



August, 2011

Mr. Harold F. Mayer  
The Oscar G. and Elsa S. Mayer Family Foundation  
1 South Pinckney Street, Suite 312  
Madison, WI 53703

RE: Grant Interim Progress Summary & Report for \$30,000 Grant Received January, 2011

Dear Mr. Mayer,

Fewer than half of the children in Madison's low-income families have the skills necessary to begin school. By five years of age, Madison children living in poverty significantly lag behind their peers in cognitive skills including reading readiness, number skills, problem solving, creativity and memory. Research shows that children that start school behind, stay behind.

Alarmed by this reality, Children's Service Society of Wisconsin (CSSW) launched KinderReady, a community-wide initiative using evidence-based best practices in early childhood development and education. This program has a particular focus on serving at-risk families with children age birth to five from disadvantaged backgrounds in Madison, Wisconsin.

In January 2011, the Oscar G. and Elsa S. Mayer Family Foundation generously approved a grant in the amount of \$30,000 as an investment in KinderReady: *Building Kindergarten-Ready Kids*. We are pleased to submit the following Interim Report detailing the progress of this grant to date.

We are extremely grateful to the Mayer Family for its partnership in KinderReady and the care, concern and compassion for children exhibited through your generosity. Together, we are empowering children to succeed in school and in life. Thank you for sharing our vision.

Should you have any questions relating to the following report or would like additional information, please do not hesitate to contact us.

Sincerely,

A handwritten signature in black ink that reads "Lynn".

Lynn Riley  
Prevention Programs Manager

A handwritten signature in black ink that reads "Keri".

Keri Brunelle  
Development Manager

**Interim Report/Progress Summary on Identified Outcomes (Referencing Section IV in our 10/11/10 Proposal)**

**1) Increased kindergarten readiness**

School readiness includes the readiness of the individual child, the school's readiness for children, and the ability of the family and community to support optimal early child development. Many children enter kindergarten with limitations in their social, emotional, cognitive, and physical development that might have been significantly diminished or eliminated through early identification of and attention to child and family needs. By increasing a parent's level of knowledge and interaction with their child in these early formative years, many of these limitations can be minimized allowing a child to be ready to enter kindergarten. Research has shown that providing in-home education and role modeling to these parents during this time is an effective way to increase this level of knowledge and interaction.

Some interesting and telling demographics of the children KinderReady is serving include:

- 53% of are being raised by one or more parents who did not complete high school;
- 80% are living in poverty;
- 53% live in a home where English is not their first language.

In the past year (July 2010 – June 2011), KinderReady staff have completed almost 1300 home visits to 131 children and their caregivers. Considering the entire family constellation, a total of 557 adults and children were serviced in the last year in the KinderReady program.

The only way semi-consistent way of measuring 'kindergarten readiness' that we have found is through the Madison Metropolitan School District's (MMSD) "Kindergarten Screener". This screener is not research nor evidence based, however, it is offered to incoming kindergartners as a screening tool and for determining eligibility for the MMSD pre-kindergarten summer school program.

Percentage of children who **'passed'** the Kindergarten screener in the spring of 2011:

	KinderReady:	MMSD:
Overall:	21%	60%
Students living in Poverty:	25%	30%
English as a second language	25%	unavailable

Further analysis of the KinderReady screener data shows that almost 50% of the KinderReady children who did not pass the screener have been identified with developmental delays and many are receiving other early intervention specialized services. CSSW and KinderReady are proud of the prevention and early intervention work we are doing with this high risk population. The positive feedback and stories from the parents we work with speak volumes to the success of the program.

**2) Ensure that 100% of children in our program have an identified Medical Home**

The purpose of incorporating this goal in KinderReady's outcomes is our recognition of the importance that families establish roots in their communities while identifying vital community resources and support services and fostering consistent and appropriate healthcare for their children. Our staff helps families establish a connection with a primary family physician and/or pediatrician with whom the family can build a long-lasting relationship versus the more common occurrence of families seeing healthcare providers as simply a means to an end. A Medical Home then becomes a resource to the family for not just medical needs, but social, emotional, educational, and overall well-being needs. 100% of KinderReady parents are educated about the importance of and have been assisted in establishing a family Medical Home.

**3) 100% of caregivers with children identified with potential developmental delays will be encouraged to follow up with further, specialized services**

The KinderReady program utilizes two developmental screening tools: the Ages and Stages Questionnaire © (ASQ) and the Ages and Stages Questionnaire:Social Emotional Questionnaire © (ASQ:SE). These questionnaires are administered at the beginning of a child's participation in the program and then at each 6 month interval from 18 months to five years old. The results and follow-up, including referrals made, are tracked using Wisconsin's Secure Public Health Electronic Record Environment (SPHERE) database. Of the participants in the KinderReady program, 100% are screened with the results sent to the child's Medical Home. Of those families whose children have been identified as being at risk for developmental delays, 100% are offered information and support in making referrals to outside resources for further assessment and intervention services. This year, 21% of KinderReady children have been identified with potential delays vs. 16% of the population

statewide. This finding suggests that the KinderReady program is working with more challenged and at-risk children and families than the population at large.

#### **4) 70% of KinderReady customers will rank our services as EXCELLENT**

CSSW conducts quarterly client satisfaction surveys agency wide as a way to gauge the quality of services that are provided to our consumers. Of the KinderReady families that were surveyed in the first and second quarters of 2011, 74% of the families ranked the quality of the services they receive as excellent. 96% of the families surveyed ranked the services they receive from KinderReady staff as "Very Good" or "Excellent".

#### **Unanticipated Developments, Changes or Challenges to KinderReady**

One unanticipated development is the loss of funding for the CSSW Family Resource Center (FRC), which resulted in the FRC being closed effective July 1, 2011. Dane County and CSSW (including KinderReady programming to provide the home visiting component of the proposed network) partnered and proposed a model to meet the new criteria for the Family Resource Centers grant through Children's Trust Fund (CTF), but the county was not awarded this grant. The closing of the FRC is a great loss to the Dane County community.

A continued challenge to the KinderReady program is not getting the Screener scores that are targeted. We outline our plan to address this challenge, along with modifications that will be made, in the next steps section of this report.

Another unexpected change has been a decrease in our funding from the Cuna Mutual Group by \$30,000 annually. CSSW plans to maintain program solidarity despite this challenge by increasing the community's awareness of the program's importance and impact on families and seeking additional financial and programmatic support from other local funders as well as looking into grant opportunities.

Beginning in January 2011, CSSW partnered with Americorps Volunteers to provide additional support to our KinderReady families. To date, we have recruited 14 volunteers that have been working with 13 of our KinderReady families. The volunteers visit the family homes twice a month to read to the children. KinderReady staff provides direction to the volunteers so that the reading materials complement the area of teaching being provided through the Parents as Teachers (PAT) curriculum.

#### **Our next steps for the remainder of the grant period include:**

- 1) Greater purposeful integration of specific KinderReady – MMSD measures into the PAT home visitation component of KinderReady and the use of a specific progress monitoring tool recently identified by literacy experts at MMSD. This will measure our children's progress in acquiring early learning skills and identify areas on which to concentrate more heavily.
- 2) Piloting the Parent Child Home Program in September of 2011 with a subset of our KinderReady families with 2 year old children.
- 3) Partnering and collaborating with Dane County's Early Childhood Initiative (ECI) program to promote a more integrated early childhood development and education curriculum of services in targeted at-risk Madison communities.
- 4) Once targeted communities are identified, partnering and collaborating with the select schools in these communities to provide more purposeful education and support to the identified at-risk families to facilitate increased home stability and family involvement in early math and literacy skills and school preparedness/success with their children.
- 5) Continuing and growing our KinderReady programming with the use of Americorps volunteers.
- 6) Keeping families engaged over a longer period of time and developing ways to transition them into kindergarten by connecting parents to their Parent-Teacher Organizations/Associations, connecting parents to their child's teacher, and using Parent-to Parent mentoring.
- 7) Continuing to capitalize on the array of services and expertise housed under the Children's Service Society of Wisconsin umbrella. KinderReady works in close collaboration with other CSSW programs, including Joining Forces for Families; Community Support Specialists; Mobile Play & Learn; and Child & Family Counseling. When a family becomes involved in KinderReady, there are a number of impactful CSSW programs and services that surround them. CSSW serves thousands of children and caregivers, supporting and educating them through the early years of parenting to build a strong foundation for Dane County kids.

## Lessons Learned

While the desired outcomes of the Kindergarten Screener 'scores' have not been attained, this is not viewed as an issue. It is felt that this outcome has not been met due to the screener only focusing on early math and literacy skills. Research shows that models like KinderReady's that also consider children's physical, social and emotional progress are most effective in supporting school readiness. In KinderReady, we work with the "the whole child" and his/her caregivers. CSSW is confident that KinderReady is doing excellent, research and evidence-based work with children and their caregivers.

There are a variety of early intervention home visiting programs that are evidence-based. These programs have varying foci in curriculum as well as targeted ages of children. Given the challenges with the KinderReady outcomes obtained to date utilizing the PAT model along with proposed changes to the PAT model, it is felt that this may be a time to explore alternative evidence-based models. Specifically we are interested in comparing the PAT and Parent Child Home Program (PCHP) models.

The PAT model has undergone some changes to its Foundational and Model Implementation Curriculum. These revisions are felt to be more representative of the way the program conducts its training and puts their work with vulnerable families first. These revisions are reflected across several domains of the PAT structure and approach. The Philosophy and Theoretical Framework has shifted from a strengths model to a human ecology and family systems, developmental parenting, attribution theory, empowerment and self-efficacy model. The Personal Visit Approach and Content has shifted from an instructional focus on child development to a focus on healthy pregnancies, parent-child interaction, development-centered parenting, and family well-being through the parent educators' facilitation, reflection, and partnering with the families. The Structure of the Personal Visit has shifted from five elements (rapport, observation, parent-child activity, discussion, and summary) to opening, parent-child interaction, development-centered partnering, family-well being, and closing. The Screening process has shifted from a child screening to a family-centered assessment child screening. The Relationship between the Parenting and Child Development has shifted its focus from parenting issues to seven developmental topics (sleep, attachment, nutrition, discipline, routines/transitions, safety, and health) addressed throughout the child's development. The Parenting Behavior has shifted from no specific behaviors: designer, authority, consultant to parenting specific behaviors (nurturing, designing/guiding, responding, communicating, supporting and learning). Lastly, the Curriculum Structure has shifted from specialized visits and personal visit plans by month to Foundational visits (first visit, child development, parenting behaviors, developmental topics, brain development, family dynamics and culture, family supports, planning as partners) and Guided Parenting Tools.

The Parent-Child Home Program (PCHP) is a 45-year-old national evidence-based early literacy, school readiness, parenting program specifically designed to serve at-risk families with two and three-year-old children. The Program's intensive home visiting model addresses school readiness (including early literacy and early numeracy), child development, and parenting skills. The program model requires the participation of both parent (and other primary caregiver) and child together during twice a week visits for a minimum of 23 weeks in each program cycle or year. There are two program cycles or years, for a total of 92 visits. The PCHP curriculum is designed around a developmental progression of books, educational toys, and activities and builds on the research-based understanding that children learn best within the context of a loving, nurturing relationship. The PCHP curriculum is based on the critical role of parent-child attachment in a child's successful emotional and cognitive development, and builds on this foundation to support the child's language and literacy development during the pre-school years. Beginning in September 2011, KinderReady will be partnering with United Way, AmeriCorps, and The Centers for Families to do a pilot of the PCHP program, targeting two-year-old children that will receive the PCHP model for 2 years until the child's entrance into the 4-K programming. KinderReady will serve 16 children with this program in the 2-year PCHP program. Fifty children are targeted to be served in this pilot program, with The Centers for Families and AmeriCorps volunteers to serve the remaining targeted children/families. In August 2011, CSSW, The Centers for Families, and United Way managers will be attending a 3-day training on the PCHP model and initiating the beginning of this pilot program.

By experimenting with each of these programs, it is felt that KinderReady can explore various ways to try to maximally enhance a child's kindergarten readiness through early home visiting services. Perhaps each program will demonstrate efficacy in differing ways and KinderReady will be able to tailor its programming to better meet the needs of families and helping parents preparing their children ready for kindergarten through more diverse home visiting services.

Lastly, a large lesson learned is today's increased need for intra- and inter-agency collaboration as when financial resources are becoming scarcer. In trying to be proactive to meet these financial challenges, KinderReady has started a more structured, deliberate partnership with Dane County's Early Childhood Initiative. Through this partnership, it is felt that more families can be served with a more deliberate plan to assist in family stabilization and parenting education. The partnering with United Way, Center for Families, and Americorps volunteers is another avenue to maximize the outreach to families with home visiting services and early intervention. Within CSSW, KinderReady is part of a large 'Prevention Program' structure. KinderReady utilizes its close collaboration with other programs, such as Joining Forces for Families/Community Support

Specialists, Mobile Play and Learn, and the Counseling program. When a family becomes involved in KinderReady an array of programs and services instantly surrounds them. KinderReady program funders truly are part of a much bigger picture than anything that can be reported on several pages of paper. With the Prevention programs working together, thousands of children and caregivers are served, supporting and educating them through the early years of parenting to build a strong foundation for Madison/Dane County's kids.

We are extremely grateful to the Oscar G. and Elsa S. Mayer Family Foundation for your investment in KinderReady and the care, concern and compassion for children that it demonstrates. Together, we are empowering children to succeed in school and in life. Thank you for your partnership.

Should you have any questions relating to the enclosed report or would like additional information, please do not hesitate to contact either Lynn Riley (lynn.riley@cssw.org or 608-442-4170) or Keri Brunelle (kbrunelle@chw.org or 608-257-1663).