



FIRST THINGS FIRST

Ready for School. Set for Life.

AGENDA ITEM: Regional School Readiness Benchmarks

BACKGROUND: The First Things First State Board established School Readiness Indicators in FY2012. In FY2013 work began to establish statewide and regional benchmarks to evaluate the progress towards meeting the School Readiness Indicators. Special statewide workgroups determined the best evaluation measures at a statewide level. Regional level data will be available over the next few months. Currently data is available on School Readiness Indicator #7.

RECOMMENDATION: The Regional Council will be reviewing the regional level benchmarking data over the next few months. Regions will be asked to set regional benchmarks using this data and prepare a plan to present to the State Board next spring. This attachment provides the data on School Readiness Indicator #7 which has been identified as a priority indicator for the region. With the assistance of Amy Kemp, Evaluation Consultant the Regional Council will discuss the process, data and begin working with the Benchmark worksheet to set Regional Level Benchmarks. This will begin at the May meeting, but will be completed at the June meeting. The Regional Council may vote on the Regional Benchmark for Indicator #7 at the June meeting and complete the worksheet.



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School Readiness Indicators

Regional Benchmarking for the School Readiness Indicators

Achieving the mission of First Things First to ensure all young children arrive in kindergarten healthy and ready to succeed will require more than simply funding programs and services. It will take all partners, across the state, to own a common vision for children in Arizona and a cross-sector commitment to ensure that vision is realized.

First Things First School Readiness Indicators were chosen to reflect the effectiveness of funding strategies and collaborations built across communities to improve the lives of children residing in the state of Arizona and improve their readiness for entering school and subsequently their life long success.

In April 2014, Regional Partnership Councils will recommend 2020 benchmarks for prioritized indicators to the First Things First Board. To support those discussions and the community forums that follow, the data release phases below have been set.

A phased approach was selected due to data availability as well as considerations for how to provide technical assistance for decision-making. Data releases will include a fact sheet for each indicator which provides regional-specific data for decision-making on benchmarks for prioritized School Readiness Indicators. Prior to Phase I, a series of three webinars will be available in March 2013 and will include: 1) overview of the School Readiness Indicators, recap of the selection of data sources, and description of the state-level benchmarks; 2) background and assistance on interpreting tribal data; and 3) guidance in how to set benchmarks, including data interpretation and assistance on setting attainable yet aspirational goals. Additional support materials, as well as discussion and decision-making facilitation, will be provided throughout the process.

Data Release Phases

Phase 1: April - June, 2013

Non-Tribal Regions - Indicator 6: #/% of children entering kindergarten exiting preschool special education to regular education

Non-Tribal Regions - Indicator 7: #/% of children ages 2-4 at a healthy weight (Body Mass Index-BMI)

Phase 2: June – August, 2013

Tribal Regions - Indicator 6: #/% of children entering kindergarten exiting preschool special education to regular education

Tribal Regions - Indicator 7: #/% of children ages 2-4 at a healthy weight (Body Mass Index-BMI)

Tribal Regions - Indicator 8: #/% of children receiving at least six well-child visits within the first 15 months of life

Tribal Regions - Indicator 9: #/% of children age 5 with untreated tooth decay

Phase 3: August – October, 2013

All Regions – Indicator 2: #/% of children enrolled in an early care and education program with a Quality First rating of 3-5 stars

All Regions – Indicator 3: #/% of children with special needs/rights enrolled in an inclusive early care and education program with a Quality First rating of 3-5 stars

All Regions – Indicator 4: #/% of families that spend no more than 10% of the regional median family income on quality care and education with a Quality First rating of 3-5 stars

Non- Tribal Regions - Indicator 8: #/% of children receiving at least six well-child visits within the first 15 months of life

Non- Tribal Regions – Indicator 10: % of families who report they are competent and confident about their ability to support their child’s safety, health and well being

Phase 4: September – October 2014

Tribal Regions – Indicator 10: % of families who report they are competent and confident about their ability to support their child’s safety, health and well being

Phase 5: TBD

All Regions - Indicator 1: #/% children demonstrating school readiness at kindergarten entry in the development domains of social-emotional, language and literacy, cognitive, and motor and physical

All Regions – Indicator 5: % of children with newly identified developmental delays during the kindergarten year

Non-Tribal Regions – Indicator 9: #/% of children age 5 with untreated tooth decay



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School Readiness Indicators 2020 Yuma Regional Benchmark Summary

Indicator #7:	Number/Percentage of children age 2-4 at a healthy weight (Body Mass Index-BMI)
Intent:	Increase the number of children who maintain a healthy body weight

Key Definitions: Body mass index (BMI) is a measure used to determine childhood overweight and obesity. It is calculated using a child's weight and height. BMI does not measure body fat directly, but it is a reasonable indicator of body fatness for most children and teens.¹ A BMI is calculated by taking the weight in pounds divided by the height in inches squared times 703 {Formula: weight (lb) / [height (in)]² x 703}

A BMI is not usually calculated for children under the age of 2 years. Healthy weight at 2-4 years of age is a standard measure for the WIC program to report to the CDC. A child's weight status is determined using an age- and sex-specific percentile for BMI rather than the BMI categories used for adults because children's body composition varies as they age and varies between boys and girls.

For children and adolescents (aged 2—19 years):

- **Underweight** is defined as a BMI less than 5th percentile for children at the same age and sex- an underweight child can have many different reasons that include feeding disorders to lack of food resources or being food insecure.²
- **Healthy weight** is defined as a BMI at 5th to 85th percentile.²
- **Overweight** is defined as a BMI at or above the 85th percentile and lower than the 95th percentile for children of the same age and sex.²
- **Obesity** is defined as a BMI at or above the 95th percentile for children of the same age and sex.²

Benchmark Data Source:

Body Mass Index (BMI) is a measure used to determine childhood overweight and obesity. It is calculated using a child's weight and height. Two primary sources of Body Mass Index (BMI) data were considered for this indicator:

- Arizona Department of Health Services, Women, Infants, and Children (WIC) Nutrition Program data: WIC is a federally funded program providing residents with nutritious foods, nutrition education, and referrals. WIC serves pregnant, breastfeeding, and postpartum women, and infants and children under age five who are at nutritional risk and who are at or below 185 percent of the federal poverty guidelines.³ Around 62% of newborns in the state are eligible for the WIC program whereas around 25-30% are eligible between the ages of 2-4 years of age. This program measures BMI of all enrolled 2-4 year old participants for all regions of the state. WIC data is available for non-tribal regions and the Navajo Nation Regional Council (with tribal permissions) through the Arizona Department of Health Services (DHS). Data for tribal

¹Centers for Disease Control and Prevention (CDC):

http://www.cdc.gov/healthyweight/assessing/bmi/childrens_bmi/about_childrens_bmi.html

²Barlow SE and the Expert Committee. Expert committee recommendations regarding the prevention, assessment, and treatment of child and adolescent overweight and obesity: summary report. *Pediatrics* 2007;120 Supplement December 2007:S164—S192.

³ Arizona Women, Infants & Children (WIC) Program: <http://azdhs.gov/azwic/>

regions is available (pending tribal permissions) through the Intertribal Council of Arizona (ITCA) or tribal authorities. WIC serves a very large number of low-income 2-4 year olds and their families in Arizona; however, it does not measure the BMI of all Arizona children, only those enrolled in the WIC program. Some regions may be better represented by WIC data than others. Specifically, those communities with large percentages of the population at or below 185 percent of the federal poverty guidelines will have better measurement with the WIC data.

- Arizona Health Care Cost Containment System (AHCCCS): The Arizona Health Care Cost Containment System (AHCCCS) is Arizona's Medicaid agency that offers health care programs to serve Arizona residents. Individuals must meet certain income and other requirements to obtain services. Data is collected through AHCCCS for all participants, but this data is not currently available in a standardized report, and access to the data requires permission from AHCCCS.

Data source selected:

There currently is no data source that measures the BMI of all Arizona children. However, WIC data from DHS and ITCA (pending tribal permissions) were identified as best data sources for this indicator because consistent data are available for all regions and the WIC program serves a large number of Arizona 2-4 year-olds (105,968 in the initial data pull).

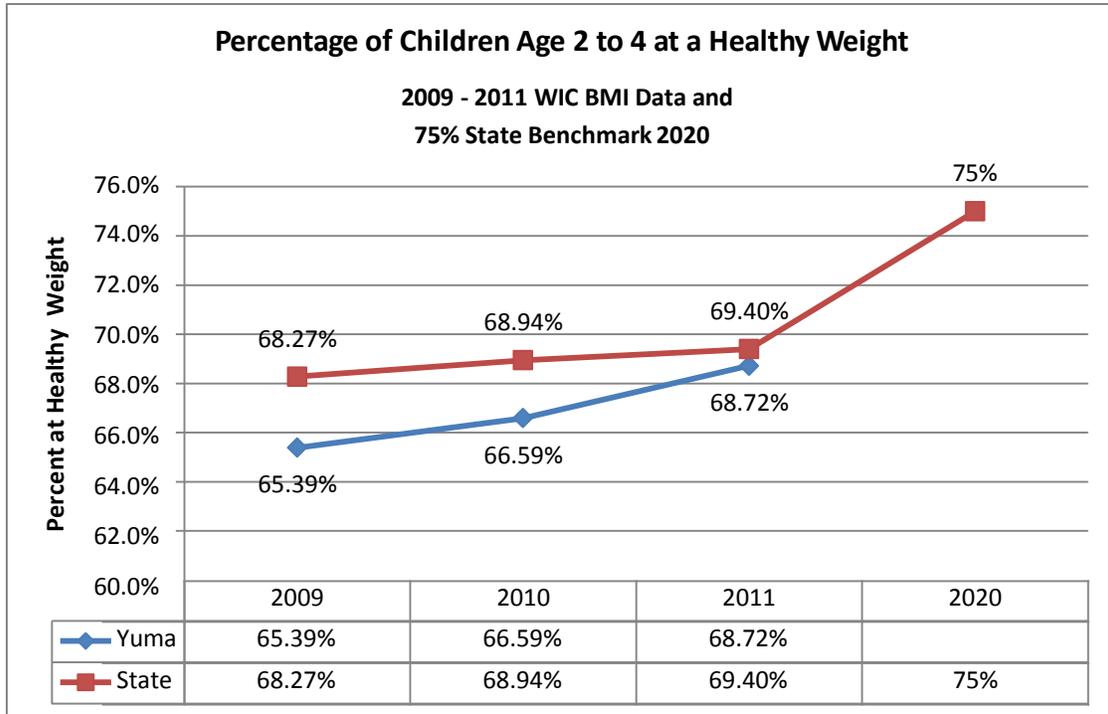
Baseline (Region and State):

- 2010: In Yuma, **67%** (2,639) of children age 2-4 were at a healthy body weight
- 2010: In Arizona, **69%** (72,521)⁴ of children age 2-4 were at a healthy body weight

⁴ Statewide baseline presented here (69%) is based on data from the Arizona Department of Health WIC program; no data from tribal WIC programs are included. The regional benchmarking statewide baseline data vary from those utilized in statewide benchmarking. Statewide benchmarking was informed by WIC data from the Centers for Disease Control which included tribal data and duplicated child counts. It was calculated with a slightly different methodology from that employed in Arizona. FTF is working with data partners to identify the best approach to methodology and will present any variations to baseline statewide number to the FTF Board and Councils for review.

Trend Line (Region and State):

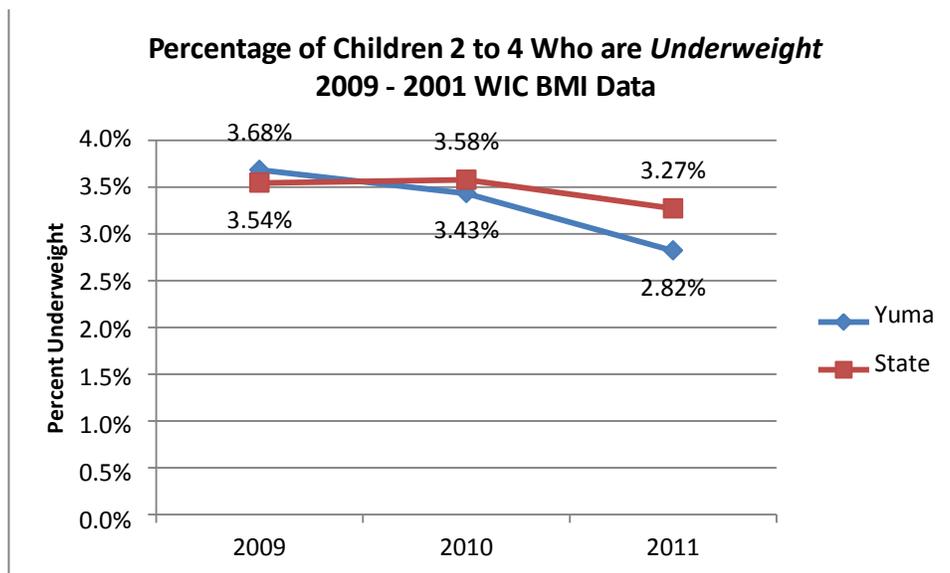
Graph 1: Percentage of children age 2 to 4 who are at a healthy weight (based on body mass index- BMI). Data displayed is presented for both the region (identified with diamonds) and state (identified with blocks) for years 2009 through 2011. The state benchmark for 2020 (75%) is also presented in this graph.



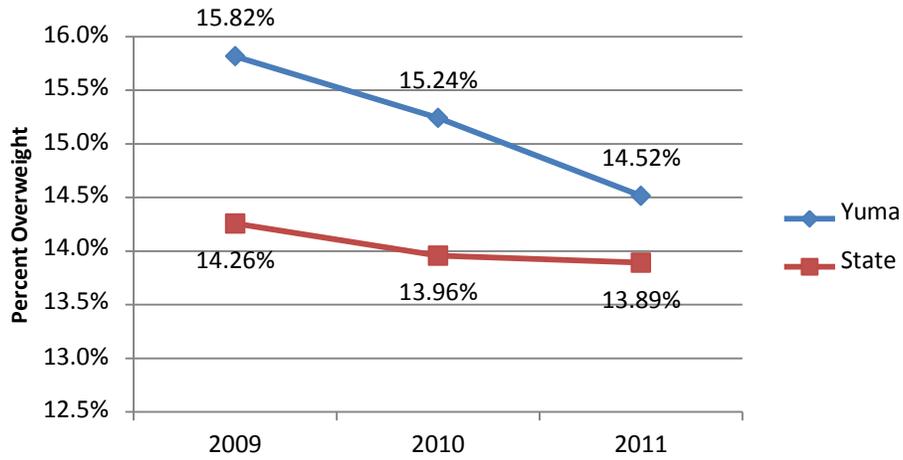
Benchmark (Region and State):

- 2020: In Yuma, **XX** % of children age 2-4 at a healthy weight (BMI)
- 2020: In Arizona, 75% of children age 2-4 at a healthy weight (BMI)

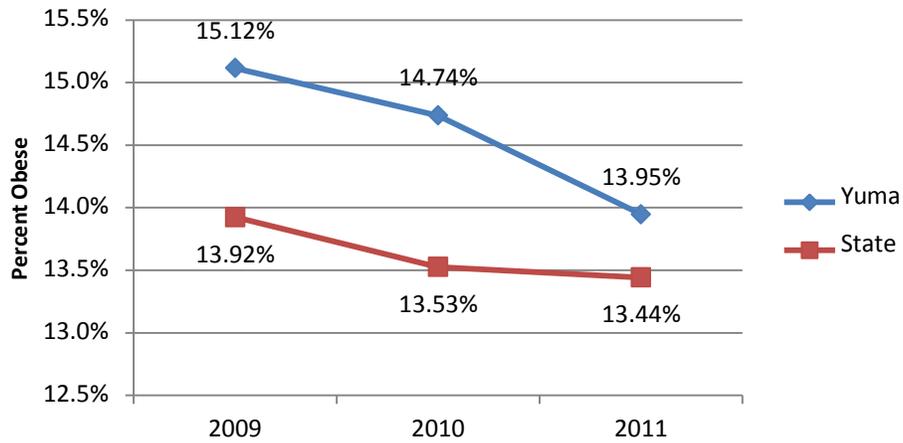
Graphs 2 - 4: Percentage of children age 2 to 4 who are Underweight, Overweight or Obese (based on body mass index- BMI). Data displayed is presented for both the region and state for years 2009 through 2011.



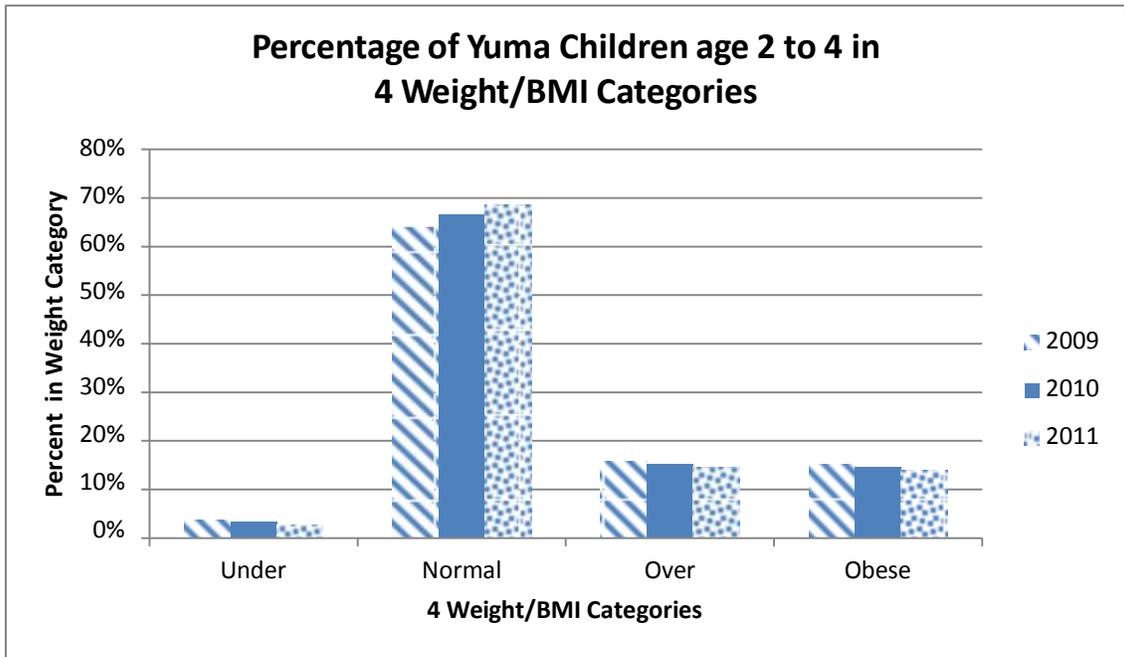
Percentage of Children who are *Overweight*
2009 - 2011 WIC BMI Data



Percentage of Children 2 to 4 Who Are *Obese*
2009 - 2011 WIC BMI Data



Graph 5: Yuma children age 2 to 4 presented in four weight categories (based on body mass index-BMI). Data displayed compares percentages for years 2009 through 2011.



Yuma: Percent and number of children in each weight category for years 2009-2011				
Year	Under	Normal	Over	Obese
2009	3.68% (N=142)	65.39% (N=2522)	15.82% (N=610)	15.12% (N=583)
2010	3.43% (N=136)	66.59% (N=2639)	15.24% (N=604)	14.74% (N=584)
2011	2.82% (N=114)	68.72% (N=2779)	14.52% (N=587)	13.95% (N=564)

Yuma School Readiness Indicator Worksheet – Indicator 7

Step 1: Discuss the indicator and its intent. Make sure all participants understand how improvement in this indicator will positively impact the lives of children.

Indicator #7:	Number and percentage of children ages 2-4 at a healthy weight (Body Mass Index-BMI).
Intent:	Increase the number of children who maintain a healthy body weight.

Step 2: Review the national trend and benchmark.

Healthy People 2020 Objective

Indicator:	Reduce the proportion of children aged 2 to 5 years who are considered obese.
Baseline:	10.7% of children aged 2 to 5 year were considered obese in 2005-08.
Benchmark (target):	9.6%.
Target setting method:	10% improvement.
Data Source:	National Health and Nutrition Examination Survey, CDC, NCHS.

Healthy People 2020, Topics and Objectives. <http://www.healthypeople.gov/2020/topicsobjectives2020/objectiveslist.aspx?topicid=29>.

Step 3. Review the statewide trend and benchmark.

First Things First - School Readiness Indicators

Indicator:	Number and percentage of children ages 2-4 at a healthy weight (Body Mass Index-BMI).
Baseline:	69% of children age 2-4 at a healthy weight (BMI).
Benchmark (target):	75% of children age 2-4 at a healthy weight (BMI).
Target setting method:	6 percentage points improvement.
Data Source:	WIC Arizona. FTF School Readiness Indicators.

Step 8. What is the likely timeframe of policies, activities, programs, or collaborations?

Name	Currently In Place or Planned?	Initial, Intermediate, or Longer Term?
Yuma Early Childhood System Collaboration Meeting	Currently in place. Quarterly meeting dates with sub groups year long	First meeting of SFY14 on Aug 12, long term
Sub-committees		
EL/Health/Family Support		

Step 9. How many children or families are the policies, activities, programs, or collaborations likely to reach?

Name	Eligibility Requirements or Targets	Target Service Units
Home Visitation	at risk, special needs and teen	460 parents / 615 children
Scholarships	Income	Over 400
Clinics	Income	waiting for data, promotora
Wacog	Income	728 children
CPLC	Income	523, children * State
WIC	income	8,600 county monthly

Step 10. Determine current estimated need, estimated service, and aspirational goal.

Total Children 0-5 in Region*	Potential Benchmark	Children at a Healthy Weight at Each Benchmark	Children not at Healthy Weight at Each Benchmark	Additional Number of Children to be Served to Meet Benchmark
17,983	70%	12,588	5395	539
17,983	71%	12,768	5215	719
17,983	72%	12,948	5035	899
17,983	73%	13,128	4855	1079
17,983	74%	13,307	4676	1258
17,983	75%	13,487	4496	1438
17,983	76%	13,667	4316	1618

Step 11. Set the regional benchmark.

Indicator:	Number and percentage of children ages 2-4 at a healthy weight (Body Mass Index-BMI).
Baseline:	70 % of children age 2-4 at a healthy weight (BMI).
Benchmark (target):	<input type="text"/> % of children age 2-4 at a healthy weight (BMI).
Target setting method:	<input type="text"/> Percentage points improvement.
Data Source:	WIC Arizona.

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17,983	71%	12,768	5215	719
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17,983	73%	13,128	4855	1079
17,983	74%	13,307	4676	1258
17,983	75%	13,487	4496	1438
17,983	76%	13,667	4316	1618

*US Census 2010, Yuma Regional Needs and Assets Report