



**2017 – 2025**

# **QUALITY FOR ALL**

*Roadmap to a High-Quality Prenatal—3rd Grade Health & Early Learning System in Alum Rock Union Elementary School District*

## EXECUTIVE SUMMARY

Learning begins at birth, and all children are capable of achieving their full potential in school and life. However, healthy child development that leads to success in school and life does not happen on its own or in isolation. Helping children reach their full potential requires a “whole person, life-course approach” that addresses the multiple and intersecting determinants that influence the health, education and well-being of children and families across the lifespan.

Unfortunately, too many children begin life with the odds stacked against them. Complex family challenges—such as poverty, cultural and linguistic isolation, discrimination, unstable housing, lack of access to high-quality early learning experiences, substance use, mental illness, and family or community violence—can create toxic levels of stress that damage the developing brain and threaten children’s lifelong health, development, and learning. Without high-quality relationships and supports to buffer the cumulative effect of these stressors, children facing adversity are at greater risk of entering school without good health and foundational physical, social, emotional, behavioral and academic skills they need to succeed in school.

Decades of research show that children who start school behind their peers in foundational school readiness skills are more likely to stay

behind. This “readiness gap” feeds into the “achievement gap,” or disparities in educational outcomes such as 3rd grade reading proficiency—a key predictor of high school graduation rates. Lower educational attainment, in turn, increases the risk of repeating the cycle of socioeconomic disparities that sets the stage for the achievement gap in the next generation of children. To complicate matters further, the systems that exist to support children and families are often siloed or operate based on policies and practices that widen the opportunity, readiness and achievement gaps instead of creating equity.

The Alum Rock Union Elementary School District’s Quality for All: Prenatal—3rd Grade Health & Early Learning System Plan outlines a vision and “Pathway to Success” to ensure that by 3rd grade, all children in the district are healthy, thriving and on the path to reaching their full potential in school and life. The Pathway to Success begins prenatally and lifts the whole health of children, families, and the community. It requires informal and formal health, educational and family strengthening systems to work in partnership with families to build an equitable, inclusive system that ensures all children have access to the high-quality health care, early learning experiences, family relationships, and environments that will prepare children for success in school, college, career, and life.

### PRENATAL - 3rd GRADE PATHWAY TO SUCCESS







# STRATEGIC GOALS

2017-2025

The Alum Rock Partners have identified the following strategic goals to guide their collaborative, systems-building efforts:

## GOAL 1

### **Align and Integrate Systems**

Align policies, programs, standards, practices, professional development, evaluation, funding and other “pillars” of the Alum Rock Prenatal—3rd Grade Health and Early Learning System.

## GOAL 2

### **Provide inclusive, equitable, affordable and universal access to high-quality early learning experiences**

Ensure all children and families in ARUESD have inclusive, equitable and universal access to high quality early learning experiences prior to entering kindergarten.

## GOAL 3

### **Address social determinants that impact children’s health and learning**

Ensure children and families have access to a comprehensive system of services and supports that meet the needs of the whole child and family—physical, social, emotional, behavioral, academic, economic—and prepare children to be ready for and suc-

## GOAL 4

### **Strengthen family-school-community partnerships**

Ensure early learning providers, educators, service providers and Alum Rock families engage with each other as equal partners to foster children’s health, well-being and learning at home, at early learning sites and elementary schools, and in their surrounding networks of families, friends, neighbors

## GOAL 5

### **Demonstrate impact and achieve sustainability**

Ensure the Alum Rock Prenatal—3rd Grade Health and Early Learning System is an effective, sustainable, replicable model for closing the opportunity, readiness and achievement gaps for all children.







## ACKNOWLEDGEMENTS

This plan was developed based on the collective wisdom, experience, and passion of the Alum Rock Partners listed below. It will serve as a living document that simultaneously guides the partners' collaborative efforts and evolves to reflect the partners' successes and lessons learned.

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## WHO WE ARE

The Alum Rock Union Elementary School District Prenatal—3rd Grade Partners (**Alum Rock Partners**) are **staff and parent leaders** from organizations that are committed to building an inclusive, equitable, high-quality, integrated system that promotes **children's health, development and learning from the prenatal period through 3rd grade**. The Partners include:

**Alum Rock Union Elementary School District (ARUESD)**

**Applied Survey Research** (evaluation partner)

**Families in ARUESD**

**FIRST 5 Santa Clara County**

**Grail Family Services**

**Healthier Kids Foundation**

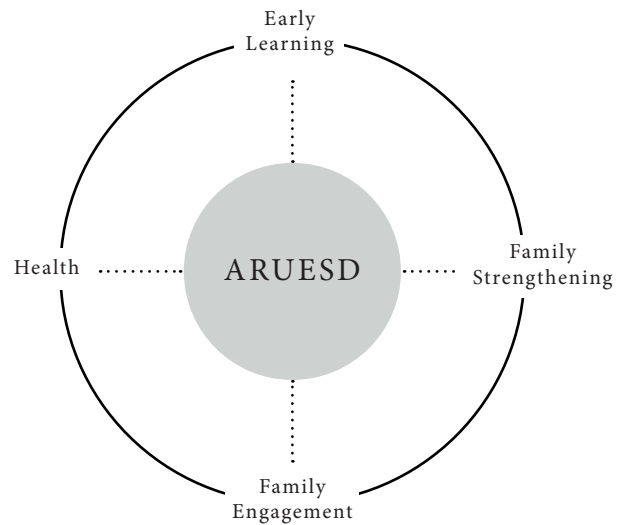
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**San Juan Bautista**

**Santa Clara County Office of Education/Head Start**

**SOMOS Mayfair**

**Other partners as identified**



## OUR MISSION

To work in partnership with families to build an inclusive, equitable and universal system that closes the opportunity, readiness and achievement gaps, ensuring all children in Alum Rock Union Elementary School District are succeeding in school by the end of 3rd grade.

## VISION OF SUCCESS

All children in Alum Rock Union Elementary School District are healthy, thriving and on the path to reaching their full potential in school and life.





# PHILOSOPHY & GUIDING PRINCIPLES

The Alum Rock Partners will build a comprehensive, high-quality Prenatal —3rd Grade Health and Early Learning System that:

- 01.** Promotes optimal physical, social, emotional and behavioral health, development and learning from the prenatal period through 3rd grade.
- 02.** Is rooted in scientific evidence that positive relationships and experiences in the earliest years of life lay the foundation for future health, learning, and behaviors.
- 03.** Addresses the needs of the whole child within the context of the families and community they live in, to ensure children have the social, emotional, physical, behavioral and academic skills and supports needed to succeed in school.
- 04.** Increases equity and embeds culturally competent practices in all policies and programs, in order to end systemic structures and practices that perpetuate intergenerational opportunity, readiness and achievement gaps.
- 05.** Encourages and validates families as leaders and equal partners in their children's education.
- 06.** Builds on family and community strengths, social and cultural capital, and connectedness.
- 07.** Provides inclusive, equitable and universal access to high-quality early education.
- 08.** Supports both formal and informal educators in providing high-quality early learning experiences for all children.
- 09.** Mobilizes community leaders and partners to provide wraparound family support and create safe and thriving neighborhoods.
- 10.** Ensures all children enter school healthy with foundational school readiness skills —physical, social, emotional, behavioral, academic—no matter when or how they first enter the Alum Rock Prenatal—3rd Grade Health and Early Learning System.

- 11.** Promotes fluency in English by 3rd grade, while encouraging students to retain their native languages and cultures to become bilingual, biliterate and bicultural.
- 12.** Creates alignment within and across the partners in the Alum Rock Prenatal—3rd Grade Health and Early Learning System.
- 13.** Ensures the legal, technical and ethical use of shared data.
- 14.** Engages all stakeholders—families, early educators, schools, community agencies, health care providers, business leaders, elected officials, funders, and the community at large—in building a high-quality Prenatal—3rd Grade Health and Early Learning system that puts children on the path to success in 3rd grade and beyond.





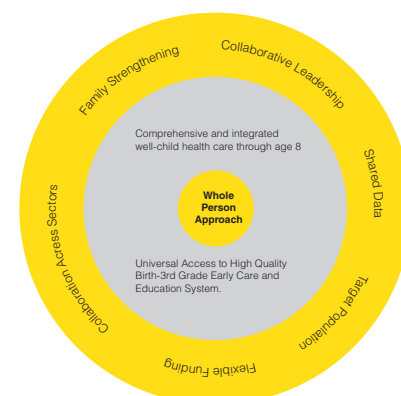
# WHY THIRD GRADE MATTERS

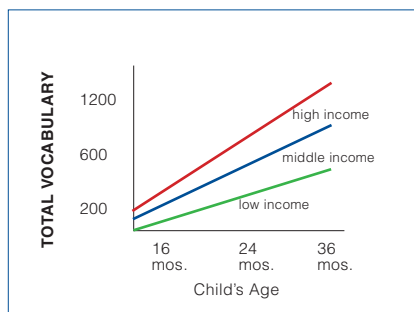
The Alum Rock Partners believe **learning begins at birth, and all children are capable of achieving their full potential** in school and life. However, healthy child development that leads to success in school and life does not happen on its own or in isolation. Helping children reach their full potential requires a “whole-person, life-course approach” that addresses the complex interplay of biological, social, environmental, economic, and institutional determinants that shape the health, education, and well-being of children and families throughout the lifespan and across generations.

**Unfortunately, too many children begin life with the odds stacked against them.** Exposure to chronic stressors and Adverse Childhood Experiences (ACEs)—such as poverty, cultural and linguistic isolation, discrimination, unstable housing, barriers to accessing health care, lack of access to high-quality early learning experiences, substance use, mental illness, and family or community violence—can create toxic levels of stress that disrupt the developing brain and threaten children’s lifelong health, development, and learning.<sup>1</sup> As the number of adverse experiences in a child’s life increases, so does the risk for developmental delays, behavioral problems, low educational attainment, lower wages in adulthood, and poor health outcomes later in life, such as heart disease, diabetes, substance abuse and depression. A 1998 study conducted by Kaiser Permanente and the Centers for Disease Control and Prevention (CDC) found that a person with four or more Adverse Childhood Experiences is 12 times more likely to attempt suicide, 10 times more likely to use intravenous drugs, 7 times more likely to become an alcoholic, and 5 times more likely to experience depression.<sup>2</sup>

To complicate matters further, the systems that exist to support children and families are often siloed or operate based on policies and practices that end up widening the opportunity, readiness and achievement gaps instead of creating equity. For instance, a lack of cross-sector communication and coordination places the burden of navigating complex service systems on families. In other cases, income-eligibility criteria for publicly-funded programs, such as subsidized child care, often become barriers to accessing services or may require families to make choices that end up restricting their economic and social mobility.

Without a system of responsive, coordinated and high-quality health, social, emotional, economic and educational supports to buffer the cumulative effect of these stressors, **children who experience adversity in early childhood are at greater risk of entering school without the foundation of good health, social-emotional skills and academic skills they need to succeed in school.**





Source: Hart & Risley (1995)

Research indicates that children who start school behind their peers in these foundational school readiness skills are more likely to stay behind. A longitudinal study conducted by researchers Betty Hart and Todd Risley found striking differences in the size of children's vocabulary by age 3 that corresponded with differences in parent-child interactions among families of varying socioeconomic status.<sup>3</sup> Hart and Risley estimated that by age 3, **children from lower socioeconomic backgrounds were likely to hear 30 million fewer words than children from higher socioeconomic backgrounds**, and a follow-up study indicated that this early "30 million word gap" was a predictor of language skills and reading comprehension by 3rd grade.<sup>4</sup>

Subsequent research studies have confirmed Hart & Risley's findings that differences in the quantity and quality of verbal interactions between parents and children during the first three years of life are linked to later differences in children's language and literacy skills, contributing to a gap in children's readiness for school.<sup>5</sup> **This "readiness gap" feeds into the "achievement gap,"** or disparities in educational outcomes. The achievement gap can be detected as early as 9 months of age<sup>6</sup> and is often exacerbated for children who live in low-income or under-resourced families, are English Learners, or attend schools that do not provide high-quality education. Without a system of responsive, coordinated and high-quality supports for children and families during the early primary grades, the achievement gap grows wider and more difficult to eradicate.

**Third grade is a particularly important milestone in a child's educational development.** Students who are not proficient in reading, writing and math by the end of 3rd grade are more likely to struggle in 4th grade when they must focus on reading to learn instead of learning to read. Although reading, writing and math assessment scores are only one dimension of student achievement, they serve as an important warning sign of unmet health, learning or family support needs. If these needs remain unidentified and unaddressed, the achievement gap will continue to grow as the curricula become more difficult each year and students are expected to engage in more complex problem-solving and critical thinking. Persistent academic struggles can contribute to low self-esteem and feelings of inadequacy and failure, which often manifest as social, emotional and behavioral problems at home and school. In fact, The Children's Reading Foundation in Washington State cites low achievement in reading as a "common denominator in school discipline, attendance and dropout problems, and juvenile crime."<sup>7</sup>

Without a system of responsive, coordinated and high-quality supports, the combined effects of dealing with health, social, emotional and academic struggles can lead both students and families to feel discouraged by and disengaged from their schools, increasing the risk of students dropping out of school before obtaining a high school diploma. Lower educational attainment, in turn, increases the difficulty of finding good-paying jobs, which increases the chances of living in poverty and experiencing other socioeconomic disparities that set the stage for the achievement gap in the next generation of children.

# CURRENT GAPS & STRENGTHS

In ARUESD, there are signs of readiness and achievement gaps, as well as indicators that students and families are in need of support. While these data might illuminate areas of concern, there are also strengths within the ARUESD community that can be built upon to close these gaps for all children. The following are just a few examples:

## READINESS & ACHIEVEMENT GAPS

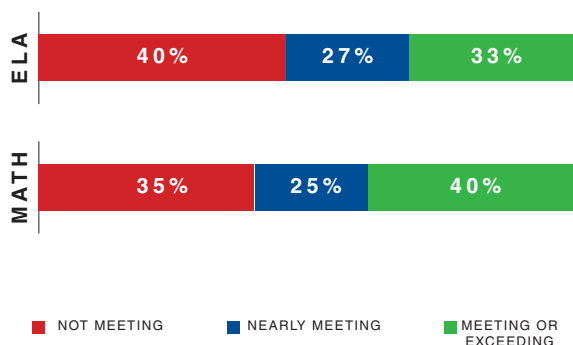
- Results from a Fall 2016 School Readiness Assessment conducted by Applied Survey Research in Alum Rock Union Elementary School District Research showed that **only one-quarter of children (26%) were Fully Ready for kindergarten** across the Self-Regulation, Social Expression and Kindergarten Academics domains, **while nearly half (41%) of students were Not Ready**. The remaining 33% of students were partially ready for school.
- By 3rd grade, slightly more students are meeting grade-level academic standards, but there is still a persistent achievement gap affecting many students. The Smarter Balanced Assessment Results from the 2016-17 school year show that **only one-third of students achieved proficiency in English Language Arts (33%).<sup>8</sup> Slightly more students achieved proficiency in math (40%)**. While this is a noteworthy improvement over the 2014-15 school year, when only 29% of 3rd grade students were meeting or exceeding standards in English Language Arts and in math<sup>9</sup>, it still means the majority of ARUESD students are at risk of falling further behind and experiencing poor educational outcomes in later years.

Only 26% of Kindergarteners are Fully Ready for school in all domains of school readiness



Source: Applied Survey Research, Kindergarten Observation Form; N=491 (2016)

Only 33% of students are achieving proficiency in English Language Arts (ELA) by 3rd Grade. Slightly more students are achieving proficiency in math (40%).



Source: CAASPP Smarter Balanced Assessment Results, 2017, Alum Rock Union Elementary School District







## HEALTH & FAMILY STRENGTHENING NEEDS

During the 2016-17 school year, **21% of all ARUESD students (TK – 8th grade) or their families received School Linked Services (SLS)** through 24 school sites. It is a promising sign that nearly one-quarter of the district's students and families were referred to or participated in behavioral and mental health services and family engagement events. At the same time, this data points to the types of struggles students and families are facing. The majority of SLS referrals were for behavioral/mental health services (44%) or family support services to help families meet their basic needs (32%).

In 2016-17, **over 600 children and their families received services from FIRST 5-funded programs in Alum Rock.** While many of the children and parents received preventative, family strengthening services at a Family Resource Center, a significant number of children received more intensive developmental services from the KidConnections Network (n=431) and home visiting from a public health nurse (n=111). This indicates that young children who are—or will eventually be—attending school in ARUESD have potential health, developmental or behavioral challenges. The good news is that vulnerable children and families are getting connected to a system of early intervention and therapeutic services that build on families' strengths, reduce risks, and enhance protective factors.

The Healthier Kids Foundation (HKF) provides hearing, vision and dental screening and case management for students in the ARUESD community, as well as healthy lifestyle classes to parents, and help with health enrollment for children. **HKF's data from the 2016-17 school year indicates that oral health is an issue to pay particular attention to.** Approximately 31% of oral health screenings conducted for children ages 1-9 indicated oral health concerns that led to referrals for dental care. The majority of those referrals ended with children being successfully connected to dental care or treatment. While this is considered a success, a high number of screening cases were closed due to the inability to contact the children's parents. HKF attempts to contact families up to eight times before closing the case. This means that many children with oral health problems may not be receiving appropriate treatment, which can have a debilitating effect on their learning and behaviors.



In the 2016 School Readiness Assessment, participation in **formal early care and education programs prior to kindergarten**—particularly programs rated as high quality—was the strongest predictor of school readiness.

Other school readiness predictors, or assets, included students' health and wellbeing (being rested or not tired), age (5.5 years or older), gender (female), frequency of parents and children reading aloud together at home (at least three times per week), and socioeconomic status (particularly mother's educational attainment).

**Readiness assets have a cumulative effect.** The more assets a student has, the higher the level of school readiness skills.

**Attending a higher rated early learning program was associated with higher school readiness among entering kindergartners.** In Alum Rock, 36 early learning programs have been rated based on the California Quality Rating and Improvement System (CA-QRIS) Hybrid Rating Matrix, which defines and measures elements of quality using a tiered system. Participating early learning sites are assigned a rating from Tier 1 (lowest quality) to Tier 5 (highest quality). As of July 2017, 61% of Alum Rock early learning programs were rated Tier 4 or Tier 5. Twenty-five percent were rated Tier 3 and 14% were rated Tier 2.

FIRST 5's SEEDS of Early Learning professional development program have demonstrated **significant improvements in the quality of literacy environments and teaching practices of family child care home providers, which in turn has improved children's early literacy skills.**

Many families in Alum Rock are already **connected to family resource centers (FRCs), high quality early learning programs, and other family strengthening and community-building supports.** Three FIRST 5 FRCs in the Alum Rock neighborhood, Cesar Chavez FRC, Grail FRC and Rita Chavez-Medina FRC, provide basic needs support and connection to community resources, developmental screenings (using the Ages and Stages Questionnaire, or ASQ-3), developmental learning play groups for children, parent/caregiver workshops and education programs, parent/caregiver leadership and advocacy programs, and early childhood literacy programs.

## STRENGTHS TO BUILD UPON

In 2016-17, 131 children received a developmental screening through the FRCs, and 122 parents participated in Triple P, an evidence-based parenting program for the prevention of social, emotional, and behavioral problems. A version of the SEEDS of Early Learning literacy development program for families was offered to 117 parents/caregivers at the FRCs. Additional services provided to a smaller number of families include 10 Steps to a Healthier You! (a series on implementing healthy habits in the home), 24/7 Dad (a National Fatherhood Initiative curriculum that trains fathers to be involved and engaged in child care), and Baby Care (a training on the basics of infant care).

Connections to these educational and social support resources are important because multiple research studies have proven that strong connections between families, schools and the community are linked to children's learning and educational outcomes. The more that families are involved in their children's learning at home and school, the more children are likely to do well in school and continue their education.<sup>10</sup> Fortunately, the organizations and partners in the Alum Rock community understand the importance of connecting children and families to needed resources, engaging families as leaders and partners in their children's education, and building mutual trust and respectful relationships between families, early learning providers, schools and the broader community.

These data about gaps and strengths underscore the urgency of building a comprehensive, equitable and inclusive Prenatal—3rd Grade Health and Early Learning system that closes the readiness and achievement gaps, so that all ARUESD children have the opportunity to succeed in school and fulfill their potential.



# THE PATHWAY TO SUCCESS

The readiness and achievement gaps in Alum Rock Union Elementary School District can be closed with an **intentional, systemic effort to close the opportunity gap** at the earliest point possible. The Alum Rock Partners have defined a “**Pathway to Success**” that reflects the collaborative’s whole-person, life-course approach, aligns with early childhood development research and best practices, and aims to achieve the following outcomes:

## By the end of 3rd Grade, children are:

- Meeting developmental milestones
- Demonstrating growth in multiple domains
- Meeting grade-level benchmarks
- Proficient in reading and math
- Fluent in academic language

## Families in the Alum Rock community are:

- Informed about available resources, child development and parenting, and opportunities to be active leaders and advocates in their children’s education
- Healthy in all domains – physical, social, emotional, environmental and economic
- Strengthened and drawing on available resources and their social capital to raise healthy, thriving children
- Engaged as equal partners and leaders in fostering their children’s healthy development and learning at home, school and in the community
- Valued by their communities, schools and other organizations they interact with

## The Alum Rock Partners are:

- Committed, skilled, responsive, and aligned in their approach to building a high-quality prenatal – 3rd grade health and early learning system
- Collaborative and interdependent leaders

The Pathway to Success **begins prenatally and lifts the whole health** of children, families, and the community. It requires informal and formal health, educational and family strengthening systems to work in partnership with families to build an equitable, inclusive system that **closes the opportunity gap**, so that starting at birth, all children have access to the high-quality health care, early learning experiences, family relationships, and environments that **close the readiness and achievement gaps**. Building the Pathway to Success for children and families in Alum Rock Union Elementary School District is an ambitious undertaking, yet it’s imperative to ensure that by the end of 3rd grade, **every child is healthy, thriving and on the path to reaching their full potential in school and in life.**





## ALUM ROCK UNION ELEMENTARY SCHOOL DISTRICT INTEGRATED & ALIGNED SERVICES & SUPPORTS



### HEALTHY PREGNANCIES & BIRTHS

- Health & dental insurance
- High-quality, continuous health care, beginning prenatally
- Access to healthy food, beverages, physical activity, & environments
- Screenings (parental depression, substance abuse, domestic violence)
- Other pre- & perinatal services
- Linkage to other supports & services



### OPTIMAL CHILD DEVELOPMENT

- Medical & dental homes
- Comprehensive health care
- Screenings (health, dental, vision, hearing, developmental, social-emotional, behavioral)
- Linkage to early intervention services
- Linkage to other supports & services



### SUPPORTED & ENGAGED FAMILIES

- Family Resource Center programs
- Economic supports
- Parent education
- Health & wellness programs
- Equitable, inclusive resources for special needs
- Programs and opportunities for parent/caregiver engagement, leadership development & advocacy
- Promotores (peer educators/ community workers)
- Community-building activities
- Linkage to other supports & services

## SYSTEM PILLARS: THE FOUNDATION OF HIGH QUALITY PRE

CULTURALLY  
RESPONSIVE  
PRACTICES

FAMILIES  
ENGAGED  
AS EQUAL  
PARTNERS

VALUES-  
DRIVEN  
LEADERSHIP &  
GOVERNANCE

SUSTAINABLE  
& LEVERAGED  
FINANCING

ALIGN  
POLICY  
PROCESSES  
& PRACTICES

## PATHWAY TO SUCCESS THROUGHOUT THE LIFE COURSE (PARTIAL LIST)



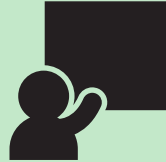
### HIGH QUALITY EARLY CARE & EDUCATION (ECE)

#### FOR CHILDREN/FAMILIES

- Universal access to high quality infant & toddler care, preschool & Transitional Kindergarten
- Developmentally-rich language & learning opportunities
- Inclusive ECE programs
- Centralized, family-friendly enrollment
- Community-based early learning opportunities
- Early childhood mental health consultations
- Linkage to other supports & services

#### FOR PROVIDERS

- SEEDS of Early Learning
- Quality ratings
- Quality improvement supports



### HIGH QUALITY TK-3RD GRADE EDUCATION

- Transition, articulation and alignment across ECE and TK-3rd systems
- Assessments to set student learning goals & measure growth
- Differentiated instruction
- Assessments of program & teacher quality
- Quality improvement supports
- Linkage to health, social, emotional, behavioral and/or academic supports & services for students & families, particularly English Learners & students with special needs



### CHILDREN SUCCEEDING BY 3RD GRADE

#### CHILDREN ARE:

- Meeting developmental milestones
- Demonstrating growth in multiple domains
- Meeting grade-level benchmarks
- Proficient in reading & math by 3d grade
- Fluent in academic language

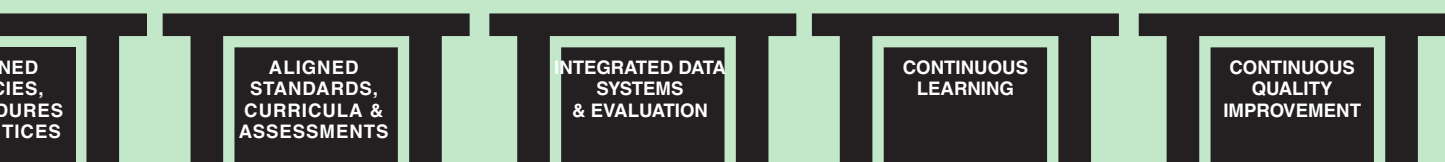
#### FAMILIES ARE:

- Informed, healthy, strengthened, engaged and valued

#### PARTNERS ARE:

- Skilled, responsive, aligned & interdependent

## PRENATAL - 3RD GRADE HEALTH & EARLY LEARNING SYSTEM



# STRATEGY ROADMAP

## 2017-2025

The **Goals, Desired Outcomes and Strategies** outlined in this Strategy Roadmap will guide the Alum Rock Partners' efforts to make steady and incremental progress toward building a comprehensive Prenatal—3rd Grade Health and Early Learning System. The Strategy Roadmap will evolve as the partners implement this plan and continuously evaluate the successes, challenges, and emerging community needs.

Detailed action plans will be developed to further define the specific steps the Partners will take to achieve these goals. The **Key Indicators of Progress** represent important data points for the Alum Rock Partners to track as a means to measure both progress and accomplishments. Specific components of this Prenatal—3rd Grade Health and Early Learning System will be evaluated in greater depth to determine whether and how this integrated system is impacting child, family and community outcomes. See Appendix A for a summary of the Goals, Desired Outcomes, Evaluation Domains, and Indicators to be Measured.





## GOAL 1

### Align and Integrate Systems

**Desired Outcome:** Alignment of policies, programs, standards, practices, professional development, evaluation, funding and other “pillars” of the Alum Rock Prenatal—3rd Grade Health and Early Learning System.

## STRATEGIES

a. Identify, map, and analyze the degree of alignment and/or gaps in existing policies, programs, practices and infrastructure elements across the Alum Rock Prenatal—3rd Grade Health and Early Learning System. Develop a glossary that defines key terms and builds common language. Areas to focus on include but are not limited to:

- Health, early learning and family engagement and strengthening services offered by the Alum Rock Partners, county departments and other community partners
- Outreach, enrollment and referral processes and eligibility criteria
- Standards for children’s learning, program quality, and provider/teacher qualifications and core competencies
- Assessments of child and family strengths and needs
- Developmentally—and culturally-appropriate curricula, practices, and services
- Professional development requirements and opportunities
- Evaluation and data collection, tracking and reporting methods and systems
- Funding sources

b. Develop and implement action plan(s) to prioritize and guide alignment efforts.

c. Report findings and share progress with Alum Rock Partners and other stakeholders.

## KEY INDICATORS OF PROGRESS

Alignment of standards, child screenings and assessments, curricula, programs and practices across the Prenatal – 3rd Grade Health and Early Learning System

Centralized and coordinated eligibility, enrollment and referral processes (“no wrong door”)

Centralized data warehouse (e.g. DataZone) adopted and implemented by all partners

Unique Identifier assigned to all children at birth and entered into CalPADS

Joint professional development opportunities (e.g. training, coaching, mentoring and reflective supervision) provided to build common understanding and skills among health, early learning and family strengthening service providers, elementary school teachers, school and agency administrators and support staff

Matrix of existing funding streams and gaps

## GOAL 2

### **Provide inclusive, equitable, affordable and universal access to high-quality early learning experiences**

**Desired Outcome:** All children and families in ARUESD have inclusive, equitable and universal access to high quality early learning experiences prior to entering kindergarten.

## STRATEGIES

- a. Increase the availability of and access to inclusive high quality early learning experiences that provide developmentally-rich language and learning opportunities for children birth—3 and their families at home, family child care homes, child care centers, family resource centers, libraries, parks, and in other early learning settings.
- b. Provide inclusive universal access to high quality preschool and/or transitional kindergarten for every 3- and 4-year old child in the Alum Rock Union Elementary School District.
- c. Integrate and centralize outreach, advertisement, eligibility and enrollment processes to create seamless access and “no wrong door” to high-quality infant/toddler, preschool and transitional kindergarten programs.
- d. Support formal early education sites within ARUESD to become QUALITY MATTERS sites, obtain a quality rating (using the California Quality Rating & Improvement Hybrid Matrix), and develop and implement a Quality Improvement Plan.
- e. Encourage family child care home providers and informal early learning providers to participate in FIRST 5’s SEEDS of Early Learning, as a pathway to enter the QUALITY MATTERS system.
- f. Develop operational plans to meet future facilities, funding, staffing, professional development and partnership needs based on unmet demand for infant/toddler care, preschool and transitional kindergarten.
- g. Establish family engagement and learning approaches to use in early learning settings.
- h. Design a process that aligns curriculum, professional development, coaching, and data on child and family progress to continuously improve quality.

## KEY INDICATORS OF PROGRESS

Number and type of high-quality early learning opportunities for children birth—3 years

Number and type of high-quality preschool and TK spaces for 3- and 4-year olds

Number of inclusive infant/toddler, preschool and TK programs/classrooms

Number and percent of children needing care

Percent of children needing care who can be accommodated in the available spaces, by age

Number of children on wait lists, by length of time

Number of new enrollments made via a centralized enrollment team or process

Enrollment in available spaces, by type of space

Number of children who have participated in at least two years of inclusive high-quality early learning opportunities prior to kindergarten

Percent of early learning sites within ARUESD boundaries participating in QUALITY MATTERS

Percent of family child care providers participating in FIRST 5's SEEDS of Early Learning

Number of QUALITY MATTERS early learning sites rated as "Exceeding Quality Standards" or "Excellence in Quality Standards," based on rating criteria defined in the California Quality Rating & Improvement System Hybrid Matrix

Number of families that know the quality rating of their children's early learning programs

Percent of QUALITY MATTERS sites moving up the rating scale

## GOAL 3

### Address social determinants that impact children's health and learning

**Desired Outcome:** Children and families have access to a comprehensive system of high-quality health, early learning and family strengthening services that meet the needs of the whole child and family—physical, social, emotional, behavioral, academic, economic—and prepare all children to be ready for school and fulfill their potential.

## STRATEGIES

- a. Conduct universal physical, developmental and behavioral health screenings in health, early learning and/or family support settings. Connect families to health, early intervention and treatment services offered by medical providers, the Santa Clara County KidConnections Network, and other specialists as needed.
- b. Connect families to child health and development, early learning, and family strengthening services offered through FIRST 5 Family Resource Centers (FRCs). Link families to basic needs services (housing, employment, food, transportation), medical/dental homes, early learning enrichment activities, and other family strengthening services offered by Alum Rock Partners, county agencies, and other community-based organizations.
- c. Create inclusive spaces for parents/caregivers to participate in early learning activities together with their children.
- d. Establish policies, practices, professional development opportunities, and resources to support Social Emotional Learning and reduce exclusionary disciplinary practices in pre-school—3rd grade.
- e. Implement a kindergarten readiness assessment procedure districtwide to identify students needing additional social, emotional or academic support as early as possible.
- f. Utilize curriculum-specific assessments in the early primary grades (kindergarten—3rd grade) to identify students' Social Emotional and academic learning needs, set learning goals, and measure growth. Ensure that the academic content being delivered is developmentally appropriate and that Social Emotional best practices are integrated to support students' learning.
- g. Use child/student assessment results to differentiate teaching practices in all early learning settings (birth – 3rd grade).
- h. Enhance, expand and/or create instructional programs and practices to support the specific and diverse needs of English Learners, children with special needs, and other children at risk of falling behind.
- i. Provide trauma-informed social-emotional, physical and behavioral health services and academic supports with appropriate interventions, including extended learning opportunities, as needed to foster student growth, proficiency, and Social Emotional Learning, particularly among English Learners, students with special needs, and other students at risk of falling behind.



## KEY INDICATORS OF PROGRESS

Percent of pregnant women accessing early prenatal care

Percent of babies born with a healthy birthweight

Number of screenings conducted in health, early learning settings and/or FRCs in ARUESD

Number of children with identified concerns, by screening type

Number and type of referrals to health, early intervention and treatment services

Percent of children connected to health, early intervention and treatment services that address concerns identified during screenings

Percent of children making progress in meeting developmental milestones

Number of ARUESD families participating in FRC services

Number and type of referrals to basic needs, medical/dental, early learning enrichment, and other family strengthening services

Percent of kindergarten students demonstrating readiness for school in multiple domains, as measured by validated assessments

Number of inclusive K – 3rd grade classrooms

Student attendance rates (decreased chronic absenteeism)

Number of behavioral incidents reported

Rate of exclusionary disciplinary practices (suspensions)

Percent of students demonstrating growth in multiple domains

Percent of students meeting grade-level benchmarks

Percent of K-3rd grade students proficient in reading

Percent of English Learner students reclassified as Fluent English Proficient by the end of 3rd grade

Percent of students designated as bilingual and/or biliterate

Percent of students proficient in English Language Arts and math by the end of 3rd grade

## GOAL 4

### Strengthen family-school-community partnerships

**Desired Outcome:** Early learning providers, educators, service providers and Alum Rock families engage with each other as equal partners to foster children's health, well-being and learning at home, at early learning sites and elementary schools, and in their surrounding networks of families, friends, neighbors and community.

## STRATEGIES

- a. Provide professional development for staff and administrators of early learning providers, schools and service providers, community liaisons, and volunteers about effective, culturally responsive practices for creating engaging environments, honoring students' and families' native languages and cultures, and demonstrating responsiveness to family and community needs (e.g. 5 Protective Factors, Strengthening Families Quality Standards, Pyramid Model, etc).
- b. Link families to activities or events designed to strengthen social connections among families in the Alum Rock community.
- c. Create opportunities and support families to be involved in planning, providing, and continuously improving health, early learning and family strengthening programs and services in the Alum Rock community.
- d. Acknowledge the strength, expertise, culture and heritage of families by creating opportunities that uplift their active voice and leadership role in decisions that affect their children's health, early learning and developmental experiences (prenatal – 3rd grade) and the health of their community.
- e. Adopt an intergenerational approach to strengthening family-school-community partnerships—e.g. recruit and train Generation to Generation volunteers (50+ years old) to lead or support family engagement, leadership and community-building efforts.

## KEY INDICATORS OF PROGRESS

Number of Alum Rock Prenatal – 3rd Grade Partners that adopt Family Strengthening Quality Standards

Percent of teachers, administrators, and service providers successfully implementing a family engagement workplan

Percent of families with strong Protective Factors: Parental Resilience, Social Connections, Knowledge of Parenting & Child Development, Concrete Support in Times of Need, Social and Emotional Competence of Children

Percent of families with high levels of family engagement (with children at home, with early learning providers, with elementary school, peers, and social service)

Percent of parents/caregivers who feel connected to their community

Number and description of leadership, advocacy and community connectedness actions taken by families

Number of active volunteers (e.g. Gen2Gen, youth, community members)

Documented shifts in policy change or community norms as a result of community engagement, leadership and advocacy

Percent of English Learner students reclassified as Fluent English Proficient by the end of 3rd grade

Percent of students designated as bilingual and/or biliterate

Percent of students proficient in English Language Arts and math by the end of 3rd grade

## GOAL 5

### Demonstrate impact and achieve sustainability

**Desired Outcome:** The Alum Rock Prenatal—3rd Grade Health and Early Learning System is an effective, sustainable, replicable model for closing the opportunity, readiness and achievement gaps for all children.

## STRATEGIES

- a. Institutionalize and sustain funding for the Director of Early Learning position within ARUESD, in order to coordinate ongoing systems-building and communication among the Alum Rock Partners.
- b. Adopt and maintain a partnership agreement that clarifies the collaborative's governance structure, partners' roles and contributions, and decision-making processes.
- c. Develop an integrated budget that reflects the Partners' investments in the Alum Rock Prenatal—3rd Grade Health and Early Learning System and projects future financing needs.
- d. Secure dedicated funding to sustain the Alum Rock Prenatal—3rd Grade Health and Early Learning System.
- e. Adopt and implement an evaluation framework with shared outcomes and common measurement tools.
- f. Establish agreement among Partners to use a centralized data warehouse, including data sharing agreements and assignment of Unique Identifiers prior to kindergarten entry.
- g. Communicate measurable results to key stakeholders, including families, early learning professionals, school staff and administrators, funders, and policymakers. Provide opportunities for collective results-based decision-making focused on continuous quality improvement.
- h. Advocate for local, regional, statewide and federal policies and funding that institutionalize critical components of the Alum Rock Prenatal—3rd Grade Health and Early Learning System and the collaborative's whole child, ecological approach to improving 3rd grade outcomes.



## **KEY INDICATORS OF PROGRESS**

The district's Early Learning Department is fully integrated into the TK-12 educational system, is led by skilled leaders and staff, and has stable, sustainable funding.

Key partnership documents are adopted: Partnership Agreement, integrated budget, data sharing agreements, sustainability plan, evaluation plan, communications plan, etc.

Adoption of local, statewide and/or federal policies and funding streams that will sustain the Alum Rock Prenatal – 3rd Grade Health and Early Learning System and components in the Pathway to Success.

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- 02** Data Report: A Hidden Crisis. Findings on Adverse Childhood Experiences in California. Center for Youth Wellness White Paper on Toxic Stress, June 2013
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## APPENDIX A: SUMMARY OF GOALS, DESIRED OUTCOMES, EVALUATION DOMAINS & INDICATORS TO BE MEASURED

### GOAL 1: ALIGN & INTEGRATE SYSTEMS

**Desired Outcome:** Alignment of policies, programs, standards, practices, professional development, evaluation, funding and other infrastructure elements of the Alum Rock Prenatal—3rd Grade Health and Early Learning System.

<b>Alignment</b>	Alignment of standards, child screenings and assessments, curricula, programs and practices across the Prenatal—3rd Grade Health and Early Learning System.
<b>Coordination</b>	Centralized and coordinated eligibility, enrollment and referral processes (“no wrong door”)
<b>Data sharing</b>	Centralized data warehouse (e.g. DataZone) adopted and implemented by all partners  Unique Identifier assigned to all children at birth and entered into CalPADS
<b>Professional Development</b>	Joint professional development opportunities (e.g. training, coaching, mentoring and reflective supervision) provided to build common understanding and skills among early learning providers, elementary school teachers, program/school administrators and support staff
<b>Funding</b>	Matrix of existing funding streams and gaps

### GOAL 2: PROVIDE INCLUSIVE, EQUITABLE AND UNIVERSAL ACCESS TO HIGH-QUALITY EARLY LEARNING EXPERIENCES

**Desired Outcome:** All children and families in ARUESD have inclusive, equitable and universal access to high quality early learning experiences prior to entering kindergarten.

<b>Supply</b>	Number and type of high-quality early learning opportunities for children birth—3 years (licensed, informal, community-based care; subsidized vs non-subsidized)  Number and type of high-quality preschool and TK spaces (licensed, informal, community-based care; subsidized vs non-subsidized)  Number of inclusive infant/toddler, preschool and TK programs/classrooms
<b>Demand</b>	Number and percent of children needing care
<b>Access</b>	Percent of children needing care who can be accommodated in the available spaces, by age group  Number of children on wait lists, by length of time  Number of new enrollments made via a Centralized Enrollment team or process  Enrollment in available spaces, by type of space  Number of children who have participated in at least two years of inclusive high-quality early learning opportunities prior to kindergarten



## GOAL 2: PROVIDE INCLUSIVE, EQUITABLE AND UNIVERSAL ACCESS TO HIGH-QUALITY EARLY LEARNING EXPERIENCES

**Desired Outcome:** All children and families in ARUESD have inclusive, equitable and universal access to high quality early learning experiences prior to entering kindergarten.

### Quality

Percent of early learning sites within ARUESD's boundaries participating in QUALITY MATTERS

Percent of family child care providers in participating in FIRST 5's SEEDS of Early Learning

Number of QUALITY MATTERS early learning sites rated as "Exceeding Quality Standards" or "Excellence in Quality Standards," based on rating criteria defined in the California Quality Rating & Improvement System Hybrid Matrix

Number of families that know the quality rating of their children's early learning programs

Percent of QUALITY MATTERS sites moving up the rating scale

## GOAL 3: ADDRESS SOCIAL DETERMINANTS THAT IMPACT CHILDREN'S HEALTH AND LEARNING

**Desired Outcome:** Children and families have access to a comprehensive system of high-quality health, early learning and family strengthening services that meet the needs of the whole child and family—physical, social, emotional, behavioral, academic, economic—and prepare children to be ready for school and fulfill their potential.

### Service Access

Percent of pregnant women accessing early prenatal care

Percent of babies born with a healthy birthweight

Number of screenings conducted in health, early learning settings and/or FRCs

Number of children with identified concerns, by screening type

Number and type of referrals to health, early intervention and treatment services

Percent of children connected to health, early intervention and treatment services that address concerns identified during screenings

Percent of children making progress in meeting developmental milestones

Number of families participating in FRC services

Number and type of referrals to basic needs, medical/dental, early learning enrichment, and other family strengthening services

### School Readiness

Percent of kindergarten students demonstrating readiness for school in multiple domains, as measured by validated assessments

### Inclusion & Social Emotional Learning

Number of inclusive K—3rd grade classrooms

Student attendance rates (decreased chronic absenteeism), preschool—3rd grade

Number of behavioral incidents reported, preschool—3rd grade

Rate of exclusionary disciplinary practices (suspensions), preschool—3rd grade

## GOAL 3: ADDRESS SOCIAL DETERMINANTS THAT IMPACT CHILDREN'S HEALTH AND LEARNING

**Desired Outcome:** Children and families have access to a comprehensive system of high-quality health, early learning and family strengthening services that meet the needs of the whole child and family—physical, social, emotional, behavioral, academic, economic—and prepare children to be ready for school and fulfill their potential

### Growth & Proficiency

Percent of K-3rd students demonstrating growth in multiple domains

Percent of students meeting grade-level benchmarks in K – 3rd grade

Percent of K-3rd students proficient in reading

Percent of students designated as bilingual and/or biliterate

Percent of English Learner students reclassified as Fluent English Proficient by the end of 3rd grade

Percent of students proficient in English Language Arts and math by the end of 3rd grade

## GOAL 4: STRENGTHEN FAMILY-SCHOOL-COMMUNITY PARTNERSHIPS

**Desired Outcome:** Early learning providers, educators, service providers and Alum Rock families engage with each other as equal partners to foster children's health, well-being and learning at home, at early learning sites and elementary schools, and in their surrounding network of families, friends, neighbors and community.

### Supply

Number of Prenatal – 3rd Grade Partners that adopt Family Strengthening Quality Standards

Percent of teachers, administrators, and service providers successfully implementing a family engagement workplan

Percent of families with strong Protective Factors (Parental Resilience, Social Connections, Knowledge of Parenting & Child Development, Concrete Support in Times of Need, Social and Emotional Competence of Children)

### Family Engagement

Percent of families with high levels of family engagement (with children at home, with early learning providers, with elementary school, peers, and social service)

Percent of parents/caregivers who feel connected to their community

### Community Leadership

Number and description of leadership, advocacy and community connectedness actions taken by families

Number of active volunteers (e.g. Gen2Gen, youth, community members)

Documented shifts in policy change or community norms as a result of community engagement, leadership and advocacy

## GOAL 5: DEMONSTRATE IMPACT & ACHIEVE SUSTAINABILITY

**Desired Outcome:** The Alum Rock Prenatal—3rd Grade Health and Early Learning System is an effective, sustainable, replicable model for closing the opportunity, readiness and achievement gaps for all children.

### Sustainable System

The district's Early Learning Department is fully integrated into the TK-12 educational system, is led by skilled leaders and staff, and has stable, sustainable funding.

Key partnership documents are adopted: Partnership Agreement, integrated budget, data sharing agreements, sustainability plan, evaluation plan, communications plan, etc.

### System Impact

Adoption of local, statewide and/or federal policies and funding streams that will sustain the Prenatal – 3rd Grade Health and Early Learning System and components in the Pathway to Success.





