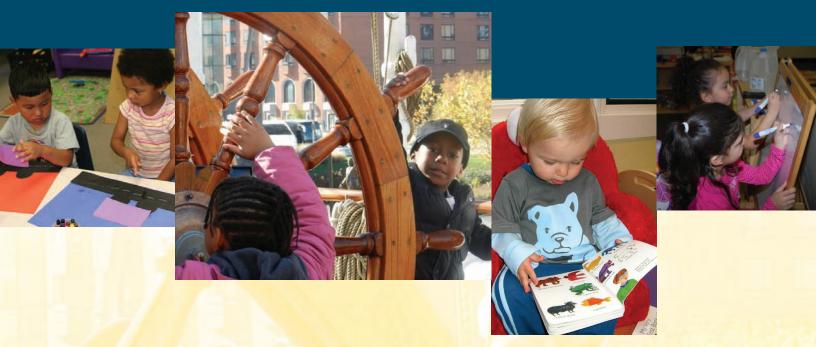
THE JUDITH P. HOYER EARLY CARE AND EDUCATION ENHANCEMENT PROGRAM



2012 Annual Report November 2012



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2012 ANNUAL REPORT



Lillian M. Lowery, Ed.D. State Superintendent of Schools

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December 31, 2012

Dear Colleague:

Children are born with a remarkable capacity for learning. A young child's development is influenced by relationships, heredity and the quality of early childhood experiences. By nurturing each child's individual abilities we increase the likelihood that all children will enter school ready to learn.

I am very pleased to share with you *The Judith P. Hoyer Early Care and Education Enhancement Program 2012 Annual Report* which provides an up-to-date review of recent accomplishments focusing on State Fiscal Year 2012.

In May of 2000, the Maryland State Legislature enacted the Judith P. Hoyer Early Child Care and Education Enhancement Program, a statewide effort to help young children enter school ready to learn. Judith P. Hoyer Early Child Care and Family Education Centers, known as "Judy Centers", provide a central location for early childhood education programs and support services for children birth through Kindergarten and their families who reside in specific Title I school districts across the state. Maryland's 25 Judy Centers are models of collaboration between a diverse group of agencies, governmental organizations and private providers, all working together to ensure that children and families have the services and resources to ensure school success. In addition, the legislation established the Maryland Model for School Readiness (MMSR) professional development and assessment. It also promoted the improvement of early childhood programs through national or state program accreditation. The total budget for FY12 for these initiatives was \$10,574,999.

We are grateful for the tireless work of local school systems and their early childhood partners as we strive to make the vision of school readiness and success in life a reality for all young children in Maryland. I encourage you to use this report as motivation for continuing your efforts to serve the needs of all Maryland's children.

Sincerely,

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Lillian M. Lowery, Ed.D. State Superintendent of Schools

Maryland Public Schools: #1 in the Nation Four Years in a Row

2012 ANNUAL REPORT

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INTRODUCTION

Judith P. Hoyer, as the early education coordinator for Prince George's County Public Schools, lamented the gaps of service for low income families. In the 1990's, she created a central location in Adelphi, Maryland for important early childhood services, thus fostering cooperation of governmental and private agencies around the needs of local families. After her untimely death in 1997, her husband, Congressman Steny Hoyer (D-MD), in partnership with Governor Parris Glendening, led a successful movement to bring her model of cooperation and coordination to other areas of Maryland. As a result, the Maryland State Legislature enacted the Judith P. Hoyer Early Child Care and Education Enhancement Program in May of 2000.

That legislation addressed three important principles in Maryland's early childhood care and education programs:

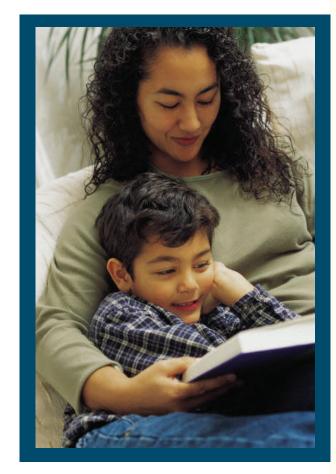
1. Judy Centers - The need for greater coordination among the providers of early childhood education and support services: Focusing the services and resources of the various programs and providers on families with high needs in designated Title 1 school zones provides a greater opportunity for positive outcomes for children.

2. Kindergarten Assessment - The need for a uniform assessment of success in early childhood education: Clearly, the State could not measure progress without some definition of success, and a means of assessing that success.

3. Program Accreditation and Preschool For All - The need to ensure that all preschool age children receive quality care and education by promoting professional development for the early education workforce and accreditation for child care providers.

The preamble of the legislation remains today a concise and relevant statement of the new understanding of early childhood care and education:

• "Whereas recent brain research confirms that the most rapid brain growth occurs in the first three years of life; and Whereas



• a stimulating environment is essential to brain development and has a major impact on a child's language and cognitive and emotional development; and Whereas

• the overwhelming evidence suggests that it is best to capitalize on the brain's elasticity before age 5, the age at which public education is guaranteed; and Whereas • high quality early care and education programs make a significant contribution to the development of skills required by young children to succeed in school; and Whereas

• not all Maryland children have access to quality early care and education programs . . . "1

Twelve years have lapsed since that landmark legislation was passed but the three principles listed above continue to be all-important in early childhood education. In fact, they formed the basis for Maryland's successful competition for the Race to the Top-Early Learning Challenge grant, which expanded Judy Centers and professional development on the Maryland Model for School Readiness. In addition, it will transform the state's program accreditation for improving program quality to a broad-based quality rating and improvement system.² This report is an up-to-date review of recent accomplishments and challenges focusing on State Fiscal Year 2012.



PRINCIPLE NUMBER ONE JUDY CENTERS

Fortunately, Maryland had a ready model of a solution in Judith P. Hoyer's Family Learning Center. Dedicated to the needs of low income families in the local elementary school catchment area, this first Judy Center (although not named as such until after her death) collaborate to deliver a wide spectrum of early childhood education programs and family support services for children. Judy Centers are required to include the following:

• Public kindergarten and prekindergarten

quickly demonstrated the true value of such coordination.

Maryland's legislation took that model and financed an expansion across the state, offering comprehensive, integrated, full-day and fullyear early care and education services. The year 2001, the first year of operation, saw the establishment of 13 Judy Centers in Allegany, Calvert, Caroline, Charles, Dorchester, Frederick, Kent, Montgomery, Prince George's, Queen Anne's,

St. Mary's and Washington Counties and Baltimore City. The next year 11 more were funded in Baltimore, Carroll, Cecil, Charles, Garrett, Howard, Montgomery, Talbot, Wicomico and Worcester Counties and Baltimore City. With the opening of the Judy Center in Anne Arundel County in FY 2011, there are now 25 Judy Centers across the State serving 39 elementary school districts. In all cases, Judy Centers are located in or near Title I schools to better serve high needs populations.

COMMUNITY PARTNERSHIPS ARE THE HEART OF THE JUDY CENTERS

Judy Centers serve all children birth through Kindergarten who live in the designated Title I school zones. Most of the work of the Judy Centers is accomplished through its partnerships. The partnerships reflect Judy Hoyer's vision of how professionals must

"To me, the most crucial responsibility of any community is the protection, education and mentoring of its children. As adults, guardians, and parents, we must offer as many opportunities as possible to ensure the success and development of our children. If we can do this, we will all have met our most fundamental obligation to ourselves, our families and our communities."

-Judy Hoyer

Infants and Toddlers
Program (intervention services for children with special needs from birth to 3)
Preschool Special Education and
Private childcare providers, both family and center care.

Memoranda of Understanding with other community agencies and organizations that were critical to meeting the needs of families with high needs were also included. Agencies and organizations

typically include Departments of Social Services, Health Departments, Healthy Families, Head Start, Family Support Centers, Adult Education and public libraries.

Since then, Judy Centers have cast a wide net to expand the partnerships and engage others in their communities who can deliver necessary services for families whenever a gap is identified, including local businesses. There are many partners contributing in unique and creative ways. For example, local book stores provide venues for story time at some Judy Centers; Child Care Resource Centers are vital partners that train local child care providers who care for children who live in the Judy Center school zones; Sheriff 's Offices provide programming for children, as well as safety and security during events; and local organizations such as Lions Clubs and Rotary Clubs have stepped up to take on various roles such as vision screenings. Pediatric dentists have been recruited



to provide a much-needed service that this population typically is not able to access due to cost and the limited availability of providers. Housing Authorities provide space for Judy Centers to provide parent workshops which help families maintain their housing. Mental health providers have been recruited to serve families in need. University of Maryland Extension provides essential nutrition information and activities for children and adults. Local colleges and universities provide degree programs for child care providers and teachers, as well as classroom interns at Judy Centers. PNC and BB&T Banks have generously provided grants to several Judy Centers for classroom materials and summer programs. While Judy Centers originally had to seek out members for its partnerships, the list of organizations now asking to join the Judy Center Partnerships continues to grow.

The number of partners varies across Judy Centers depending on population density and the number of agencies, organizations and businesses available in the area. Partnerships include from 10 to 30 agencies and organizations across the state; however, it is not unusual to see 30 members participating in most Judy Center Partnership Meetings because most organizations have multiple members representing different departments. Partnerships meet monthly and the larger partnerships have created subcommittees to ensure the work is more manageable and is accomplished as quickly and as effectively as possible.

STANDARDS

All Judy Centers are required to meet the following 12 Component Standards deemed essential to the positive impact on children's school readiness.

- 1. Full Day/Full Year: Children who participate in Judy Centers have access to high-quality early care and education programs to meet the full-day and year-round needs of children and families.
- Breakfast/Lunch: Children who participate in Judy Center Partnership programs for more than 2½ hours per day have access to appropriate breakfast, lunch and snacks according to USDA guidelines. Eligible programs are required to access federal and/or state food programs. (e.g., Free and Reduced Meals, CACFP).
- **3. Service Coordination and Family Support:** Service coordination at Judy Centers is designed to include the 6 Elements of Effective Service Coordination:
 - a. assessment of needs of children and families;b. a referral process;
 - c. review and evaluation (includes the coordination of intervention services among various programs);
 - d. intervention services;
 - e. monitoring the effectiveness of intervention services; and
 - f. reporting on progress of intervention services.

The Judy Center Partnership coordinates its services, programs and activities to avoid duplicating the services offered to families, and to monitor the effectiveness of the family support offered. When a child participates in more than one program, the service coordinator, in collaboration with program and/or agency offices, will identify one key contact for that child. Several forms of support services may be provided and include, but are not limited to, home visiting, child tutoring, child care tuition assistance, behavior services and family counseling.

4. Integration of Early Education Services:

Curriculum and assessment for all programs for children are aligned with the Maryland State Curriculum and the Maryland Model for School Readiness (MMSR) Framework and Standards documents for Prekindergarten and Kindergarten.

- 5. Family Involvement: The Judy Center Partnership's role in Family Involvement is centered on the family's ability to participate in and support their child's early learning. It is based on the philosophy that the family provides the primary influence on a young child's well being. Family Involvement in the Judy Center Partnership depends on the collaboration of all partners to encourage parents and care givers to become empowered to meet the needs of their families. Events are coordinated among all partners to avoid conflicts in scheduling and to ensure families have many opportunities to participate. A calendar of events is regularly distributed to families.
- 6. Early Identification/Intervention: There is a plan in place to identify all children ages birth through five years of age who live in the designated Judy Center school zones. This includes those who are enrolled in state or federally regulated programs. Children receive age-appropriate developmental screenings, evaluations and interventions when appropriate. All children ages birth through five years, regardless of abilities, are fully included and have access to all programs and services.
- 7. Young Children with Disabilities (ages 3-5 with IEPs or IFSPs): Consistent with the vision of the Judy Centers, preschool age children with disabilities and their families are seen as fully included in all of the services as part of the Individualized Education Program (IEP) such as pre-kindergarten, family support and involvement, service coordination, and fullday/full-year services. Families who elect the Individualized Family Service Plan (IFSP) Option participate in Judy Center activities and are also included in ways that meet their Plan.

8. Health Services include:

Judy Centers ensure children receive

immunizations; blood lead testing, as recommended; dental, vision and hearing assessments and referral when appropriate; mental health assessments and referral when appropriate; physical growth and nutritional assessments including referral to Women, Infants and Children Program (WIC); referral to local health department (drug and alcohol services), if warranted; and access to health care insurance, including other family members, but especially children (MCHP).



- 9. Professional Development: Staff members of all participating programs participate in MMSR training and understand their responsibilities in implementing the MMSR as appropriate for their program. Training and workshops are provided for child care providers and Head Start staff.
- 10. Adult Education/Family Literacy: Parents are encouraged to pursue their own education to allow them to better support their children and to afford them opportunities at home, in school, and in the community to become full partners in their child's education. Family Literacy activities are paired with and are an integral part of all programs for children and families involved in the Judy Center Partnership.
- 11. Accreditation/Validation: All early care and education programs for children in the Judy Center Partnership are accredited or validated

within the first 18 months of becoming part of the partnership through the state or a national agency (MSDE, NAEYC, NEPCA, NAFCC). Accreditation/validation must be maintained and kept current for all programs.

12. Judy Center Partnership/Leadership: The Judy Center Partnership is actively engaged and is consistently and frequently involved in the school readiness mission of the Judy Center. The Judy Center is well-known in the community. Judy Centers are involved in the mission of its partners, their work benefits the entire community, and they are recognized as leaders in early childhood.

POPULATION SERVED:

Currently, Judy Centers offer benefits to 39 Title I school attendance areas in the State. Based on the 2012 evaluation reports, total children served numbered 12,335. Children served are birth through kindergarten. Demographic data shows ethnic composition as 33% White, 41% African-American, 18% Hispanic, 3% Asian and 5% other. Considering Judy Center enrollments as a proportion of the population in kindergarten in the schools served by the Judy Centers in the 2011-12 school year, 62% received at least one year of Judy Center services prior to kindergarten entry. This is a result of the successful outreach efforts employed by Judy Centers, and represents a major objective to serve all young children in the designated school attendance zone, not just the ones already enrolled in partnership programs.

In the larger perspective, however, and comparing these numbers to the total number of low income children in the State, it is clear that only a small portion of high needs children are being served. Since half the Judy Centers serve one school zone while the other half serves two or more, the proportion of children served by all Judy Centers combined is relatively small. In fact, estimating the "high needs" child population of the State (ages birth through 5) in 2010 at 121,585,³ the 12,335 children served in Judy Centers comprise approximately 10% of the total. MSDE reports that most jurisdictions are eager to expand the Judy Center services to other elementary schools if funding was available.

MEASURING SUCCESS:

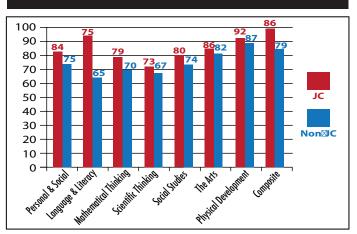
Judy Centers use the Results Based Accountability method to set their annual goal and headline performance measures based on local data and to track their success. Every Judy Center must produce an annual evaluation report on how well they met the goal and headline performance measures from the previous fiscal year. The goal and headline performance measures vary from one Judy Center to another and reflect the uniqueness of the needs of the populations they serve.

An overview of all Judy Centers is compiled each year and continues to demonstrate impressive results when comparing the school readiness results of entering kindergartners who had at least 1 year of Judy Center experience with their kindergarten peers who did not have the advantage of the Judy Center experience.

During School Year 2011-2012, Judy Centers and their partners identified 1,868 kindergartners who had at least 1 year of Judy Center experience prior to entering kindergarten. The school readiness levels of the 1,868 with Judy Center experience and the 1,163 who did not receive Judy Center services prior to kindergarten were compared. The results of this comparison can be seen in Figure A. The bars represent the proportion of children fully ready in all 7 domains of learning, including personal and social, language and literacy, mathematical thinking, scientific thinking, social studies, the arts, physical development, as well as a composite of all the individual domains.

More Judy Center children were fully ready for kindergarten compared to children who were not exposed to the Judy Center experience in all 7 domains of learning. The difference in the composite score was 7 percentage points. The difference between the percentages for the two cohorts was highly significant on the composite rating.

What is also impressive is the success of children who had Judy Center experience before entering kindergarten FIGURE A Kindergarten Assessment Results Judy Center vs. Non-Judy Center (% Ready By Domain, Fall 2011)

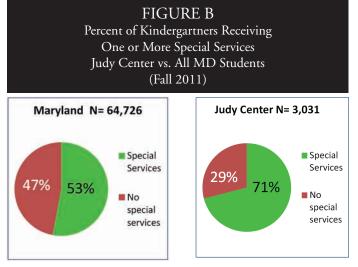


when compared with all kindergartners entering Maryland schools. In Fall 2011, 83% of Maryland's kindergartners were fully ready for school (N = 64,726); 86% of children with Judy Center experience were fully ready (N = 1,868); and 79% of children who entered kindergarten with their Judy Center peers but who did not have the Judy Center experience themselves were fully ready (N = 1,163).

Children with Judy Center experience have enjoyed this success even though Judy Centers serve a much higher percentage of children who are receiving special services. Special services include Free and Reduced Price Meals, Special Education or English Language Learners, or a combination. In the State, 53% of entering kindergartners receive special services; however, 71% of Judy Center kindergarteners receive special services. See Figure B.

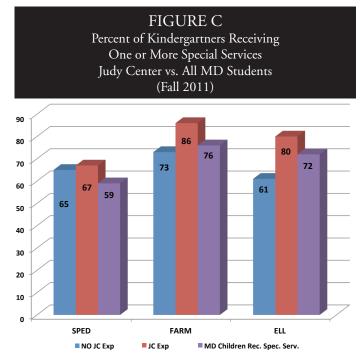
The school readiness data for Judy Center children receiving special services is also impressive. A summary follows. Also see Figure C.

Free and Reduced Price Meals (FARM): In Fall 2011, of the children who qualified for FARM, 86% were fully ready if they entered kindergarten with Judy Center experience, compared with 73% who entered without prior experience. In Maryland, 76% of the children qualifying for FARM were fully ready.



Special Education: In Fall 2011, of the children who were receiving special education services, 67% were fully ready if they entered kindergarten with Judy Center experience, compared to 65% who entered without prior experience. In Maryland, 59% of kindergartners who were receiving special education services were fully ready.

English Language Learners (ELL): In Fall 2011, of the children who were English Language Learners, 80% were fully ready if they entered kindergarten with Judy Center experience, compared with 61% who entered without prior experience. In Maryland, 72% of kindergartners who were English Language Learners were fully ready.



This success is attributed to the outreach efforts of the Judy Centers that resulted in the identification and provision of services to 62% of the children birth through age 4 and living in the Judy Center school zones before they entered kindergarten. Children living in the Judy Center school zones and receiving special services had a clear advantage over their peers who were receiving special services but did not have prior Judy Center experience. The work of the Judy Center Partnerships validates the critical importance of early intervention for children of high needs and underscores its relationship to school readiness.

Statistics are not the only way to measure outcomes. There are countless success stories emanating from families and Judy Center staff.

CAROLINE COUNTY – FEDERALSBURG JUDY CENTER

Tearesa French, Coordinator of the Caroline County Judy Center, provided the following testimony from one of the parents the Federalsburg Judy Center serves:

My name is Melanie. I have a 22 month old son named Barrington. We started attending the Federalsburg Judy Center in 2011 when Barrington was 7 months old. Our experience thus far has been very exceptional. I am very thankful to be able to attend the Judy Center. As a first time mother there are many questions that I've had and have on a daily basis. No one expects their child to develop problems when they are born healthy. When Barrington was 5 months old he started having seizures. His seizures are unexplainable. He's been diagnosed with Complex Partial Epilepsy. He takes medicine several times a day. Because of his seizures, Barrington is developmentally delayed in walking and talking. He participates in the Infants and Toddlers program through the school system and the Judy Center. Barrington receives Occupational, Speech, and Physical therapy. His therapists come to the center to work with him. We attend the center Tuesday and Thursday mornings, 9:30 a.m.-12:30 p.m. In every possible way, the Judy Center staff is very helpful,

IMPORTANT SCREENINGS LEAD TO POSITIVE HEALTH OUTCOMES AND SELF-ESTEEM

ALLEGANY COUNTY JUDY CENTER

Deborah Kolb, Coordinator of the Allegany County Judy Center, has been arranging for vision screenings for Pre-K children not only at the Judy Center but for all Pre-K classrooms in Allegany County for many years. Throughout the years, these screenings have resulted in the detection of vision problems in many children. Last year, however, there was a heartwarming story about a little boy that particularly touched her heart. The child was screened and referred for further evaluation. He went to an optometrist and was found to be severely in need of glasses. The Mom called to thank Deb after his doctor's visit. She told Deb that when he put the glasses on, he looked at his mom and said, "Your face is really pretty." Without glasses, he had never been able to clearly see his mom's face.

BALTIMORE CITY

Michelle Matthews, the Coordinator of the Moravia Park Judy Center, reports that they utilize the services of their dental partner, Colgate Bright Smiles, Bright Futures Mobile Dental program, to screen children for potential dental problems. During the routine Fall dental screening, a kindergarten student was identified by the hygienist as needing extensive dental work. The 5-year-old had extensive decay that required extractions and fillings. She is an English Language Learner and her parents did not speak English. The Judy Center, through the assistance of the Spanish language interpreter, discovered that the family did not have insurance and could not afford the needed dental care for their child. Berneva McLarin, Head Start's Family Service Coordinator, and a Judy Center partner, was able to find a dentist who was willing to complete all of the work that was needed at no cost to the family. This 5-year-old student who once covered her smile with her hand is now smiling broadly!

caring, and compassionate. When Barrington has therapy, the teachers become knowledgeable of what he is being taught and implement it into his daily learning activities. If I have a question or need help finding information, staff members try to assist me. If they can't, they direct me to other resources. Group meetings are helpful. I get information from staff and other program participants. Sometimes other parents have already experienced situations I am currently experiencing. Since attending the Judy Center, I've started taking classes at Chesapeake College. I am currently taking my third class toward becoming a Registered Nurse. I use the adult education time to study. With a two year old, sometimes this is the only time I get to study and do assignments. Because the Judy Center has licensed child care with extended hours for parents who are working on educational pursuits, Barrington is in good care and I am able to attend class and not worry about him. At the Judy Center, Barrington learns and engages in learning activities that he can use anywhere. I like going on the different field trips which I may otherwise not be able to attend.

The Federalsburg Judy Center is a very good program for children from birth to three years old. There is so much learning and information to be experienced and received from staff, teachers and other parents. I would recommend this program to anyone.

WASHINGTON COUNTY

The following letter was sent to Kathy Kerns, Coordinator of the Washington County Judy Center, by a Judy Center parent:

My son, Will, has come a very long way from where he was 2 ½ years ago thanks to all the help that we have been given through Early Intervention and the Judy Center. Two and a half years ago I took Will to a playgroup at Bester Elementary. He was at that time so unable to speak that he would scream and throw himself face first on the ground. During this playgroup, I was introduced to Sandy Lyons who started the process that turned his whole world around. Will is now in PreK and can speak clearly enough to be understood even by people who don't know him. He went from hating books and stories to not being able to get enough of them. He is able to do so much more than I would have ever been able to imagine 2 1/2 years ago as I sat in tears at that first playgroup. The Judy Center has offered us so many different activities and workshops that have helped him to grow and learn but have also helped our whole family to work with Will and help him improve upon the skills that they have helped him to learn. Not only has my son learned to speak and communicate with us, but his behavior has also improved dramatically due to the fact that he is now capable of communicating his needs and wishes with us. I can't begin to say how grateful I am to the Early Intervention people, as well as the Judy Center for all of the help that they have given to my son and, in effect, my whole family.

CARROLL COUNTY

Denise Laird, the Judy Center Partnership Service Coordinator and Parent Educator for the Parents As Teachers (PAT) program, reports the following:

I met one of our families in March of 2010. They came to enroll their daughter for kindergarten. They also had a son almost 4 years old with them. The son was having a difficult time following the parents' directions and they were having a difficult time communicating expectations to him. We chatted about prekindergarten and the importance of getting children "ready to learn". Their daughter had no prior school or child care experience. The family did not have a car so they were very limited in the experiences they could provide the children. I gave them information about the Judy Center and off they went.

Our paths crossed again in August 2010 during kindergarten orientation for their daughter. We talked about the importance of prekindergarten again and of PAT for their son who was now 4 years old. They agreed to enroll him in prekindergarten.

Shortly after, Mom called very concerned about the behavior of her children. They enrolled into the PAT program. We met weekly/biweekly with Mom and sometimes with Dad. Mom quickly opened up to me about their relationship. Mom and Dad grew up seeing and living in violence, abuse, drugs and exposure to suicide. Dad was physically abusive to Mom and often verbally and emotionally abusive to her as well. Mom had been the same to Dad but on a much lesser degree and only as a response to Dad's abuse of her. We talked about being role models and what the children see and learn even if they do not know the meaning of the words they hear. Mom understood what I was saying. Dad turned a deaf ear but said he would try. As we progressed, Mom started to see a counselor. Dad had been seeing a therapist and psychiatrist as he had been diagnosed bipolar. He did not always take his medications as prescribed and this affected his ability to function at times. Mom continued to open up about the abuse she received as a child and we had long conversations about what this did to her and how she needed to break the cycle for her children. She came to realize that much of what the children were doing was as a result of the actions of Mom and Dad. The young son acted like Dad, and the kindergartener like Mom. They acted out, yelling with violent and mean behavior. I was able to get our Mental Health Consultant to talk a bit to Mom about the behaviors.

Over time and many PAT lessons, Mom became empowered and "got" the importance of communication, honesty, safety and what is best for the children. I would tell her, "Say what you mean, mean what you say, and don't say it mean" to the children. She became more engaged in her children's school activities. She did not "fight back" with Dad. We talked about a safety plan in the event Dad became violent. We discussed what documents she needed to have and where they would be and who she could call and the path to walk to safety if they had to leave their apartment at night. Mom became strong in her convictions for the children to have a happy childhood with positive memories. She obtained her GED!

As more resources were offered to her, she started to become more confident in making the connections herself after I presented them. Mom became pregnant and some of the abuse continued. Dad was still living at home although they were not functioning as a couple. During my PAT visits, Dad was usually asleep all day in the bedroom. Shortly thereafter at Mom's request, he moved to a nearby shelter for adults diagnosed with mental illness. He would continue to stop by the house to sleep under the excuse he wanted to see the children. He did show up for the delivery of the baby at the very last minute. After the baby was born, Dad's visits to the house became less frequent and Mom became stronger. Eventually she filed for divorce and most recently applied for child support. Over the 2 years that she has been served by the Judy Center, Mom has become more engaged at school for the children. She utilizes the public library every week and provides her children experiences that in the past she saw no value for at all.

She is now able to set goals for herself and looks to a brighter, happier and healthier future for her children and herself. She has broken the cycle of abuse! She is more confident, happy and content in her life. She is empowered! The Judy Center services and PAT education had a lot to do with her empowerment!

CHALLENGES:

Individual success stories like these, however, are not the only results from the Judy Center endeavor. The needs of some local areas are increasing with the immigration of high needs individuals. Elementary school populations of English Language Learners are rising in many areas of the state. The challenges facing the Judy Centers are therefore increasing in complexity. Additional languages and cultures make outreach efforts ever more difficult.

On a larger scale, Judy Center Partnerships have become an important and effective support to Title I schools, some of which are in school improvement according to No Child Left Behind (NCLB) requirements. However, while children make early gains and progress during their preschool years, such positive early results are hard to sustain unless the support structure for the family and the individual education needs are maintained.

OUTLOOK:

The success of Judy Centers is gaining national recognition. The Full-Service Community Schools Act of 2011, for example, co-sponsored by Congressman Steny Hoyer (D-MD) and Senator Ben Nelson (D-NE) proposed taking the Judy Center principles and including them in full-service community schools nationwide.⁴ Senator Barbara Mikulski (D-MD), Member of the Health, Education, Labor and Pensions Committee and Chairwoman of the Subcommittee on Children and Families, has held hearings on the importance of early childhood education, and has visited Judy Centers in the State.⁵ It may be that Congress will recognize the Judy Center as a model for the nation, just as the Maryland General Assembly did with the Judy Hoyer Family Learning Center in Prince George's County.

PRINCIPLE NUMBER TWO **KINDERGARTEN ASSESSMENT**

The issue of how to assess the quality of early childhood care and instruction in educational terms has been a thorny one for many states. To promote the development and use of such assessments, the U.S. Departments of Education and Health and Human Services have recently thrown the full weight of Federal grant support behind the issue through the Race to the Top - Early Learning Challenge (RTT-ELC) Program.⁶

Thanks to the Judith P. Hoyer legislation, Maryland has already had such a kindergarten assessment for the last ten years, putting Maryland well out in front of most states in the nation in terms of measuring child outcomes.

THE MARYLAND MODEL FOR SCHOOL READINESS (MMSR)

Over the course of several years of study, between 1998 and 2001, MSDE decided on a set of standard definitions of children's capabilities and behaviors. This set of early learning standards and indicators is "a framework that defines what preschool and kindergarten children should know and be able to do during their early years, and how professionals and parents ensure quality early learning opportunities."⁷ Professionals are guided by the framework when developing or selecting early childhood curricula, implementing evidence-based instruction, and promoting assessment practices which are aligned with the State's content standards, curriculum, and classroom instruction.

The MMSR is based on an adaptation of Pearson's Work Sampling System[™] (WSS), a well known portfolio-based assessment system designed to help teachers document and evaluate children's skills, knowledge, behavior, and academic accomplishments across a variety of curricular areas.⁸ Developed at the University of Michigan by Professor of Education Samuel J. Meisels and colleagues in the early 1990's, that system identified seven domains of learning, which were included in the MMSR:

- 1. Social and Personal Development
- 2. Language and Literacy
- 3. Mathematical Thinking
- 4. Scientific Thinking
- 5. Social Studies
- 6. The Arts
- 7. Physical Development and Health

Each of these domains is further elaborated into indicators, or sub-divisions of the area of competence. These domains of learning with their indicators, as incorporated into the MMSR, are the basis of curriculum development for public kindergarten, prekindergarten, Head Start, licensed child care, and MSDE certified nursery school, and have become increasingly important in Maryland's early learning framework.



THE ASSESSMENT PROCESS:

To evaluate the kindergarten readiness of children based on these domains of learning, Maryland selected the use of a portfolio-based assessment system where teachers document and evaluate children's skills, knowledge, behavior, and academic accomplishments. In the first months of the kindergarten year, teachers observe, record, and evaluate the everyday classroom experiences and activities of their students. In that process, they gain a better understanding of what their students know, what they can do, and what they still need to work on. Then, they rate their students on 30 WSS indicators on what they have observed and documented since September, placing their students into three groups based on their scores. Children are identified as

• Fully Ready: Consistently demonstrating the skills, behaviors, and abilities which are needed to meet kindergarten expectations successfully.

- Approaching Readiness: Inconsistently demonstrating the skills, behaviors, and abilities which are needed to meet kindergarten expectations successfully and requiring targeted instructional support in specific areas.
- Developing Readiness: Failing to demonstrate the skills, behaviors, and abilities which are needed to meet kindergarten expectations successfully and requiring considerable instructional support in several areas.

To guide teachers' thinking in the assessment process, MSDE developed guidelines for the detailed components of the domains of learning, and trained teachers on how to use them to assess their students fairly. These guidelines are called "exemplars"—descriptions of proficiency regarding student skills and behaviors that a teacher looks for when evaluating performance. They offer descriptive models of student skills for each of the

FIGURE D Maryland Model for School Readiness Exemplars						
Content Area: Language and Literacy Development - 6.0 ListeningWSS Indicator: II A1 Gains meaning by listening.FallSpringMMSR/SC Indicator:6A 1 Demonstrate active listening strategies6A 2 Comprehend and analyze what is heard						
MMSR/SC Objective:		Proficient	In Process	Needs Development		
Attend to the speaker		Looks at the person who is speaking and/or remains quiet until the speaker is finished.	Inconsistently focuses on the speaker; may interrupt speaker before he is finished.	Does not focus on the speaker and engages in other activities while another is speaking.		
Determine a speaker's general purpose		Communicates to the teacher one key idea about a book read or class discussion.	Identifies the main character of a story, but is unable to supply any story details.	Identifies some details about a personal experience irrelevant to the story being discussed.		
Listen careful expand and e vocabulary	•	Pays attention to new vocabulary and is sometimes able to use it in the correct context during conversation.	Pays attention to new vocabulary but does not use it in the correct context during conversation.	Does not attend to or use new vocabulary that has been introduced.		

* Student may use sign language or augmentative communication to communicate comments, answer questions, and to demonstrate understanding.

three levels of performance ratings. Both kindergarten, prekindergarten, and preschool special education teachers are encouraged to become familiar with the MMSR Exemplars, discuss them during the training sessions and with colleagues, use them to guide their evaluations, and share expectations for student performance when they move from one grade to the next. A similar portfolio assessment process has been developed for Head Start and child care programs who serve preschool-age children. The professional development on the use of MMSR/State Curriculum prekindergarten standards and the assessment exemplars align not only standards but instructional practices for children.

For example, one indicator of the Language and Literacy domain is listening, and the corresponding MMSR Exemplar is shown as Figure D. Note that it is extensively cross referenced to the MMSR/State Curriculum content standards and standard numbers ("SC"), and Work Sampling System (WSS) indicators.⁹

Since preschool special education teachers are working with all WSS indicators, exemplars have been written for all indicators from preschool through kindergarten. Thirty selected indicators, with corresponding exemplars, comprise the full set of the MMSR Kindergarten Assessment.

MMSR SUPPORT ACTIVITIES:

As one component of ensuring reliable implementation of the assessment, ongoing training and coaching as well as effective communication of the assessment information is necessary. For that reason, the Hoyer legislation also financed a wide range of support activities including professional development for multiple populations, the production and distribution of instructional materials for parents, and management of the assessment process. The full list of assessment related activities financed by the Hoyer program includes:

A. Direct Assessment Activities- Funding is largely dedicated to grants to the local school systems (known as local education authorities or LEA's), covering costs associated with the assessment process. This includes not only the normal fall kindergarten entry assessment, but also additional spring assessments dedicated both to Judy Center elementary schools and to local priorities. There are 26 grants, one each for the 24 LEA's plus one for the Maryland School for the Blind, and one for the Maryland School for the Deaf. MMSR data is instrumental in evaluating the success of the Judy Centers, as well as annual progress toward statewide school readiness goals.

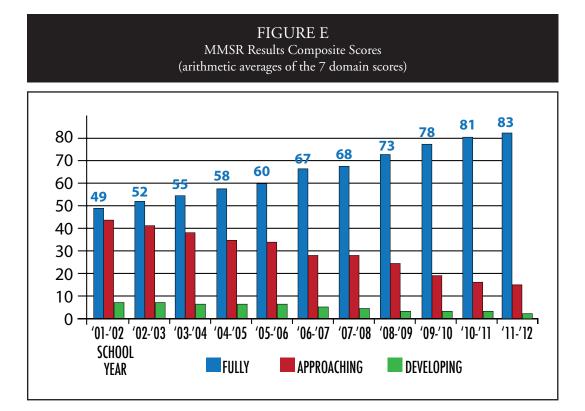
- B. Data Management- Grants to local school systems also fund the collection and management of MMSR data, both centrally at MSDE and in the local school systems. Originally a manual system, the process of data collection has become more automated over time. Currently, 14 systems are using an online data input system developed and managed by The Johns Hopkins University's Center for Technology in Education; the remaining school systems submit their data electronically via batch files. The MMSR data is part of the Maryland Longitudinal Data System (MLDS).
- C. Professional Development- To maintain a fully competent workforce in both public and private early childhood education settings, continuing professional development on the domains of learning is provided for 120 days of the year. All kindergarten, prekindergarten, and preschool special education teachers are required to attend MMSR professional development, including training in the use of the assessment but also professional development (PD) on instructional strategies for five out of the seven domains. MSDE's Division of Early Childhood Development is planning the PD activities in collaboration with each of the 24 local school systems. A team of 14 trainers with extensive experience, including retired teachers, current teachers, and independent consultants, handles these training sessions.

- For private early childhood care and education providers, this has been handled by Maryland Family Network's group of local resource and referral agencies. Ongoing instruction is provided in multiple modules meant to introduce and reinforce key concepts—especially the seven domains of learning—to the providers.
- D. Publications- To disseminate the results of the annual MMSR assessment, the Hoyer program finances the production of a number of publications, including centrally produced and distributed reports.
- E. Parent Materials- Under the supervision of Ready at Five,¹⁰ parent instructional materials are made available on line. These materials are focused around areas of concern that vary from year to year, as determined by MSDE and Ready at Five staff. Recent areas of focus have included issues of African-American and Hispanic academic success and the particular needs of English-Language Learners.

MMSR ASSESSMENT RESULTS:

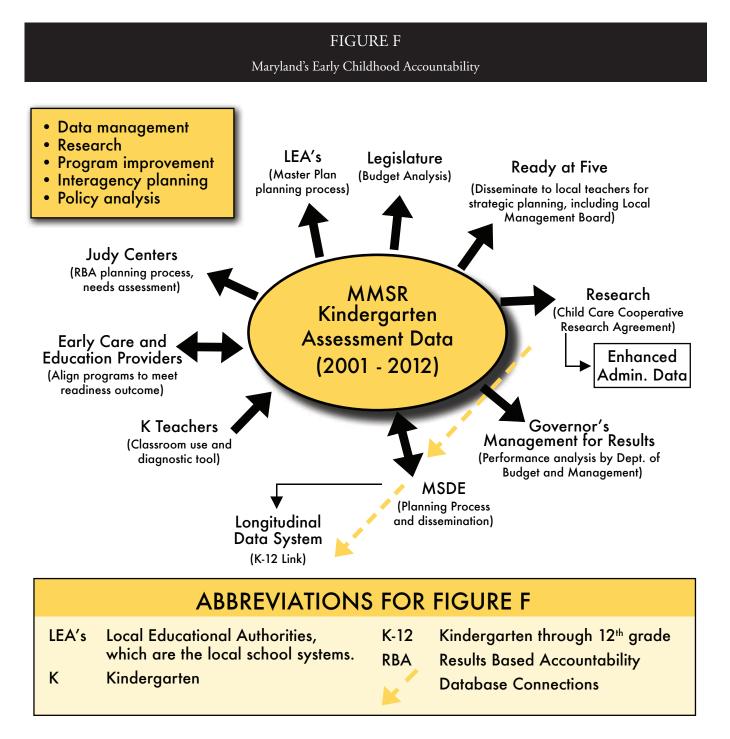
Annual reports summarizing the statewide results of these assessments have been issued since school year 2001-02. Over the nine years since the original report, readiness has grown remarkably. Figure E shows the composite scores (arithmetic averages of the 7 domain scores) in percent for the State since the first assessment.

Fully ready scores have risen 34 percentage points from 49% in the 2001-2 school year to 83% in the most recent 2011-12 school year, a remarkable string of successful improvements.¹¹ While there is no particular program or initiative that accounts for the changes, the combination of improved program quality, better qualified workforce, and more family engagement have created a climate of greater awareness among many that school readiness is a critical goal of early childhood education. Defining school readiness in terms of domains of learning and assessment indicators has helped to articulate child outcomes for those who work with young children before they come to school.



MARYLAND STATE DEPARTMENT OF EDUCATION

It is important to stress that the MMSR early learning framework, particularly the assessment component, is central to the whole infrastructure of early childhood education in Maryland. Figure F illustrates this principle. Programs including Judy Centers, local school systems, and private child care providers use it for measuring progress. The State Legislature and the Governor's Office use it for budget and performance analysis. MSDE uses it for policy analysis and planning. Early care and education providers use it for program improvement.



PRINCIPLE NUMBER THREE PROGRAM ACCREDITATION AND PRESCHOOL FOR ALL

Higher quality early care and education programs produce better outcomes for children. Positive outcomes for children include higher cognitive development, foundations for academic achievement, overall better health status, and more mature social skills. Studies document "sizeable long-term effects on school achievement, grade retention, placement in special education, and social adjustment." In Maryland, expanding the number of high quality early care and education programs will impact the school readiness skills of entering kindergartners as measured by the MMSR kindergarten assessment.

Voluntary accreditation and validation of early care and education programs provides consumers of service and the general community assurances about program quality. This information is useful to parents who must evaluate various programs and make decisions about the best program for their child. Voluntary accreditation and validation is also a marketing tool to promote standards of high quality for public schools and nonpublic school programs alike.

In Maryland's current early care and education system, the elements of quality are manifested differently among the various types of providers. Early childhood programs at public schools are governed by state regulations and operated by local boards of education. Head Start programs for children, birth to five, are governed by the Federal government and operated by local organizations, generally not-for-profit agencies. Child care and nursery programs are operated privately and either licensed by the MSDE and/or approved by MSDE in accordance with the non-public school regulations.

The MSDE Standards for Implementing Quality Early Childhood Learning Programs intend to define program standards across the various types of programs and transcend –but not replace- program-specific licensing regulations. Since their inception in 1998, the Standards have gradually leveled the playing field among early educators, provided greater focus on quality features of early learning, and given the early childhood community in Maryland the opportunity to improve its services to customers and promote young children's school readiness skills.

The Standards reflect research and advancements in the field and are now in their 5th edition, reflecting the changes in national and state standards and policies over the past 13 years. They incorporate program standards, indicators, and descriptions of best practices for prekindergarten, kindergarten, center-based child care, and Head Start programs. They focus on the administration, operation, and family/community partnership of classroom-based programs. MSDE did not develop Standards for family child care but recognizes the National Association of Family Child Care as the sole accrediting organization for Maryland's 9,000 registered family child care providers.

By pursuing and successfully completing these programs, early learning programs in public schools will receive program validation and non-public schools will receive program accreditation. Any program that uses the revised Standards and participates in the accreditation/ validation process has made a commitment to improve the performance of its early childhood services.

Professional development of the child care workforce was one of the major tenets of the original legislation, and thus through the years, Hoyer grant funds have been used to train those directly caring for young children. For instance, Hoyer funds are being used to train teachers in the use of the MMSR Kindergarten Assessment and on developmentally appropriate practices promoting the MMSR early learning framework which includes the Maryland State Curriculum for prekindergarten and kindergarten.

PRESCHOOL FOR ALL

In December 2007, Maryland's Task Force on Universal Preschool Education submitted a report to the Governor recommending the expansion of prekindergarten to all four-year-olds. The delivery of educational services could be both public and private, provided that the same standards which currently define the program in public prekindergarten are maintained. The Task Force called the program Preschool for All. The initiative intends to broaden the scope of access to high quality prekindergarten beyond the currently mandated group of families whose income¹² qualifies them to access a prekindergarten program operated by local school systems.

The subsequent Preschool for All Business Plan, submitted to the Governor in December 2009, recommended the establishment of a separate funding stream for Preschool for All sites at accredited child care, Head Start, or nursery school programs. The constraints of the state budget over the past three years denied MSDE the opportunity to establish such a fund. However, Hoyer funds were realigned to create 11 Preschool for All pilot sites across the state. The Race to the Top Early Learning Challenge Grant awarded to Maryland in 2010 provided additional funding for 5 additional sites. The five new sites are King's Kid Academy and Early Learning Center in Wicomico County, Crossway Community Montessori Charter School in Montgomery County, Howard County Community College's Children's Learning Center in Howard County, Hagerstown Community College's Children's Learning Center, and Downtown Baltimore Child Care Center in Baltimore City. Named the Preschool Services Grant, the Preschool for All pilot sites must meet ten standard quality benchmarks adopted by the Task Force on Universal Preschool Education and recommended by the National Institute for Early Education Research (NIEER) at Rutgers University. These benchmarks are

- Curriculum standards. All programs must implement a State-recommended comprehensive curriculum, an MSDEapproved individually developed curriculum, or a local school system curriculum that aligns with the MMSR, MD State Curriculum (SC, now the MD Common Core State Curriculum) and Healthy Beginnings (Birth to 48 months).
- **2. Teacher certification requirement.** Lead teachers in both public school and private

settings must meet state teacher certification standards for early childhood education.

- **3. Specialized training requirements for teachers.** Pre-service requirements for lead teachers must include specialized training in early childhood education. Elementary teaching certificates alone will not qualify.
- **4. Assistant teacher degree requirement.** Assistant teachers must hold a minimum of a high school diploma, but preferably a Child Development Associate or equivalent training (corresponding to Level 4 in MSDE's Child Care Credentialing Program).
- **5. Teacher recertification requirement.** Teachers must attend the specified number of hours of approved professional development per year to keep certification requirements current.
- **6. Maximum class size.** Class size must be limited to no more than 20 children for four-year-olds and no more than 16 children for three-year-olds.
- 7. Staff-child ratio. At least one staff member must be present per 10 children in a classroom for four-year- olds and per 8 children for threeyear-olds.
- 8. Screening/referral requirements. Programs must provide screening and referral services for vision, hearing, general health, immunizations, and lead screening, and provide support services, such as parent training, parent involvement activities, and transition to kindergarten activities.
- **9. Meal requirements.** All participants in full day sessions must be offered at least one full meal per day, in accordance with the Child and Adult Care Food Program.
- 10. Monitoring. Each year, programs that receive grant funding from MSDE must conduct a self-evaluation to assess program quality—using these quality indicators—and must report performance data to MSDE. Additionally, MSDE conducts one on-site visit each year. Programs not meeting standards and in need of improvement must create a program improvement plan identifying the steps they will take to fulfill each standard. Additional site visits will be conducted to assess improvement and adherence to quality standards.

Grant funds may be used for:

- Salaries, wages, and benefits for teaching staff;
- Equipment, materials, and supplies, including classroom furniture, instruction materials;
- Costs of health screening and intervention services for students;
- Costs for assessment and monitoring of students;
- Costs of professional development activities to support recertification of teaching staff;
- Cost associated with the evaluation and monitoring of the project; and
- Indirect costs incurred in operation the program.

Programs are also asked to describe the nature of their partnership, how services will be provided as required by Maryland regulations (COMAR), and how student progress and performance will be monitored and assessed in accordance with the MMSR.

Prekindergarten services include either a half-day (2 ½ hour) or full-day (6 ½ hour) session that meets five days a week in accordance with the official schedule of the school system's academic year. Currently, the grant requires programs to offer enrolled families a tuition discount of 20% for a half-day, or 40% for a full-day session.

CURRENT GRANTEES:

The funded partnerships with private providers demonstrate various program models and mechanisms through which services are provided at a reduced cost to families. Those models are:

- An "integrated approach" at The Young School in Howard County, in which eligible grant-funded children are placed in child care classrooms with tuition-paying children from the community;
- A "targeted approach" in which income-eligible and high-needs children are placed in a single classroom and provided full-day services with a prekindergarten curriculum at a reduced or no-cost rate. There are three examples of this approach run directly by school systems, Greenbelt Children's Center in Prince George's County, Cecil County Family Center in Cecil County, and King's Kid Academy and Early Learning Center in Wicomico County. There

are also privately run classrooms at CentroNia in Takoma Park, and Peppertree Centers, Inc. in Gaithersburg, both in Montgomery County, and The Learning Center in Washington County;

- A "Head Start add-on approach" at The Children's Center Group of Walkersville in Frederick County where a half-day prekindergarten session is added to a half-day Head Start session to create a full-day program for eligible Head Start children and a half-day program for some additional children who are eligible only for prekindergarten; and
- A "Head Start/Prekindergarten blended approach" at Catholic Charities Head Start of Carroll County in which Head Start and prekindergarten funding are blended to provide a seamless full-day program for Head Start eligible children, including some three-year-olds.
- A "Multi-age Montessori Charter approach" at Crossway Community Montessori Charter School in Montgomery County. Eligible three and four year-old children will are placed in a carefully prepared Montessori environment that promotes learning in both the cognitive and social domains.

Two grantees ceased operation due to contractual issues. With the addition of two new sites at King's Kid Academy and Early Learning Center and Crossway Community Montessori Charter School the number of partnerships funded thus totals 13. They all meet the 10 quality benchmarks listed above. Taken as a whole, the projects will allow for the evaluation of the problems and potential of each approach for the future direction of Preschool for All. MSDE recently published a report on the implementation of the pilot sites and their effects on school readiness.¹³ It showed that children, including those from at-risk groups, enrolled at the Preschool for All pilot sites significantly improved their school readiness skills. The results suggest that a combination of a high quality prekindergarten component embedded in an all-day, all-year accredited child care program increase the impact on early learning significantly.

APPENDIX Fy 2012 Judith P. Hoyer Program Budget

This table shows expenditures in Fiscal Year 2012, organized by the three priorities covered above. The total budget for the Judith P. Hoyer grant program amounted to \$10,574,999.

GRANT NUMBER	VENDOR NAME		APPROVED BUDGET	
	JUDY CENTERS			
12441901	ALLEGANY CO PUBLIC SCHOOLS	\$	323,333	
12441101	ANNE ARUNDEL CO PUBLIC SCHOOLS	\$	161,000	
12449801	BALTIMORE CO PUBLIC SCHOOLS	\$	322,000	
12439801	CALVERT CO PUBLIC SCHOOLS	\$	323,333	
12442001	CAROLINE CO PUBLIC SCHOOLS	\$	323,333	
12441001	CARROLL COUNTY PUBLIC SCHOOLS	\$	322,000	
12449401	CECIL COUNTY PUBLIC SCHOOLS	\$	322,000	
12441601	CHARLES CO PUBLIC SCHOOLS (2 Centers)	\$	645,333	
12423601	DORCHESTER COUNTY PUBLIC SCHOOLS	\$	323,333	
12440901	FREDERICK CO. PUBLIC SCHOOLS	\$	323,333	
12423701	GARRETT COUNTY BOARD OF EDUCATION	\$	322,000	
12448701	HOWARD COUNTY PUBLIC SCHOOL SYSTEM	\$	322,000	
12464701	KENT CO PUBLIC SCHOOLS	\$	323,333	
12464301	MONTGOMERY CO PUBLIC SCHOOLS	\$	202,988	
12464601	MONTGOMERY CO PUBLIC SCHOOLS	\$	322,000	
12440801	PRINCE GEORGE'S COUNTY PUBLIC SCHOOLS	\$	323,333	
12439701	QUEEN ANNE'S COUNTY PUBLIC SCHOOLS	\$	323,333	
12440601	ST MARY'S COUNTY PUBLIC SCHOOLS	\$	323,333	
12441801	TALBOT CO. PUBLIC SCHOOLS	\$	322,000	
12440501	WASHINGTON COUNTY PUBLIC SCHOOLS	\$	323,333	
12440401	WICOMICO CO PUBLIC SCHOOLS	\$	322,000	
12464801	WORCESTER CO. PUBLIC SCHOOLS	\$	322,000	
12441701	BALTIMORE CITY BOARD OF SCHOOL Commissioners			
12464401	BALTIMORE CITY BOARD OF SCHOOL	\$	323,333	
12404401	COMMISSIONERS	\$	222.000	
12464501	BALTIMORE CITY BOARD OF SCHOOL COMMISSIONERS	φ	322,000	
		\$	150,000	
	TOTAL JUDY CENTERS	\$	7,935,984	

GRANT NUMBER VENDOR NAME		ME APPROVED BUDGET	
	MMSR		
12461701	ALLEGANY CO PUBLIC SCHOOLS	\$	3,734
12455501	01 ANNE ARUNDEL CO PUBLIC SCHOOLS		43,556
12455401	BALTIMORE CO PUBLIC SCHOOLS	\$	14,447
12455301	CALVERT CO PUBLIC SCHOOLS	\$	12,961
12476201	CAROLINE CO PUBLIC SCHOOLS	\$	6,293
12532501	CARROLL COUNTY PUBLIC SCHOOLS	\$	44,685
12455201	CECIL COUNTY PUBLIC SCHOOLS	\$	15,309
12455101	CHARLES CO PUBLIC SCHOOLS	\$	12,827
12455001	DORCHESTER COUNTY PUBLIC SCHOOLS	\$	3,207
12454901	FREDERICK CO. PUBLIC SCHOOLS	\$	18,673
12454801	GARRETT COUNTY BOARD OF EDUCATION	\$	13,634
12476301	HARFORD CO PUBLIC SCHOOLS	\$	23,470
12476401	HOWARD COUNTY PUBLIC SCHOOL SYSTEM	\$	15,548
12528801	KENT CO PUBLIC SCHOOLS	\$	6,276
12454701	MONTGOMERY CO PUBLIC SCHOOLS	\$	53,564
12456301	PRINCE GEORGE'S COUNTY PUBLIC SCHOOLS	\$	99,434
12456201	QUEEN ANNE'S COUNTY PUBLIC SCHOOLS	\$	16,035
12510901	ST MARY'S COUNTY PUBLIC SCHOOLS	\$	7,614
12456101	SOMERSET COUNTY PUBLIC SCHOOLS	\$	9,868
12456001	TALBOT CO. PUBLIC SCHOOLS	\$	26,142
12455901	WASHINGTON COUNTY PUBLIC SCHOOLS	\$	18,700
12455801	WICOMICO CO PUBLIC SCHOOLS	\$	16,711
12455701	WORCESTER CO. PUBLIC SCHOOLS	\$	14,211
12476101	BALTIMORE CITY BOARD OF SCHOOL		
	COMMISSIONERS (NEW)	\$	32,097
12521003	MARYLAND FAMILY NETWORK	\$	400,000
12540801	CCSSO	\$	12,500
12528901	MARYLAND BUSINESS ROUNDTABLE FOR EDUCATION	\$	23,500
12552601	MARYLAND BUSINESS ROUNDTABLE FOR EDUCATION	\$	17,000
12529001	RESI	\$	19,588
12543802	JOHNS HOPKINS UNIVERSITY	\$	352,186
12573801	JOHNS HOPKINS UNIVERSITY	\$	280,935
	TOTAL MMSR	\$	1,634,705

GRANT NUMBER	VENDOR NAME	APPROVED BUDGET	
PRESCHOOL FOR ALL			
12422801	12422801 CECIL COUNTY PUBLIC SCHOOLS		99,000
12423101	PRINCE GEORGE'S CO PUBLIC SCHOOLS	\$	99,000
12423001	WORCESTER CO. PUBLIC SCHOOLS	\$	99,000
12423301	BALTIMORE CITY BOARD OF SCHOOL Commissioners (NEW)	\$	124,995
12423401	CATHOLIC CHARITIES HEAD START OF CARROLL COUNTY	\$	99,000
12422701	CENTRONIA	\$	99,000
12423501	CHILDRENS CENTER GROUP AT WALKERSVILL	\$	86,486
12422901	PEPPERTREE CENTERS INC	\$	78,000
12440701	SANDIS LEARNING CENTER INC	\$	21,829
12423201	THE LEARNING CENTER	\$	99,000
12441401	THE YOUNG SCHOOL	\$	99,000
	TOTAL PRESCHOOL	\$	1,004,310
	GRAND TOTAL	\$	10,574,999

ACKNOWLEDGMENTS

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ENDNOTES

- ¹The original legislation, <u>http://mgaleg.maryland.gov/webmga/frm1st.aspx?tab=home</u>
- ² Race to the Top-Early Learning Challenge activities are posted at http://www.marylandpublicschools.org/MSDE/divisions/child_care/challenge
- ³ Based on Census 2010 estimates of Maryland children under 5 multiplied by the 28.5% estimate of children ages 5-17 at or below 200% of poverty from the 2009 Annual Social and Economic Supplement of the Current Population Survey, and then adding a like percentage of kindergarten enrollees from 2010.
- ⁴ See <u>http://thomas.loc.gov/cgi-bin/query/z?c112:H.R.1090</u>
- ⁵ See <u>http://mikulski.senate.gov/media/pressrelease/12-16-2011-1.cfm</u>
- ⁶ See <u>http://www.ed.gov/early-learning/elc-draft-summary?page=1</u>
- ⁷ See <u>http://www.msde.maryland.gov/MSDE/divisions/child_care/early_learning/MMSR</u>
- ⁸ See <u>http://fairtest.org/work-sampling-system</u> and <u>http://www.pearsonassessments.com/pai/</u>
- ⁹ Note that the prekindergarten and kindergarten standards of the State Curriculum are referenced as the MMSR standards.
- ¹⁰ Ready At Five is a self-sustaining, board-designated program of the Maryland Business Roundtable for Education. See <u>http://www.readyatfive.org/raf/about-us/about-us.html</u>
- ¹¹ For additional information on the impressive results of early childhood programs and the improvement in the proportion of children entering school ready to learn, see this Hoyer Program funded report: http://www.msde.maryland.gov/MSDE/newsroom/publications/school readiness.htm
- ¹² 185 percent of Federally Poverty Guidelines (FPG)
- ¹³ Maryland State Department of Education (2011). The Judith P. Hoyer Early Care and Education Preschool Services Grant. Baltimore: Author. Retrieved from <u>http://www.marylandpublicschools.org/MSDE/divisions/child_care/ pubs</u>







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