# **Notes from Success Indicator Discussion**

#### **Possible Quality Indicators:**

- ERS (environmental rating scale) specific/overall;
- accreditation status;
- Qualistar 3 or 4 rating;
- % of improvement in data produced (surveys, etc.);
- quality ratings # centers rated;
- quality improvement plan; not cost prohibitive (fundable, cost effective); monitoring data; focus on parts that mean something;
- # of agencies using evidenced based strategies;
- greater % of parents accessing quality care;
- providers engaged in training;
- # of hours of training beyond licensing requirements, professional development, support;
- social/emotional program specific success indicators re. pyramid & others; meet needs of community;
- % of community agencies meeting/exceeding high rankings (accreditation standards) within their field;
- # of children involved in Results Matter;
- level of credential

### Possible Capacity Indicators:

- professional development-credential;
- leadership capacity; \
- councils by the numbers, WIC, child maltreatment rates; CHP+ sites;
- number served regardless of program;
- increasing capacity to support social/emotional needs;
- incentives for continuity of care practices;
- councils increasing number of EQ instructors and number of students per class;
- oral health services;
- maltreatment strategies;
- child outcome indicators;
- build capacity of family support services;
- educate about oral health services;
- number of agencies implementing evidence based maltreatment strategies;
- capacity to serve the number of children who need services (no waiting lists);
- children in publicly funded programs;
- child outcome indicator

#### Possible Availability Indicators:

- # of IT slots (CCR&R),
- CPP slots.
- # of slots for subsidized child care (non-governmental),
- # of families who get home visitation;
- supports for the CHP+ process;
- # of available preschool slots;
- # of children who receive early support (Part C, mental, developmental screening);
- options for transportation;
- # of providers who accept Medicaid & CHP+;
- # of special needs slots/services;
- # of licensed care providers;
- # of mental health professionals;
- # of oral health providers

## **Possible Accessibility Indicators:**

- co-location of services;
- developmental and dental screenings done in variety of settings;
- miles for smiles;
- EQ at midway point (geographically);
- opt-out oral health screening at schools and child care centers;
- providing resources in multiple languages;
- CHP+ and WIC enrollment at schools;
- amount of non-governmental \$s subsidizing child care;
- decrease the numbers of eligible but not enrolled;
- decrease childhood obesity (access to physical activity & good food);
- children with special needs have access to the appropriate resources;
- utilization rates;
- providers having access to a continuum of professional development.