# Local Needs Assessment (LNA) Framework

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## Directions

After reviewing the Local Needs Assessment Guidance, complete this customizable LNA Framework. The framework is organized into core sections with data prompts to help you document what you know about community strengths, needs, and priorities affecting young children and their families. You may use the table format provided or replace it with another format, as long as you address the main sections of the framework. You may also choose to include an Executive Summary at the beginning of your LNA report. If you have questions about modifying the framework, consult with your RESC for guidance. **As you move through the framework, note that you may not have data for every prompt in a given section, and you should choose which data to collect based on your local context.** You may also collect relevant information from additional sources that are not listed in the framework.

**Initial LNAs are due by June 30, 2026.** LGPs must upload their LNA to their Shine Google folders. Each LGP's LNA must receive final approval from their Fiduciary prior to submission.

## LGP Information

LGP name: Regional Early Childhood Collaborative (RECC)
Town(s) included: Ledyard, Norwich, Griswold, Lisbon, Voluntown, Preston and Montville
Primary LNA contact person: Linda Allen, Liaison
Primary LNA contact email: lallen@learn.k12.ct.us
LGP Fiduciary approval (name of Fiduciary contact and date LNA approved): Adrenna Paolillo
Date submitted to Shine: June 30, 2026

## LNA Process

**Who was involved in this LNA? (check all that apply)**
x☐ LGP Liaison/s
x☐ LGP Parent Ambassador/s
☐ Parents Connecting Parents (POP) Ambassador/s (if applicable)

☐ OEC Parent Cabinet member/s (if applicable)
x☐ Families
x☐ Center-based program staff
x☐ Family child care providers
x☐ Public school staff
☐ Birth to Three staff
x☐ Preschool special education staff
☐ Home visiting program staff
x☐ Family child care networks, intermediaries, or other support groups
☐ Other service providers (please specify):
☐ Municipal government staff
☐ Other community partners (please specify):
☐ Other (please specify):

**What data sources were used for this LNA? (check all that apply)**
x☐ OEC-provided datasets
x☐ Community surveys (specify audience):
☐ Community interviews (specify audience):
☐ Community focus groups (specify audience):
☐ Other community data (please describe):

**Other LNA processes or methodology notes: The LNA was conducted by the RECC members during the spring of 2026 at both the monthly LGP meetings and additional LNA data review meetings. We reviewed the data provided by the OEC, a family survey, an FCC and center-based survey and questionnaire to public school administrators.**

## Children and Family Characteristics

**Central question:** You want to paint a picture of the children and families in your community. How would you describe them based on the data the OEC provided as well as other data you have collected?

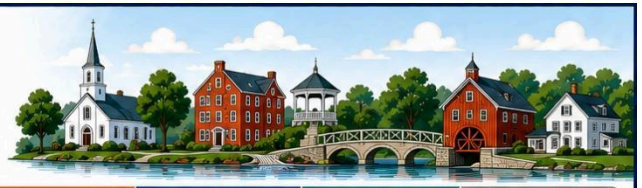
**Table 1. Children and Family Characteristics**

| Data descriptor | Source | Data value | Notes |
|---|---|---|---|
| Population size | OEC-provided | | |
| Birth rate over time | OEC-provided | | |
| Languages spoken | OEC-provided | | |
| Household composition | OEC-provided | | |
| Median household income | OEC-provided | | |
| Population below federal poverty level | OEC-provided | | |
| Race/ethnicity | Consider collecting | | |
| Participation in work, school, or training | Consider collecting | | |
| Other demographic | | | |

| | |
|---|---|
| or population characteristics (e.g., immigration status) | |
| Relevant findings from | |

# RECC COMMUNITIES BY THE NUMBERS

*A Comparison of Key Demographic Indicators*



| INDICATOR | GRISWOLD | LEDYARD | LISBON | MONTVILLE | NORWICH | PRESTON | VOLUNTOWN |
|---|---|---|---|---|---|---|---|
| TOTAL POPULATION | 11,484 | 15,394 | 4,213 | 18,006 | 39,992 | 4,812 | 2,587 |
| TOTAL # OF HOUSEHOLDS | 4,901 | 5,504 | 1,626 | 6,610 | 16,840 | 1,897 | 1,099 |
| BIRTH RATE (births per year) | 93-114 | 157-178 | 40-42 | 156-163 | 420-438 | 40-42 | 21-23 |
| # OF CHILDREN UNDER 5 YEARS | 194-484 | 628-1,130 | 124-360 | 448-898 | 1,646-2,430 | 125-311 | 36-120 |

These key indicators provide a snapshot of our communities and help guide decisions that support children and families.

Stronger data. Stronger communities. Brighter futures.

Birth Rate represents the estimated number of births per year.

Children Under 5 includes all children from birth through age 4.

**Source:** *Connecticut Office of Early Childhood*

| | |
|---|---|
| surveys, focus groups, and any other local data collection | |

**Describe and interpret the data:**

*What do you see? What do you notice? What does this tell you about the children and families in your community? What is missing? What themes and gaps can you identify?*

The seven RECC communities account for about 78,500 people and consists of rural, suburban and urban communities. Three of the towns are small with under 5000 residents, two are moderate size – between 11,000 – 18,000 and Norwich is the largest accounting for over 50% of the RECC population. According to the Census Bureau, Norwich is notably the most racially and ethnically diverse community in this group, with a Non-Hispanic White population of 55%. This is driven by its higher Black, Asian and Hispanic populations. Conversely, Lisbon and Preston remain the most homogeneous, hovering above 90% Non-Hispanic White. Please note that these figures **do not** include the sovereign Tribal Nations located near Norwich, Ledyard and Montville.

While there is not much industry in the small towns, there is Backus Hospital in Norwich and two casinos located in Ledyard and Uncasville, which are major employers in the area. They are open 24 hours, so many people work second and third shift hours. Electric Boat in Groton also employs over 10,000 people, so having reliable transportation for many families is necessary. Not only do people in the smaller towns need to travel for work, they may also need to look outside their town for childcare, healthcare (pediatricians/doctors vs. walk-in clinics) and larger grocery stores.

The City of Norwich has low-income housing and more apartment complexes than in the other communities, along with public transportation. There are also a wide range of services and resources available, however, for families in the more rural towns it may be a challenge for some to access them. This is something the LGP Community Table will examine closer as we prepare the community plan.

(This graphic was created by using ChatGPT)

Child and Family Basic Needs, Health, and Well-Being

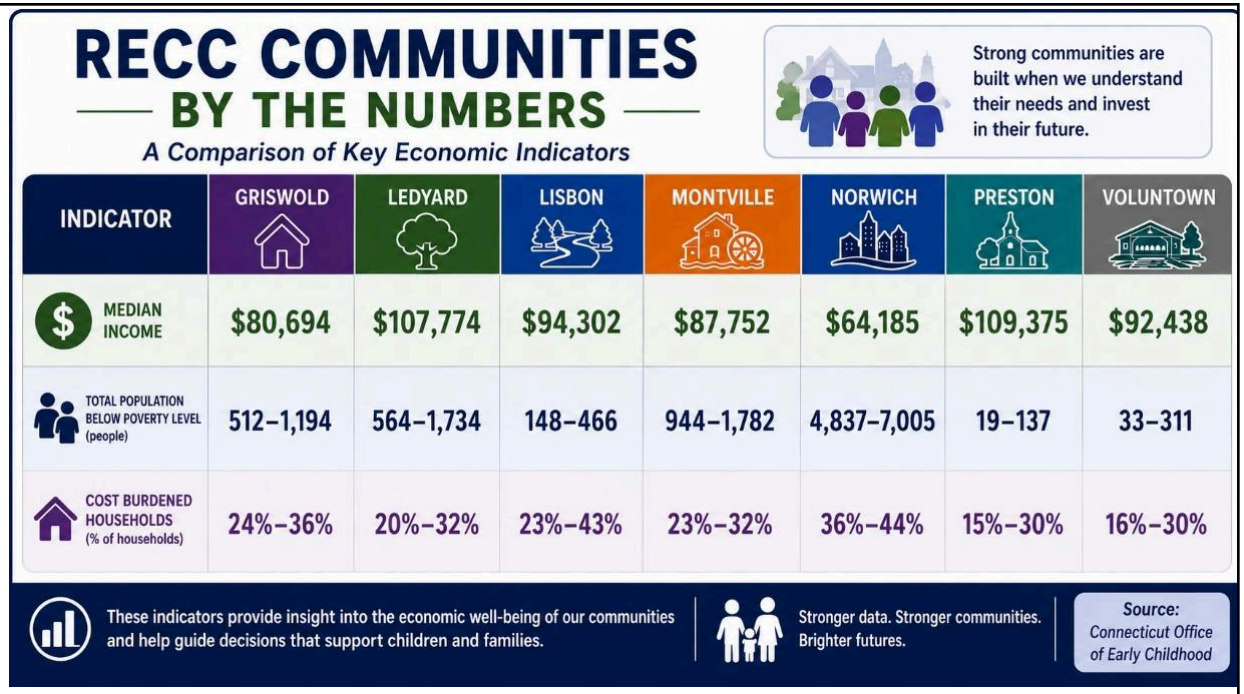
**Central question:** How are the basic needs, health, and overall well-being of children and families in your community supported and addressed?

**Notes on OEC-provided data:** This is a section in which you may want to collect additional data to supplement the OEC-provided data. For example, you may have local data sources that offer a fuller understanding of children and families experiencing homelessness in your community than the OEC-provided data, which includes counts of PreK and Kindergarten students experiencing homelessness as reported by school districts.

**Table 2. Child and Family Basic Needs, Health, and Well-Being**

| Data descriptor | Source | Data value | Notes |
|---|---|---|---|

| | |
|---|---|
| Child Opportunity Index (COI) | OEC-provided – **See information below chart** |
| Owner-occupied vs. Renter-occupied housing | OEC-provided |
| Median rent | OEC-provided |
| Cost-burdened households | OEC-provided |
| Median household income (also included in Table 1) | OEC-provided |
| Children experiencing homelessness | OEC-provided |
| Households receiving SNAP | OEC-provided |
| Children receiving WIC | OEC-provided |
| Number of people served by Medicaid | OEC-provided |
| Number of people served by CHIP | OEC-provided |




The Connecticut chapter's latest ALICE projections — an acronym for Asset-Limited Income-Constrained Employed households — found a family of four, with two adults, one preschooler and one infant, needed to earn $106,632 in 2021 to cover a basic survival budget. Unprecedented inflation in housing, food costs and other essentials over the past two years adds another 18.2%, bringing the 2023 estimate to $126,018.
United Way: A family of four needs $126,000 a year to survive in CT – DataHaven
Based on this information, the median annual salary for the RECC communities is significantly lower than what the United Way is stating was needed in 2023.

**Child Opportunity Index by town - Griswold – 20, Ledyard 15.333, Lisbon – N/A, Montville – 18.667, Norwich – 20, Preston –18, Voluntown - 20**

| | | |
|---|---|---|
| Number of people served by TFA | OEC-provided | |
| Children referred to Birth to Three | OEC-provided | **371 – These figures for Birth to Three represent all seven RECC communities.** |
| Children evaluated for Birth to Three | OEC-provided | **364** |
| Children determined eligible for Birth to Three | OEC-provided | **215** |
| Children served in Birth to Three | OEC-provided | **394** |
| Number of Birth to Three programs | OEC-provided | 21 |
| Preschool children with an IEP or ISP for primary disability of Developmental Delay | OEC-provided | 201 No data for Preston and Voluntown |
| Transportation needs | Consider collecting | |
| Maternal physical health indicators | Consider collecting | |
| Infant physical health indicators | Consider collecting | |
| Child physical health indicators | Consider collecting | |
| Mental health indicators | Consider collecting | |

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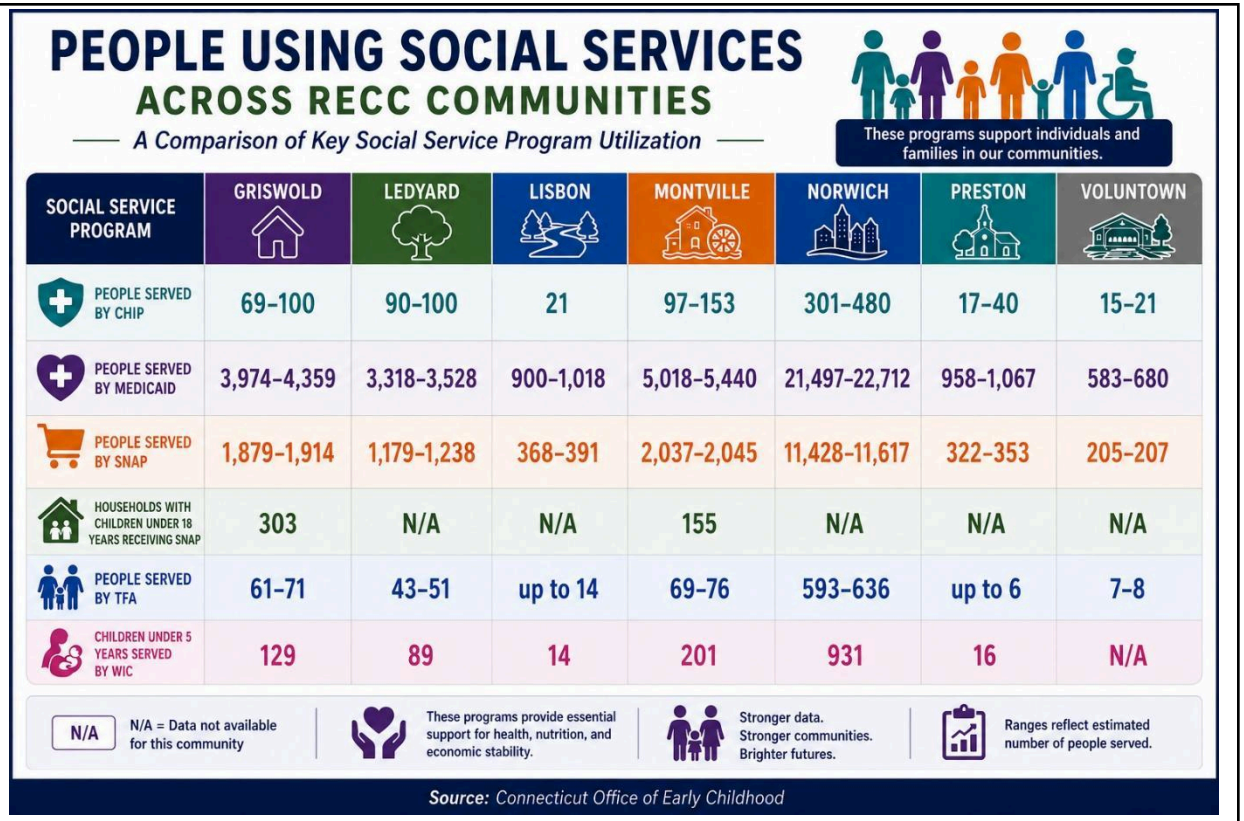
| | |  |
| Child welfare indicators (e.g., children in foster care, protective services) | Consider collecting | |
| Other basic needs, health, or | Consider collecting | |

| | |
|---|---|
| well-being indicators | |
| Relevant findings from surveys, focus groups, and any other local data collection | |

**Describe and interpret the data:**
*What do you see? What do you notice? What does this tell you about the overall well-being of children and families in your community? What is missing? What themes and gaps can you identify?*

Although the communities vary in size and income, based on the data provided, there is a significant number of households dependent on some type of assistance. The percentage of the population living below the poverty level ranges from 9% - 15% for 5 of the 7 communities. Regarding Medicaid, the percentage goes from 20%-55% of the total population, the spread for WIC is 4%-35% and cost-burdened households range from the lowest at 15% to 44% at the very highest. It is no surprise that Norwich's numbers are on the higher side due to the population size and because services and resources are located there. This helps to make them more accessible for families and public transportation is available.

(These graphics were created using ChatGPT)

## Availability and Affordability of Early Care and Education

**Central question:** How accessible and affordable is early care and education in your community? How does the existing early care and education available in your community align with what families need and want (for example, along dimensions such as type of care setting, hours of care offered, and/or others), and what families can afford?

**Notes on OEC-provided data:**

- The provided child care capacity, enrollment, and openings data (United Way) is based on annual self-reported survey data from licensed and license-exempt child care providers. It represents an estimated snapshot in time and will not reflect ongoing fluctuations in capacity and enrollment. As with all provided data, you should ask probing questions to determine if this data reflects your understanding of current child care availability in your community.
- Some children are funded through multiple federal- or state-funded programs (e.g., federal Head Start and Early Start, Early Start and Care 4 Kids).
- The provided Early Start and State Head Start utilization data is from November 2025. It is point-in-time data; utilization data may change over time, and your LGP liaison/s may have additional information on utilization in your community.

**Table 3. Demand – Local families' preferences**

| Data descriptor | Source | Data value | Notes |
|---|---|---|---|
| Birth rate (per 1,000 population) | OEC-provided | **2024 Data** – Griswold – 114, Ledyard 157, Lisbon – 42, Montville – 156, Norwich - 420, Preston – 40, Voluntown - 23 | |
| Total population under 5 | OEC-provided | | Please see graph in section one |
| Total population | OEC-provided | | Please see graph in section one |
| 211 inquiries related to child care & parenting | OEC-provided | Ledyard – 2, Montville – 7, Norwich - 26 | There was no data for the other communities |

| | | | |
|---|---|---|---|
| 211 inquiries related to education | OEC-provided | Ledyard – 0, Montville – 0, Norwich - 0 | There was no data for the other communities |
| Demand for care | Consider collecting | | |
| % families in need of infant / toddler care | Consider collecting | | |
| % families in need of preschool care | Consider collecting | | |
| % families with preference for full-day, school-day, or part-day care | Consider collecting | | |
| % families with preference for center-based, public school-based, FCC-based care, or other | Consider collecting | | |
| % of families with need for wrap-around care | Consider collecting | | |
| % families with need for care during non-traditional hours (night, weekend, early morning) | Consider collecting | | |
| Relevant findings from surveys, focus groups, and any other local data collection | | | |

**Describe and interpret the data**

Use the below prompts to guide your thinking. These are not all required questions; you should select the questions most helpful for capturing your community's context.

- *What does this tell you about the **demand** for early care and education from families in your community? What themes and trends can you identify?*

- *How do families' work and school schedules influence demand for non-traditional hours (night, weekend, early morning) or wrap-around care? What patterns do you see in the need for part-time versus full-day care?*
- *Are there any policies or practices in the current local or state early care and education system that are misaligned to parent needs?*

Members of the RECC created a survey to distribute to families with young children in all of the communities. In total we received 78 responses, which is not representative of the many families with children under 5 years of age. The table recognizes that we need to continue to collect data over the coming year to gather more specific information about each community and how the LGP can support family needs. Through the survey we conducted, we learned that some families either decreased their work (**25% of the respondents**) hours or quit entirely **(16%)** because the current childcare options did not meet their family's needs. In the smaller communities, there are few, if any programs that offer full-day, full year care, which necessitates parents to travel to other communities to find a program that meets their needs. This means that families are dependent on safe, dependable transportation.
When asked about support that would be helpful to a family, affordable childcare, childcare before and after school, summer camps and activities for young children had the highest percentages **(38%-57%).** This illustrates the need for programs to offer longer hours for the entire year. Cost was the number one reason that childcare does not work for families with 47% citing this as the reason. This supports the **57%** that expressed they cannot afford it. As far as non-traditional hours, 1/3 of the respondents indicated they needed them, while **76%** noted needing daytime (7:00am-5:00pm) care.

While working on collecting data for the LNA, we planned to host a community listening session for families. Unfortunately, this did not take place due to no registration. We will continue to reach out and hope for better results.

The use of 211 was noticeably low if used at all by families in the RECC communities.

**(Please see attachment for family survey results.)**

Table 4. Availability - Child care providers by setting

| Data descriptor | Source | Data value | Notes |
|---|---|---|---|
| Child care access score | OEC-provided | Griswold - .1119, Ledyard .339, Montville - .209, Norwich - .139, Voluntown - .145 | No data was available for Lisbon and Preston |
| Child care capacity – United Way | OEC-provided | Griswold – 180, Ledyard – 42, Lisbon – 37, Montville – 264, Norwich – 675, Preston – 197, Voluntown - 21 | |
| Child care enrollment – United Way | OEC-provided | Griswold – 137, Ledyard – 333, Lisbon – 29, Montville – 206, Norwich – 528, Preston – 92. Voluntown - 15 | |
| Child care openings – United Way | OEC-provided | Griswold – 43, Ledyard – 88, Lisbon – 8, Montville – 58, Norwich – 147, Preston – 105, Voluntown - 6 | |
| Number of licensed child care centers | OEC-provided | 23 | This represents all seven communities |
| Number of licensed group child care homes | OEC-provided | 0 | |
| Number of licensed family child care homes | OEC-provided | 22 | This represents all seven communities |
| Number of child care centers (exempt), e.g., school-based | OEC-provided | 6 | This represents all seven communities |

| | | | |
|---|---|---|---|
| Any other child care providers | Consider collecting | | |
| Number of CHEFA-funded providers | Consider collecting | | |
| Number of programs building or renovating child care facilities (e.g., through Local Initiatives Support Corporation (LISC) funding, Community Investment Fund (CIF) support, WBDC funding for expansion, municipal support) | Consider collecting | | |
| Data on prior ECE history for children entering kindergarten | Consider collecting | | |
| Capacity of local ECE settings to meet the needs of children with disabilities | Consider collecting | | |
| Capacity of local ECE settings to meet the needs of dual language learners | Consider collecting | | |
| Distance / time local families travel to access child care | Consider collecting | | |
| Parent satisfaction in searching for child care | Consider collecting | | |

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| Relevant findings from surveys, focus groups, and any other local data collection | |

**Describe and interpret the data:**

Use the below prompts to guide your thinking. These are not all required questions; you should select the questions most helpful for capturing your community's context.

- *What does this tell you about the **availability** of early care and education in your community? What themes, trends, and gaps can you identify about…*
    - *Different types of settings (centers, FCC, school-based, etc.)?*
    - *Hours provided?*
    - *Age groups served?*
    - *Priority populations served?*
- *Do the capacity, enrollment, and openings data reflect your understanding of child care availability in the community?*
- *Does access to early care and education differ based on geography/location within the community? Is transportation a barrier for families to access care? Do families prefer providers who speak languages other than English?*
- *Please describe any plans in your community for the creation of new child care classrooms or sites. (e.g., X number of new spaces FY27, Y number of spaces FY28)*
- *Please describe any innovative practices making care more accessible for families in your communities.*
- *How has the change in the birthday requirement and local public school district option to offer the waiver affected enrollment and utilization?*
- *Please describe the process of collaboration between private providers and the local public school district for kindergarten transition. What quantitative and/or qualitative data do you learn from this collaboration?*

- *How are services delivered to children with disabilities, including those enrolled in community-based programs (e.g., LEA provides push-in services, itinerant services, or transportation to another location)? How does your community/district define itinerant services? What themes and gaps can you identify?*
- *What are themes in families' experiences searching for care that meets their needs and wants?*

As of spring 2026, the RECC communities have about 17 community-based ECE programs that offer full day/full year care. Of those 17, eight are funded through Early Start and nine are private pay. The locations are in Griswold, Ledyard, Montville, Norwich and Preston and Most of these centers offer first shift, Monday-Friday hours. In Lisbon and Voluntown, there are only programs through the school system and offer academic year programming.
The community-based programs have been affected by the change in the kindergarten entrance age. With preschool children staying longer, the ability to move toddlers to those classrooms when they turn 3-years-old has decreased. One program stated they had to submit waivers to the OEC to keep 3-year-old children in toddler rooms.
The Untied Way data regarding the number of programs and slot capacity and openings does not seem quite accurate. The RECC plans to take time to contact the providers and centers to have a clearer understanding of what is actually available to families.
For most, if not all the community-based programs, there is no formal collaboration to transition children into kindergarten at this time. The only system in place is for preschool children with IEPs.

While working on the LNA, we invited program administrators and family childcare providers to participate in focused listening sessions to hear their successes, challenges and concerns. Unfortunately, these did not take place due to no registration.
A few of the Family providers did complete a questionnaire. Here are some of their responses:

- What makes you feel good about providing childcare? "It makes me feel good to help a family in need." "I love helping children grow and develop."
- How do families hear about you? All who responded said the same thing – word of mouth.
- Has your program had difficulty maintaining full enrollment? All but one replied "No."
- What contributes to your tuition? One stated they receive some Care4Kids funding. Everyone else stated that families pay full rate.

Table 5. Affordability – Program and cost details

| Data descriptor | Source | Data value | Notes |
|---|---|---|---|
| Number of Head Start Preschool funded centers | OEC-provided | 1 | Norwich |
| Number of Early Head Start funded centers | OEC-provided | Montville – 1, Norwich – 1 | |
| Number of Early Head Start funded family child care homes | OEC-provided | 0 | |
| Federal Head Start Preschool funded slots | OEC-provided | 2 | |
| Federal Early Head Start funded slots | OEC-provided | | |
| Care4Kids waitlist, children *(incl. each age group)* | OEC-provided | 43 (Infant/Toddler) 21 (Preschool) | Waitlists were noted in Griswold, Montville and Norwich |
| Care4Kids waitlist, families *(incl. each age group)* | OEC-provided | | |

| | | | |
|---|---|---|---|
| Care4Kids enrollment – licensed centers *(incl. each age group)* | OEC-provided | 626 | This figure represents values for Griswold, Ledyard, Montville, Norwich and Preston |
| Care4Kids enrollment – licensed group homes *(incl. each age group)* | OEC-provided | 0 | |
| Care4Kids enrollment – licensed family child care *(incl. each age group)* | OEC-provided | | |
| Care4Kids enrollment – licensed youth camps *(incl. each age group)* | OEC-provided | | |
| Care4Kids enrollment – total *(incl. each age group)* | OEC-provided | | |
| Care 4 Kids FFN (family, friend, and neighbor) providers | OEC-provided | | |
| Early Start CT infant/toddler state-funded spaces *(incl. each space type, e.g., Full-Time, Half-Time)* | OEC-provided | 46 full time | Griswold 10<br>Norwich 36 |
| Early Start CT infant/toddler spaces utilized *(incl. each space type, e.g., Full-Time, Half-Time)* | OEC-provided | 45 full time | |
| Early Start CT preschool state-funded spaces *(incl.* | OEC-provided | | Griswold quarter time 45 /31 full year |

| | | | |
|---|---|---|---|
| *each space type, e.g., Full-Time, Half-Time)* | | | Ledyard 36 half year<br>Lisbon 36 quarter time<br>Voluntown 29 half time<br>Norwich 154 quarter time 62 full year 87 half year |
| Early Start CT preschool spaces utilized *(incl. each space type, e.g., Full-Time, Half-Time)* | OEC-provided | Griswold quarter time 45 /31 full year<br>Ledyard 36 half year<br>Lisbon 20 quarter time<br>Voluntown 28 half time<br>Norwich 47 full<br>70 half time time<br>107 quarter time | |
| Early Start CT school age state-funded spaces | OEC-provided | Could not find | |
| Early Start CT school age spaces utilized | OEC-provided | Could not find | |
| State Head Start infant/toddler state-funded spaces *(incl. each space type, e.g., Half-Time, Quarter-Time)* | OEC-provided | 80 New London County | |
| State Head Start infant/toddler spaces utilized *(incl. each space type, e.g., Half-Time, Quarter-Time)* | OEC-provided | Could not find | |

| | | | |
|---|---|---|---|
| State Head Start preschool state-funded spaces *(incl. each space type, e.g., Half-Time, Quarter-Time)* | OEC-provided | 333 New London County | |
| State Head Start preschool spaces utilized *(incl. each space type, e.g., Half-Time, Quarter-Time)* | OEC-provided | Could not find | |
| Public school PreK enrollment *(add up enrollment for all schools)* | OEC-provided | 605 Includes the IDCS in Norwich | |
| Other subsidized care models (e.g., Tri-share in New London County) | Consider collecting | Currently, five employers are participating in the program, supporting approximately 90 employees and 91 children while partnering with 46 licensed childcare providers. | Data continues to demonstrate that Tri-Share is increasing access to affordable childcare for working families, with nearly half of participating households falling below the ALICE threshold and more than half of enrolled children requiring infant and toddler care |
| Average full-price tuition for full-day infant toddler care | Consider collecting | | |
| Average full-price tuition for full-day preschool care | Consider collecting | | |

| | | | |
|---|---|---|---|
| Average full-price tuition for school-day preschool care | Consider collecting | | |
| Approximate funding given out via hardship policy or private scholarships | Consider collecting | | |
| % of total families who work less or not at all to care for child(ren) because cost of child care is too high | Consider collecting | | |
| Relevant findings from surveys, focus groups, and any other local data collection | | | |

**Describe and interpret the data:**

Use the below prompts to guide your thinking. These are not all required questions; you should select the questions most helpful for capturing your community's context.

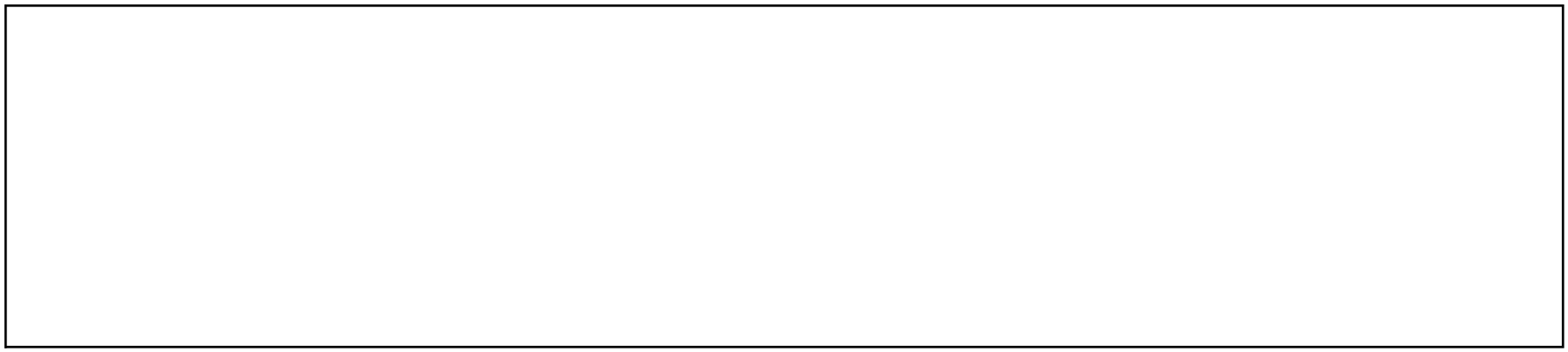
- *What does the data suggest about families' ability to access **affordable** care (Care 4 Kids, Head Start, Early Start CT, etc.)? What themes, trends, and gaps can you identify?*
- *Where are the biggest gaps between full-price tuition (market rate) and what families can afford?*
- *What barriers to affordable care appear most significant?*
- *Are there child care programs with waitlists in your community? What trends do you see around waitlists and waitlist management?*
- *If there are un-utilized subsidized spaces in your community, please share the reasons you have identified and note any common themes across providers.*

- *If there are open private pay spaces in your community, please share the reasons you have identified and note any common themes across providers.*
- *What are providers [or others?] doing to address underutilization?*
- *Please describe any innovative practices making care more affordable for families in your communities (e.g., scholarships, grants).*
- *How do providers use hardship policies in your community?*

In two of the rural towns there are no programs that offer full day/full year care for young children and in the suburban towns, there are some that offer year-round care. This creates a childcare desert especially for families needing infant/toddler care. As stated earlier, the percentage of cost burdened households and the annual salary needed to live in CT, illustrates why many families cannot afford the cost of childcare. While Care4Kids is available, there is oftentimes a lengthy waitlist time which is a burden for both the family and the program. The cost of a private-pay spot for a community-based program is cost prohibitive for many families. This causes them to either reduce hours, find a friend or relative to provide some or all of their childcare or have one parent leave the workforce.

Providers face the challenge of hiring and retaining qualified staff due to the demands of the profession, low pay and minimal benefits. Community-based programs cannot compete with the salaries offered by the public schools and other sectors.
There is often a high turnover rate of staff, which affects the consistency and quality of care for children. When a program is not fully staffed, they struggle to retain full enrollment. This directly impacts their financial stability and the family's need for a slot. Waitlists are another big concern and challenge especially for infant and toddler spots. There can be anywhere from a 4 month-over 12-month wait for families.
There are no easy solutions to this situation that would meet the financial needs of both the family and the program. The amount of money needed to run a successful ECE program far exceeds the amount of money families can afford to spend.

There is the Tri-Share Pilot in the New London County. It is an innovative cost-sharing program that makes childcare more affordable for working families by dividing the cost of care among the employee, employer, and the State of Connecticut. LEARN serves as the regional intermediary, partnering with employers and licensed childcare providers to increase access to quality childcare, support workforce retention, and strengthen the early childhood system.



## Quality of Early Care and Education

**Central question:** How would you describe the quality of early care and education in your community?

**Table 6. Quality of Early Care and Education**

| Data descriptor | Source | Data value | Notes |
|---|---|---|---|
| Number of programs at Member level in Elevate | OEC-provided | 83 | This figure is for all seven RECC communities |
| Number of programs at Member Plus level in Elevate | OEC-provided | 65 | This figure is for all seven RECC communities |
| Number of programs at Member Accredited level in Elevate | OEC-provided | 16 | This figure is for all seven RECC communities |
| Number of programs with NAEYC accreditation | OEC-provided | 13 | This figure is for all seven RECC communities |
| Number of programs with NAFCC accreditation | OEC-provided | 0 | This figure is for all seven RECC communities |
| Number of Teachers in OEC Registry | OEC-provided | 56 | This figure reflects data for Griswold, Ledyard, Norwich and Voluntown |
| Number of Teachers in OEC Registry with BA Degree or higher | OEC-provided | 54 | This figure reflects data for Griswold, Ledyard, Norwich and Voluntown |
| Number of Teachers in OEC Registry with AA Degree | OEC-provided | 13 | This figure reflects data for Griswold, Ledyard, Norwich and Voluntown |
| Number of Teachers in OEC Registry with CDA | OEC-provided | 1 | This figure reflects data for Griswold, Ledyard, Norwich and Voluntown |

| | | | |
|---|---|---|---|
| Number of Teacher Assistants/Aides in OEC Registry | OEC-provided | 78 | This figure reflects data for Griswold, Ledyard, Norwich and Voluntown |
| Number of Teacher Assistants/Aides in OEC Registry with BA Degree or higher | OEC-provided | 26 | This figure reflects data for Griswold, Ledyard, Norwich and Voluntown |
| Number of Teacher Assistants/Aides in OEC Registry with AA Degree | OEC-provided | 13 | This figure reflects data for Griswold, Ledyard, Norwich and Voluntown |
| Number of Teacher Assistants/Aides in OEC Registry with CDA | OEC-provided | 2 | This figure reflects data for Griswold, Ledyard, Norwich and Voluntown |
| Kindergarten readiness (KEI) | OEC-provided | Four out of the seven districts show between 20%-30% in level one for Language, Literacy, Numeracy and Social Emotional domains. | The RECC could consider offering developmentally appropriate professional development opportunities for ECE teaching staff, along with creating materials and supports for families. |
| K-3 assessment data (e.g., universal literacy and math screener results, grade 3 reading proficiency data) | Consider collecting | | |
| Parent satisfaction with the quality of their child care providers | Consider collecting | | |
| Average Teacher wages (across age groups, settings) | Consider collecting | | |

| | | | |
|---|---|---|---|
| Average Teacher Assistant/Aide wages (across age groups, settings) | Consider collecting | | |
| Teacher retention / turnover data | Consider collecting | | |
| Availability of local ECE credentialing programs and other professional development offerings | Consider collecting | | |
| Other quality indicators (please describe) | Consider collecting | | |
| Relevant findings from surveys, focus groups, and any other local data collection | | | |

**Describe and interpret the data:**

Use the below prompts to guide your thinking. These are not all required questions; you should select the questions most helpful for capturing your community's context.

- *What are our community's current strengths in quality?*
- *What are the most significant gaps? Do these gaps disproportionately affect certain neighborhoods or populations?"*
- *How have Quality Enhancement funds and other sources of funding or resources focused on quality improvement (e.g., scholarship funding, professional development offerings) been utilized in your community?*
- *Does the ECE workforce in your community reflect the languages and cultures of the children and families served?*

Within the RECC region, there are about 13 licensed center-based programs with one site and programs with two or more sites. Norwich Public Schools has the largest number at 5 locations within the district. The total number of program sites is about 22. Of this total, almost half are NAEYC accredited with two more in AQIS for their initial certification. These numbers show a strength in the quality of care offered to families.
The gaps and challenges seem to be with programs being able to hire and retain qualified staff for a variety of reasons such as low compensation for community-based programs and decreased number of people entering the ECE field as a profession. While QE funds help to pay for professional development, oftentimes, directors state that it is challenging to release staff during the day due to having no substitutes available for classroom coverage.

### Additional Supports for Children and Families

**Central question:** What additional supports are needed and exist for children and families in our community, including for children and families with specific needs?

**Notes on OEC-provided data:** When completing your LNA, keep in mind that not all programs participate in Sparkler. Some programs may use paper-based ASQ or ASQ: SE forms, or other developmental screening tools. You may want to talk with providers to learn more about which tools they use and how screenings are conducted, to gain a fuller understanding of local practices when summarizing findings or identifying areas of need.

**Table 7. Additional Supports for Children and Families**

| Data descriptor | Source | Data value | Notes |
|---|---|---|---|

| | | | |
|---|---|---|---|
| Number of children served through home visiting | OEC-provided | | |
| Children age 1-5 who received a developmental screening in the past year | OEC-provided (where available) | | |
| Parents saying it was "easy" or "very easy" to access services for their children, among those whose children had received developmental support services (e.g., Birth to Three, home visiting, private therapy) | OEC-provided (where available) | | |
| Parents saying the services/supports had met their children's needs, among those whose children had received developmental support services | OEC-provided (where available) | | |
| Total number of ASQs completed using Sparkler | OEC-provided | 540 | This figure represents Griswold, Ledyard, Montville, Norwich, Preston and Voluntown |
| Total parent accounts in Sparkler (with children who haven't aged out) | OEC-provided | 620 | This figure represents Ledyard, Montville, Norwich, Preston and Voluntown |
| Number of active Sparkler accounts | OEC-provided | 322 | This figure represents Griswold, Ledyard, Montville, Norwich, Preston and Voluntown |

| | | | |
|---|---|---|---|
| Level of demand for home visiting, compared to number of children currently served | Consider collecting | | |
| Other federal, state, or local resources | Consider collecting | | |
| Relevant findings from surveys, focus groups, and any other local data collection | | | |

**Describe and interpret the data:**

*What do you see? What do you notice? What does this tell you about the additional supports available in our community? What is missing? What trends and gaps can you identify?*

From the data provided, about 50% of the Sparkler accounts are active. It appears that parents tend to create an account and then don't use consistently. While 211 is a resource that is available, little to no one utilizes the service. In Norwich alone, only 26 people called. When people are asked about 211, the comments are not always positive about their experience.

It is unclear if the data provided included online access to the website.

## LGP Structure

**Central question:** How effective is our current LGP structure?

**Table 8. LGP Structure**

| Guiding prompt | Response |
|---|---|
| What is the role of our Liaison/s? If there are multiple Liaisons, how do they divide up responsibilities? | The role of the liaison is to support the work of the LGP by creating strategic working plans with the members to help execute the identified goals and responsibilities. |
| What is the role of our Parent Ambassador/s? | The role of the Parent Ambassadors is to focus on connecting with families of young children in the community(s) in which they work and/or live. When out at community functions talking with attendees, people usually respond better to someone they know or are familiar with. |
| Who is part of our Community Table and how often does it meet? Are there any small-group or committee structures? | The RECC meets monthly and typically at least one member from each community is in attendance. The agenda includes OEC LGP topics, along with opportunities for funded programs and community partners to share updates and information. Currently, there are no small groups or committee work groups. |
| How do we make decisions as an LGP? | Decisions are typically made by the members who are in attendance at that specific meeting. |
| How do we communicate with providers? Which providers do we communicate with regularly (e.g., centers, FCC, public schools), and who are we missing? | In general, much of the communication with centers and providers is done via email. There are two CTAEYC staffed family hub members who serve on the RECC, so they also assist with connecting with FCCs. The state-funded programs are the ones who receive regular communication. |
| **Describe and interpret the data:**<br>*What do you see? What do you notice? What trends and gaps can you identify? What parts of the structure are working well today? What changes would most improve our effectiveness over the next 6–12 months?* | |

There is a lot to consider and think about moving forward that would improve and strengthen the RECC as an LGP. A crucial piece is creating and continuing to build meaningful relationships with the providers and community partners. This should yield more input and participation in the RECC and to garner better data to guide the work to better support families and children. Having the Parent Ambassadors host some pop-up events and activities that attract families would be an option, along with making more personal introductions to local providers. This could be a small group listening session in the evenings or joining a meeting they already attend.

## Strengths, Gaps, and Focus Areas

Based on all the data you collected and your initial interpretations of the data above, discuss the strengths, gaps, and focus areas for young children and the families your community, utilizing the below prompts as a guide.

Overall Discussion

- What do you know about our community? What do we not know? We know that really no matter what a family's annual income is, many struggle to make ends meet. This can put the family under stress with little or no supports readily available especially in the smaller communities. We do not know what supports families do access, such as help from other family members with childcare and depending on food pantries. We also don't know if families are unaware of resources and supports or if they choose not to use them. As for employment, we do not know how many adults are able to work from home or remotely, which may reduce some needs and expenses.
- What trends have emerged? There is a complexity to what is needed, what is offered and how to effectively help and support children and families. The challenges are multifaceted and connected.
- What are your existing strengths? What assets can we build on? There are agencies, resources and services that are available for families and children. We can build on these assets to help identify and create a coordinated system that could be more effective and reach more families.

- What are the gaps in services for young children and families? Are there barriers to families receiving the services they need? With families often needing or wanting to utilize childcare outside of their community, if their child needs any educational support services, they have no opportunity to receive the services.
- What partnerships (with school districts, public health, housing/transportation agencies, employers, higher-education institutions, community organizations) could help address the gaps identified? It is a goal to create and strengthen partnerships with all of the agencies listed above to determine how to address the identified gaps.
- What policy or system changes might you recommend at the local or state level? The supports that are in place for low-income families is effective, there is a growing number of families who earn too much annual income to be eligible, but are truly struggling. Addressing this issue should be a priority!

<u>Early Care and Education Discussion</u>

- Where are the largest mismatches between demand and supply? Which children and families are the most underserved by high-quality, affordable early care and education programs? Consider age groups (infants, toddlers, preschoolers), program settings (centers, family child care, inclusive programs), geographic areas, hours of care, and priority populations. Families who are struggling to make ends meet and do not qualify for assistance, or don't get a subsidized slot, oftentimes need to change their work hours, etc. to survive. Community-based programs need to charge a high rate of tuition to meet their operating budget needs. The gap between what families can comfortably afford and what programs need to sustain their business is HUGE.
- If additional resources for early care and education became available from the state or Federal government, where would your community invest first to address the gaps identified above? How do you see different state and Federal funding sources working together to address your community's needs? Provide 2–3 priority recommendations and explicitly tie them to data in the sections above. The Tri-Share pilot supports about 90 families in New London County. It would be worth considering expanding this model to provide for more families who cannot afford to pay full tuition for a childcare slot. Many families must provide their child's meals and snacks, especially in community-based programs who are not funded by the state. Is there a program that could help

families with this? Could unfunded programs be eligible for a food program so they could provide snacks and a meal?

- Specifically, if additional Early Start CT funding became available in FY28 (for services beginning in July 2027), how would you want to use that funding to address the most pressing needs in your community?* Food insecurity is another big concern in the communities. Adding funding for programs to put toward offering nutritious meals and snacks might be something to consider.

**Please note that the FY28 Early Start procurement will be a competitive procurement, and individual providers will need to submit applications for Early Start spaces. These provider applications should be responsive to the needs identified through this LNA process, but LNA findings will not determine or dictate the number of Early Start spaces awarded to individual providers or across towns.*

Focus Areas

Following the overall data analysis above, identify your LGP's top focus areas for increasing the well-being of young children and their families in your community. These focus areas will form the foundation of your Community Plan.

**Table 9. Focus Areas**

| | Description | Rationale (Why are you choosing this Focus Area?) |
|---|---|---|
| Focus Area 1: | The RECC LGP was formed during the summer of 2025, which means that most of FY26 was dedicated to establishing the Table. The Parent Ambassadors were not hired until March of 2026, so their involvement has just begun, as well. These factors, along with the compressed timeline to conduct the LNA has certainly impacted our work. For FY27, it will be important to strengthen the internal relationships and invite key community partners to join the table. This will support the | If the RECC is not a strong, well-functioning group that represents each of the member communities, we are not able to effectively and successfully perform the work that is needed to support young children and families. |

| | | |
|---|---|---|
| | RECC to become more effective and improve the ability to become more present and active in all the communities. | |
| Focus Area 2: | Supporting cost burdened households through providing workshops and quick short messages about cost-saving ideas and opportunities. Host pop-up events to distribute basic needs items and literature about resources and services. Create an awareness campaign about childcare options and family networking. | This is a significant and multi-faceted issue and concern for many families in the RECC area. In the survey we conducted, many identified they needed affordable childcare, it is a challenge to find care that meets their work hours, they struggle with food insecurities and overall, the high cost of living in CT. |
| Focus Area 3: | Supporting language, literacy, numeracy and social/emotional developmental domains to better support children entering kindergarten.<br>We could offer educational materials and supports to families, along with providing professional development coaching and opportunities for teaching staff. | For six out of the seven communities, the KEI data shows that many of the children entering Kindergarten are in the level 1 and level 2 categories.<br>For language development the range is 60-80%, for literacy it is 50-95%, for numeracy it is 50-87% and for social/emotional development the range is 55-85%. |
| Other (additional Focus Areas as relevant): | | |

LGP Structure Needs

In order to meet the needs of your community and carry out the Community Action Plan, it is important that your LGP structure is responsive to the community and effective in its implementation. Reflect on the follow prompts and identify any necessary action steps and owners of those action steps.

**Table 10. LGP Structure Needs**

| Question | Response |
|---|---|
| Does our LGP have the right people at our Community Table? If not, who is missing? | The RECC is a new group consisting of seven towns. Although we have been meeting monthly for FY26, there are still community representatives who are not present. |
| Does the structure of the LGP support providers and families in our community? | The funded providers attend the monthly meetings and communicate with the liaison, so the families connected and enrolled in those programs should feel supported. The goal is to create strategies to better reach families who may not be involved with any type of early childhood program. |
| Does our LGP have ways to communicate with all providers? With diverse groups of families? | This is another area that needs some attention and effort. |
| Is our LGP leveraging its current and potential resources as effectively as possible? | The LGP needs to create a more coordinated plan to partner and work with more community agencies in all of the communities. |
| What additional supports does our LGP need (e.g., from Shine/OEC, local partners)? | Since we are still in the process of identifying and solidifying the RECC, it is hard to know exactly what supports are currently needed. We will certainly reach out for assistance as needed. |
| Action steps and owners | Most of the action items will be addressed by the liaison during the summer months.<br>● Identify which community partners need to be invited to join the RECC. Ask current members to reach out. |

| | |
|---|---|
| | ● Meet with the Parent Ambassadors to coordinate and organize their work for FY27 with the focus on meeting with families.<br>● Connect with center-based and family providers to introduce them to the RECC.<br>● Get input from current members on how to change the meeting format to encourage better participation.<br>● Create a committee to review Quality Enhancement applications |

**Appendices (Optional)**

RECC member town graphics

RECC Family Survey Responses