





#### **ABSTRACT**

The Collaboration for Early Childhood has a contract with the Village of Oak Park, Oak Park Elementary School District 97 and Oak Park River Forest High School District 200 to develop an integrated system of high-quality early childhood programs and services to benefit all children birth to kindergarten age living in Oak Park and River Forest. Data collection and use of data are integral to the Contract for Services to better understand Oak Park's and River Forest's youngest children, monitor service delivery and usage, and measure impact.

The Collaboration presents this report to the IGA Governing Board to show the results of activity during the 2019-2020 school year. This is the sixth report about our progress on the indicators and corresponding data collection since contract initiation. We issued the initial report in May 2015.

Submitted October 21, 2020

# **Collaboration for Early Childhood**

# **Annual Data Report: 2020**

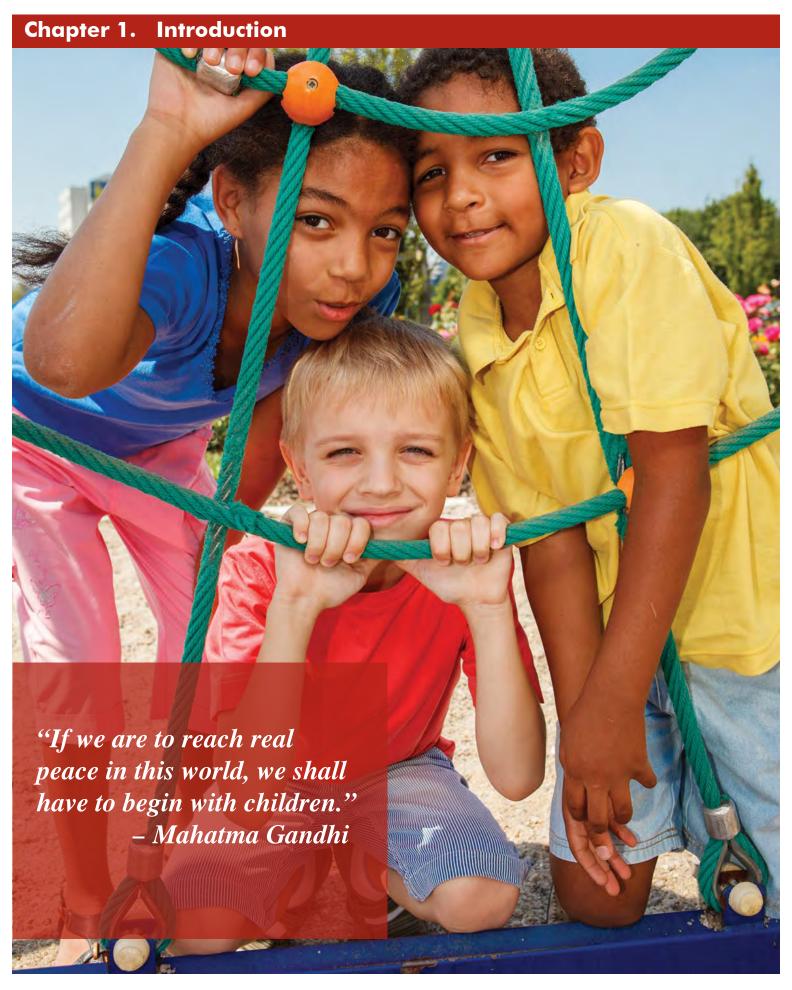
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Integrated Database Schema
Child, Service and System Outcomes
Child Outcome 1:
Children identified through screening as needing assessment or services receive them.
Child Outcome 2:
Percent of children in Oak Park and River Forest Preschool for All (PFA) and Head Start who demonstrate age-appropriate proficiency in each domain of development in accordance with the Illinois Early Learning Standards.
Child Outcome 3:
Percent of children entering kindergarten demonstrating age-appropriate proficiency in kindergarten readiness assessment administered by District 97.
Service Delivery Outcome 1:
Kindergarten students with Free and Reduced Price Lunch (FRPL) assistance have a history of participation in a PFA/HS/NAEYC accredited program, or a program meeting the Illinois Quality Rating.
Service Delivery Outcome 2:
Teen parents and families receiving up through All Kids Level 1 health insurance for their child under age 3 receive referral to intensive parent education program.
Service Delivery Outcome 3:
Percent of referred parents who choose to participate in the intensive parent education program.
Service Delivery Outcome 4:
Percent of kindergarten and first grade students with Individual Educational Plans (IEPs) who have

documentation of receiving services in early childhood (if they lived in Oak Park or River Forest during

their early childhood years).

System Level Outcome 1:
Estimate the Collaboration's connection with all families in Oak Park and River Forest with children under five via direct and indirect measures.
System Level Outcome 2:
Percent of teachers and directors in Oak Park early childhood programs who have above minimum state educational requirements for their role.
System Level Outcome 3:
Percent of teachers and child care providers reporting more than the state-mandated 15 documented hours of continuing professional education each year.
System Level Outcome 4:
Percent of preschools, child care centers, and home are engaged in the Illinois Quality Rating System (ExceleRate) and improve their scores each year.





## **Chapter 1. Introduction**

#### Friends:

Welcome to the Collaboration's first annual look at the state of our early childhood community! This is our story for 2020. This year, the hope that we hope to foster in families and children was tempered with the unique and unforeseen challenges that came with a global health pandemic. Each month brought with is a new sense of insecurity for adults who struggled to meet the basic needs of their families. This was a year of crisis.

In the face of the unknown, the Collaboration remained engaged. We focused on children and families and the systems that support them. We seized on the opportunity to reinforce our value in the community as coordinators, collaborators, and leaders. We held hands and faced whatever challenges came. And there were many. We will always remember that our community endured two public health threats in a year: a health pandemic, and a crisis of racist violence.

Although we were able to shift our programming to virtual offerings so that more people could access them, we also recognized that we were physically far away from families at a time when they desperately

needed closeness. At a time when our Black and Brown families needed to see solidarity in action, we tempered the moral imperative to act, rally and march with the very real dilemma of needing to safeguard our health. We spoke, through foggy glasses and thick masks, about George Floyd and how he couldn't breathe. We bumped elbows with people who were crying. It was imperfect. But, we could do nothing but acknowledge the challenges and move with them.

Throughout, we remained committed to our goals. We reached out to families that needed security and mourned the events that would make moments of peace more rare. Importantly, we never closed. We remained present. We answered the phone. We plunged into what was happening around us. We joined others in the dance towards recovery. And in doing so, we learned a lesson about resilience in early childhood.

This report is divided into 6 chapters. The first holds this introduction and an invitation to engage in our work. The second chapter of this report recounts our vision and mission and how our history had prepared us for the challenges that we faced this year. The third chapter presents a portrait of the children and families who live in Oak Park and River Forest, because knowing them is important.



The fourth chapter of this report seeks to bring to light some of the questions that have been proposed by the data this year. The final chapter is a comprehensive look at the Early Childhood communities in Oak Park and River Forest through the lens of research and data. Throughout, we hope to hold a mirror up to ourselves, provoke rich discussion and help a community to think about the opportunities that are so necessary for the success of our youngest people.

# **Chapter 1. Introduction**

There is much effort given to process in this report. It is about causes, if not solutions. It is about important questions, although some of the answers are still forthcoming. It is our effort to speak honestly about where we are, and encourage us all to wonder where we can go.

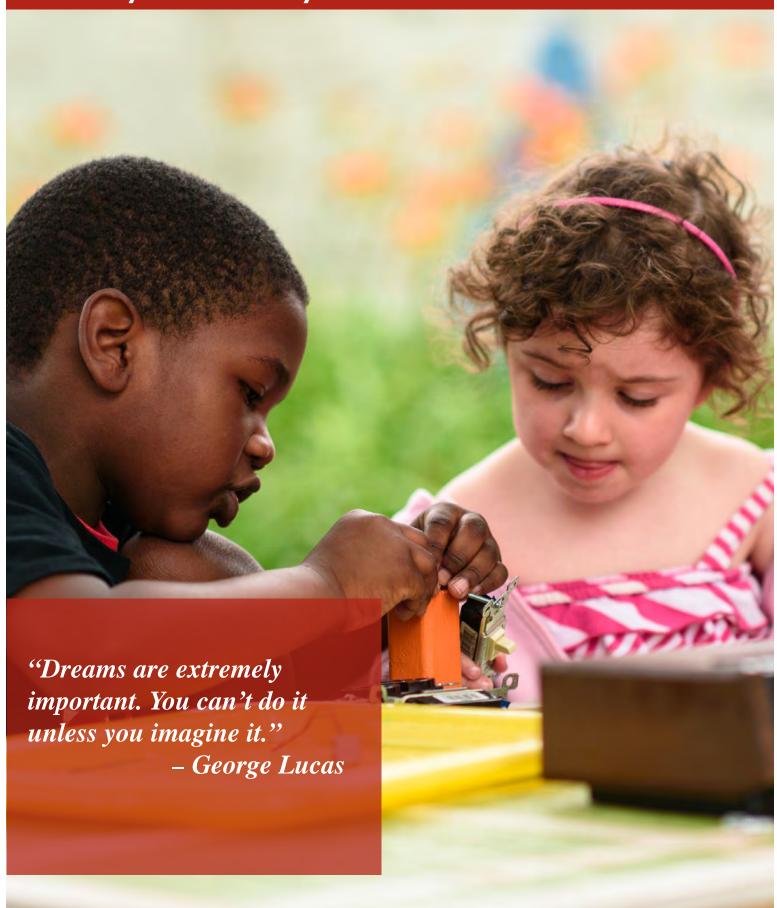
So, please read. Wonder. Inquire. Hope. Enjoy.

John Borrero

**Executive Director** 

The Collaboration for Early Childhood

# Chapter 2: The Collaboration for Early Childhood: The History of a Community Effort



# Chapter 2: The Collaboration for Early Childhood: The History of a Community Effort

Since its beginnings in 2002, the Collaboration for Early Childhood has embraced the vision that all children should arrive at kindergarten safe, healthy, ready to succeed and eager to learn. It is a large and ambitious vision. We began by looking at how much we could impact.

At the beginning of our work, our goal was that:

- all parents should have information about child development and about services available in the community;
- all children should be provided with developmental screening and follow-up so that developmental delays and disabilities could be detected early and be appropriately addressed;
- parents should have access to intensive parent coaching services so that all families with children birth to three-years-old could have the opportunity to participate;
- there would be opportunities for all parents to participate in some kind of parent group or network;
- all children in Oak Park who needed preschool could attend preschool (either a part-day or an enriched full-day program), and that these programs would provide the educational experience needed for children to arrive at kindergarten ready to succeed;
- all early childhood teachers and child care providers in Oak Park would be engaged in ongoing, meaningful professional development, and;
- programs would take full advantage of statelevel resources for quality enhancement.

We did not take these early ideological steps alone. In 2001, all the governing bodies in Oak Park helped to create the Collaboration. Through in-kind and direct financial support, they affirmed the vital role that high quality early learning and care experiences play in assuring the success of every child. They committed resources to working with early care and education providers to weave a web of support for all parents of young children and to raise the skill level of early childhood staff

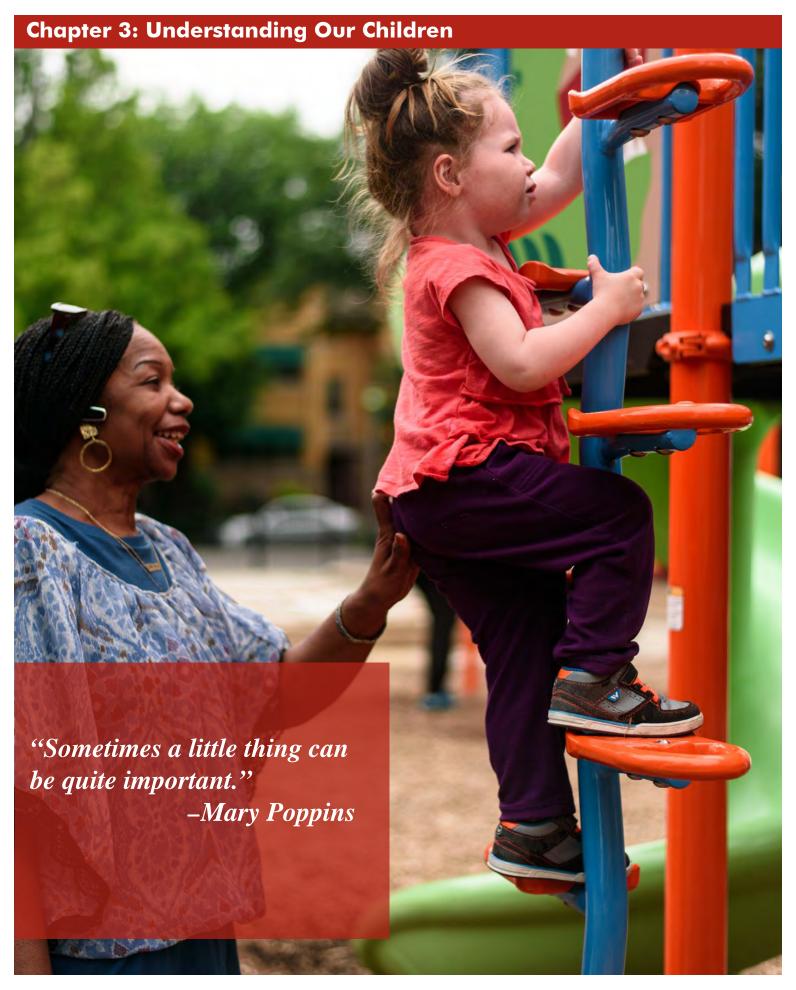
and offer a continuum of services to all families with children birth to five.

By the mid 2010s, the ability for this mindset to expand beyond our borders had become a part of the Collaboration's narrative. The Collaboration for Early Childhood became the model for the statewide Illinois Early Learning Council, which developed the Preschool for All proposal. Years later, as a former Illinois Senator, President Obama proposed a national early learning council, based on the Illinois prototype. And it began in Oak Park.

Now, concern for the wellbeing of children is part of the fabric of this community. We hope that it always will be. Each September, when almost 700 children begin their journeys through the school system in Oak Park, the community dedicates significant energy and resources to narrowing the opportunity gap that begins in the first few years of a child's life and stubbornly threatens to extend through to their elementary, middle and high school years.





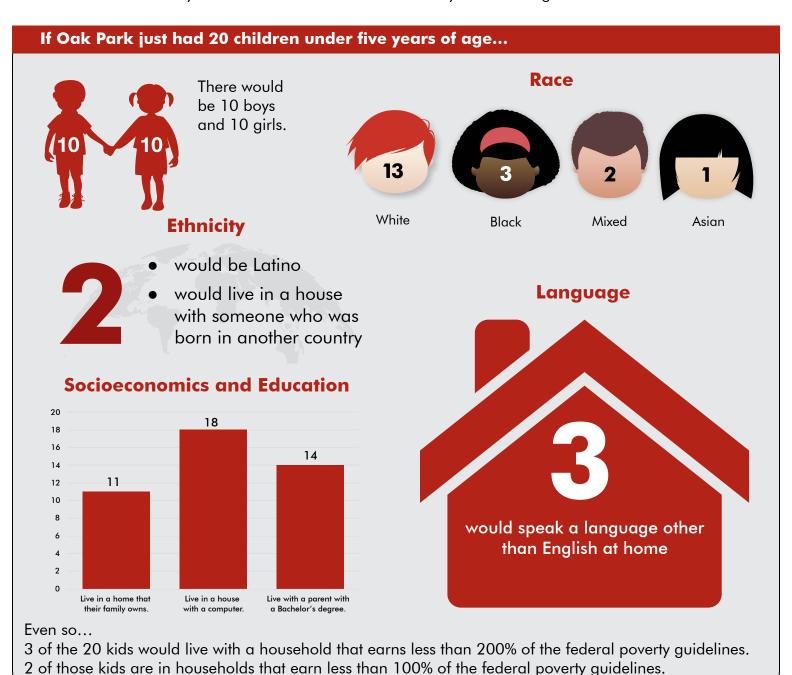


## **Chapter 3: Understanding Our Children**

Each year, the Collaboration's view of our community begins with an overview of the demographics of young children in Oak Park and River Forest. Sam Balter said "Nothing sticks in your head better than a story". We have found this to be true in our local work and understand that if we want to be impactful, a key part of this success is helping others to build a narrative around the unique experiences of our children.

Our stories are made from data from the U.S. Census Bureau and American Community Survey (ACS) tables. The ACS tables are a subset of the indicators presented annually, which are generated in stages as the data becomes available. Represented below are data that is current for the 2019/ 2020 academic year.

If Oak Park Were Twenty Children Under Five: The Data Story of our Youngest Residents.



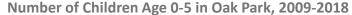
# **Chapter 3: Understanding Our Children**

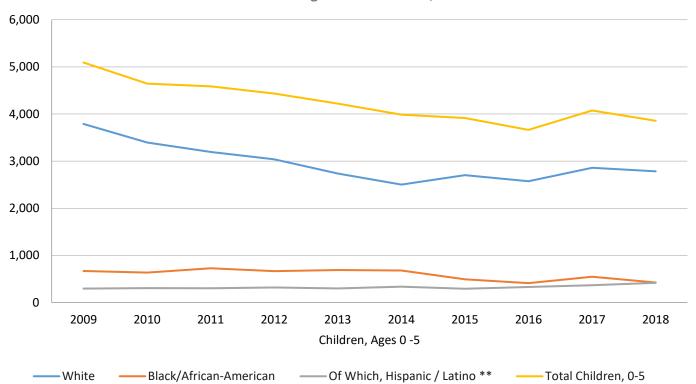
Family Size	CCAP Maximum Monthly Income (Gross Before Taxes)	
2	\$2,819	
3	\$3,555	
4	\$4,292	
5	\$5,029	
6	\$5,765	
7	\$6,502	
8	\$7,239	
Income guidelines as of October 1, 2019		

## **Federal Poverty Levels**

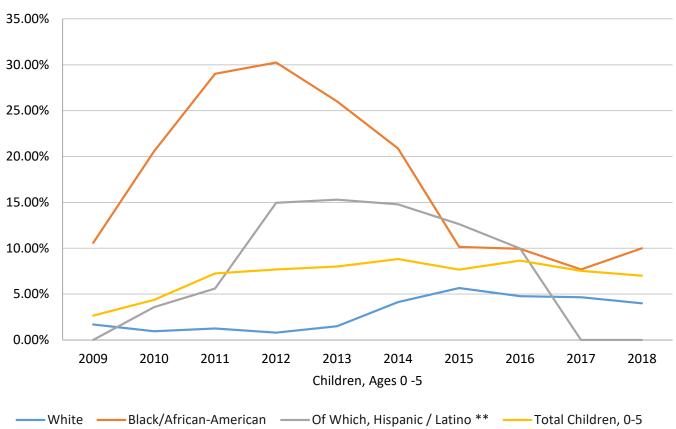
Persons in Household	100%	200%
1	\$12,760	\$25,520
2	\$17,240	\$34,480
3	\$21,720	\$43,440
4	\$26,200	\$52,400

# **Chapter 3: Understanding Our Children**

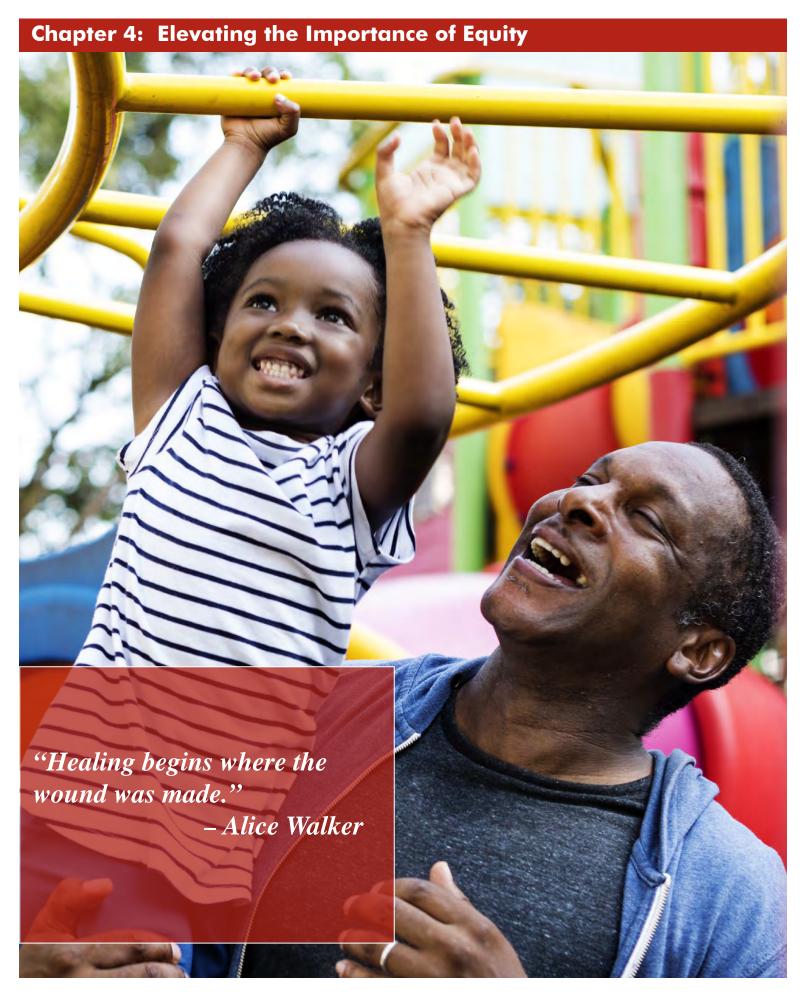




## Percent of Children Age 0-5 Below Poverty Line in Oak Park, 2009-2018







## **Elevating the Importance of Equity**

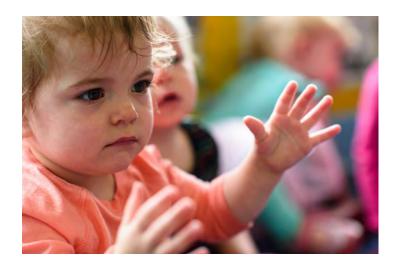
In our 2019 report to the IGA Board, the Collaboration outlined a course of action for examining and responding to equity issues in our community. Developing a stance on equity work was an important focus of our year, although we weren't actively engaged in a crisis. 2020 elevated the importance of equity work.

Barely three months into 2019, we found ourselves working to protect our community against the perils of a global health pandemic. Despite our best work, the entire early childhood community would go on to be deeply impacted. The presence of a health pandemic made evident the disparities that exist and shone a light on the families and children who need the most support. It was a time to grow to know our families more intimately. Rather than making a decision around whether or not to attend a support group, families were needing to rely upon us for information on how to keep their families safe. It was a test of our position in the community. We grew. We were also reminded agencies like ours were important during the pandemic.

In May, the murder of George Floyd reminded us that systemic inequities continue to perpetuate negative life outcomes for Black children in our community. We all felt this deeply. We saw stress and fear, insecurity and confusion. The opportunity arose for the Collaboration to reaffirm its commitment to seeing Black families and their young children have access to the same opportunities for health, growth and advancement that other families enjoy.

Ten months into the year, we understand very clearly the importance of an equity focus: both for health equity and racial equity, and we have the beginning of a roadmap to follow in our ongoing work. We have looked back at our framework as a means of understanding and being responsive to events affecting the children and families that we serve. At many times, families and community members were dealing with multiple crises at once. For example, a teacher might be coping with fear of going to work and risking possible

exposure to COVID-19, while also struggling to understand the court decision around Breonna Taylor's death. A mother, raising a Black child alone might be feeling fearful for him and nervous about his future, but also afraid to reach out to others, because of the requirements of social distancing. A pediatrician might be overwhelmed with her new work environment and the pressures of treating children who are sick, while also worrying about their own children who needed to go into daycare so that they could present to work.



2020 has been a year of interwoven stresses and competing adverse experiences, all requiring a nuanced and compassionate approach from the Collaboration. It has meant supporting people at their most vulnerable, and hoping that our support facilitates healing. We don't yet know where healing will happen. But, we do know that it will begin with the hope that is born when adults are invited to learn about and become invested in the lives of young children.

The following timeline gives a sense of the events of this year, and how the Collaboration navigated this time to support our community. Not all of our activities are listed. Neither are all of the community events listed. This is a snapshot... an example of what the year was through an early childhood lens.

#### **TIMELINE OF EQUITY EVENTS in 2020**

#### HEALTH EQUITY, RACIAL EQUITY, COLLABORATION RESPONSE

#### March 2020

- 11 COVID-19 Pandemic is characterized as a pandemic by the World Health Organization.
- 13 Village of Oak Park declares COVID-19 a public health emergency.
- 13 Breonna Taylor was killed in a raid on her apartment.
- 16 Collaboration switches to remote operations, in response to COVID-19 threat.
- 18 Collaboration releases statement responding to COVID-19, establishes resource page.
- 20 Village of Oak Park Orders "Shelter-In- Place" due To COVID-19.
- 25 Illinois guidance released for Child Care Centers Providing Emergency Child Care to Essential Workers.

#### **April 2020**

22 Illinois releases guidance for virtual home visiting.

#### **May 2020**

- 01 Stay at home order extended in Oak Park.
- O1 Governor orders business to move to Phase 2, allowing some businesses to open.
- 06 MIECHV & IDHS release home visiting guidance for Breastfeeding During the COVID-19 Pandemic.
- 25 George Floyd murdered by police. "I can't breathe" becomes a cry for justice.
- 27 Protests occur in cities across the country for George Floyd murder.
- 28 Breonna Taylor 911 Tapes released.
- 29 Governor orders business to move to Phase 3, allowing for child care businesses to reopen.

#### **June 2020**

- 01 Anti-racism solidarity protests are held around the world.
- The White House threatens to send American soldiers to the streets to quell the unrest, prompting outrage.
- 06 Collaboration releases public statement: Why George Floyd Matters to Early Childhood.
- 09 Funeral service for George Floyd.
- 11 Breonna's Law passed, barring no-knock warrants.
- 12 Restore Illinois Day Care Guidance released.
- 19 Collaboration offices close on June 19th to allow staff to observe this holiday.
- 21 Collaboration hosts roundtable for child care directors to offer guidance on reopening.
- 25 Demonstration on state capital for Breonna Taylor murder.
- 25 Illinois releases Phase 4 reopening guidelines.



#### **July 2020**

27 Collaboration, in partnership with the OPPL and E-Team launch a summer enrichment program for families entering Kindergarten during COVID-19.

#### August 2020

- 12 Collaboration is awarded a grant by the Oak Park River Forest Community Foundation to develop a pilot program to develop a guide of best practices for child care programs operating safely during COVID-19.
- 17 Collaboration Board of Directors approves contract with Mary Morten group to support the Collaboration in its Diversity, Racial Equity and Inclusion planning.

## September 2020

- O1 District 97 schools open virtually.
- 11 Home Visiting Task Force meeting, to discuss COVID-19 support.
- 19 Collaboration hosts roundtable for child care directors to offer guidance on COVID-19 safety.
- 23 Grand Jury indicts one officer for Breonna Taylor death.
- 23 Collaboration engages the New Teacher Center to help begin the process of producing an equity framework.

#### October 2020

- 02 Grand Jury tapes released outlining decision not to charge any officers in Breonna Taylor's killing.
- 06 Collaboration hosts racial healing listening session, sponsored by Mary Morten Group.
- 20 Collaboration hosts Physician's Network Breakfast on Telehealth Practices.

#### **UNDERSTANDING CULTURE**

The previous chapter outlined demographic information and how Census data can be used to better understand children who live in Oak Park and River Forest in 2020. Within that narrative, there was mention of the interplay of cultural factors in children. For example, there are measured differences in poverty level according to race and ethnicity. There are also differences in population size according to race and ethnicity. For this reason, the elements that contribute to each family's understanding of culture, and which influence a child's experience, present an important context for the work that must happen at the Collaboration for Early Childhood.

Culture includes many of the ways in which families are different from each other. Some examples of cultural differences between people are seen in areas of gender, race, countries of origin, home language, socio-economic status, disabilities status, sexual orientation/gender identity, geographic location, family composition and religion.

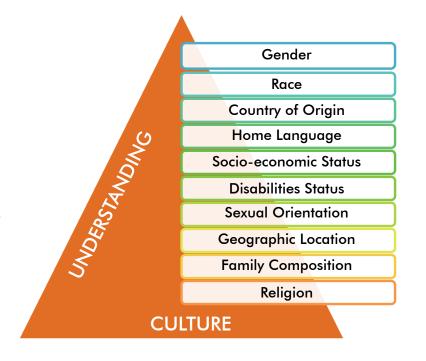
The graphic below outlines several of the cultural elements that are represented in families that are enrolled in early childhood programs.

Most of these categories are evident in the data that is collected in the course of the Collaboration's work. This allows us to make observations about the quality of individual experiences that Oak Park and River Forest families and children might have.

# THE QUALITY OF INDIVIDUAL EXPERIENCES

Children arrive at the door of an early childhood experience with more than just their innate culture. They also arrive with a set of life experiences also influenced by culture.

When discussing the impact of culture and experience on early childhood, there is research that points to a range and progression of experience. This field of study begins with an understanding of the booming field of research



around early brain development. Second to this, the field of research leads us to learn about the impact of adverse childhood experiences and adversity in early life. Finally, early education researchers then emphasize the importance of interventions that focus on the development of executive functions skills, as well as early childhood mental health support, all towards the goal of building resilience in young children and their families.

Brain Science Adverse Childhood Experiences The Impact of Adversity

Executive Function

Early Childhood Mentral Health

Resilience

### **Brain Science**

The basic architecture of the brain is constructed through an ongoing process that begins before birth and continues into adulthood. Early experiences affect the quality of that architecture by establishing either a sturdy or a fragile foundation for all of the learning, health and behavior that follow.

**Implications:** Brain development dictates the extent to which children are able to adapt when they perceive possible danger and also how they respond. The brain also determines health damaging behaviors later in life, such as eating too much, smoking or drinking, and sleeping badly. Through the nervous system, the brain also regulates the body's hormonal, immune and metabolic processes that can affect many body processes at once. In turn, the hormones responsible for stress, sex, and metabolism affect the brain; they can alter the structure of neurons and their connections, influence behavior and even change the hormonal processes themselves. As early as preschool, stress can increase anxiety and decrease memory and cognitive flexibility. It is, then, important to support families so that they can protect children from situations of chronic stress.



# Adverse Childhood Experiences (ACES)

These include experiences such as physical and emotional abuse, neglect, caregiver mental illness, and household violence. The more ACEs a child experiences, the more likely he or she is to suffer from health issues later in life.

**Implications:** Hundreds of articles have outlined the connection between early experiences and public health outcomes later in a child's life. Both systemic and individual racism have been shown conclusively in current research to impact health outcomes for children. In brief, it is as important to protect children from the impact of racist behavior as it is to protect them from the impact of other adverse health issues.

## The Impact of Adversity

In early childhood, research on the biology of stress shows how major adversity, such as extreme poverty, abuse, or neglect can weaken developing brain architecture and permanently set the body's stress response system on high alert. Science also shows that providing stable, responsive, nurturing relationships in the earliest years of life can prevent or even reverse the damaging effects of early life stress, with lifelong benefits for learning, behavior, and health.

Implications: Families experiencing poverty, abuse or neglect are likely to have greater exposure to stress and fewer resources to deal with adversity than the general population. This is exacerbated in times of crisis or diminished access to resources (such as the conditions created during a health pandemic). It is easy to imagine that our families who had fewer resources before the health pandemic would struggle more to recover. This is consistent with what the Collaboration saw in requests for support.

## **Executive Function**

Research on the developing brain shows us that early childhood experiences build the foundation for a skilled workforce, a responsible community, and a thriving economy. A new evidence base has identified a set of skills that are essential for school achievement, for the preparation and adaptability of our future workforce, and for avoiding a wide range of population health problems.

**Implications:** As our country continues to adapt to life in the era of COVID-19, it is well established that there has been a rise in anxiety and stress in all communities. The Centers for Disease Control and Prevention have reported extensively on the mental health effects of the current pandemic. Issues that we may see in children include difficulty sleeping, poor access to health care (the well documented issue of children not receiving immunizations during the pandemic), changes in eating patterns and fear about personal health and the health of loved ones. All of these items contribute to stress in children. One effect of heightened stress and anxiety is a decrease in executive function skills. Finally, executive function skills for young children are a product of direct instruction and guidance. This is a skill that is often developed in a child care setting, some of which have remained closed throughout the pandemic.

## **Early Childhood Mental Health**

The science of child development shows that the foundation for sound mental health is built early in life, as early experiences—which include children's relationships with parents, caregivers, relatives, teachers, and peers—shape the architecture of the developing brain. Disruptions in this developmental process can impair a child's capacities for learning and relating to others, with lifelong implications.

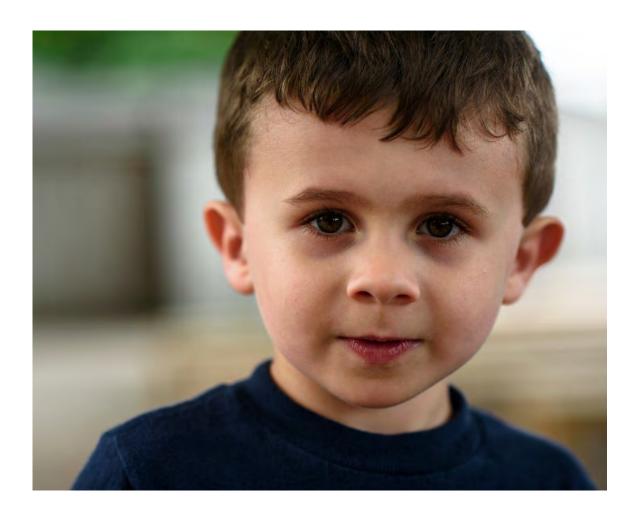
**Implications:** There are several intervention programs (such as home visiting) that can address the effects of toxic stress if they are successfully implemented in a setting with children. Research also points to the importance of considering maternal depression and family access to mental health services as needed.

### **Resilience**

Reducing the effects of significant adversity on young children's healthy development is critical to the progress and prosperity of any society. Yet not all children experience lasting harm as a result of adverse early experiences. Some may demonstrate "resilience," or an adaptive response to serious hardship. A better understanding of why some children do well despite early adversity is important because it can help us design policies and programs that help more children reach their full potential.

**Implications:** Studies have shown that reducing family stress directly impact the ability of children to develop resilience. The Collaboration has several kinds of support available to families to reduce stress. One of the most relevant to COVID-19 has been support meeting basic needs like food, shelter, diapers, health care and child care, and connecting them with programs that can help. We will also continue to work closely with child care programs to monitor the progress of children using available developmental and social emotional screening tools.

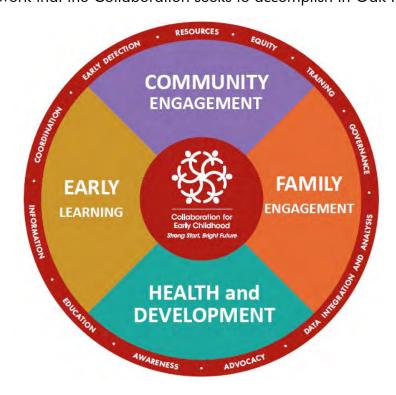
For more extensive information on these, <u>please reference pages 24-33</u> of the 2019 Collaboration IGA report.



#### **RESEARCH, EDUCATION, and AWARENESS**

What can be done to consider cultural factors in the work of the Collaboration for Early Childhood?

The graphic outlines the work that the Collaboration seeks to accomplish in Oak Park and River Forest.



A good first step towards engaging in culturally responsive practice could be understanding some of the significant steps taken in cultural research, which inform our work. Many prominent researchers have contributed to our understanding of cultural influences in the lives of children and families. This research can be seen in the context of our existing service delivery model.



COMMUNITY

HEALTH AND

DEVELOPMENT

FAMILY ENGAGEMENT

## **Community Engagement**

Community Partnership refers to the Collaboration's efforts to engage the entire community in the success of our children, leveraging resources from other agencies to support children and families on their journeys to Kindergarten. Several cultural researchers have shared insights into forming effective community partnerships, outlining the

EARLY

LEARNING

importance of recent brain research and the demonstrated impacts of a communitywide approach to early care and education.

Within this area lies the field of **Brain Architecture** Research. The last 2 decades have seen an explosion of early brain research. We have already

seen that brain research not only offers insights for educators, families, and policy makers but also provides a strong foundation for uniting our efforts. Brain science robustly reinforces the concept that the early years are a special time of promise and vulnerability and that consistently warm relationships are as important as nutritious food. Brain research confirms that all children have enormous potential which is greatly influenced by their environments.

For our current work, the Collaboration will continue to share information about brain development with the community, and help foster awareness around the importance of the first 1,000 days of development. This work will be further enhanced this year by a stronger social media presence and a website redesign.

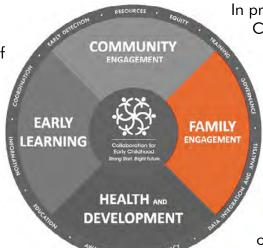
### **Family Engagement**

Family Engagement refers to the work that is done under the auspices of the Collaboration to empower families to be effective leaders in the education of their children. Ranging from the importance of family voice to family experiences of culture, this arm of cultural inquiry has been well established within early childhood research.

Within this area lies the study of Fund of Knowledge which correlates very closely to the

Collaboration's philosophy for working with families. This area of research offers that families have abundant knowledge that programs can learn and use in their family engagement efforts and that students bring with them funds of knowledge from their homes and communities that can be used for concept and skill development. Dr. Luis Moll was the originator of this work. His research reminds us that families are a key contributor to the knowledge that is shared with

children in early childhood and that they play a vital role in supporting educational change in Oak Park.



In practice, the

Collaboration has worked consistently through the health pandemic and period of social unrest to elevate family voice and place them in decision-making positions. This was been done through our existing contracts with the Chicago Parent

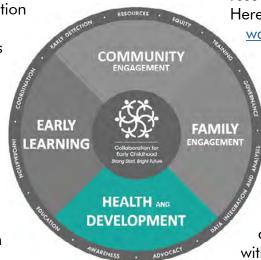
Program and Easterseals, but

also through our social media platforms and our Families First group, composed of parent leaders trained under the auspices of the Collaboration's programming.

## **Health and Development**

Health and Development refer to the

efforts of the Collaboration to view child success as influenced by indicators of good health, and the extent to which a family is supported by the health services community. A relatively new field, there has been a boom in medical and mental health research which points to gains in early childhood.



An innovator, and someone whose research very closely resonates in our community is Dr. Jack Shonkoff. Dr. Shonkoff's work supports the notion that early childhood efforts are best supported by a community of health and education providers and a network of relationships, all working together towards the success of each child. His work undergirds much of the efforts to form a sense of community among pediatric providers in Oak Park.

This research encourages the Collaboration to consider the entire network of providers working with a family and to focus on developing their capacity to serve as a safety net for children. His work is evidenced at the Collaboration in EARLY areas where we advocate for a holistic, LEARNING cross disciplinary approach to working with families. Our health work at the Collaboration also seeks to empower families and education providers to understand the importance of proper health. Towards that goal, the Collaboration provides developmental, social emotional, hearing and vision screening for families in Oak Park and River Forest through their education and health providers.

As a leader within the Harvard University
Center for the Developing Child, there is much research and material support for this work.
Here is an example: <a href="https://www.youtube.com/watch?v=urU-a">https://www.youtube.com/watch?v=urU-a</a> FsS5Y&t=80s

## **Early Learning**

Early learning refers to the Collaboration's work to influence the success of the preschool classroom experience, in areas of teacher quality, classroom experience and teacher training. Both teacher training and classroom environment are rich areas of cultural research, where so much of a child's success relies upon the relationship with her/his teacher.

The research of Gloria Ladson-Billings has aligned very closely to the Collaboration's work in navigating the impact of racism and bias in our schools, as well as the incidence of racist violence in our communities. Her work focuses on the role of adults in educational settings, and the extent to which they value cultural diversity in children. Among her main points was that the term "racial achievement gap" unfairly constructs students as defective and lacking. She

COMMUNITY

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FAMILY ENGAGEMENT

suggests moving to a discourse that holds systems (instead of children) accountable. Dr.

Ladson Billings reminds us that a teacher's perspective and training has an enormous on the success and advancement of children in Oak Park.

In partnership with the New Teacher Center, the Collaboration has done considerable work to impact

teacher perspective and to enhance their reflective capacity. We have also advocated for language that characterizes the needs of a system, instead of portraying work that is focused on perceived deficits of children.



### **AREAS OF INQUIRY**

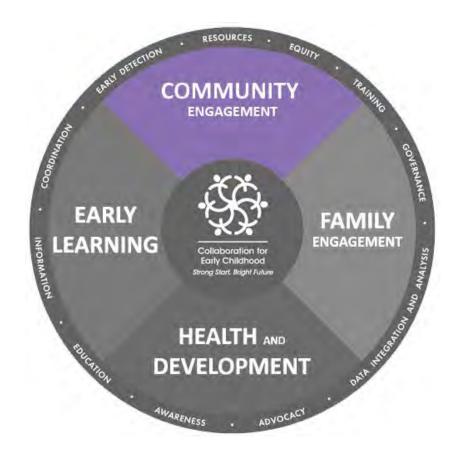
Towards the goal of preparing Oak Park and River Forest children to thrive in kindergarten, the Collaboration engages in inquiry around the potential paths and obstacles to success in this transition. The following are highlights from larger data sources, formed around key questions. These areas of inquiry pertain to kindergarten readiness, parent preparation and identification of obstacles to kindergarten readiness. And, this year, this transition was significantly impacted by the presence of a health pandemic.

#### 1. COMMUNITY ENGAGEMENT

How important is community support to the goals of the Collaboration? To what extent does the Collaboration rely upon community participation, partnership, and volunteerism?

#### WHAT DATA TELLS US

The Collaboration greatly relies upon community support for its work. Though the scope of the Collaborations' work is very broad, staff members comprise the smallest body of individuals engaged in this work. Since it was formed, the Collaboration's governance structure has leaned intentionally towards the incorporation of volunteer and community voice. (See figure #1 below.) This graphic, from 2012, shows the role of volunteerism and community support. In 2012, there was one full-time and 2 part-time staff members (highlighted in red). To sum, the roots of the Collaboration lied in its ability to engage community and volunteer support.



## **COLLABORATION FOR EARLY CHILDHOOD**

**Governance and Participation Chart** 

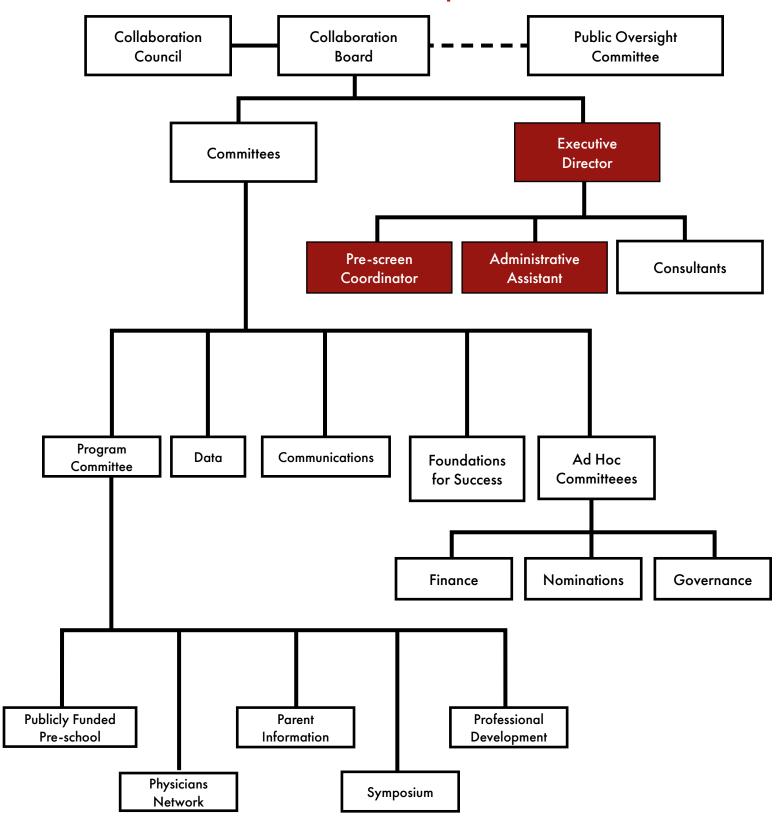


Figure 1 Collaboration Governance in 2012

In 2020, the agency has evolved somewhat in both its scope and its impact, largely because of the commitment of the taxing bodies in Oak Park and its support of the early childhood systems work. Today, there are, in total, 10 staff members employed under the Collaboration, of which three are part-time (working fewer than 20 hours per week) and 7 are full-time (working 40 hours per week). To complement staff, the Collaboration also hires 27 contractors. Staff and contractors have assumed much of the role of partnerships, community capacity building and oversight of the community-based work. (See graphic #2 below.)

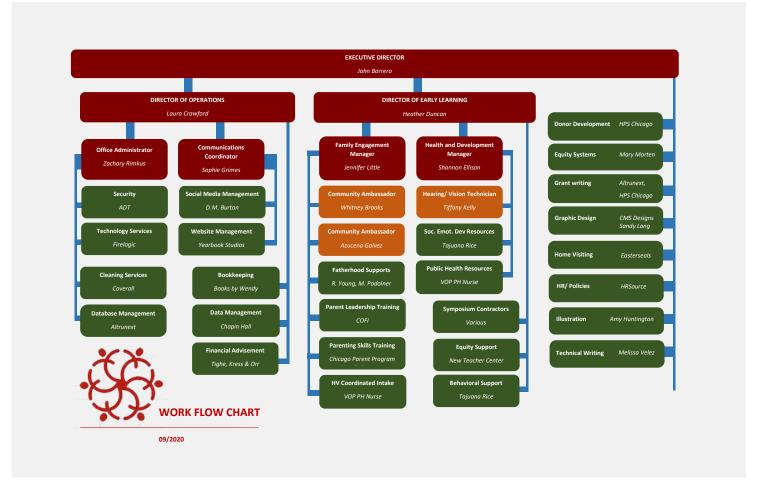


Figure 2 Collaboration work flow in 2020.

Despite this shift in accountability from community to staff, the level of engagement continue to be very high. There are volunteers and community members at the center of each governance structure, who enjoy a strong voice in the Collaboration's decision making process.

To sum, volunteers outnumber staff more than 10 to 1. There are also nearly 3 times as many temporary contractors as there are staff members. Community support and volunteerism is vital to the operations of the Collaboration for Early Childhood.

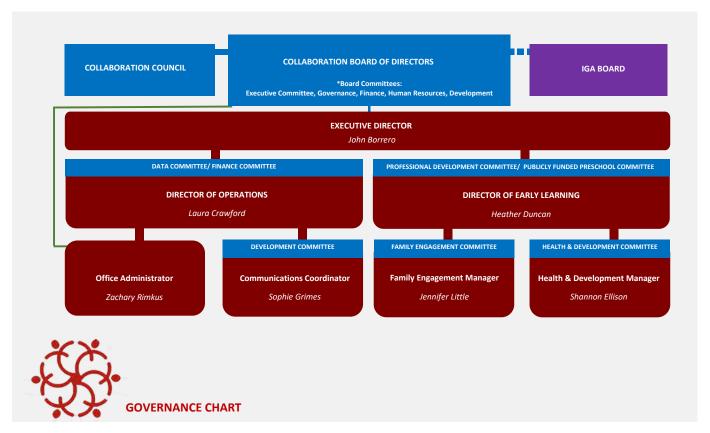


Figure 3 Collaboration governance in 2020

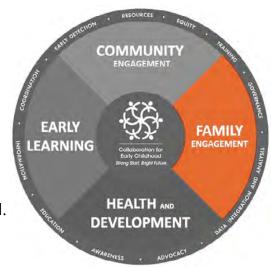
As outlined in the chart above, there are six committees and three governing bodies connected to the Collaboration's work. Within those committees, there are 78 committee members, all of which are volunteers, which the exception of the staff member who attends each meeting. There are 17 seats on our volunteer Board of Directors and an unlimited number of members on our Collaboration Council. Over the course of the year, the Collaboration also maintains over 100 volunteer opportunities for community members to contribute to our Annual Symposium and other community events.

#### 2. FAMILY ENGAGEMENT

What strategies are needed to connect families to support in context of COVID-19?

#### WHAT DATA TELLS US

Family engagement is, in the best of times, a long and complex process. It involves great efforts at communication, trust building, and connectedness to the needs of our community. Additionally, it involves reaching a section of the community whose time is in high demand. One of the major changes that occurred in 2020, as a result of COVID-19, was that the U.S. Centers for Disease Control and Prevention recommended that in-person programming be halted. Of all of the areas that fall under the Collaboration's scope, it was family engagement that was perhaps most impacted by the inability to meet.



A Parenting Resource Program Recommendation and Strategic Framework Report, prepared in 2016, gave the Collaboration one of its earliest glimpses into family needs and how the Collaboration could effectively connect to them. The survey uncovered the primary needs of families:

# What type of resources or services would be most helpful? (Check all that apply)

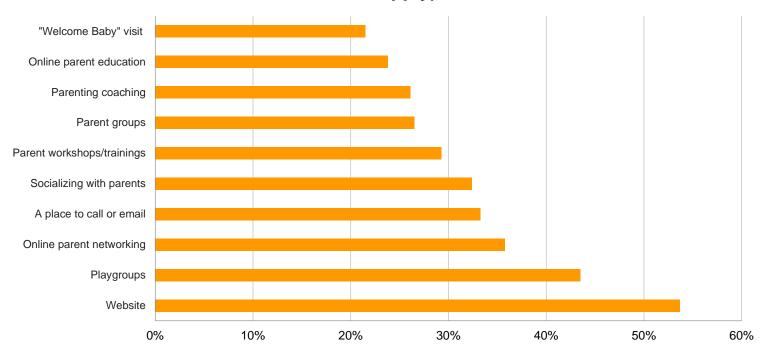


Figure 4 Parent resources needed

As well as the supports upon which families mostly rely:

#### Type of Parent Support and Education Local Providers Currently Offer

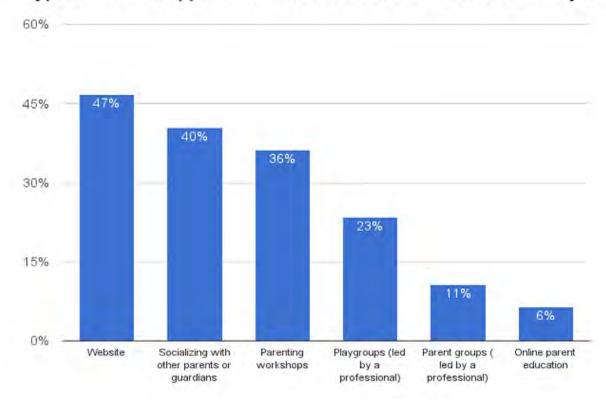


Figure 5 Types of current support used

A quick glance at Figure 4 shows us that 7 of the 10 needs that families requested involved in-person support. Similarly, Figure 5, which identifies the levels of support that families engaged outside of the Collaboration, shows us that 4 of the 6 means of support were in-person supports.

The most significant strategy needed to remain connected to families was to switch in-person programming to virtual programming.

The following virtual supports were offered in 2020:

- Website information
- Social media support (Our parent leadership group has its own social media presence, supported by the Collaboration)
- Online parent networking
- Parent workshops and training
- Virtual events
- Home delivery of family and baby materials

# OUR RESPONSE: In all, the following data outlines shifts to our work in response to COVID-19

- Our in-person outreach activities from mid-March through June were canceled. This reduced the number of materials we distributed. However, all monthly parent workshops were held as planned and we saw an increase in attendance for the virtual sessions (6 of the 17 workshops were virtual).
- We delayed the printing of our bi-annual Early Childhood Resource Directory due to COVID-19. We transitioned to focusing on a redesign of the directory on our website. We plan to print fewer than usual copies of the directory to distribute in 2021. We will promote the online directory extensively.
- We launched Ready, Set, Kindergarten a virtual support system for 30 families whose children are transitioning to kindergarten in the midst of COVID-19.

 We distributed activity kits to 175 children with disabilities or developmental delays to enhance their at-home learning and growth during shelter-in-place.

#### **Digital Communications**

#### Ready4K Text App

We piloted a new research-based text app for families this year. 1,118 text messages were sent to 83 families via Ready4K's text-based family engagement curriculum during the 2019-20 school year. This pilot was met with success and will continue in the 2020-2021 school year.

#### **Website Activity**

We began a significant redesign of collab4kids. org, which is still in progress at the time of this report. One feature is the searchable Early Childhood Resource Directory. There were 774 visits to the online version of the Directory this past year, making it the most popular page after our Symposium registration area.

#### Newsletters

Our Early Learning program sent out monthly e-newsletters to child care center directors, early learning professionals, and family child care providers in Oak Park or River Forest. These newsletters shared information on COVID-19, including funding resources and guidance on PPE, as well as general training opportunities and other important information. Since their start in April 2020, these newsletters have had 2,348 views.

The Parenting Resource Program distributes a newsletter. The distribution of the newsletter shifted from bimonthly to monthly in April 2020 and went to 392 recipients. In July, the newsletter included lots of play and activity ideas. #PlayOPRF was a way for parents and caregivers to connect with the Collaboration on social media during the summer months.

#### 3. HEALTH AND DEVELOPMENT

How did the health support needs and services change during COVID-19?

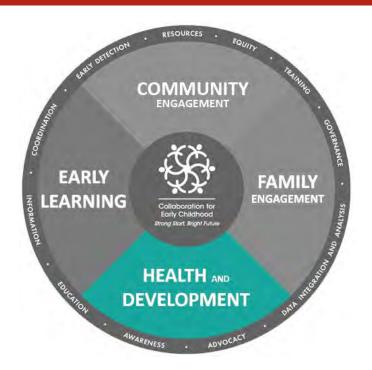
#### WHAT DATA TELLS US

Of great concern during this health pandemic is the wellbeing of mothers and their young children. Although much of the Collaboration's prior work has focused on detection and prevention, the occurrence of COVID-19 has necessitated a somewhat expanded scope of support, to include response. Much is still unknown about the impact on children, though studies point to awareness building around the risks to maternal health as a call to action for agencies serving this population. The CDC has been a consistent source of information and guidance around the Collaboration's public health work. Among the CDC's recommendations is a focus on societal factors that can impact a family's access to health resources and services.

#### WHAT WE UNDERSTAND

The Collaboration knows that health starts in our homes. The ability to engage in self-care and see a doctor when we are sick influences our health. Our health is also determined in part by our access to social and economic opportunities; the resources and supports available in our homes, neighborhoods, and communities; the quality of our schooling; the safety of our workplaces; the viability of our water, food and air; and the nature of our social interactions and relationships. These are called the Social Determinants of Health. The conditions in which we live explain in part why some families are healthier than others, and why many families are not as healthy as they could be.

In 2020, the COVID-19 global health pandemic underscored the need to address Social Determinants of Health and to provide supports that could enable our most vulnerable families to overcome barriers in access to health. The Collaboration for Early Childhood understands this urgent need and is positioned to be a cornerstone of support for Oak Park and



River Forest families in their navigation of the COVID-19 pandemic.

#### WHAT OUR RESPONSE WILL BE

Related to our health component, our goals will be:

- To prevent the spread of COVID-19, by enabling families to maintain and manage their physical and mental health, including easy access to information, medical care and mental health care.
- 2. To combat a resurgence of COVID-19, pursuant to the <u>Illinois State COVID-19 Mitigation Plan</u>.
- To address the disparities in access to services, resources and information that would protect vulnerable families from the impact of COVID-19 in our community.

The following guideline was adapted from the CDC and its description of Social Determinants of Health (SDOH).

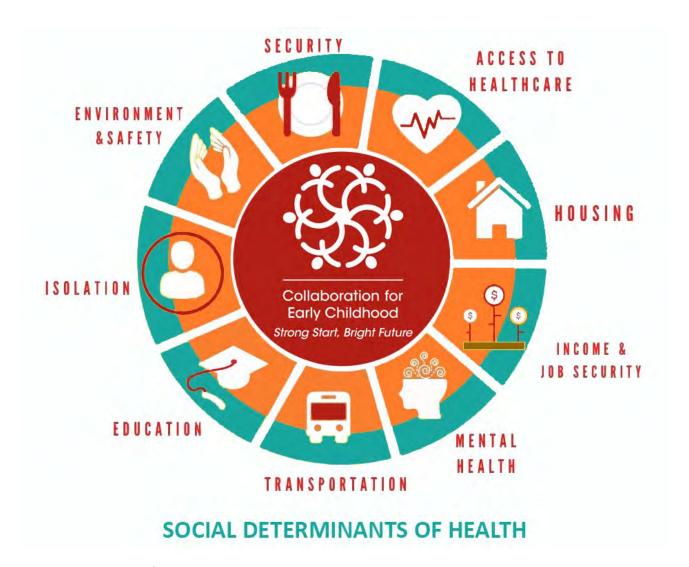


Figure 6 Social Determinants of Health

One target population for this support will be families that are already taking part in home visiting programs in Oak Park and River Forest, since these families are already identified as having fewer resources and being potentially more vulnerable than other families.

#### 4. EARLY LEARNING

How are Oak Park and River Forest finding and supporting families and children with low incomes? What systems are in place?

#### WHAT DATA TELLS US

Socioeconomics are important indicators used to predict and measure the access to opportunity that can impact a family's ability to thrive and support their children's academic success. For this reason, the Collaboration intentionally targets support to families with lower incomes who live in Oak Park and River Forest. Some of the measures connected to socioeconomics in our community are:

- Income in relation to Federal Poverty guidelines (100% FPL);
- Head Start eligibility (130% FPL);
- Eligibility for free of reduced priced lunch (185% FPL); and
- Eligibility for assistance with child care/ CCAP (200% FPL).



	2020 Annual													
Household /Family Size	50%	*100%*	125%	130%	133%	135%	138%	150%	175%	185%	200%	250%	300%	400%
1	6,380	\$12,760	15,950	16,588	16,971	17,226	17,609	19,140	22,330	23,606	25,520	31,900	38,280	51,040
2	8,620	\$17,240	21,550	22,412	22,929	23,274	23,791	25,860	30,170	31,894	34,480	43,100	51,720	68,960
3	10,860	\$21,720	27,150	28,236	28,888	29,322	29,974	32,580	38,010	40,182	43,440	54,300	65,160	86,880
4	13,100	\$26,200	32,750	34,060	34,846	35,370	36,156	39,300	45,850	48,470	52,400	65,500	78,600	104,800
5	15,340	\$30,680	38,350	39,884	40,804	41,418	42,338	46,020	53,690	56,758	61,360	76,700	92,040	122,720
6	17,580	\$35,160	43,950	45,708	46,763	47,466	48,521	52,740	61,530	65,046	70,320	87,900	105,480	140,640
7	19,820	\$39,640	49,550	51,532	52,721	53,514	54,703	59,460	69,370	73,334	79,280	99,100	118,920	158,560
8	22,060	\$44,120	55,150	57,356	58,680	59,562	60,886	66,180	77,210	81,622	88,240	110,300	132,360	176,480
9	24,300	\$48,600	60,750	63,180	64,638	65,610	67,068	72,900	85,050	89,910	97,200	121,500	145,800	194,400
10	26,540	\$53,080	66,350	69,004	70,596	71,658	73,250	79,620	92,890	98,198	106,160	132,700	159,240	212,320

Figure 7 Federal Poverty Level guidelines

What follows is further information about children under 5 and family Income in Oak Park and River Forest, in relation to Federal Poverty guidelines

#### Head Start eligibility (130% FPL) in Oak Park and River Forest.

	0-130% Federal Poverty Level (2018 Estimates)											
Townships (sort)	number of children under 1 year (sort)	number of children 1 year (sort)	number of children 2 years (sort)	number of children 3 years (sort)	number of children 4 years (sort)	number of children 5 years (sort)	number of children 5 and under (sort)					
(Cook - Suburbs) Oak Park	50	57	63	71	78	71	390					
(Cook - Suburbs) River Forest	0	0	0	0	0	0	0					

#### Eligibility for free of reduced priced lunch (185% FPL) in Oak Park and River Forest

	0-185% Federal Poverry Level (2018 Estimates)											
Townships (sort)	number of children under 1 year ( <u>sort</u> )	number of children 1 year ( <u>sort</u> )	number of children 2 years (sort)	number of children 3 years (sort)	number of children 4 years (sort)	number of children 5 years (sort)	number of children 5 and under (sort)					
(Cook - Suburbs) Oak Park	69	79	88	100	109	99	544					
(Cook - Suburbs) River Forest	2	2	2	2	2	1	11					

#### Eligibility for assistance with child care/ CCAP (200% FPL) in Oak Park and River Forest.

	0-200% Federal Poverty Level (2018 Estimates)									
Townships (sort)	number of children under 1 year (sort)	number of children 1 year (sort)	number of children 2 years (sort)	number of children 3 years (sort)	number of children 4 years (sort)	number of children 5 years (sort)	number of children 5 and under (sort)			
(Cook - Suburbs) Oak Park	69	79	88	100	109	99	544			
(Cook - Suburbs) River Forest	2	2	2	2	2	1	11			

## Families receiving assistance with child care/ CCAP (200% FPL) in Oak Park and River Forest.

	CCAP. Children receiving assistance by family location (FY 2019)									
Townships (sort)	number of children 0 and 1 year (sort)	number of children 2 years (sort)	number of children 3 and 4 years (sort)	number of children 5 years (sort)	number of children 5 years and under (sort)					
(Cook - Suburbs) Oak Park	35	20	36	***	100					
(Cook - Suburbs) River Forest	***	***	***	***	12					

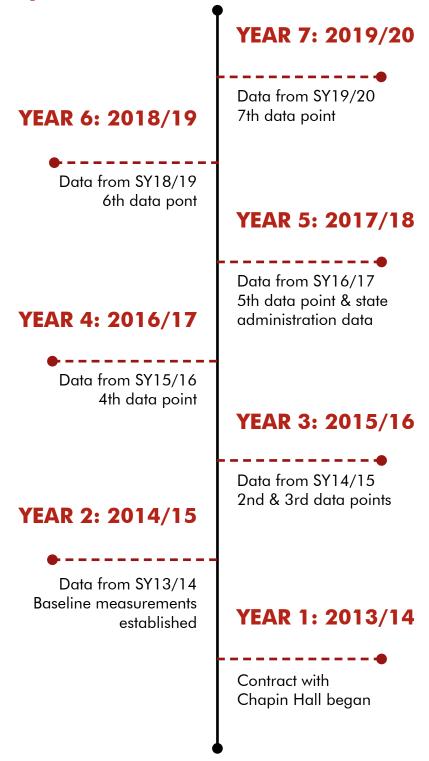
<sup>\*\*\*</sup> CCAP data on number of children receiving services are not reported for instances of regions in which there are 10 or fewer children.



# **Chapter 6: Appendices** "Play is the highest form of research." – Albert Einstein

#### **Chapter 6: Appendices**

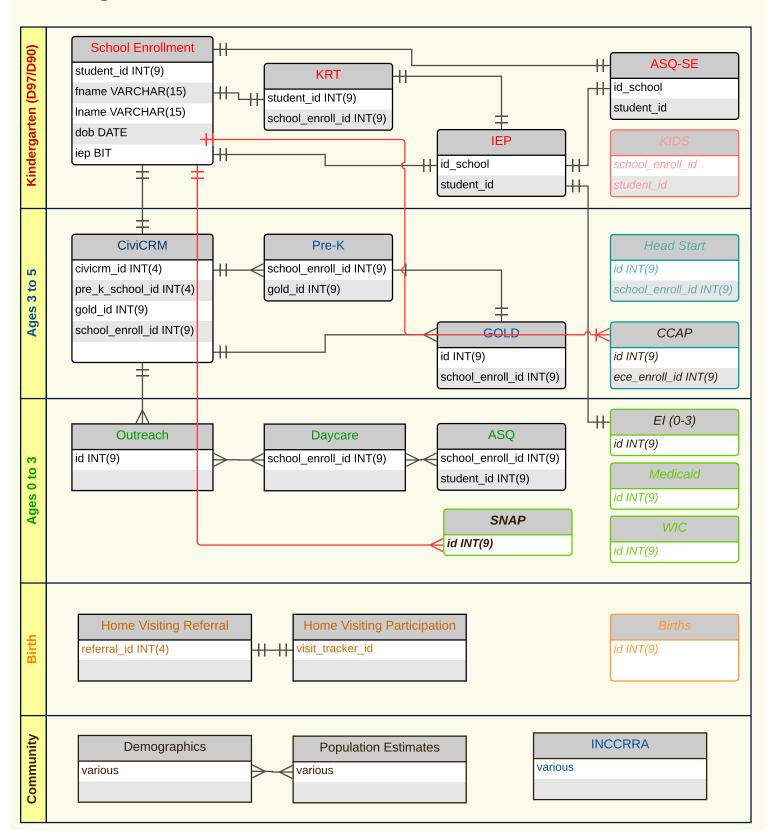
#### **Reporting History**

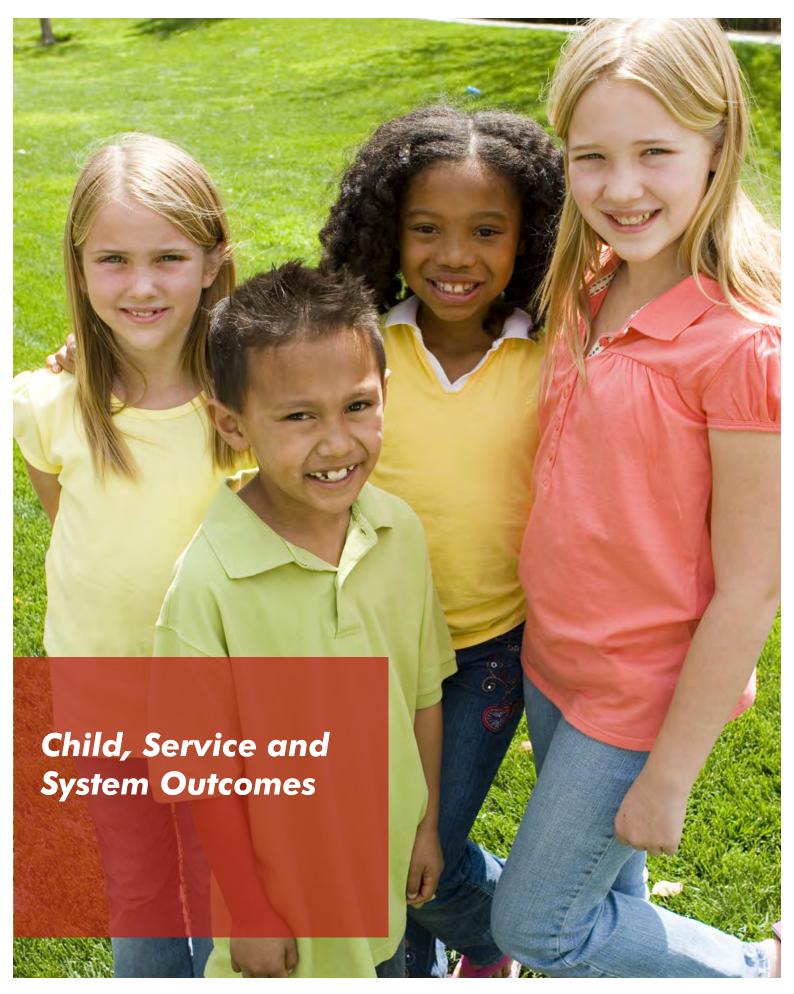


Quarterly, the Collaboration reports to the IGA on program activities through detailed data reports, progress reports, and financial reports. A complete list of documents from these quarterly meetings is available on <u>our website</u> (under Meeting Materials > IGA).

Oak Park Collaboration for Early Childhood

## Integrated Database Schema 2018





# Child Outcome 1: Children identified through screening as needing assessment or services receive them.



#### **Submeasure 1: Number of children screened**

The ASQ-3 is a global developmental screening tool and the ASQ: SE-2 is a social-emotional screening tool. They do not provide diagnosis, rather they offer a valuable perspective on where the child is developmentally in relation to their age. The results may indicate that additional evaluation is warranted. The Collaboration strives to ensure as many children as possible are screened at regular intervals, at least once per year, prior to kindergarten entry.

The ASQ screening tools can be completed by parents or other caregivers in a variety of settings. Medical practices make them available to families, as do preschools and child care programs, home visitation programs or even the public library. While caregivers (parents, guardians, grandparents, etc.) complete the screening questionnaires, early learning and health professionals review the completed questionnaires and should share the screening results with caregivers soon after screening completion.

The Collaboration has made it easier for families to share their results across providers. For instance, if a caregiver completes a screening for the child's preschool program, the caregiver can give permission for the completed screening to be shared with their doctor, also in the ASQ Online system. This service has been received very positively by both families and providers. It means the family doesn't have to complete the screening questionnaire multiple times within a close time period and important information about the child is shared among those who are supporting families.

#### **Impact from COVID-19**

We were on track to increase the number of children who received a developmental, social-emotional, hearing, or vision screening when schools and other screening partners closed due to COVID-19. These closures impacted all but one of the programs scheduled for March 2020. Our Spring screening round, in April and May, was greatly affected by school closings. That is the reason for a decrease in screenings.

The State has recently issued guidance on conducting hearing and vision screenings and we are scheduling those starting in the next month. Our Hearing & Vision Screening Technician will screen children on-site using strict health and safety protocols.

Medical facilities were closed for non-emergency procedures for four months of the reporting period due to COVID-19. This potentially prevented families from receiving follow-up examinations, as indicated below.

	2016-17	2017-18	2018-19	2019-2020
Total children receiving ASQ-3 <b>or</b> ASQ: SE-2	1,806	1,787	1,969	1,868
Total children receiving ASQ-3 and ASQ: SE-2	1,524	1,509	1,575	1,556
Total children receiving ASQ-3	1,726	1,711	1,830	1,810
Total children receiving ASQ:SE-2	1,604	1,585	1, <i>7</i> 14	1,614
Hearing screenings	1,353	1,313	1,375	945
Vision screenings	1,411	1,367	1,425	947

## <u>Submeasure 2: Number (percent) of children referred for assessments receive</u> them.

- 19 (70%) programs participating in the Developmental Screening Project (27 total) used ASQ Online to document follow-up needs and further documented those needs as requested by the Collaboration for children in response to screenings. Two of the participating programs had no children who scored in the "refer" range in any developmental areas. This means that 19 of the 25 (76%) programs with enrolled children who scored "refer" in one or more developmental area used ASQ Online to document follow-up needs and further documented those needs as requested by the Collaboration.
- Collaboration documentation shows that 13 children were referred to Early Intervention for further evaluation.
- 756 children scored as "monitor" or "refer" (for further evaluation for additional support services) on the ASQ:3 questionnaire and 154 children scored as such on the ASQ:SE-2 questionnaire.
- In order to streamline this complex data collection effort more efficiently, we have worked with Chapin Hall to revise code to streamline ASQ:3 and ASQ:SE-2 screening scores and to determine counts of screening score results matched to the documentation of appropriate follow-up activities.
- 9 (36%) of the children who were referred for assessments due to concerns identified through the vision screening were assessed and received treatment. Medical facilities were closed for non-emergency procedures for 4 months of the reporting period due to COVID-19. This potentially prevented families from receiving follow-up examinations.
- 3 (60%) of the children who were referred for assessments due to concerns identified through the hearing screening were assessed and received treatment. Medical facilities were closed for non-emergency procedures for 4 months of the reporting period due to COVID-19. This potentially prevented families from receiving follow-up examinations.

# Submeasure 3: 41 (87%) of children assessed were found eligible for services, and Submeasure 4: 29 (70%) of children identified as eligible for services received them.

• These are not submeasures where we should be setting a target. We monitor and record this number, which varies from year to year.

# Child Outcome 2: Percent of children in Oak Park and River Forest Preschool for All and Head Start (PFA/HS) who demonstrate ageappropriate proficiency in each domain of development in accordance with the Illinois Early Learning Standards.

Proficiency is typically measured using the Teaching Strategies GOLD assessment system, which is administered by teachers in fall, winter, and spring in Preschool for All and Head Start classrooms. It is an observation-based portfolio assessment. The GOLD assessment has 38 objectives across 8 domains. The Preschool for All committee, with the guidance of a researcher at Loyola University who studies preschool transitions to kindergarten, identified 10 of these objectives as representative of proficiency in the different domains.

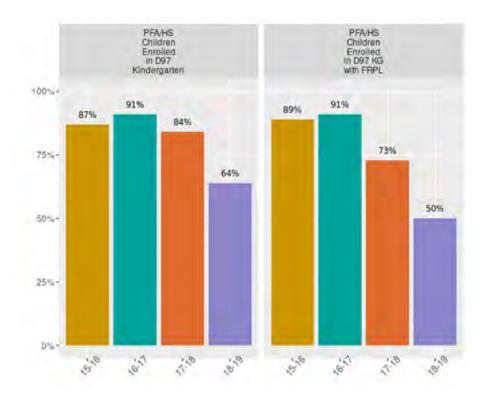
The GOLD assessment is used by teachers to adjust their instruction at regular intervals, and Collaboration staff use it to identify topics for professional development.

As the Collaboration has coached the teaching staff on the importance of completing scores for all 10 of the target objectives, the number of completed assessments has increased.

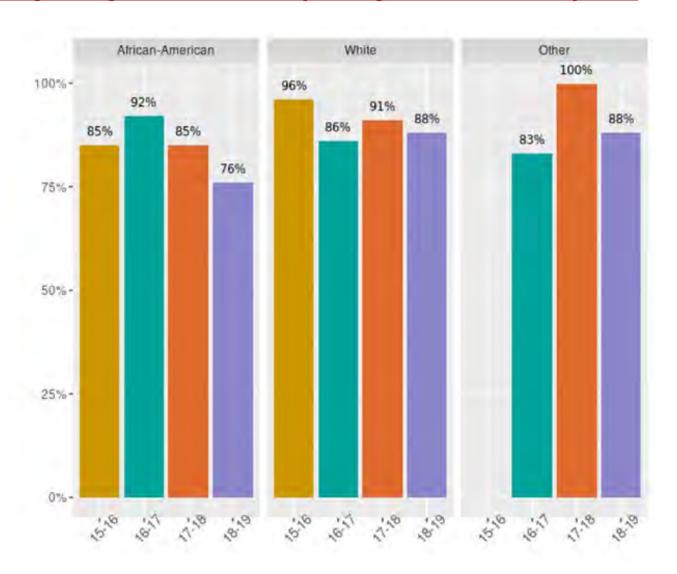
#### **Impact from COVID-19**

- The scores discussed in this report are based on Spring scores. Due to COVID-19, staff were not able to assess students in the Spring of 2020. Since Spring scores are linked with data of students enrolling in D97 Kindergarten in the subsequent Fall, this will be reflected in the report next year. We are already comparing GOLD scores from the past two Winters to establish a baseline for that change.
- Preschool for All programs are planning to administer the GOLD for fall, winter and spring for the current school year. However, we do expect anomalies relating to COVID-19 due to the current school environment.

#### **Teaching Strategies GOLD Proficiency**



#### Teaching Strategies GOLD Proficiency Among PFA/H5 Students, by Race



- While it is difficult to say with certainty why SY17/18 and SY18/19 show a decrease in proficiency, we do know that was when the Collaboration started being the coordinated intake point for PFA enrollment. At that time, there was an emphasis on reviewing the eligibility standards to ensure the most vulnerable children had a spot in one of the publicly-funded preschool programs.
- It is interesting to note that KRT scores for children in publicly-funded preschools went down in both Teaching Strategies GOLD and the KRT (Child Outcome 3) in SY17/18 and SY18/19. The next year, SY19/20, scores went up on the KRT. We do not have Spring 2020 GOLD scores as a comparison due to COVID-19.

# Child Outcome 3: Percent of children entering kindergarten demonstrating age-appropriate proficiency in the kindergarten readiness assessment administered by District 97.

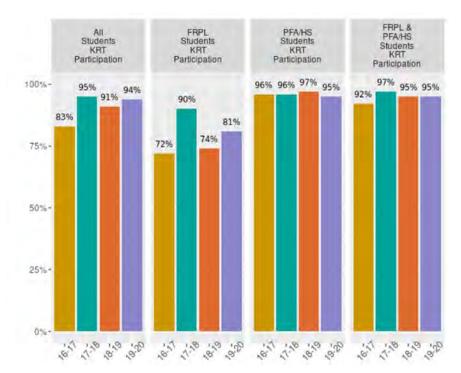
We rely on the Kindergarten Readiness Test (KRT) for assessing the proficiency of children entering kindergarten. In a typical year, the KRT is administered to incoming kindergarten students over the summer and goes through the third week of school.

For students attending Preschool for All or Head Start, the Collaboration usually administers the KRT during the Spring before kindergarten and these results inform additional interventions like summer enrichment activities with District 97 and the E-Team.

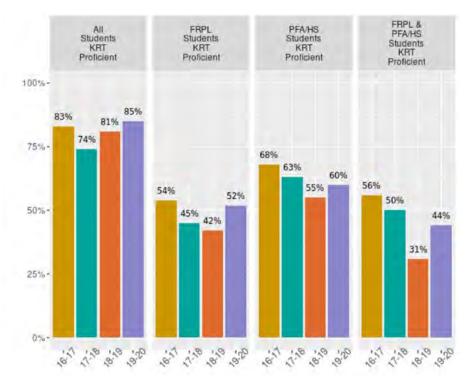
#### **Impact from COVID-19**

- Due to school closures, the KRT was not administered to students at the PFA programs in the Spring of 2020. It was not administered to any incoming kindergarten students for the current school year so we will not have KRT results to report on in Fall 2021.
- In the meantime, we will continue to look more closely at the findings from KIDS. The state defines KIDS as "an observational tool designed to help teachers, administrators, families and policymakers better understand the developmental readiness of children entering kindergarten." We will look for ways to align what we know from KIDS, Teaching Strategies GOLD, and previous KRT results. The KIDS data is very new and we're watching it cautiously until we know teachers and classrooms have settled into the collection process enough for the data to be reliable.
- The State of Illinois has required that school districts administer the KIDS assessment this school year to understand where kindergartners are academically and developmentally. The year is still expected to be an anomaly for a variety of reasons related to COVID-19.
- With the gaps in data this year, we expect to not have usable information about the progress made by students and educators, but it may show where there are gaps to fill.

#### **Kindergarten Readiness Test (KRT) Participation**



#### **Kindergarten Readiness Test (KRT) Proficiency**



- It is interesting to note that KRT scores for children in publicly-funded preschools went down in both the KRT and Teaching Strategies GOLD (Child Outcome 3) in SY17/18 and SY18/19. The next year, SY19/20, scores went up in the KRT. We do not have Spring 2020 GOLD scores as a comparison due to COVID-19.
- The pattern for these four years is similar for children who are either low-income or enrolled in public preschool.
- Each year is a different cohort of children and fluctuation is not unusual.

Service Delivery Outcome 1: Kindergarten students with Free and Reduced Price Lunch (FRPL) assistance have a history of participation in a PFA/HS/NAEYC accredited program, or a program meeting the Illinois Quality Rating System (ExceleRate) Gold Circle of Quality.

Sub-measure: What percent of kindergarten students with an IEP were enrolled in one of the programs described above?

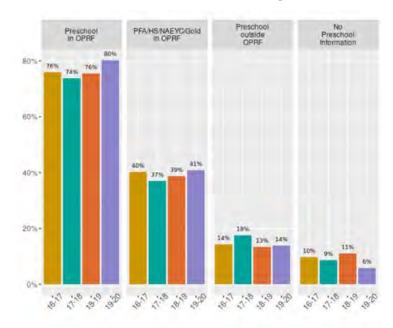
#### **Impact from COVID-19**

- This is an area where we expect to see changes in the data presented next year. For instance, the Preschool for All program at District 97's Longfellow School had full enrollment this past school year. In order to accommodate for COVID-19 protocols, they reduced their enrollment by 30 spots to handle distancing requirements. They are full now at reduced numbers. The other two Preschool for All programs in Oak Park (ABC Toon Town and Day Nursery) have had to reconfigure their PFA enrollment this year as well. These programs are also accommodating distance learners in their sites as well as providing distance learning for families who aren't comfortable with face to face classes. They had to reduce their numbers and are over 90% full.
- There has been a change in how and if families are enrolling their children in preschool for the coming year. We intend to collect the same data on enrollment and will report on the findings in Fall 2021.

#### **District 97 Kindergarten Enrollment**

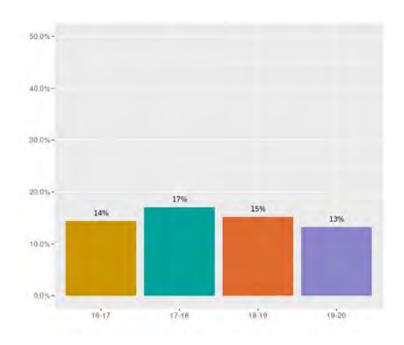
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#### Kindergarten Preschool Attendance History



#### Free-Reduced Price Lunch (FRPL) Status

#### Preschool History for Incoming Kindergarten Students who Receive Free-Reduced Priced Lunch





# Service Delivery Outcome 2: Teen parents and families receiving up through All Kids Level 1 health insurance for their child under age 3 receive referral to intensive parent education program.

This measure continues to be difficult to obtain due to the limitations of available data on the number of parenting teens and the number of families receiving All Kids health insurance. However, we have three programs operating in Oak Park, and all are providing some level of reporting to the Collaboration about the number of families who have been referred to their programs.

Teen or Non-Teen Parents	Teen- June 2018	Non- Teen June 2018	Teen- June 2019	Non- Teen June 2019	Teen- June 2019	Non- Teen June 2019
Number of families in Oak Park and River Forest receiving up through All Kids Level 1*	Not avail	Not avail	Not avail	Not avail	Not avail	Not avail
Number of families referred to Easterseals, Hephzibah or New Moms for parenting support	*	47	*	31	*	41

We do not have a good source of data for the number of teen parents or the number of families participating in All Kids Level 1 health insurance.

The Collaboration, in partnership with home visiting programs and the Public Health Nurse work together to make sure families can get connected to a program through a single point of entry. Home visiting programs work in tandem with the Public Health Nurse, who visits newborns and their mothers over the course of the first year of their child's life. Home visiting programs continue to support children and families through preschool.

# Service Delivery Outcome 3: Percent of referred parents who choose to participate in the intensive parent education program.

Easterseals, Hephzibah, and New Moms offer the Parents as Teachers parent education model program. The Easterseals program, funded by the Collaboration, combines Parents as Teacher program requirements with Maternal, Infant, and Early Childhood Home Visiting (MIECHV) requirements and standards.

Easterseals became our contractor as of January 2016 and they started enrolling families in March 2016. Easterseals has accomplished tasks related to family engagement, community leadership, and program growth. Home visiting staff monitor child development and parenting effectiveness, offering resources and guidance to families.

#### **Impact from COVID-19**

New home visiting program enrollment was certainly affected by COVID-19. It is highly likely that there would have been more families enrolled if services were able to be conducted in-person and if there were more referrals. There was only one referral from mid-March to the end of June. We know that families are experiencing financial hardships and family stress. We continue to pursue every avenue possible to contact families and to encourage referrals from partner agencies.

	June 2017	June 2018	June 2019	June 2020
Number of families referred for home visiting	63	47	31	41
Number of families who actively engaged as new families in the home visiting program funded through the Collaboration.	35	32	21	28
Percentage of referred families who engaged in the program.	56%	68%	68%	68%
Total number of families engaged in the home visiting programs in Oak Park and River Forest. * * *	86	66	<i>7</i> 1	61

The number of new families who engaged in home visiting includes all three programs.

Of the 51 families served by Easterseals, 18 were new this year. There are 69 children in that program. (Easterseals served 47 families the previous year.)

The total number of families engaged in home visiting includes the families who engaged in home visiting via the coordinated intake process as well as via direct contact with families.

Coordinated Intake is an initiative of the Collaboration for Early Childhood, Easterseals, Hephzibah, and New Moms that is designed to make it easy for social service providers, physicians, hospitals, and child care providers to refer families by providing a single point of entry for home visiting programs in Oak Park.

The Collaboration, in partnership with home visiting programs and the Public Health Nurse, work together to make sure families can get connected to a program through a single point of entry. Home visiting programs work in tandem with the Public Health Nurse, who visits newborns and their mothers over the course of the first year of their child's life. Home visiting programs continue to support children and families through preschool.

During FY19-20 there were 29 referrals through coordinated intake. Twenty-three referrals came from the Public Health Nurse. In total, ten families engaged in a home visiting program, five families declined services and six families were referred to a program outside of Oak Park and River Forest.

Home visiting program partners continue to meet monthly while the Home Visiting Task Force meets quarterly and parents are asked to participate in two meetings per year. Task Force partners are from RUSH, Beyond Hunger, Oak-Leyden Developmental Services, Housing Forward, CEDA WIC, Thrive, CFC #7, and IWS Children's Clinic. Task Force meetings are essential to strengthening relationships with referral sources.

Since February 2016, Easterseals has had 141 referrals with an enrollment rate of 47%. Typically, home visiting programs can expect an enrollment rate of around 15%. All families are contacted within two days of referral. They offer initial visits in their home or in the Easterseals office, based on the family's comfort level. They have seen more drop-ins in their new location on Oak Park Avenue.

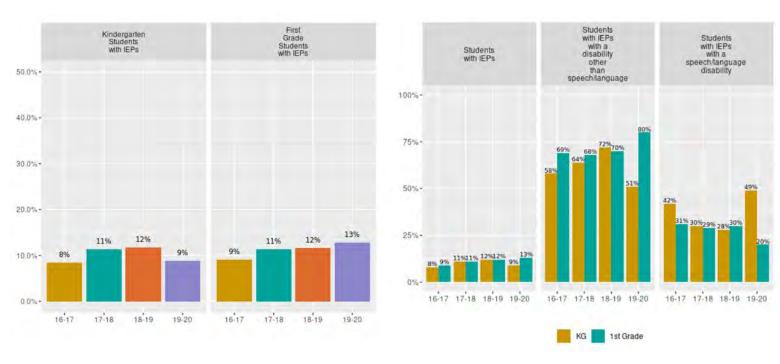
Over the same time period, Easterseals has served 71 families and 95 children. They have made 200 referrals for additional services, including Early Intervention. Twenty four of 95 children have received Early Intervention services. They also do depression screening and domestic violence screening for adults in their families and have provided referrals as well.

#### Service Delivery Outcome 4: Percent of kindergarten and 1stgrade students with Individual Educational Plans (IEPs) who have documentation of receiving services in early childhood (if they lived in Oak Park or River Forest during their early childhood years).

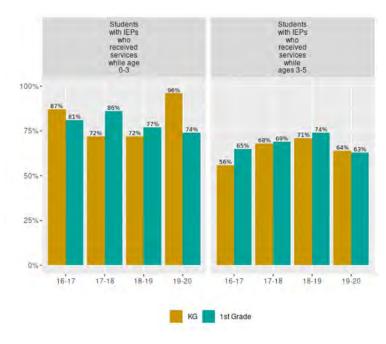
The goal of the special education system is to serve all children who need special services. A low percentage of children with IEPs in kindergarten does not indicate success or failure to provide services to children. We analyze the children who received IEPs or Early Intervention support prior to kindergarten to determine if they do in fact have fewer IEPs as they progress through elementary school.

#### **Students with IEPs**

#### **Service Delivery to Students with IEPs**



#### Service Delivery to Students with IEPs, by Age Group



# System Level Outcome 1: Estimate the Collaboration's connection with all families in Oak Park and River Forest with children under five via direct and indirect measures.

- Estimated percent of families with children under five touched by Collaboration services
  - Direct: Number of families reached through collaboration-sponsored outreach activities and services who provide information voluntarily and are included in our database.
  - Indirect: Counts of information distributed, subscribers to information (social media, other open distribution channels).

	June 2017	June 2018	June 2019	June 2020				
Number of people in Oak Park and River Forest	63,199	63,199	63,199	63,199				
Number of families with children < age 6 in Oak Park and River Forest	3,448*	3,448*	3,448*	3,448*				
Direct: Oak Park/River Forest participants in the voluntary database:								
Number of children enrolled in publicly funded preschool (Preschool for All and Head Start)	212	199	190	215				
Number of children participating in the developmental screening program	1,806	1,787	1,969	1,868				
Number of families participating in the Parents As Teachers home visiting parent education program	53	44	47	51				
Indirect: Families receiving informa	tion or support th	nrough the Collab	oration's efforts	* *:				
Number of families receiving outreach materials from the Parenting Resource Program	2,700**	7,500**	3,500**	2,358**				
Number of people on the Collaboration's email list who receive early childhood information	1,808	2,577	2,624	2,956				
Number of unduplicated visitors to the Collaboration's website	7,925	9,213	8,154	8,204				
Number of people following the Collaboration's Facebook page for parenting resources and information about early childhood	465	616	<i>7</i> 81	970				
Number of printed Early Childhood Resource Directories distributed	2,500	10,000	3,000	500				

<sup>\*</sup> Source: U.S. Census Bureau, 2010 Decennial Census; table P20. Updates to this number are not available until the next census.

<sup>\*\*</sup> Many of the indirect counts are duplicated since people encounter our materials in many ways

#### **Impact from COVID-19**

- Our in-person outreach activities from mid-March through June were canceled. This reduced the number of materials we distributed. However, all monthly parent workshops were held as planned and we saw an increase in attendance for the virtual sessions (6 of the 17 workshops were virtual).
- We delayed the printing of our bi-annual Early Childhood Resource Directory due to COVID-19. We transitioned to focusing on a redesign of the directory on our website. We plan to print fewer than usual copies of the directory to distribute in 2021. We will promote the online directory extensively.
- We launched Ready, Set, Kindergarten a virtual support system for 30 families whose children are transitioning to kindergarten in the midst of COVID-19.
- We distributed activity kits to 175 children with disabilities or developmental delays to enhance their at-home learning and growth during shelter-in-place.

#### **Digital Communications**

#### Ready4K Text App

We piloted a new research-based text app for families this year. 1,118 text messages were sent to 83 families via Ready4K's text-based family engagement curriculum during the 2019-20 school year. This pilot was met with success and will continue in the 2020-2021 school year.

#### **Website Activity**

We began a significant redesign of collab4kids.org, which is still in progress at the time of this report. One feature is the searchable Early Childhood Resource Directory. There were 774 visits to the online version of the Directory this past year, making it the most popular page after our Symposium registration area.

#### **Newsletters**

Our Early Learning program sent out monthly e-newsletters to child care center directors, early learning professionals, and family child care providers in Oak Park or River Forest. These newsletters shared information on COVID-19, including funding resources and guidance on PPE, as well as general training opportunities and other important information. Since their start in April 2020, these newsletters have had 2,348 views.

The Parenting Resource Program distributes a newsletter. The distribution of the newsletter shifted from bimonthly to monthly in April 2020 and went to 392 recipients. In July, the newsletter included lots of play and activity ideas. #PlayOPRF was a way for parents and caregivers to connect with the Collaboration on social media during the summer months.

#### **Community Outreach**

Community Ambassadors have been leading community outreach throughout the year. From October through June 2020, they engaged approximately 655 caregivers in conversations and handed out more than 280 early childhood resource bags.

The Collaboration has two part-time Community Ambassadors on staff. During the summer (July 2019-June 2020) 5 parents signed on to work as (temporary) Summer Early Childhood Community Ambassadors. In 2019, Ambassadors conducted over 70 hours of outreach.

#### Families First | La Familia Primero

Families First formed in April 2019. At Earth Fest, the team's first event, members organized a family-friendly Earth Day-related activity. Their children helped at the table while other families explored at the event. Throughout the year, team members continued to organize family-friendly activities including marching in the 2019 Oak Park Fourth of July Parade. In December 2019, they organized a donation drive for Sarah's Inn. There were 12 donation locations throughout the community. In total, the team made 50 winter kits as well as donated hundreds of essential toiletry items to Sarah's Inn.

#### **Parent Leadership Training**

In February 2020, four Oak Park parents led the 7-week Parent Leadership Training in River Forest during February and March 2020. Six parents completed the training. Parent Leadership Training uses the Community Organizing & Family Issues (COFI) Family Focus Organizing model. After completion of the 7-week training parents started "Saturday Parent Circle" where they open up a space to talk and connect with each other on important topics and issues. Circle topics have included parenting, social-emotional learning, and self-care.

#### **Monthly Parent Workshops**

In partnership with First United Nursery School, New Moms, and a lineup of monthly speakers, a variety of parent workshops were offered to all caregivers of young children. In total, there were 17 workshops with 210 participants.

#### Workshop topics included:

- Potty Training
- Using Positive Guidance with Young Children
- Kindergarten Readiness
- Preschooler Health
- Choosing Child Care
- Winter Break Ideas
- Nutrition and Eating Healthy on a Budget

#### **Parenting Skills Workshops**

#### **Chicago Parent Program**

The Chicago Parent Program is a group-based parenting program led by trained facilitators. Facilitating the 12-week, evidence-based program, parents, and caregivers gain parenting confidence while also meeting and learning from other parents and caregivers raising young children in the community. During FY19-20, 17 parents and caregivers completed the Chicago Parent Program. Community partners on this work included the staff from Easterseals home visiting program, a teacher from The Day Nursery, and a private practice early interventionist.

#### Feedback from parents:

- "Thank you for the program and the education!"
- "Great group and really helpful conversations with the instructors. Thank you!"
- "Lenita and Susy were very helpful. Thank you for respecting our opinions and for listening to us carefully."
- "I feel very blessed to have a program like this available for us. The team leaders have been very elpful and positive in what they are doing."
- "I loved it. Our teachers were funny, shared their own experiences and gave us really nice examples! In the end we all became a family."
- "This was a wonderful help for our family- so enriching as we are busily raising our toddler and anticipating a second! Thank you so much to everyone involved."

#### **Welcome to Fatherhood**

Welcome to Fatherhood discusses different issues around parenting, relationships, and self-development twice a month. During FY19-20, Welcome to Fatherhood had 21 total participants, averaging 7-8 fathers per bi-monthly meeting. The Collaboration supported 12 meetings throughout the year.

#### Participate Testimony:

 "Welcome to fatherhood has been an awesome experience for me. It helped me realize that I was strong enough to know that I needed to get better as a father because I was weak in some areas. The group helped me with conflict resolution and how to prep myself for this journey of fatherhood."

#### **Home Visiting**

## Easterseals Partnering with Parents Home Visiting Program

During FY19-20, Easterseals showed an enormous amount of flexibility in meeting families. From July 2019 to June 2020, PwP staff worked with 51 families and 72 children. The program combines Parents as Teachers program requirements with Maternal, Infant, and Early Childhood Home Visiting (MIECHV) requirements and standards. At the end of the fiscal year, 83%

of well-child visits occurred in the recommended timeframe. Throughout the year, staff assisted families with a number of referrals to local resources including Sarah's Inn and Preschool for All programs and offered memberships to Wonder Works Children's Museum.

#### Additional FY19-20 numbers:

- Total number of home visits completed: 539
- Group Connections: 21, including a 5-week infant massage workshop
- Screenings: 63 children were screened using ASQ-3 and/or ASQ: SE-2
- Referrals to PwP: 31 referrals were made to PwP. Aside from coordinated intake referrals, the staff was able to engage new families by word of mouth, volunteering at Healthy Development Screening Day, Barrie Fest, walk-ins to their office, Early Childhood Resource Fair, and marketing through MomMail.

Each year families complete a Parents as Teachers Satisfaction Survey. Feedback included:

- "I am happy with the services that Easterseals provided."
- "I feel accepted, understood, and respected."
- "I receive helpful community resources."
- "I would recommend Easterseals services to others."
- "Easterseals services have a positive impact on our family."
- "Easterseals demonstrates an awareness of respect for and attention to the diversity of the people with whom it interacts."

System Level Outcome 2: Percent of teachers and directors in Oak Park early childhood programs who have above minimum state educational requirements for their role.

This outcome will be updated in the November report.

System Level Outcome 3: Percent of teachers and child care providers reporting more than the state-mandated 15 documented hours of continuing professional education each year.

This outcome will be updated in the November report.

# System Level Outcome 4: Percent of preschools, child care centers, and homes that are engaged in the Illinois Quality Rating System (ExceleRate) and improve their scores each year.

	June 2017	June 2018	June 2019	June 2020
Center-Based Programs				
Number of licensed and exempt preschools and child care centers.	46	44	45	45
Number of licensed preschools and child care centers.	29	27	28	28
A. Number (%) of licensed and exempt preschools and child care centers who engaged in the ExceleRate program.	20	21	22	27
	(43%)	(48%)	(49%)	(60%)
B.1. Number (%) of licensed and exempt preschools and child care centers engaged in ExceleRate and have received a score.	15	14	14	19
	(33%)	(32%)	(31%)	(42%)
B.2. Number (%) of licensed preschools and child care centers engaged in ExceleRate and have received a score.	15	13	13	14
	(52%)	(48%)	(46%)	(50%)
C. Number (%) of licensed and exempt preschools and child care centers involved in ExceleRate that improved their scores.	4	6	6	6
	(9%)	(14%)	(13%)	(13%)
D. Number (%) of centers initially involved with ExceleRate and choosing NAEYC-accreditation	4	4	4	6
	(9%)	(9%)	(9%)	(13%)
Family Child Care Providers				
Number of licensed family child care homes.	34	34	34	34
A. Number (%) of licensed family child care homes that engaged in ExceleRate.	10	14	14	15
	(29%)	(41%)	(41%)	(41%)
B. Number (%) of licensed family child care homes engaged in ExceleRate who received a score.	2	2	2	2
	(6%)	(6%)	(6%)	(6%)
C. Number (%) licensed family child care homes engaged in ExceleRate who improved their scores.	1	0	0	0
	(3%)	(0%)	(0%)	(0%)

<sup>1</sup> The number of unlicensed family child care providers is unavailable.

#### **System Level Outcome 4 continued**

This year, five centers engaged in ExceleRate for the first time, at the Green (or licensed) level. Six centers also became NAEYC-accredited, showing a commitment to quality using a scale different from the State's ExceleRate program.

While this year no new family child care providers decided to engage in the extensive process of ExceleRate, 24 home providers did engage with the Collaboration by attending professional development opportunities such as the Symposium, trainings and our regular Family Child Care Providers Roundtables.

#### Engaged in ExceleRate

A program that maintains a Bronze, Silver or Gold Circle of Quality in the Illinois ExceleRate System or NAEYC Accreditation, within a given fiscal year, is counted as engaged for that year.

#### **ExceleRate Green**

A Green rating means a center has had a DCFS license for at least one year. This is a requirement for engagement in ExceleRate.

#### Engaging in ExceleRate while having a Green Circle of Quality

Within a given fiscal year, a program that is engaged in ExceleRate must accomplish 50% of the following items:

- Complete and submit the "ExceleRate Licensed Center Application."
- Connect with an Action for Children Quality Specialist.
- Attend ExceleRate Illinois Orientation. (This is required for the program administrator.)
- Attend ECERS-3. (This is attended by the administrator and 50% of staff.)
- All staff are able to pull up and review their Illinois Gateways Professional Development Record (PDR) to create a Professional Development Plan (PDP).
- All staff submit official transcripts to Gateways to Opportunity.

- All staff complete and submit applications for Gateways credentials.
- Help staff attain Credentials and trainings based on program needs for Circle of Quality (Professional Development Advising).
- 50% of staff must complete 50% of Bronze Circle trainings.
- For a non-licensed program to be counted as engaged in ExceleRate they must apply and receive a DCFS license within the fiscal year.

## 2. Engaging in ExceleRate while having a Bronze Circle of Quality

- Once a program receives a Bronze Circle of Quality, a program can be counted as engaged by completing the yearly required report called a Continuous Quality Improvement Plan (CQUIP).
- Programs that achieve the Bronze Circle of Quality can hold it for three years.
   During the three years, the program will need to complete an annual report every 12 months, updating program information and working towards achieving the Silver Circle of Quality.
   The Bronze Circle of Quality cannot be renewed.

## 3. Engaging in ExceleRate while having a Silver or Gold Circle of Quality

 Working towards and/or maintaining an ExceleRate Silver or Gold Circle of Quality is a process with too many parts to describe here. Once a program has a Silver or Gold rating, it can be counted as engaged if a minimum of 50% of requirements are completed within a fiscal year. Programs receive a checklist of requirements that cover the areas of teaching & learning, family & community engagement, leadership & management, and qualifications & continuing education.

#### **Family Child Care Providers**

 The same percentages apply to Family Child Care Programs using the Family Child Care Program ExceleRate checklists.





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