Planning for Success: Mapping Goals, Services, and Outcomes for Program Improvement
A Logic Model

Many program directors and staff routinely collect what often seems like an overwhelming amount of data; what’s more, organizing and using these data to show a program’s accomplishments can be quite difficult. A logic model provides a way to systematize much of the work that is already done by program directors and staff and creates a road map that guides a program in identifying what it seeks to achieve, the steps it will take to get there, and how to tell if participants are on the right track to reaching their goals. In this way, a logic model can help programs fine tune their services and document their results. Developing and using a logic model can help answer questions such as:

- Are all children in the program receiving a developmental screening?
- Are all families receiving home visits as scheduled?
- Are all children developing effective communication skills?
- Are all parents learning to effectively read and respond to their infant’s cues?

In addition, developing a logic model allows staff to provide input and be involved in the process of articulating the relationship between program activities and outcomes. Participating in this process will increase the likelihood that staff will stay connected to the intention behind the activities they undertake and the services they provide to young children and families. Participating in the process also reinforces that services are not an end in and of themselves. Simply performing a developmental screening alone will not result in fulfillment of the goal of healthy development.

However, identifying children with possible delays through developmental screening and linking families with appropriate services will contribute to the goal of healthy development. A logic model helps staff and participants focus on goals as opposed to simply monitoring service provision and tracking data.

The logic model can be used to help answer questions about program implementation—to what extent a program is accomplishing its goals and why this is so. It provides a mechanism to continually incorporate feedback into the program plan and helps staff and families realize how services are connected to a program’s long-term outcomes.

A logic model is not a static or unchanging document but rather a living document to be used, revisited, and revised. Using a logic model:

- Assists staff and program participants in staying focused on connecting program activities and services to program outcome goals.
- Provides a framework for methodically monitoring and tracking the successes, accomplishments, and challenges of a program in a way that makes it easier to share information with staff, families, the community, other programs, and funders.
- Aids in improving program quality by helping staff continually learn about what works best and which areas need improvement.
- Helps to incorporate new research findings into existing program models as well as informs broader efforts to understand “what works” in early childhood programs.

The Components of a Logic Model

This table defines a variety of terms used to describe outcomes and other components of logic models. Many can be used interchangeably.

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
<th>Example</th>
<th>Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcome</td>
<td>A condition of well-being among program participants that should result from the successful provision of services</td>
<td>Healthy child development</td>
<td>The reason or logic as to how the services will help families achieve identified goals</td>
</tr>
<tr>
<td>Program</td>
<td>Services provided to program participants to achieve desired change</td>
<td>Developmental screening</td>
<td></td>
</tr>
<tr>
<td>Process</td>
<td>A measure of whether the services are being provided as planned</td>
<td>The number of children receiving developmental screening</td>
<td></td>
</tr>
<tr>
<td>Indicator</td>
<td>A measurement, for which data are available, that helps quantify the achievement of program goals</td>
<td>The number of children identified as needing additional services who are receiving those services</td>
<td></td>
</tr>
<tr>
<td>Rationale</td>
<td>The reason or logic as to how the services will help families achieve identified goals</td>
<td>Developmental screening helps to identify and refer children whose development may be delayed and who would benefit from more intensive developmental services to prevent further delay</td>
<td></td>
</tr>
</tbody>
</table>

What is a Logic Model?

All programs have a “theory of change”—reasons for what they do and why and how they do it. A theory of change explains why certain services are provided to a particular population and what outcomes are expected. Although all programs have a theory of change, it may not always be stated or documented. A logic model provides a way to clearly articulate this theory and includes the following components:

- The stated outcome goals of the program
- The services the program will provide to achieve those goals
- Measures that indicate if the program is providing the services as planned (process indicators)
- Measures that show if participants are making progress toward the outcome goals (outcome indicators)
- A rationale that explains how the identified services will have the intended effect

Going through the process of creating a logic model—by specifying program outcome goals, services, and indicators of process and outcome achievement and clearly showing how these components are linked—will serve to uncover and document a program’s theory of change. For example, many programs for young children aim to promote healthy child development. To help achieve this goal, many programs provide developmental screening to identify and link children in need to specialized developmental services. The components of the logic model for this example are illustrated in the table on page three.

The Family Enrichment Program: Connecting Outcomes to All Aspects of Programming

The Family Enrichment Program (FEP) is an Early Childhood Block Grant Prevention Initiative program funded by the Illinois State Board of Education that serves children and families in suburban Cook County. FEP is an example of how well-articulated outcome goals can be used to organize and facilitate every aspect of a program. The staff developed a set of outcomes for parents and children using Ten Things Every Child Needs1 as a framework for the child outcomes, and then developed a parallel set of ten things every parent needs and corresponding parent outcomes. Specific short-term outcomes such as “Child is responsive to parent-initiated interactions” are grouped under one of the ten larger goals (in this case, “Interaction”). Each of the ten child outcomes and ten parent outcomes have been assigned a colorful icon that serves as a coding system in program materials.

The FEP staff use the goals and icons to organize all of their work for the program. For example, when planning the calendar for parent groups each year, the staff code each session’s topic as belonging to one of the outcome categories. By looking at the icons attached to each activity, they can tell at a glance whether all areas are being covered and if the program is well-balanced.

Staff also help parents focus on the outcome goals. When parents first enroll in the program, parent educators introduce them to the lists of Ten Things Every Child and Parent Needs, and then invite them to choose one or two primary goals for themselves and their children from the list of program goals. Parent handouts describing each week’s parent-child play session are coded according to the goals being pursued in each activity so that parents can see how what they are doing relates to their child’s development.

In the Family Enrichment Program, even the smallest details such as the inspirational quotes that are written on the board before parent meetings are coded according to the goals to ensure balance across the program year. All of these efforts help the staff stay focused on the outcome goals in all that they do with families.

1 A video from the McCormick Tribune Foundation, produced by WTTW Chicago based on early childhood brain development research

Developing a Logic Model

Many programs have articulated some of the components necessary to build a logic model. For example, program goals and program services may be specified in a Request for Proposal (RFP) or program standards. When possible, existing information that addresses each of these components should be considered when creating a logic model. Logic modeling is an approach to organizing and using this information to continually improve a program. Below are several considerations to keep in mind:

- A logic model works best as a living document as opposed to a static or unchanging tool. Changes to the model may be necessary as a result of changes within the community context, changes in the range or types of services provided, changes in public policies, or changes in our knowledge from research about “what works.” Consequently, programs will need to devise a process for updating the model on a regular basis. Program assessment or strategic planning processes are opportunities to incorporate review of and updates to the logic model.

- There is no “right time” to develop a logic model. Any program can create a logic model at any time to organize its existing goals, services, and outcomes in a logic model framework. Established programs can use existing materials to answer the questions outlined in the following section.

- Include all levels of staff in the process of creating the logic model. This involvement will help to make the logic model meaningful to all staff as they better understand the connections between program services and outcomes.

- Be realistic about the types of goals that can be achieved given the population served, the program’s available resources, and the level and intensity of services being provided. If a program has overstated what a given set of services can realistically help participants accomplish, it will make the program appear unsuccessful.

- Finally, keep in mind that the outcome goals and indicators that are articulated are usually those that end up being emphasized in the program curriculum. Make sure that the logic model focuses on goals, services, and indicators that are realistic and truly important for young children and their families.
Five Key Elements

Identifying the elements of the logic model is a fluid process that involves looking at each element and determining how all elements fit together. The steps outlined below are useful from the perspective of a new or developing program. Existing programs may proceed through the process in a different order as long as all components of the model are addressed.

1 Specify outcome goals that answer the question: What does your program aim to accomplish in working with young children and families?

Start this process with the “end” in mind. The first step in developing a logic model is to identify clear goals that the program will help children and families to achieve. Most programs have several goals or goal areas they address with families. These goals describe the long-term vision of the program and are frequently described in a program’s mission statement or in RFPs, program standards, or other types of program plans. Program outcome goals should address current community issues and needs and broadly describe the characteristics of a family that has successfully completed the program. Be aware that these changes may not manifest themselves immediately. It may take several years to be able to observe and measure significant change in a family’s functioning. Even though these broad level outcome goals will not be those that program staff use to assess performance, they provide a vision that is integral to determining all aspects of the program. These goals guide what services the program provides and to whom the program provides them. They also help to identify with which other community partners to collaborate and what funding streams are appropriate for the program.

Examples:
- Healthy growth and development of children
- Enhanced self-sufficiency of parents

2 Specify program services that answer the question: What activities will your program undertake and what resources will it use to accomplish its goals?

Program services include the activities and resources the program will use to help participants achieve the desired change. This element—the heart of the logic model—describes how program staff will help children and families achieve desired outcomes. The activities described in this element should be supported by the research literature as having an effect on the desired outcome goals. This section should specify not only what the activity is but also the level and intensity of each activity. The more specifically activities and resources are articulated, the more useful the logic model will be in identifying how to continually improve the program. Resources include assets needed to undertake the program activities such as staff with certain qualifications or experience.

Examples:
- Conduct home visits once a week for 1.5 hours focused on the parent-child relationship
- Conduct developmental screenings with all children using the Ages and Stages Questionnaires every four months

3 Specify process indicators that answer the question: Is your program being implemented as planned?

Program indicators measure the extent to which the program model is being implemented as described in the “program services” section of the logic model. These indicators provide a concrete way to quantify program activities. Program indicators provide the day-to-day information about what is happening in the program and will help to answer questions such as: “Is the program fully staffed?” “Are all home visits being conducted as scheduled?” or “Are all children receiving a developmental screening?”

4 Specify outcome indicators that answer the question: What measurements will indicate that your program is helping families make progress toward the outcome goals?

Outcome indicators are measures of participants’ progress toward achieving their goals. They are milestones that can be observed in program participants after some active participation in the program. Families must be engaged and participating in program services in order for change to take place. “Active participation” or the extent of participation necessary before change can take place and be observed depends on the outcome being measured. Outcome indicators must be meaningful, measurable, and achievable given the scope and intensity of services provided.

Examples:
- Improved parenting skills as measured by pre- and post-assessments
- Absence of subsequent births to teens in the program
- Progress has been made toward achieving two goals in a family’s service plan

5 Specify the rationale that answers the question: How will these program services help families to achieve outcome goals?

This final element is essential. The rationale explains how the identified set of services will have the intended effect or outcome with the target population and should be supported by research-based evidence. This explanation or rationale will provide context and direction for acting upon findings gleaned from program evaluation based on the logic model (see next section). If some element of the program is not working as planned, revisiting the rationale will help determine why this is so and what changes in the interventions, population served, or expected outcomes might be needed.

Examples:
- Providing group socialization activities for parents of young children will help families feel more supported and less isolated
- Talking to parents about child development will help them to better understand the developmental stages their children go through and the behaviors that may be associated with different stages
### Example: Good Beginnings Program Logic Model

#### A Look at Good Beginnings

The Good Beginnings program at Children’s Home in Peoria, Illinois is a voluntary, intensive, home-based parenting education and support program for first-time parents with the primary goal of enhancing the parent-child relationship to prevent child abuse and neglect.

Program staff conduct community outreach and assess new families to identify those with risk factors appropriate to the intervention. Once families enroll in the program, they receive home visits that focus on building healthy relationships between parents and their children through developmentally appropriate activities and assessments including the Family Administered Neonatal Activity (FANA), the Parent-Child Observational Guide (PCOG), and the Make Way for Play curriculum. Family Support Workers conduct periodic developmental screening using the Brigance screening tool at 3, 6, 9, and 12 months of age; and every 6 months thereafter.

Families also participate in group parenting education and support activities and receive coordinated referral services to meet their other needs and to increase awareness of community resources. Some participants also receive Doula services from the last trimester of pregnancy through the first three months after birth. Doulas help mothers develop a birth plan, attend and support the mother through the birth, and help parents establish a positive relationship with their new baby.

#### Program Outcome Goal: Enhance parent child relationship to prevent abuse and neglect

<table>
<thead>
<tr>
<th>A. Program Components</th>
<th>B. Activities</th>
<th>C. Outcome Indicators (Benchmarks)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A1 Assessment</strong></td>
<td>B1a Record screen completed prenatally or within 2 weeks of birth</td>
<td>C1a 100% of families enrolled will be screened and assessment started prenatally or within 2 weeks of birth of the baby</td>
</tr>
<tr>
<td>(Peoria and Tazewell Counties)</td>
<td>B1b Linkage to appropriate support and medical services</td>
<td>C1b A minimum of 80% of families offered the program voluntarily will accept the program</td>
</tr>
<tr>
<td><strong>A2 Individual Services</strong></td>
<td>B2a Weekly home visits for first 6-9 months, then decreasing frequency by service level</td>
<td>C2a Less than 10% of participants will have a founded case of child abuse/neglect</td>
</tr>
<tr>
<td>- Voluntary, intensive, long-term home visiting (3-5 years for targeted child)</td>
<td>B2b Family support planning</td>
<td>C2b 80% of engaged participants will show improvements in parent responsiveness to child as measured on the Home Inventory</td>
</tr>
<tr>
<td>- Program capacity of approximately 130 families, including prenatal participants</td>
<td>B2c Prenatal education/family planning (FANA)</td>
<td>C2c 80% of engaged participants will have made progress toward achieving at least 2 goals in their IFSP</td>
</tr>
<tr>
<td>- Optional voluntary participation in a short term Doula service, from the last trimester of pregnancy to 3 months after the birth of the baby</td>
<td>B2d Linkage to medical provider for immunization and well-child check-ups</td>
<td>C2d 90% of children will be in a stable child care environment with their needs being met</td>
</tr>
<tr>
<td><strong>A3 Group Services</strong></td>
<td>B3a Parent-child interaction activities, (birth to 5 years)</td>
<td>C2e 80% of families will be able to identify at least 2 resources that they use for support</td>
</tr>
<tr>
<td>- Prenatal parenting education (ongoing)</td>
<td>B3b Parent support activities</td>
<td>C2f 85% of engaged participants will have a medical provider</td>
</tr>
<tr>
<td>- Parent/child interaction groups</td>
<td>B3c Prenatal education classes for teens</td>
<td>C2g 90% of participants will have a child medical provider</td>
</tr>
<tr>
<td>- Family literacy activities (ongoing)</td>
<td>B3d Family events/outsings</td>
<td>C2h 90% of children’s immunizations will be current</td>
</tr>
<tr>
<td><strong>A4 Community Collaboration</strong></td>
<td>B4a Monthly case management meetings with birth to 3 providers in Peoria</td>
<td>C2i 90% of participants will demonstrate knowledge about family planning options and understand the importance of delaying second pregnancies</td>
</tr>
<tr>
<td>(Peoria and Tazewell Counties)</td>
<td>B4b Healthy Families Advisory Meetings</td>
<td>C2j Less than 15% will have a second child while in level 1 or 2 of the program</td>
</tr>
<tr>
<td></td>
<td>B4c Area Early Childhood Meetings</td>
<td>C2k 80% of participants will be enrolled in school or GED preparation classes</td>
</tr>
<tr>
<td></td>
<td></td>
<td>C2l 90% of children in the program will have their developmental screen up to date</td>
</tr>
</tbody>
</table>

The staff at the Children’s Home developed a logic model to articulate the connections between the program services and outcomes for the Good Beginnings program. Following are several sections of their model to demonstrate what an actual logic model looks like. This model has one overarching outcome goal for the program at the top. The program activities are organized by program components specified in column A as: 1. Assessment 2. Individual services 3. Group services 4. Community collaboration.

The specific program activities are described in column B. Although they are not listed here, the process indicators would be those that ensure that the program activities are taking place. The outcome indicators specified in column C provide benchmarks that not only indicate what will be measured but also specify the extent of movement or change expected for each measure.
Using a Logic Model to Improve Program Quality

Every program’s logic model should be reviewed over time to identify trends, to assess whether children and families are making progress toward their goals, and to learn how the program is being implemented. Using a logic model is actually a dynamic cycle of gathering and reviewing information, formulating questions, and making changes, if necessary.

The following is an example of gathering and using information to better understand how a program is working and where to make improvements.

1. Gathering and Reviewing Information
   By systematically reviewing teachers’ assessments of children’s language development, a program discovers that children are not making the gains that were expected. At the same time, the program has been performing systematic classroom observations over a period of time to learn more about how program activities are implemented. The program director has discovered that staff are not having the types of interaction with children that had been planned and are known to be related to children’s language development.

2. Formulating Questions
   To find out why children and teachers are not having the expected type of interaction, the program director identifies questions to help shed light on the situation:

   - Have all staff been fully trained on the program curriculum?
   - Are there enough staff members to implement the model and services with the number of children in the program?
   - Is the chosen curriculum appropriate for the needs and risk factors of program participants?

3. Developing a Response
   After defining and answering these questions about why interactions are not happening as expected, the program director explores potential responses to the above scenario including:

   - Having additional staff training and/or increased supervision
   - Making adjustments to the current staffing arrangement (e.g. shifting responsibilities, hiring new staff)
   - Serving fewer participants
   - Changing the program curriculum to one that better suits the population served and/or the resource constraints of the program

Many programs collect a great deal of information about participants as they enter programs or begin to receive services. This information can help to refine program interventions to more specifically meet participant needs or adjust expectations about program outcomes. If, for example, a program discovers that the participants they are serving have a higher level of risk or need than the population the program was originally intended to serve, some adjustments may need to be made.

A program could: 1) offer more intensive services targeted to specifically identified areas of need, 2) refine the intake process and offer services to only those with risk factors appropriate to the intervention, or 3) adjust its expectations for participant outcomes.

Regardless of the specific findings or issues identified as a result of using a logic model, there are many possible factors that can contribute to a situation (program implementation, participant characteristics, etc.), and there are a variety of responses that could be appropriate. Programs are influenced by various external factors as well as what is going on inside the program. A thoughtful review of findings will help to determine an appropriate response.

For example, shifts in the demographics of the neighborhood surrounding a program or policy changes that affect the population served can have a significant impact on program operations and outcomes. Finally, as program adjustments are made it is important to be sure that enough time has been allowed for an intervention to be fully implemented and to have an effect on participants before further adjustments are made.

Ounce of Prevention Fund/Parents Too Soon: Using Logic Models to Monitor Program Performance and Provide Technical Assistance

The Ounce of Prevention Fund provides funding, technical assistance, and training to twenty-two Parents Too Soon (PTS) programs across the state, which provide comprehensive support for teens with young children. Collaborative partnerships between individual program sites and the Ounce of Prevention Fund to continually improve services and outcomes for teen parents are fostered in part through the use of site-developed logic models. Contract requirements for PTS programs are based around five specific outcome areas. Sites are required to develop program plans that identify appropriate activities, indicators, rationales, and documentation of progress for participants across each of the five outcome areas. Each year, sites revise the program plans or logic models as necessary. Sites collect process and outcome data through StarGate, the PTS management information system, and through narrative quarterly reports. The program directors synthesize program data and reflect on what is going on in the program—what is working especially well and what, if any, changes in the program activities are being made. These mechanisms provide an information-driven foundation on which to base appropriate technical assistance, customized to each site, and help to facilitate a collaborative partnership to develop and implement new ways to continually improve services, and ultimately, outcomes for teen parents and their children.

Through the use of data collected in StarGate, larger trends can be observed to identify ways to continually improve the quality of the program and interventions. For example, one pattern emerged as a result of collecting and reviewing program information on developmental screening across a number of sites. Many of the children had developmental screening results indicating a need for rescreening or referral for further evaluation due to indications of a possible delay in the area of language development. These data prompted a program development training series that included a self-study to help sites better understand how to interpret and use data within individual programs.

As a result of what was learned through the self-study, several sites conducted trainings with program staff on how to provide interventions that could enhance language development in the population served. In this case, collecting information and looking more closely at the meaning behind the information led to a more specific intervention targeted to the needs of children and families.
Determining realistic outcomes that can be achieved given the specific population the program targets and the level of resources and services provided is key. No one program can address all issues facing young children and families. Individual programs should choose outcomes appropriate for their specific purpose and goals based on identified community and family needs. Considering the risk factors of the families served, the resources available, the intensity of services provided, and what the current research literature indicates is appropriate will help staff determine realistic outcomes. Additionally, for each outcome, a different level of effort and length of time will be necessary to achieve it.

Short-term changes in incidence rates of adverse outcomes such as child abuse and developmental delay may not be useful indicators of success for prevention programs. Prevention programs, by their nature, attempt to screen and identify as many individuals as possible with known or potential risk factors in order to prevent adverse conditions by providing appropriate services as early as possible. This push for early identification, coupled with technology that has increased our ability and desire to track data that were not previously tracked, will most likely lead to higher rather than lower incidence rates in the short-term. This increase is a sign of improved functioning of prevention programs and not a program’s failure to achieve the broad desired outcome in the long-term. For example, an increase in the number of young children identified with a developmental delay as a result of more developmental screening means that more children will receive appropriate developmental services at an earlier age.

All issues surrounding infants and toddlers must be viewed in the context of their primary caregiver. Very young children experience the world almost entirely through their primary caregiver. These relationships provide the foundation for later development. Outcomes that relate to caregiver behaviors are of primary importance to young children, and are of greater long-term predictive value than infants’ and toddlers’ achievement of isolated developmental milestones.

Attain buy-in and understanding throughout the program. Make sure to involve staff at all levels in the process of developing a logic model and incorporating its use into the program. All staff have a role in the program improvement process (e.g., collecting, reporting or reviewing data) and must understand the importance of having a meaningful logic model and its utility to them. Maintaining the accuracy and integrity of the data, beginning with the collection of information by front line staff through each step of the process, is essential.

Develop and maintain a system to collect reliable, quality data. In order for data to be of value, agencies must have 1) a logic model with clear outcomes that are appropriate for the goals of the program and meaningful to measure for young children and 2) a systematic mechanism to monitor service delivery data and outcome indicators, such as paper reporting systems or computerized management information systems. Data that are not systematically collected and analyzed will not accurately reflect program performance.

Desired outcomes and the program logic model must be continuously re-evaluated within the context of larger trends. A logic model should not be seen as static and unchanging. While outcome data can be instructional and informative, a more complete and accurate picture of how programs are functioning requires looking at data within a larger context. For example, how does welfare reform affect the needs and outcomes of families with very young children? How does it impact the way in which the services are delivered? Over time outcome data can also be used to examine trends and better understand how programs and policies affect families.

Setting Yourself Up for Success
Building and using a logic model is challenging but essential. Here are some tips to keep in mind.
A logic model provides a framework to clearly outline a program’s “theory of change.” A logic model explains why a program is providing a certain set of services to a particular population and the intended impact of those services. Making this theory of change explicit throughout the program will help staff and families stay focused on long-term outcome goals as opposed to just focusing on program activities and services.

A logic model will be of greater benefit to a program if it is integrated into the operation and management of the program so that information is regularly collected, reviewed, and acted upon as necessary. The use of this approach—combined with a commitment to make changes as a result of what is learned—can help to foster an environment of continual learning and quality improvement.

Conclusion

Guides and Toolkits

Measuring Program Outcomes: A Practical Approach and Training Kit
Available for purchase on the Outcomes Research Measurement Network web site or by contacting the number above. The web site includes a number of other United Way publications on program evaluation as well as a resource library with links to additional resources.

How Are We Doing? A Program Self-Assessment Toolkit for the Family Support Field
Family Support America. 312.338.0900 http://www.familysupportamerica.org/content/home.htm
Available for purchase on the Family Support America (FSA) web site or by contacting FSA at the number above.

Making Information Work For You:
A Guide for Collecting Good Information and Using It to Improve Comprehensive Strategies for Children, Families, and Communities
http://www.ed.gov/insb/america/reads/resourcekit/MakingInfo/
Available on the web site listed above or through the Department of Education by calling 800.USA.Learn.

W.K. Kellogg Foundation Evaluation Handbook
Available in its entirety on the Internet at the web site listed above.

Training and Technical Assistance

Evaluation Resource Institute
The Evaluation Resource Institute offers workshops in Chicago and Springfield, Illinois on evaluation issues and produces a regular newsletter with links to other resources and a calendar of events, workshops, and seminars. The Institute also offers individualized and technical assistance and evaluation coaching services. To access these resources contact Heather Barton-Villagran at the number listed above.

Other Resources

Promising Practices Network on Children, Families and Communities
http://www.ppromisingpractices.net/
The Promising Practices Network (PPN) web site highlights programs and practices that research indicates are effective in improving outcomes for children, youth, and families.

Child Trends Data Bank
http://www.childtrendsdatabank.org/index.htm
This web site provides data and information about the relevance and trends within many indicators of child and youth well-being.

The Family Enrichment Program
www.fepEcho.com
The web site for the Family Enrichment Program, described on page four of this brief, includes more detailed information about the curriculum, the outcomes staff monitor, and how staff incorporate an outcomes focus into the program.

This brief is one in a series produced by the Birth to Five project to explore key issues of program quality and best practices within prevention programs for expecting families and those with children from birth to five years of age. The Birth to Five Project is a statewide collaborative effort to build a comprehensive system to ensure all Illinois children are safe, healthy, eager to learn, and ready to succeed by the time they enter school. The Project brings together early childhood practitioners, government agency staff, health care providers, advocates, researchers and others to identify and develop solutions to system gaps and barriers that stand in the way of families’ ability to protect, nurture, educate and support the development of their young children. The Project is managed by the Ounce of Prevention Fund and supported by the Robert Wood Johnson Foundation and the Early Childhood Funders’ Collaborative.

We would like to acknowledge the following individuals who provided input on the development of this publication: Juana Buchell, Children’s Home; Peoria; Chris Dennison; School District U-46; Elgin; Deborah Darn, Ph.D., Chapin Hall Center for Children at the University of Chicago; Jane Dwyer, Family Enrichment Program; Park Forest; Nancy Eggers, Children’s Development Center; Rockford; Clare Eidridge, Illinois Family Education Center; Theresa Hawley, Ph.D.; Alice Kusmierek, Family Enrichment Program; Park Forest; Cheryl Mirz, Illinois Association for Infant Mental Health; Evelyn Norton, Illinois Department of Human Services; and Audrey Witzman, Illinois State Board of Education.

Author: Karen Yarbrough
Design: Sam Silvio, Silvio Design Inc

Selected Resources

Children, Families, and Communities
Comprehensive Strategies for Information and Using it to Improve A Guide for Collecting Good Practices
Available on the web site listed above.

Other Resources

Promising Practices Network on Children, Families and Communities
http://www.promisingpractices.net/
The Promising Practices Network (PPN) web site highlights programs and practices that research indicates are effective in improving outcomes for children, youth, and families.

Child Trends Data Bank
http://www.childtrendsdatabank.org/index.htm
This web site provides data and information about the relevance and trends within many indicators of child and youth well-being.

The Family Enrichment Program
www.fepEcho.com
The web site for the Family Enrichment Program, described on page four of this brief, includes more detailed information about the curriculum, the outcomes staff monitor, and how staff incorporate an outcomes focus into the program.

This brief is one in a series produced by the Birth to Five project to explore key issues of program quality and best practices within prevention programs for expecting families and those with children from birth to five years of age. The Birth to Five Project is a statewide collaborative effort to build a comprehensive system to ensure all Illinois children are safe, healthy, eager to learn, and ready to succeed by the time they enter school. The Project brings together early childhood practitioners, government agency staff, health care providers, advocates, researchers and others to identify and develop solutions to system gaps and barriers that stand in the way of families’ ability to protect, nurture, educate and support the development of their young children. The Project is managed by the Ounce of Prevention Fund and supported by the Robert Wood Johnson Foundation and the Early Childhood Funders’ Collaborative.

We would like to acknowledge the following individuals who provided input on the development of this publication: Juana Buchell, Children’s Home; Peoria; Chris Dennison; School District U-46; Elgin; Deborah Darn, Ph.D., Chapin Hall Center for Children at the University of Chicago; Jane Dwyer, Family Enrichment Program; Park Forest; Nancy Eggers, Children’s Development Center; Rockford; Clare Eidridge, Illinois Family Education Center; Theresa Hawley, Ph.D.; Alice Kusmierek, Family Enrichment Program; Park Forest; Cheryl Mirz, Illinois Association for Infant Mental Health; Evelyn Norton, Illinois Department of Human Services; and Audrey Witzman, Illinois State Board of Education.

Author: Karen Yarbrough
Design: Sam Silvio, Silvio Design Inc