life development of the child were aired on the local NBC affiliate featuring a local obstetrician and young mother. A half day presentation by Dr. Rizwan Shah with practical information about how to respond to the developmental needs of prenatally exposed children was taped and distributed to over 200 physicians, health and mental health care workers, child care providers, family support workers, educators and other interested professionals.

### **Early Childhood Environments**

Goals: Children ages 0-5 will have increase access to high quality learning  
Children ages 0-5 will have increased basic skills for school readiness via an early learning environment

#### **2002-2005 Strategies**

- Provide support for families needing child care in order to work or attend school
- Continue to support the addition of child care slots in licensed centers to improve the quality of environments for children
- Provide training and equipment for family daycare homes to improve the quality of environments for children
- Support and collaborate with the Department of Human Services in efforts to improve family day care home quality through spot checks that assess the health and safety of the child care environment as well as quality of practice
- Conduct media efforts to educate parents on child care quality issues
- Support the expansion of Head Start programming for children
- Endorse and support efforts to enhance National Association for the Education of Young Children accreditation
- Support efforts to improve the quality of existing programming for young children

#### **Highlights of Accomplishments**

Research shows that the care environment and the kinds of early learning experiences children are exposed to have a profound impact on how they develop and learn. Quality programs are essential to promoting healthy cognitive, emotional, and social development.

- A total of 491 child care spaces have been added in licensed and accredited facilities. Empowerment support has sustained an additional 86 all day, all year quality child care slots including 54 located at Head Start sites, allowing low-income families to work or attend school.
- Over 455 providers have received training in brain development research and best practices and have demonstrated gains in knowledge through pre and post testing and evidence of curriculum integration in both center and home based programs.

- An annual average of 100 low-income families employed or attending school have gained access to child care through the Empowerment supported Child Care Scholarship program.
- Six of nineteen centers providing infant and toddler care have developed and implemented improvement plans with the assistance of Empowerment and the Iowa State University Extension Service.
- Results from the Scott County Kindergarten Readiness survey reveal steady gains in all school districts.
- Quality improvement cohorts of center and home based providers have been organized with participants committed to pursuing accepted quality standards and/or accreditation goals.

### **Parent Education and Support**

Goal: To increase parental involvement with children and encourage early intellectual stimulation of very young children

#### **2002-2005 Strategies**

- Provide support for families needing child care in order to work or attend school
- Continue providing home visitation services to enhance parental education
- Establish parental resource programs in conjunction with additional school districts
- Continue working with the schools to engage parents as partners in their preschool child's education
- Refurbish the Parent Packets as needed
- Provide leadership in the community effort to educate all persons regarding the importance of the early years to later development
- Continue media efforts to educate parents on specific topics

#### **Highlights of Accomplishments**

Increased knowledge of child development, and improved parenting skills are key to fostering healthy and successful children. Every family has strengths that can be enhanced and improved parenting skills reduce risk factors and increase the likelihood that children will be ready for school.

- There has been a steady growth in the number of parents attending early literacy and parent support programs funded by Empowerment dollars. Parents have access to 11 school-based programs in the Davenport district, 5 sites in the Bettendorf district, and three new sites added in the North Scott district. Over 500 children and families attend early literacy activities and/or access Parent Resource Centers each year – more than four times the number the first year services were offered. The level of participation in the Davenport district increased by 38% alone in the past year.
- Approximately 25% of parents attending early literacy programs participate in other activities offered by the host school.
- The Parents As Teachers program provides training to over 180 families annually on child development and age appropriate training skills using parent-child interactive activities.
- All parents are provided with Baby Packets upon the birth of their children. Baby Packets have been updated with current child development information including recent materials about oral health for children birth to 5.
- Parent Packets with information about age appropriate activities that encourage parent-child interaction are available for check-out in the public libraries and the Department of Human Services

## **Progress Toward Outcomes 2002-2005**

The table below reflects community level and programmatic outcomes cited in the original plan

Outcome	Progress Measures
Reduce the child abuse rate by 3% by 2001 to 820.	While this goal was met, latest figures indicate the rate of child abuse is on the rise
Maintain 90% rate of immunization by age 2 in the public clinics	Have exceeded this goal – average rate in the public clinics was 97%
Maintain 95% rate of immunization by school age	Have exceeded this goal – rate for the 2004-05 school year was 98.5%
Decrease low birth weight by 5% by the year 2001 from 150 to 142	The number dropped to 133 in 2001, but rate increased from 60.1 in 2001 to 84.6 in 2003
Decrease the number of infants born chemically exposed by 2%	Alcohol and drug use assessed prenatally but minimal data available of infants born drug or alcohol exposed due to the limited nature of testing protocols
Reduce the teen birth rate by 2% by the year 2001 from 340 to 333	The most recent data indicate that the teen birth rate is declining
Increase the number of families identified at risk early in the child's development	The percentage of universal assessments administered increased from 30% to 96% of all births
Reduce the number of children testing positive for lead by 2% by the year 2001 from 382 to 374	The number of children testing positive for lead was 270 in 2004
Reduce the number of unintentionally injured children by the year 2001	Data is not available
Provide 75 families with subsidized day care assistance to work or go to school	Support is provided to over 180 families per year
Provide 55 new registered family day care home providers by 1999	The strategy attempted was not successful and subsequently discontinued
Increase the number of family day care homes receiving contacts and follow-up assistance by 1999	This strategy was reinstated in 2002 and to date over 250 registered homes have been spot checked and follow-up assistance has been provided to improve quality
Provide a minimum of 12 new infant/toddler slots and 20 new slots for 3-5 year olds in licensed centers by 12/31/99	A total of 451 infant and toddler and preschool spaces have been added
Increase the knowledge of soon to be parents	TV/VCR units were placed in the lobbies of obstetrician's offices throughout the county with tapes provided featuring a video loop with information about the latest brain research for soon-to-be parents. The Nest program was funded to provide vital health and parenting information to expectant parents.

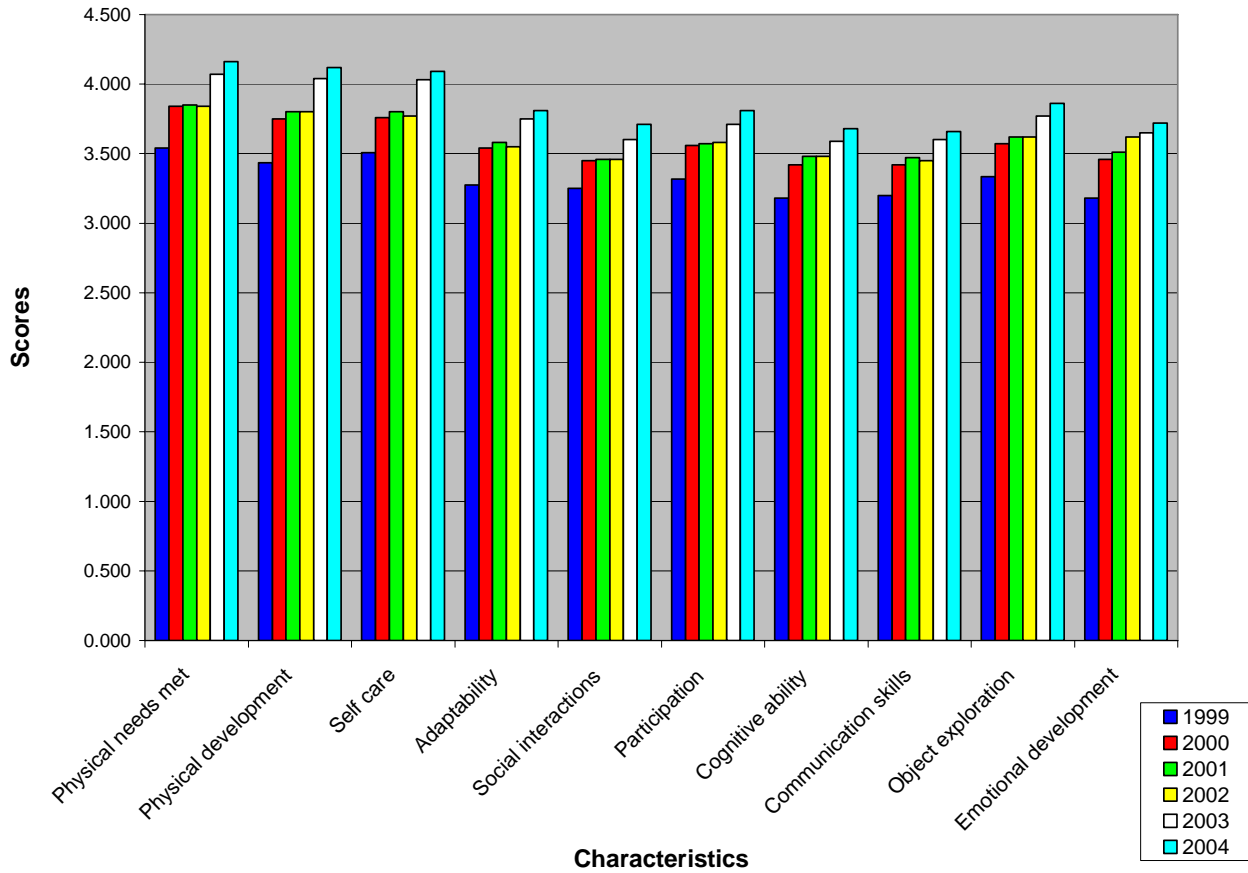
### **Progress Toward Outcomes 2002-2005**

<b>Outcome</b>	<b>Progress Measures</b>
Centers will begin the accreditation process by 12/31/99	Six centers are part of a cohort committed to pursuing accreditation
Increase the number of low income at-risk children in all-day, all-year pre-school to 120 by 12/31/99	An average of 186 all-day, all-year preschool slots are supported
Train no less than 100 professionals regarding chemically exposed infants by 12/31/99	Over 600 physicians, health care professionals, child care providers, and family support workers have attended training on chemically exposed infants and children
Train no less than 50 child care providers on the results of brain research studies by 9/30/99	As of June 2002, over 800 child care providers (including those who attended more than one session) took part in trainings related to the latest brain research
Establish a tiered accreditation system with an incentive plan for childcare centers	Iowa's voluntary Quality Rating System has eliminated the need to pursue this strategy independently
Increase the number of children delaying pregnancy until age 20 and beyond by year 2001	As of 2002, the percentage of women delaying pregnancy to age 20 increased from 86.9% to 91.1% per 1000
Increase the capacity of HOPES to meet 50% of the need by 12/31/99	The capacity of the Empowerment funded home visitation program peaked at 234 families – funding was maintained but case load expectations were adjusted downward in 2004 in keeping with best practice case loads
Increase the number of presentations and sites where persons can be exposed to early childhood information	Presentations were made in resource settings as well as in other community locations where families congregate with over 500 individuals reached
Maintain the current level of media exposure to early childhood information through 6/30/00	Public service announcements have aired regularly since 2000 on the local NBC affiliate including 308 spots in the past year. These PSAs were ranked third in viewer recognition surveys within the first year. Billboard advertising has been maintained since 2000 with the location rotating throughout the county on a monthly basis.

## School Readiness Outcomes 1999-2004

While consistent gains have been demonstrated with respect to school readiness in Scott County, much remains to be accomplished to assure that young children are healthy and receive the kind of care and early experiences they need to thrive. Providing greater access to primary medical care, behavioral health services, family support and, and quality child care – all essential to fostering better outcomes for our most at-risk populations – will continue to challenge our community in the coming years. The graph below illustrates the prevalence of risk factors associated with Scott County births from July 2001 through June 2005. Although some improvement is evident with respect to financial stability, inadequate income among families with children 0-5 is still very significant and the number of births to single parent families (generally a factor associated with poverty) is continuing to rise.

**Six Year Comparison of Kindergarten Readiness Survey Results**



## **Planning Process - Recent Trends and Assessments**

### **Community Assessment Data**

#### **2001-2002 United Way Community Assessment**

##### **Results**

- Only 25% of children eligible are enrolled in Hawk-I
- Minority youth are overrepresented in juvenile offender data and the rate of female offenders is increasing.
- Employers increasingly need workers who can think, learn new skills rapidly, work in teams, and solve problems creatively.
- Dual working parent families are increasing
- Dual working parents find it difficult to make sufficient amounts of quality time available to their children.
- Increasingly parental frustrations are being expressed in harmful ways to their children
- Parents need information to choose quality child care
- The cost of child care is increasing
- The turnover rate for child care providers can be attributed to low pay and benefits

#### **2002 Iowa Youth Survey (Scott County)**

##### **Results**

- 54% of all respondents disagree that students in school treat each other with respect.
- 23% of eleventh graders used tobacco at least one day in the 30 days prior to the survey
- 46% of eleventh graders used alcohol at least one day in the 30 days prior to the survey currently use alcohol.
- 38% of eleventh graders used drank 5 or more drinks at least one day in the 30 days prior to the survey currently use
- 22% of eleventh graders used marijuana at least one day in the 30 days prior to the survey
- 12% of respondents admitted to attempting suicide at least once.
- 24% of respondents reported they get no help with homework from anyone in their home
- 27% of respondents reported that their parents never attend school activities that they are involved in
- 79% of respondents indicated that within the three weeks prior to the survey, that their classroom teacher had to stop teaching in order to deal with a major student disruption or behavior problem.
- 23% of respondents do not feel safe at school
- 25% of respondents deny caring about their school
- 96% of respondents plan to finish school
- 20% of respondents indicate there is a person with serious alcohol or drug problems living in their home
- 22% of respondents indicated their neighborhood has lots of fight, crime and illegal drugs
- 74% of respondents indicate the adults in their community care about kids their age
- 42% of respondents indicated that adults in the community do not spend time talking to them
- 54% of respondents indicate that the other students do not treat each other with respect
- 27% of respondents do not feel they have much to be proud of
- 34% of respondents indicate having no extracurricular activities that they are involved in
- 38% of respondents indicated that they did not spend any time during the week recreationally reading during the school year
- 43% of respondents indicated that they spend no time during the week in church related activities

## **Community Assessment Data, Cont.**

### **2005 Scott County Community Health Profile Results**

- The percentage of students eligible for free and reduced lunch is continuing to increase.
- The percentage of overweight and obese children and adults is higher than the state percentage.
- School enrollment is anticipated to continue to decline in the county in the next five years.
- Children born in 1995-1997 tested for lead exceeded the state by 24.4% with the percent identified as lead poisoned was only slightly higher than the state.
- 98.% of school age children were fully immunized.
- 93.4% of children enrolled in daycare/preschool were fully immunized.
- Out of wedlock birth have continued to increase and percentages remain significantly higher than the state
- The number of low birth weight babies continues to fluctuate.
- The percentage of women who reported drinking alcohol during pregnancy is higher than the state percentage
- Scott County Community Services assisted 193 children in accessing outpatient psychotherapeutic services through payment assistance due to a lack of resources.
- The average monthly number of households receiving Food Stamp continues to increase.
- Of college students surveyed, 37.2% indicated they grew up with at least one smoker in the house.
- The confirmed child abuse rate remains steady at 31.8%.
- Low enrollment in Iowa/Illinois children's health insurance program (HAWK-I and Kid Care).
- Families with young children ages 0-5 do not have access to resources that promote the health, safety, and cognitive/ emotional development of their children.
- Synthetic estimates of percentages of overweight and obese are virtual the same as the state percent.

### **Child Care Accessibility and Affordability Results**

While affordable child care is often cited as a problem, child care availability in Scott County is increasing. Data gathered by Community Child Care Resource and Referral points to a gain of 2151 spaces within the last three years. The following is a breakdown of available spaces by setting and regulatory status.

#### **Population**

Children under the age of 5	10,989
Children 5 to 9 years	11,538
Children ages 10 to 14	12,147

#### **Child care capacity**

1067 programs
10,410 spaces

Type of setting	Number of Spaces	% of Capacity (of listed programs)
286 registered family child care homes	2,868	37%
70 non-registered family child care homes	350	5%
42 centers	3,008	39%
29 preschool programs	901	12%
9 school age programs	562	7%
439 total listed programs	7,689	100%
890 known non-listed*	4,579 (estimate)	
Estimated Total Program Capacity	12,268 (estimate)	

\*The number of non-registered, unknown “underground” programs is suspected to be much higher.

### **The Trilemma of Care – Quality/Affordability/Accessibility**

The results from recent community assessments and data collected by Child Care Resource & Referral seem to confirm that the trilemma of care can be used to describe the child care landscape in Scott County. Although no truly reliable figures exist in Scott County regarding unmet need for child care, the information listed above would seem to demonstrate that capacity is less of a problem than it was 5 or ten years ago. In the past two years, several large center based programs have opened their doors with an increased capacity of over 250 spaces and a third new center is scheduled to open in the fall of 2005.

Data gathered from providers indicate that there are not large waiting lists at most centers in Scott County. The number of families waiting for spaces in center-based facilities is more reflective of the demand for quality, affordable care. Those facilities that are either accredited or have a tradition of excellence are generally consistently full while those that are known to be of lesser quality are not. For example the Davenport School District currently has a waiting list of more than 200 families for their accredited, publicly supported child care program, yet there are many centers that are actively recruiting new families.

As parents have become more knowledgeable about the importance of placing their children in safe and nurturing environments, it is clear that the demand of quality care has risen. Not surprisingly, the providers that are able to maintain quality standards are also able to charge higher rates. By so doing, they often exclude children from moderate income families from their rosters. While working families with incomes below 185% of the federal poverty level have access to child care assistance, middle income families without such help find it impossible to afford to pay \$600 a month for care. Their selection of a provider is more determined by affordability and their options are more limited.

### **Weekly Cost of Full-Time Child Care in Scott County**

Center-Based Care	High	Low	Average	Average monthly & yearly cost
Infant Care	\$201	\$150	\$150	\$650/\$7800
Pre-K	\$162	\$120	\$140	\$606/\$7280
Home Based Care	High	Low	Average	Average monthly & yearly cost
Infant Care	\$125	\$75	\$100	\$450/\$5200
Pre-K	\$125	\$75	\$100	\$450/\$5200

## **Community Plan**

The process to update the Scott County Empowerment plan to better respond to the evolving needs of families with young children began over one year ago. The path followed mirrors the course undertaken at the state level designed to build the six fundamental components of the early childhood system – Parent, Family, and Community Engagement, Quality Services and Programs, Professional Development, Governance, Planning, and Administration, Resources and Funding, and Accountability for Results. Key stakeholders were identified and invited to participate in assessment, goal setting, and planning activities. At first the intent was to establish a formal advisory group to the Scott County Empowerment Board comprised of early childhood professionals and others concerned about the welfare of children 0-5. However, it became apparent that many of those who would be the most appropriate to serve were already members of the Area Education Agency Region IX Early Access Advisory Council.

Members of the Early Access Advisory Council expressing a desire to reach a higher degree of collaboration locally were aware of state level planning efforts and of the need to take a more systemic approach if Scott County were to continue to be successful in advancing school ready goals. As an alternative to forming yet another advisory group, the Early Access Advisory Council elected to expand representation and rename the group the Early Childhood Coordinating Council (ECCC).

Coordinating Council work groups were assembled to establish goals for the county using Sharon Lynn Kagan's framework cited above and adopted by the Early Childhood Iowa Stakeholders group. Leadership for each of the workgroups was provided by the AEA, Scott Community College, United Way, Child Health Specialty Clinics, and Scott County Empowerment. In addition to ECCC members, persons with needed expertise or perspectives were recruited to participate. Each group considered a "preferred future" for the children and families of Scott County and identified community assets and areas of needed improvement. Priority outcomes, related activities to achieve those outcomes, Empowerment and Partner responsibilities, and progress measures were developed by consensus and presented for review and approval by the full EC Coordinating Council and later to the Scott County Empowerment Board.

The resulting Scott County Early Childhood plan is a product of an extensive input and distillation process reflecting the insights and experience of parents, providers, human service and health professionals, students, business representatives and educators. It is a document that outlines shared responsibility for improving the well-being and school readiness of children 0-5 in Scott County by "Connecting the Dots" between Ready Families, Ready Communities, Ready Systems, Ready Schools, and Ready Children as promoted by Iowa Kids Count.

In developing the Scott County Early Childhood plan, members of the Early Childhood Coordinating Council and Scott County Empowerment Board have accepted shared responsibility for executing strategies and achieving outcomes related to each of the result areas. Members of both entities agreed that because of the ambitious nature of anticipated outcomes that the plan should serve as a basic road map to direct the work of the community over the next five years.

The Scott County Early Childhood plan is based upon the findings of the Early Childhood Coordinating Council workgroups which looked at existing resources in the community related to the essential components of a good early childhood system. Workgroup discussions led to several emerging themes within the framework of the six system components that later influenced the selection of priority outcomes including:

### **Quality Services and Programs**

- A targeted approach must be taken to improving quality in all child care environments
- Outcomes could be improved for at-risk children with earlier interventions
- Kindergarten readiness results for Scott County point to a lag in social/emotional development and a need to provide more tools to parents and care givers to close the gap between cognitive and social growth
- More children are displaying difficult behaviors in child care settings and parents and providers need more assistance in responding appropriately
- Too many children lack a medical and dental home or consistent point of care
- A greater percentage of lower income and at-risk children should have access to a preschool experience
- Additional strategies are needed to ease the transition from preschool to kindergarten

### **Parent, Family, and Community Engagement**

- More effective, neighborhood based strategies are needed to broaden the level of community engagement and support for early childhood programs
- Parents must have information that is more readily communicated and understood about the stages of child development and appropriate child rearing tips
- Opportunities must be seized to capitalize on the emerging interest of business leaders who see early childhood as a workforce investment and may be willing to contribute private dollars to expand programs and services
- Efforts must be intensified to encourage employers to adopt more family friendly work policies

### **Professional Development**

- Stability and professionalism are needed in the child care field which could be addressed in part through a credentialing system and corresponding compensation package
- The public undervalues child care as a profession and more must be done to raise the level of awareness and appreciation for the true cost of care
- There is a lack of core professional knowledge among a large percentage of child care providers and a need for additional funding for training and educational incentives

### **Resources and Funding**

- Fundraising goals and strategies should be established to finance a broader range of early childhood programs and services through a mix of public and private spending

### **Governance, Planning, and Administration**

- An inclusive, formalized coordinating body of stakeholders with adopted by-laws is needed to inform and guide the development of an integrated early childhood system in Scott County
- Partnership agreements must be established to maximize resources and increase the opportunities to successfully address child and family outcomes as identified in the plan

### **Accountability for Results**

- Early childhood stakeholders must be prepared to collect and report relevant information needed to measure progress towards priority outcomes
- An evaluation process must be in place to measure progress toward goal achievement involving all partners with shared responsibilities for executing the community plan

The recommendations of the workgroups are reflected in strategies included in the community plan which is organized according to state result area for consistency. An overarching goal has been selected for each result area and a mix of community-wide and more program specific outcomes identified. Data will be reported annually for priority outcomes only for those shaded and appear first in each result area for easy identification.

**2005-2010 SCOTT COUNTY EARLY CHILDHOOD PLAN  
(priority outcomes are shaded)**

**State Result:** Healthy Children

**State Results Indicators:** \* Percentage of low birth weight births \* Rate of immunization by age 2 (Department of Public Health)

**Community Goal:** Advance healthy physical and mental development for at-risk children

<b>Empowerment Activities</b>	<b>Partner Activities</b>	<b>Outcomes</b>	<b>Indicators</b>	<b>Data Sources</b>
<ul style="list-style-type: none"> <li>➤ Identify and provide support for purchase of education materials that stress importance of up-to-date immunizations</li> <li>➤ *Continue support for Child Care Auditor and Child Care Nurse Consultant</li> </ul>	<ul style="list-style-type: none"> <li>➤ Enhance outreach efforts to increase the immunization rate for 2 year olds in family child care settings by 10%</li> <li>➤ Include information at parent resource centers and parent workshops that address safety concerns and stress the importance of up-to-date immunizations</li> </ul>	95% of children with up to date immunizations by age 2	# of children with up to date immunizations by age 2 reported to child care providers and school	Child Care Provider records reviewed by Nurse Consultant and Family Day Care Home Monitor Kindergarten admission records
<ul style="list-style-type: none"> <li>➤ Research and support training and consultation activities that will build expertise among providers to successfully care for children with social and emotional problems.</li> <li>➤ Review findings from conclusion of the ABCD II pilot project and recommendations from the Scott County Early Childhood Coordinating Council</li> </ul>	<ul style="list-style-type: none"> <li>➤ Provide training activities for center and home based providers</li> <li>➤ Assess need for additional play therapy services</li> <li>➤ Examine possibility of supporting behavior management consultation services to providers</li> <li>➤ Consider findings from conclusion of the ABCD II pilot project and ways of possibly integrating strategies into the Early Childhood Community Plan</li> </ul>	50% of center based and 35% of registered home providers will demonstrate increased knowledge of working with children with behavioral problems <i>(Baseline Needed)</i>	# demonstrating enhanced knowledge through pre and post testing # of child care settings that remove a child from care due to behavioral problems # of providers completing PITC and other training	Child Care Provider Reports  PITC training evaluations
<ul style="list-style-type: none"> <li>➤ Strengthen and support communication among primary referral agencies</li> <li>➤ Support training opportunities for referring agencies</li> <li>➤ Report data</li> </ul>	<ul style="list-style-type: none"> <li>➤ Identify missing partners and broaden the number of participating referral agencies to Early Access through in-service training and networking</li> <li>➤ Provide training to child care providers regarding services offered by Early Access and how best to work with parents in making referrals</li> <li>➤ Increase general public awareness regarding the services provided by Early Access and how children may benefit</li> </ul>	10% increase per year of children referred to Early Access within 90 days of birth	# of children referred to Early Access with in 90 days of birth	Early Access
<ul style="list-style-type: none"> <li>➤ Continue to support family support programs that serve women prenatally including home visitation services and Stork's Nest</li> <li>➤ Continue participation in Health Mothers/Healthy Children initiative to refine assessment and referral process for pregnant women at risk for alcohol and drug use</li> </ul>	<ul style="list-style-type: none"> <li>➤ Review the educational content of family support programs for promotion of healthy births</li> <li>➤ Make recommendations for change as needed to improve birth outcomes</li> <li>➤ Implement Healthy Mothers/Healthy Children assessment and referral system</li> </ul>	Based on 2003 data, 20% reduction in low birth weight babies; 20% participation rate by pregnant women in family support programs	# of low birth weight babies # of pregnant women participating in family support programs	Scott County Health Department  Program reports

Empowerment Activities	Partner Activities	Outcomes	Indicators	Data Sources
<ul style="list-style-type: none"> <li>➤ Continue to fund family support programs that will increase the number of at-risk families with medical homes</li> <li>➤ Promote the medical home concept with child care providers and increase their ability to stress its importance with parents through the child care auditor and child care nurse consultant positions</li> <li>➤ * Advocate for frequent Continuing Medical Education for primary care physicians stressing culturally competent practices within the medical home</li> </ul>	<ul style="list-style-type: none"> <li>➤ Provide information to all registered or licensed children care providers about the importance and characteristics of a medical home</li> <li>➤ Work with members of the Iowa Medical Home Initiative Phase III Collaborative and other community leaders to assure that all practicing primary care physicians and pediatricians receive continuing medical education regarding the importance and characteristics of a medical home</li> <li>➤ * Increase awareness among health care professionals regarding medical home reference materials</li> </ul>	80% of children with a medical home or consistent point of care	# of children (parents) identifying a medical home to child care providers and school	Child Care Provider records reviewed by Nurse Consultant and Family Day Care Home Monitor Kindergarten admission records
<ul style="list-style-type: none"> <li>➤ Provide funding for public awareness and educational materials</li> <li>➤ Support training and consultation for child care providers and Universal Assessment staff</li> </ul>	<ul style="list-style-type: none"> <li>➤ Include culturally competent information about the importance of good oral health for children 0-5 in Well Baby Packets</li> <li>➤ Provide information and training on practices to promote good oral health in young children to all registered or licensed children care providers</li> <li>➤ Assess degree to which child care providers given oral health education are incorporating oral health practices in child settings</li> <li>➤ Work with leaders in the medical profession to assure that all practicing pediatricians receive continuing medical education regarding the importance and characteristics of the oral checklist</li> </ul>	10% increase in oral health services provided to children 0-5 <i>(Baseline Needed)</i>	# of physicians using the oral health checklist	Nurse Consultant to survey physicians use of oral health checklist
<ul style="list-style-type: none"> <li>➤ Facilitate communication between medical outreach workers, parents, and members of the Early Childhood Coordinating Council to reach agreement on significant barriers to Medicaid and Hawk-I enrollment</li> <li>➤ Support training and family-directed outreach efforts for child care providers</li> </ul>	<ul style="list-style-type: none"> <li>➤ Identify a minimum of 3 significant barriers to Medicaid and Hawk-I enrollment in Scott County and develop strategies to eliminate them</li> <li>➤ Train child care providers and school health nurses in culturally competent approaches to recruiting eligible families</li> </ul>	95% of children with health insurance	# of children (parents) reporting health insurance to child care providers and school	Child Care Provider records reviewed by Nurse Consultant and Family Day Care Home Monitor Kindergarten admission records
<ul style="list-style-type: none"> <li>➤ Support continuing medical education seminars for health care providers to improve identification rates</li> <li>➤ Coordinate and support multidisciplinary training for DHS and family support workers to enhance identification and referral rates</li> </ul>	<ul style="list-style-type: none"> <li>➤ Examine the need for additional training in child development among health care professionals in the community and select appropriate curriculum and coordinate trainings</li> </ul>	% of children in Early Access and Kindergarten with physical, social, emotional, and/or behavioral disabilities or delays <i>(Baseline Needed)</i>	# of children in Early Access & Kindergarten with physical, social, emotional, behavioral disabilities or delays	Early Access records School District records

**2005-2010 SCOTT COUNTY EARLY CHILDHOOD PLAN**

**State Result:** Children Ready for School

**State Results Indicators:** \* Percent of children with pre-literacy skills (DIBELS/DOE) \* Percent of children participating in a preschool program that is NAEYC accredited, meets Head Start Program Performance Standards, or meets a comparable set of standards (DOE)

**Community Goal:** Increase access to affordable quality early learning environments for all children

<b>Empowerment Activities</b>	<b>Partner Activities</b>	<b>Outcomes</b>	<b>Indicators</b>	<b>Data Sources</b>
<ul style="list-style-type: none"> <li>➤ Continue support for programs that provide low-income families with access to quality child care and early learning environments including Head Start Wrap-Around programs, Specialized Child Care for low-income children at-risk, and the Child Care Scholarship program</li> <li>➤ Develop and adopt guidelines to maximize access to School Ready preschool tuition funds</li> <li>➤ Design and launch fundraising campaign for endowment fund to match public resources with private resources</li> <li>➤ Support efforts to promote awareness among low-income families regarding assistance programs to access quality care</li> </ul>	<ul style="list-style-type: none"> <li>➤ Adopt Empowerment guidelines to maximize access to School Ready preschool tuition funds</li> <li>➤ Advocate for increased public and private sector spending at the local, state, and national levels</li> <li>➤ Generate revenue for the endowment fund to match public resources with private resources</li> <li>➤ Promote awareness among low-income families regarding assistance programs to access quality care</li> <li>➤ Provide ongoing evaluation regarding access and placement of low-income children in quality programs</li> </ul>	50% increase of low income families receiving Child Care Scholarships, Preschool Assistance funds or enrolled in Head Start or Shared Visions Programs	# of low income families receiving Child Care Scholarships, Preschool Assistance funds or enrolled in Head Start pt Shared Visions Programs.	Program specific records
<ul style="list-style-type: none"> <li>➤ Continue public awareness efforts regarding the characteristics and importance of a quality preschool experience for children</li> <li>➤ Research and present findings to determine gap groups and support strategies with target goals to increase attendance among these groups</li> <li>➤ Promote refinement of data collection to more accurately record preschool attendance</li> <li>➤ Support educational opportunities and trainings in culturally competent child development practices</li> </ul>	<ul style="list-style-type: none"> <li>➤ Conduct outreach efforts to promote awareness regarding the importance of a quality preschool experience among target populations</li> <li>➤ Analyze findings to determine gap groups and develop strategies to increase attendance by gap group families</li> <li>➤ Assist with collection of accurate data</li> </ul>	5% increase per year of Kindergarten children (parents) reporting a preschool experience <i>(Baseline Needed)</i>	# of Kindergarten children (parents) reporting a preschool experience	Kindergarten Readiness Survey
<ul style="list-style-type: none"> <li>➤ Support activities to increase awareness among low-income families regarding the characteristics of developmentally appropriate quality care</li> <li>➤ Support the establishment of district-linked website pages for the parents of preschool children to assist with transition to kindergarten</li> </ul>	<ul style="list-style-type: none"> <li>➤ Disseminate information regarding the importance and characteristics of quality care</li> <li>➤ Coordinate activities to ease transition into kindergarten for preschoolers through informative events that bring together parents, school officials, and child care providers</li> <li>➤ Provide expertise to school officials who are willing to add more web-based information regarding successful kindergarten transitioning suggestions for parents and providers</li> </ul>	5% increase per year of Kindergarten children evaluated as school ready (overall score of 4 or above) using the Scott County Kindergarten Readiness Survey <i>(Baseline Needed)</i>	# of registered Kindergarten students # of Kindergarten children evaluated for school readiness using the Scott County Kindergarten Readiness Survey	Participating School Districts
<ul style="list-style-type: none"> <li>➤ Support activities and services that assist in the development of pre-literacy skills</li> </ul>	<ul style="list-style-type: none"> <li>➤ Conduct training through the Literacy Team and others for child care providers to enhance their skills in development of pre-literacy skills</li> </ul>	80% of Kindergarten children (parents) evaluated as having pre-literacy skills <i>(Baseline Needed)</i>	# of Kindergarten children (parents) evaluated as having pre-literacy skills	Kindergarten Readiness Survey

**2005-2010 SCOTT COUNTY EARLY CHILDHOOD PLAN**

**State Result:** Safe and Supportive Communities

**State Result Indicators:** \* Crime Rate Index (DPS) \* Juvenile Crime Rate (DPS/CJJP) \* Employment Rate (IWD) \* Child death rate due to accidents (DPH)

**Community Goal:** Increase awareness regarding the importance of the early years

<b>Empowerment Activities</b>	<b>Partner Activities</b>	<b>Outcomes</b>	<b>Indicators</b>	<b>Data Sources</b>
<ul style="list-style-type: none"> <li>➤ Foster greater support for early childhood programs and facilitate development of a finance plan for early childhood in Scott County</li> <li>➤ Host event to recognize early childhood champions in the community</li> <li>➤ Advocate for representation within leading business and civic organizations</li> </ul>	<ul style="list-style-type: none"> <li>➤ Host educational events for members of the business community with local information about early childhood as an investment opportunity</li> <li>➤ Develop a local early childhood business plan to finance early childhood programs and services in Scott County</li> <li>➤ Recognize early childhood champions in the community</li> <li>➤ Acquire representation within leading business organizations</li> </ul>	5% increase each year in the total amount of funds contributed by business and private individuals to early childhood programming	Amount of money contributed by business to early childhood programming	United Way records Empowerment Foundation
<ul style="list-style-type: none"> <li>➤ Continue public awareness campaign regarding the importance of the early years and access to quality programs and services</li> <li>➤ Support acquisition and participate in the selection of educational materials for a community-wide public awareness campaign</li> <li>➤ Provide support for the creation of new promotional materials responsive to the concerns of at-risk families</li> <li>➤ Seek Community of Promise designation from the America's Promise organization and promote community-wide recognition of the Five Promises</li> <li>➤ Launch campaign for the Endowment Fund</li> </ul>	<ul style="list-style-type: none"> <li>➤ Support and maximize early childhood advocacy and public awareness efforts including the Mind in the Making and Born Learning Campaigns</li> <li>➤ Offer ongoing opportunities for parents, care givers, and other adults to learn about healthy child development, access to services and effective parenting and care giving through a coordinated public awareness campaign using a variety of delivery mechanisms including media (television, radio, print), web sites, public gathering places, places of employment, physicians' offices, and speakers' bureau</li> <li>➤ Continue to build community focal points for access to information regarding early childhood development and service coordination including public libraries, schools, and popular retail centers</li> <li>➤ Support Scott County Kid's Community of Promise application to the America's Promise organization and facilitate partnership effort to promote community-wide recognition of the Five Promises</li> </ul>	30% viewer recognition of Scott County Kids quality child care message and Born Learning campaigns  50% increase of local airtime that includes practical information about the early years, healthy child development and helpful parenting techniques <i>(Baseline Needed)</i>	# of minutes of airtime that includes educational information about the early years # of viewers indicating recognition of Scott County Kids quality child care messages and Born Learning # of web site hits # of hits on 211 system # of 211 packets sent	Channel 6 and other local media sources  Scott County IT system  United Way
<ul style="list-style-type: none"> <li>➤ Promote and support awareness and education regarding child safety</li> <li>➤ Analyze findings from Child Death Review Team to determine emerging trends</li> <li>➤ Support effort to improve playground safety in child care settings</li> </ul>	<ul style="list-style-type: none"> <li>➤ Identify and collaborate with grassroots organizations to coordinate educational and social events in targeted neighborhoods that will strengthen social ties among families while promoting safe environments for young children</li> <li>➤ Determine additional strategies based on emerging trends identified by the Child Death Review Team</li> </ul>	Maintain the rate of child deaths due to accidental injury at or below the state rate	# of child deaths due to accidental injury	DPH Records Child Care Nurse Consultant Hospital Records
<ul style="list-style-type: none"> <li>➤ Co-sponsor and/or participate in early childhood forums and educational events with business and community leaders</li> <li>➤ Support organizations that can provide information at the work place to young parents regarding child development and community resources</li> </ul>	<ul style="list-style-type: none"> <li>➤ Collaborate with area businesses and HR department to provide information to young parents regarding child development information and community resources</li> <li>➤ Offer employer sponsored "lunch and learn" seminars for parents of young children</li> </ul>	1% increase in businesses with family friendly policies <i>(Baseline Needed)</i>	# of businesses with family friendly policies	Chambers of Commerce United Way

## 2005-2010 SCOTT COUNTY EARLY CHILDHOOD PLAN

**State Result:** Secure and Nurturing Families

**State Results Indicators:** \* Child Abuse Rate (DHS) \* Percent of all births to mothers under age 20 (DPH Vital Statistics) \* Teen birth rate (DPH) \* Percent of children under 6 living at or below poverty (Census) \* Percent of children under 6 with all parents in the work force (Census) \* Domestic Abuse Victim Rate (DPS)

**Community Goal:** Increase positive relationships between children and parents

Empowerment Activities	Partner Activities	Outcomes	Indicators	Data Sources
<ul style="list-style-type: none"> <li>➤ Continue support for family support programs with researched based practices</li> <li>➤ Provide support for the creation of new promotional materials for family support and home visitation services and resources that are culturally competent and responsive to the concerns of at-risk families</li> </ul>	<ul style="list-style-type: none"> <li>➤ Promote the application of best practice home visitation models by providers of family support services in Scott County and provide a forum for on-going dialogue regarding strategies that increase child rearing competencies for high-risk parents</li> <li>➤ Provide practical information on developmentally appropriate practices to at-risk families</li> </ul>	80% of at-risk families receiving in-home services for 3 mos. will have improved parent child interactions	# of at-risk families receiving in-home services for 3 mos. will have improved parent child interactions	In-home services assessments
<ul style="list-style-type: none"> <li>➤ Continue support for early literacy and family support programs</li> <li>➤ Identify new outreach strategies to link parents and preschool children to school based early literacy activities</li> <li>➤ Research and promote the use of best practices for family support and early literacy programs through coordination and training activities</li> <li>➤ Strengthen connections between early literacy and family support programs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Identify and highlight outlets to obtain information on social/emotional development</li> <li>➤ Provide practical information to parents about Iowa's Early Learning Standards through early literacy and family support programs</li> <li>➤ Provide culturally competent information on developmentally appropriate practices to at-risk families</li> <li>➤ Investigate barriers preventing more children from attending early literacy and parent support programs co-located in area schools</li> </ul>	80% of parents attending early literacy and support programs will report an increase in child development knowledge	# of parents attending early literacy and support programs will report an increase in child development knowledge	Early literacy program pre and post test data
<ul style="list-style-type: none"> <li>➤ Work with members of the Early Childhood Coordinating Council to identify effective parenting and caregiver curriculums and develop a schedule of community-based training in a variety of settings</li> <li>➤ Support training sessions and the purchase and distribution of educational materials</li> <li>➤ Work with members of the Early Childhood Coordinating Council to examine and evaluate current efforts to identify women with prenatal and post natal depression.</li> <li>➤ Encourage and/or facilitate the creation of a task force of health care professionals and mental health workers able to select or create educational materials for distribution to parents regarding how to recognize and seek help for prenatal and postpartum depression</li> <li>➤ Support child development and positive parenting training for child protection workers</li> </ul>	<ul style="list-style-type: none"> <li>➤ Develop and offer information sessions to parents and care givers on social/emotional development which will emphasize reasonable expectations for children and sound child rearing techniques</li> <li>➤ Provide information to new parents prenatally, in the hospital, or soon after the birth of their children about realistic expectations for children, how children learn, positive parenting, and child guidance practices</li> <li>➤ Expand community based opportunities for women to learn about or seek assistance regarding prenatal and post-natal depression</li> <li>➤ Refine the referral and case management process to assure the most appropriate placements are given for families in need of support services</li> <li>➤ Confer with mental health professionals regarding the effects of maternal depression and child development</li> <li>➤ Confer with mental health professionals regarding selection and or development of educational materials for distribution to parents regarding recognizing and how to seek help for prenatal and postpartum depression</li> </ul>	Maintain rate of children with confirmed or founded abuse cases enrolled in home visitation programs at 5% or less.	# of children with confirmed or founded abuse cases who are enrolled in home visitation program	DHS records VNA Home Visitation HOPES FaDSS Early Head Start (survey) AEA Parents As Teachers

Empowerment Activities	Partner Activities	Outcomes	Indicators	Data Sources
<ul style="list-style-type: none"> <li>➤ Continue support for research based family support programs</li> <li>➤ Support training activities for family support workers and health care professionals</li> <li>➤ Research and promote the use of best practices for family support and home visitation programs through coordination and training activities</li> <li>➤ Support activities and strategies to increase single parent participation in family support programs</li> </ul>	<ul style="list-style-type: none"> <li>➤ Provide multidisciplinary training in identification and referral protocols for family support agencies</li> <li>➤ Promote the use of best practice, research/evidence based curriculum for use by family support workers</li> <li>➤ Promote establishment of parenting classes/seminars in a variety of venues that will accommodate the life styles of working dual and single parent families</li> <li>➤ *Strengthen linkages between family support and employment and training programs</li> <li>➤ Refine the referral and case management process to assure the most appropriate placements are given for families in need of support services</li> <li>➤ Examine barriers to single parent participation in family support programs</li> <li>➤ Develop and recommend strategies to address identified barriers</li> </ul>	<p>10% increase in the number of families participating in family support programs</p> <p>10% increase of single parent families participating in home visitation programs ((Baseline Needed))</p>	<p># of families participating in family support programs</p> <p># of single parent families participating in home visitation programs</p>	<p>Empowerment Reports</p> <p>United Way Data</p> <p>Program Surveys</p>
<ul style="list-style-type: none"> <li>➤ Research and support training to build skills in culturally competent practices</li> </ul>	<ul style="list-style-type: none"> <li>➤ Analyze current family support practices with respect to cultural competency and identify any needed curriculum changes</li> <li>➤ Explore opportunities to create and support culturally competent practices</li> </ul>	<p>10% increase of minority families participating in home visitation programs (Baseline Needed)</p>	<p># of minority families participating in home visitation programs</p>	<p>Empowerment Reports</p> <p>Program Surveys</p>
<ul style="list-style-type: none"> <li>➤ Investigate the prevalence of domestic violence in families with children 0-5 as it relates to child abuse and substance abuse</li> <li>➤ Promote and support training opportunities for family support workers and child care providers to address domestic violence</li> </ul>	<ul style="list-style-type: none"> <li>➤ Provide training to Family Support Program staff to improve identification and referral for domestic violence</li> <li>➤ Explore strategies for addressing domestic violence as it relates to child abuse and substance abuse</li> </ul>	<p>* 5% increase in cases identified and referred to domestic violence services by Empowerment Family Support Services</p> <p>* 95% of training attendees will indicate an increase in awareness and knowledge regarding identification and referral for domestic violence</p>	<p># of cases referred to domestic violence services by Family Support Services</p> <p># of training attendees indicating an increase in awareness and knowledge of identification and referral for domestic violence</p>	<p>Empowerment Program Reports</p> <p>Pretest and Posttest Data from trainings</p>
<ul style="list-style-type: none"> <li>➤ Engage other community programs to emphasize child development as a primary thread in the educational process</li> <li>➤ Research opportunities for prenatal and post natal parent education classes that emphasize child development</li> </ul>	<ul style="list-style-type: none"> <li>➤ Select updated educational materials that include basic information regarding child development for distribution through physicians' offices, the Stork's Nest, Welcome Baby Packets, Family Support Programs, and other outlets</li> <li>➤ Investigate researched-based strategies that will foster positive outcomes for at-risk children in family support programs</li> <li>➤ Establish mentoring programs as part of creative outreach activities to increase comfort level of participation in support programs among at-risk families</li> </ul>	<p>% of services and programming activities emphasizing child development (Baseline Needed)</p>	<p># of services and programming activities that incorporate child development concepts</p>	<p>Program Surveys</p> <p>Training Pretest and Posttest Data</p>

**2005-2008 SCOTT COUNTY EARLY CHILDHOOD PLAN**

**State Result:** Secure and Nurturing Child Care Environments

**State Results Indicators:** \* Number of licensed and registered child care slots (DHS) \* Number of confirmed child abuse by child care providers (DHS) \* Percent of child care providers in upper tier of quality rating system (DHS) Child Abuse Rate (DHS) \*

**Community Goal:** Increase the number of center and home-based providers meeting quality standards

<b>Empowerment Activities</b>	<b>Partner Activities</b>	<b>Outcomes</b>	<b>Indicators</b>	<b>Data Sources</b>
<ul style="list-style-type: none"> <li>➤ Support implementation of and provide technical assistance for the accreditation and voluntary Quality Rating System project</li> </ul>	<ul style="list-style-type: none"> <li>➤ Recruit centers interested in participating in quality improvement efforts</li> <li>➤ Provide training and technical assistance to centers participating in quality improvement efforts</li> <li>➤ Train early childhood professionals in child care assessment tools (i.e., Environmental Childcare Rating Scale and Infant and Toddler Rating Scale) to lay the foundation for the development of center improvement plans</li> <li>➤ Consider revenue strategies to assist centers with efforts to retain qualified staff</li> <li>➤ Investigate opportunities to increase compensation for child care providers</li> </ul>	25 Centers will be accredited or meet quality standards of 4 or above on Quality Rating System scale	# of Centers accredited or meeting quality standards	Empowerment
<ul style="list-style-type: none"> <li>➤ Provide leadership, coordination, and staff support for the family child care accreditation project</li> <li>➤ Continue support for Family Child Care Auditor position to improve quality among registered providers and encourage non-registered providers to participate in the regulatory/quality assurance system</li> </ul>	<ul style="list-style-type: none"> <li>➤ Improve efforts to alert non-registered family child care providers to the advantages of becoming registered homes</li> <li>➤ Recruit candidates for family child care accreditation project</li> <li>➤ Provide and or assist with training, technical assistance, and mentoring</li> </ul>	20 Family Child Development Homes will be accredited or meet quality standards of 4 or above on Quality Rating Scale	# of Family Day Care Homes accredited or meeting quality standards	Empowerment
<ul style="list-style-type: none"> <li>➤ Continue support of behavior management training and educational opportunities</li> <li>➤ Support training opportunities for providers to learn about community resources to assist with helping children with behavioral difficulties</li> <li>➤ Support training on signs of child abuse in child care facilities and reporting procedures</li> <li>➤ Support programs able to provide developmentally appropriate care for children with behavioral problems</li> </ul>	<ul style="list-style-type: none"> <li>➤ Sponsor behavior management training for providers to learn about community resources to assist with helping children with behavioral difficulties</li> <li>➤ Provide parent education regarding signs of child abuse in child care facilities and reporting procedures</li> </ul>	5% decrease of confirmed child abuse cases occurring in child care settings	# of confirmed child abuse cases occurring in child care settings	DHS

Empowerment Activities	Partner Activities	Outcomes	Indicators	Data Sources
<ul style="list-style-type: none"> <li>➤ Increase the number of early childhood professionals trained in the Early Childhood Environments Rating Scale and Infant and Toddler Environment Rating Scale to provide evaluation and consultation services to centers developing and executing center improvement plans</li> <li>➤ Fund and coordinate training on best practice and provide incentives for successful completion</li> <li>➤ Provide support to increase those receiving PITC training</li> <li>➤ *Promote professional development opportunities and acquisition of credentials including CDA and AA degree through support for TEACH and cooperative efforts with Scott Community College</li> <li>➤ Support center and family child care improvement efforts through training and mentoring targeted towards best practices</li> <li>➤ Support training and education efforts to acquaint providers with the Quality Rating System, Early Learning, Quality Preschool Program Standards, and other quality standards</li> <li>➤ Provide support and secure technical assistance for early childhood professionals willing to participate in quality improvement projects</li> <li>➤ Provide support to licensed and registered programs meeting quality standards to increase capacity</li> <li>➤ Support ongoing analysis of the need for additional quality slots</li> </ul>	<ul style="list-style-type: none"> <li>➤ Provide training and technical assistance regarding the Quality Rating System and Early Learning standards</li> <li>➤ Increase number of providers receiving PITC training</li> <li>➤ Investigate available curricula in preschool-age child development training of similar scope and complementary to PITC training and implement training</li> <li>➤ Provide technical assistance to individual centers and home providers</li> <li>➤ Provide ongoing best practice training to providers focused upon child development and behavior management practices</li> <li>➤ Consider feasibility of offering locally sponsored online learning</li> <li>➤ Support center and family child care improvement efforts through culturally competent training targeted towards best practices</li> <li>➤ Explore and recommend strategies for increasing licensed and registered child care slots</li> </ul>	<p>30% of children under the age of 6 receiving care will be in accredited settings or in other settings meeting quality standards (rank of 3 or higher by QRS standards)</p> <p>30% of providers actively engaged in pursuing accreditation or improvement programs</p> <p>10% increase of licensed and registered child care slots</p>	<p># of children under the age of 6 receiving care in accredited settings or meeting quality standards</p> <p># of providers actively pursuing accreditation or quality improvement plans</p> <p># of licensed and registered child care slots</p>	<p>ISU Extension AEA CCR&amp;R Scott Community College Empowerment DHS</p>
<ul style="list-style-type: none"> <li>➤ Facilitate discussion among early childhood providers and minority representatives</li> <li>➤ Support training opportunities to reinforce best practices in culturally competent care</li> </ul>	<ul style="list-style-type: none"> <li>➤ Collaborate with minority providers and community leaders to identify ways in which culturally competent practices can be strengthened in early childhood environments</li> <li>➤ Research and apply best practice regarding culturally competent care and education through training and mentoring activities; including cross training activities with minority providers</li> </ul>	<p>10% of all minority children receiving care will be in accredited programs or those meeting quality standards <i>(Baseline Needed)</i></p>	<p># of minority children receiving care will be in accredited program or those meeting quality standards</p>	<p>Survey of funded accredited programs or those meeting quality standards</p>
<ul style="list-style-type: none"> <li>➤ Support training activities for child care providers to respond to the special developmental needs of drug and alcohol affected children</li> <li>➤ Consider funding options for ongoing services</li> <li>➤ Assist with ongoing community planning activities targeted to meeting the needs of drug/alcohol exposed</li> </ul>	<ul style="list-style-type: none"> <li>➤ Provide special training to child care providers to respond to the special developmental needs of drug and alcohol affected children</li> <li>➤ Increase access to play therapy</li> <li>➤ Provide access to behavior management consultation services for all child care centers</li> </ul>	<p>% of child care settings available to meet the special needs of drug/alcohol exposed children or parents in substance abuse treatment</p>	<p># of child care settings available to meet the special needs of drug/alcohol exposed children or parents in substance abuse treatment</p>	<p>Empowerment</p>

children				
➤ Select and fund qualified sites to care for eligible children				

## **Plan Implementation**

The FY 06 Scott County Empowerment budget as submitted provides support for a vast percentage of priority strategies listed as Empowerment responsibilities. In addition, the following individuals representing a diverse group of public and private agencies, organizations, and constituencies who participated in the development of the community plan have pledged their support in working toward outcome achievement. These partners bring to the table a wealth of expertise and public and private resources which will be brought to bear in tackling each strategy area.

## **Evaluation**

Progress on plan outcomes will be assessed at regularly scheduled meetings of the Early Childhood Coordinating Council and Scott County Kids Empowerment Board. Areas in which the partners fail to make progress will be re-evaluated and if necessary, new target goals or strategies discussed and adopted. For this purpose regular meetings of the Early Childhood Coordinating Council will be held as well as bi-monthly meetings of the Empowerment Grants Management Committee. Quarterly progress reports will be made to the Empowerment Board.

## **Partners for Children**

The progress that has been made on behalf of children in Scott County is the result of the commitment on the part of many agencies and individuals to work collaboratively. The members of the Scott County Kids Empowerment Board extend their sincere appreciation and gratitude to the following individuals and organizations for contributions made to improving the health and school readiness of children in our community.

### **Members of the Early Childhood Coordinating Council and Affiliated Workgroups**

<b>Name</b>	<b>Agency</b>
Helen Benker	Iowa East Central TRAIN FaDDS
Jennifer Best	Iowa State University Extension
Lane Bleeker	Youth Pastor, LeClaire
Judy Boland	AEA Region IX
Scott Caldwell	United Way of the Quad Cities
Katherine Cameron	AEA/Early Access
Debra Carlson	Associated Employers
Tami Chumbley	Bettendorf Library
Dr. Joe Cowley	Center for Alcohol and Drug Services
Kathy Erickson	Davenport Schools
Sandi Fink	Home Child Care Provider
Kathryn Graver	Scott Community College
Deb Hahn	St. Ambrose Children's Campus
Michele Hancock	Positive Parenting at Trinity
Michele Hornaday	Genesis Visiting Nurses Association
Shari Huecksteadt	AEA/Parents As Teachers
Jennifer Jansen	AEA/Parents As Teachers
Dr. Ida Johnson	United Neighbors
Mary Johnson	Parent Representative
Jody Kealy	Child Health Specialty Clinics
Tiffany Kennedy	Scott County Health Dept.
Joyce Leavell	AEA/Early Access
Janet Lopez	Department of Human Services
Peg Macek	Child Health Specialty Clinics
June Martin	AEA/Early Access
Kathy Morency	Assets Trainer
Anna Morrison	CCR&R – Region V
Barbara Newcomb	CCR&R – Region V
Liz Novack	CCR&R – Region V
Shauna Norby	Scott County Health Dept.
Georgeann Norbo	Department of Human Services
Martha Owens	Head Start
Lori Parcel	Genesis Visiting Nurses Association
Analisa Pearson	Scott County Health Dept.
Wendy Peterson	Iowa State University Extension
Lorelei Pfautz	Friendly House
Mel Piff	Lutheran Services in Iowa

Kathy Polzin	University of Iowa
Janet Rector	Center for Alcohol and Drug Services
Tammy Rogers	Bettendorf School-to-Work
Amy Rowell	Scott County Family Y
Jennifer Rushton	Center for Alcohol and Drug Services
Lee Schmeltz	AEA Region IX
Heidi Schlueter	Iowa East Central TRAIN Early Head Start
Kathy Schwitzer	Home Child Care Provider
Lynn Service	Vera French Community Mental Health
Becky Sipes	United Way of the Quad Cities
Beverly Smith	Community Health Care
Jean Street	Quad Cities Vineyard Christian Fellowship
Sue Swisher	Child Abuse Council
Denise Terry	AEA Region IX
William Thiessen	Iowa East Central TRAIN Head Start
Amy Thoreson	Scott County Health Dept.
Ann Tubbs	Vera French Community Mental Health
Amy Wichman	Bettendorf Schools
Kathy Yoke	CCR&R Region V