

Minnesota
Collaborative
Outcome-Focused Reporting

Resource #1:
Accessing Available Data Related to
Core Indicators

Prepared by:
Pat Seppanen, Evaluation Consultant
Center for Applied Research and Educational Improvement
College of Education and Human Development
University of Minnesota
Phone: 612/625-6364
E-mail: seppa006@tc.umn.edu

Draft: 10/21/98

Introduction

Background

In March 1998, Minnesota family service collaboratives came to consensus on a core set of outcomes and performance indicators. By consensus, we mean that 75% or more of the collaboratives indicated in a written survey that these indicators were a priority for at least some of their members.

As part of outcome reporting, collaboratives are encouraged to report the status of their community on these outcomes and indicators annually as part of a community progress report. In addition, collaboratives may want to report on these indicators as part of their two-year outcome report (note the original Minnesota legislation for the Family Service and Community-Based Collaboratives stated that . . . within two years of the date on which a collaborative receives an implementation grant, a collaborative shall submit a report to the Children's Cabinet describing the extent to which the collaborative achieved the outcomes developed under Minnesota Statutes section 121.8355).

Family Service Collaborative and Children's Mental Health Collaborative Integrated Reporting

State legislation requires that children's mental health collaboratives perform evaluation of their programs. A document titled *Statewide Evaluation Plan for Collaboratives* (May 1997) outlines (a) a description of 17 statistical outcome indicators that currently comprise the statewide outcome-based evaluation system for children's mental health programs, and (b) the plan for implementing this system. Data related to 10 of the indicators are collected by the Department of Human Services through the Community Mental Health Reporting System (CMHRS) or the SEAGR system. Data for the other seven indicators are accessed from information collected by various state and local agencies concerned with children, youth, and families or via a client outcomes database established by each CMH collaborative.

Collaboratives (both Family Services and Children's Mental Health) have the option of preparing one combined report as long as the statutory reporting requirements of each initiative are met.

What is Included Here

This monograph includes abstracts explaining how to access *available data* for the following core indicators.

1. Rate of teenage pregnancy
2. Number and rate of cases of substantiated child maltreatment
3. Number and rate of children placed in out-of-home settings
4. Number and rate of children who receive home-based or community-based mental health services **
5. Number and rate of out-of-home episodes that involve multiple placements (Proxy indicator for: # of children who have experienced multiple placements prior to family reunification/permanent placement) **
6. Rate of children living in households below the poverty line (multiple "proxy indicators" presented)
7. Rate of infant mortality
8. Rate of preschool children between ages 3 and 4 years who are identified as having new potential immunization problems (Proxy indicator for: Percent of children who are immunized on an appropriate schedule)
9. Rate of preschool children between ages 3 and 4 years who are identified as having a potential problem related to lack of health care coverage. (Proxy indicator for: Percent of children and families covered by health insurance)

10. Rate of preschool children between the ages of three and four who are identified as having new potential vision or hearing problem. (Proxy indicator for: Percent of children with previously undetected vision and/or hearing problems at time of entry into kindergarten)
11. Percent of infants born with health or environmental risks such as late or no prenatal care, low maternal weight gain, smoking during pregnancy, three or more older siblings, or closely spaced births
12. Percent of women who receive at least adequate or better prenatal care. (Proxy indicator for: Percent of women who receive appropriate prenatal care *and* anticipatory guidance, diagnosis, and treatment services)
13. Rate of school attendance**
14. Rate of students dropping out of school**
15. Percent of 3rd graders scoring “proficient” or better on statewide mathematics tests . . . on statewide reading tests
16. Percent of 5th graders scoring “proficient” or better on statewide mathematics tests . . . on statewide reading tests . . . on statewide writing tests
17. Percent of 8th graders receiving a “passing” score on statewide mathematics tests . . . on statewide reading tests . . . on statewide writing tests
18. Rate of high school graduation
19. Rate of school disciplinary incidents

** These indicators overlap with the indicators specified in the *Statewide Evaluation Plan for Collaboratives*, an operational plan for reporting outcome based information on children’s mental health services to the Department of Human Services (dated May 1997); this plan includes 13 additional indicators that are specific to children who are receiving mental health services.

Summary of Website Addresses for Accessing Available Data

- *Children's Report Card*: http://www.lmic.state.mn.us/dnet/maplib/r_card.htm
- *Minnesota Health Profiles*: <http://www.mnplan.state.mn.us/datanetweb/health.html>
- *Child Maltreatment: A 1996 Annual Report*:
http://www.dhs.state.mn.us/Children/ChildrenIn/96cmrpt/toc_ch.htm
- *Minnesota Department of Children, Families & Learning's Data Center*:
<http://cfl.state.mn.us/Datactr/datactr2.htm>
- *Minnesota Public Schools Early Childhood Screening Factsheets*:
<http://cfl.state.mn.us/ecfi/ecscrnfact.htm>
- *Department of Children, Families and Learning Website*: <http://children.state.mn.us/grad/results.htm>

Core Indicators Not Included Here

Data are not currently collected on a statewide basis for five additional core indicators identified by family service collaboratives. Here, collaboratives will need to identify an instrument, collect, and analyze data for their community in order to report status and progress. Core indicators for which data are *not currently available* (or appropriate “proxy” indicators have not been identified) include:

- Percent of expectant and new parents supported by their families and communities
- Percent of children who receive regular child examinations and anticipatory guidance, diagnosis, maintenance, and treatment services
- Percent of children who receive their primary care and education from adults who are committed and emotionally connected to them
- Percent of families with parenting knowledge and skills to anticipate and meet the developmental needs of their children
- Percent of families who participate together in physically, emotionally, spiritually, or intellectually stimulating activities

A second evaluation resource document is being developed that will include model instruments, data collection strategies, and analysis plans for these five indicators. At this point, collaboratives have the option of locally collecting and reporting data related to these performance indicators.

An Important Reminder

The core indicators are intended as a starting point for collaboratives as they prepare their two-year outcome reports or annual community progress reports. It is vitally important that information reported on a community-wide basis be relevant and meaningful to the community and the work of the collaborative. We anticipate, therefore, that individual family service collaboratives may decide to report on a subset of core indicators and/or report on additional performance indicators that reflect their work. Sources for additional indicator data include:

- Findings from local evaluations of initiatives specific to your collaborative
- Selected data reported to state and federal agencies for particular initiatives (e.g., Children’s Mental Health, Head Start, Early Childhood Family Education, DCFL’s dangerous weapons report completed by school districts, etc.)
- Statewide survey data (e.g., the Minnesota Student Survey administered through DCFL)
- Countywide data (e.g., statistics compiled by County Juvenile Court Services)
- County profiles of available demographic, social, and vital statistics (e.g., county profiles assembled by the County Department of Health or the Minnesota Extension Service)
- Special surveys (e.g., Search Institute)

1. Indicator: Rate of teenage pregnancy

Definition:

Number of births plus abortions plus fetal deaths to women of defined age groups (15 to 17, 18 to 19) per 1,000 females in the population comprising the same specific age group.

Data collection:

Minnesota hospitals are the principal sources for collection of data associated with certificates of birth. Reports of fetal deaths and induced abortions are completed and submitted by hospitals, clinics, doctors, etc. Birth certificates, fetal death and abortion reports are filed with the Vital Records section of the Minnesota Department of Health. Most hospitals (95%) now file birth certificates directly with the state electronically. All county Departments of health receive hard copies of birth certificates. Abortion and fetal death reports, however, are not legal certificates and do not need to be filed for eternity; thus, few counties receive copies of these reports. Any data having to do with this type of report would only reside with the MN Department of Health.

Lag time:

Data for the previous calendar year are usually available 18 to 24 months after that year. For example, 1997 data will be available in December 1998.

Accessing data:

Data are available by county in the reports listed below. The Center for Health Statistics at the Minnesota Department of Health will run a special report upon request if the data are not readily available in any of its published reports. The cost is usually \$50 minimum, but may be waived in special circumstances (i.e., medical research). Contact Angela Sechler at the Center for Health Statistics at 651/297-1232.

Contact at the county or school district level:

Contact with the Center for Health Statistics is the best option since birth certificates, abortion and fetal death data are kept electronically in aggregate form by the Minnesota Department of Health.

Data disaggregation:

Data available by county may be broken down by demographic characteristics of the mother or child (including race, ethnicity, age group, marital status, educational level, method of delivery, weeks of gestation, prenatal care levels) and usually can be found in one or more of the published reports listed below. Requests that are more technical or research oriented, involving additional analyses beyond the scope of any single publication, can be obtained by requesting a special report.

Data by urban area is extremely limited and usually not available for cities with a population under 2500.

Computation of statistics:

Rate = number of births plus fetal deaths plus abortions to women of defined age groups divided by the female population of specified age group and then multiplied by 1000.

Percentage = same calculation except you multiply by 100.

Comparison:

Compare the rate or percentage to current statistics at a state or national level.

Compare to previous reporting periods to look for trends. For trend analysis, be sure to compare at least 3-5 years of data to ensure reliability.

Reports in which data are published:

Minnesota Health Statistics

- Indicator defined as above
- Published annually by the Minnesota Department of Health – Center for Health Statistics
- Data lag of approximately two years
- Data are reported for the most recent calendar year available and for intervals of 5, 10 and 15 years ago.
- Data are reported by state only
- Available in major public and university libraries. Only the most recent copies (usually the last two years) are available through the Minnesota State Bookstore for \$10.95 (651/297-3000)

Children's Services Report Card

- Indicator defined differently than above: Number and percentage of newborns whose mothers are under 18 years of age
- Published every two years by Minnesota Planning
- Data lag of two years
- Data are reported by calendar year (1994, 1996, etc.)
- Data are reported by county and state as a whole
- Print copy available from MN Planning at 651/296-3985
- Data for 1994 and 1996 available by county on the World Wide Web (hit "county report cards"):
http://www.lmic.state.mn.us/dnet/maplib/r_card.htm
- Contact Richard Fong at MN Planning for assistance in accessing data from the web (651/296-6866)

Minnesota Health Profiles

- Indicator defined as above
- Published every two years by the MN Department of Health – Center for Health Statistics
- Data lag of one year
- Data reported as a three year average (current report covers 1993-95; upcoming report due December 1998 will include 1995-97)
- Data are reported by county with statewide data, MN Health Improvement Goals and U.S. Health Goals alongside for comparison
- Available for \$7; send a check to MN Department of Health – Center for Health Statistics, P.O. Box 9441, 717 Delaware St., SE, Minneapolis, MN 55440-9441 (612/676-5370)
- Available on the World Wide Web (for 1995 unless stated otherwise):
<http://www.mnplan.state.mn.us/datanetweb/health.html>

Hints:

- In addition to data regarding teen pregnancy rates, Minnesota Health Profiles Online provides information on more than 200 health indicators. You can get county level data on demographic and vital statistics, morbidity and health care utilization, chemical health indicators, environmental health, and maternal and child health.
- For now, you can get *Minnesota Health Statistics* in a print version only. The Department of Health does plan to publish it on the Web by December 1998.
- In addition to data regarding teen pregnancy, Minnesota Planning provides information on 20 other indicators regarding children as part of the *Children's Service's Report Card*.
- Since indicator definitions may vary and statistics are computed differently, collaboratives should select one data source and use it consistently.

2. Indicator: Number and rate of cases of substantiated child maltreatment

Definition:

Number and rate per 1,000 children physically or sexually abused, neglected, or subjected to mental injury. Only verified reports of abuse are included in this data. Rate is based on a juvenile population estimate.

Data collection:

When a county receives information regarding possible child maltreatment, it must decide whether or not an assessment should be done to determine if maltreatment occurred. If an assessment is performed, local county social service agencies must submit a report to the Minnesota Department of Human Services. These reports include information about the source of the report, the nature of the alleged maltreatment, descriptive information about the children involved in the report and the alleged perpetrators, and a decision as to whether or not the maltreatment was determined. After review and validation, the reports are entered into an automated system (Minnesota Department of Human Services, 1996. *Child Maltreatment: A 1995 Minnesota Report*, p. 1). Local county social service agencies submit reports quarterly to the Minnesota Department of Human Services; these are aggregated annually at the state level.

Lag time:

Data for the previous calendar year are usually available 9 months after that year. For example, 1997 data would be available about September 1998.

Accessing data:

Data are available by county in the reports listed below. In addition, data are available through the Community Service Division of the Children's Initiative of the Minnesota Department of Human Services. Contact Judy Kuck at 651/296-5416.

Contact at the county or school district level:

At the county-level, contact the local county social service agency. The way child protection offices are structured varies by county -- larger counties have staff people devoted exclusively to child protection while in smaller counties the person responsible for child protection and related data collection may have other duties as well.

Data disaggregation:

Data available from the Minnesota Department of Human Services may be broken down along such dimensions as type and severity of abuse, characteristics of victims (age, gender, race/ethnicity, disability, relationship to perpetrator), characteristics of perpetrators (age, gender, race/ethnicity, disability, relationship to victim), and reporting sources. Trend data for these sub-categories go back to 1993.

Computation of statistics:

Rate per 1000 in population = (Total number cases of children physically or sexually abused, neglected, or subjected to mental injury multiplied by 1000) divided by estimated juvenile population in the same geographic area.

Comparison:

Compare the rate to previous years.

Reports in which data are published:*Child Maltreatment: A 1996 Annual Report*

- Indicator defined as above
- Published annually by the Community Service Division of the Department of Human Services
- Data lag of about 12 months, may be up to 18 months for Web version
- Data are reported for most recent calendar year available (would need to look in previous reports or have a special report run for historic trend data)
- Data are reported by county and statewide
- Print copy available through Judy Kuck, Department of Human Services (651/296-5416)
- 1996 reports currently available on World Wide Web:
http://www.dhs.state.mn.us/Children/ChildrenIn/96cmrpt/toc_ch.htm

Children's Report Card

- Indicator defined as above
- Published every two years by Minnesota Planning
- Data lag of 2 years
- Data are reported every other calendar year (1994, 1996, etc.)
- Data are reported by county and statewide
- Print copy available from MN Planning at 651/296-3985
- http://www.lmic.state.mn.us/dnet/maplib/r_card.htm
- **Contact Richard Fong at MN Planning for assistance in accessing data from the web (651/296-6866)**

Hints:

- A few counties may be have data at the level of municipalities, but this is not common.
- FSCs may be able to obtain data more quickly by contacting the appropriate person at your county social service agency. This source mainly depends on the county's information systems and how much the data are used by the county.
- Rate per 1000 in population may be a less distorted statistic to report from year to year than a simple percentage of the total juvenile population.

3. Indicator: Number and rate of children placed in out-of-home settings

Definition:

Out of home placement refers to a continuum of care for children who are removed from their parental homes, from foster care homes to institutional care facilities.

Data collection:

The 87 county welfare authorities in Minnesota submit data to the DHS semi-annually using the Substitute Care and Adoption System. These data are organized and edited at the state level, and published annually showing both state and county level data.

Lag time:

Data for the previous calendar year are usually available 6 months after that year. For example, 1997 data would be available about July 1998.

Accessing data:

In addition to the reports listed below, the Community Services Division at the Minnesota Department of Human Services will run a special report upon request. Contact Leesa Betzold at 651/296-2831.

Contact at the county or school district level:

Varies by county; generally the county social services director.

Data disaggregation:

Data requested from the Community Services Division at the Minnesota Department of Human Services can be broken down by the demographic characteristics of the children (such as age, gender, race, and disability or special needs) and demographic characteristics of the foster parents. Out-of-home placement information is not available at the city level.

Computation of statistics:

Rate per 1000 children = (total number of children in care multiplied by 1000) divided by estimated juvenile population in the same geographic area.

Comparison:

Compare the number and rate to the previous year.

Reports in which data are published:

Children in Out-Of-Home Care: A 1996 Minnesota Report

- Indicator defined as above
- Published annually by the Minnesota Department of Human Services
- Data lag of 6 months
- Data reported for the most recent calendar year available (would need to look in previous reports for historic trend data)
- Data are reported by county and statewide
- Available through the Community Services Division at the Minnesota Department of Human Services by calling Leesa Betzold at 651/296-2831

Children's Services Report Card

- Indicator defined as above
- Published every two years by Minnesota Planning
- Data lag of 2 years
- Data are reported for every other calendar year (1994, 1996, etc.)
- Data are reported by county and statewide
- Print copy available from MN Planning at 651/296-3985
- http://www.lmic.state.mn.us/dnet/maplib/r_card.htm
- Contact Richard Fong at MN Planning for assistance in accessing data from the web (651/296-6866)

Hints:

- A child entering an out-of-home placement is counted once, regardless of how often he/she entered or left care during the 12-month reporting period.
- Data at the county level may be available earlier through the county social services director; this is more likely in the metro and larger counties.
- For now, you can get *Children in Out-Of-Home Care: A [1996] Minnesota Report* in hard copy only.

4. Indicator: Number and rate of children who receive home-based or community-based mental health services

Definition:

Each child under the age of 18 who is found with at least one record and at least 5 hours (or contacts) for home-based or community-based services is counted. These services include: FCSS, Home-Based Treatment, Therapeutic Support for Foster Care, Outpatient Treatment, and Day Treatment. The child must have received these services during the time period (typically a six-month period) of the report, and subsequent to enrollment of the child in the collaborative system of care.

Data collection:

The Department of Human Services (DHS) collects client-specific information about receipt of home-based or community-based services through the Community Mental Health Reporting System (CMHRS). A designated contact person at the county-level handles reporting of services that are both provided or contracted through the county every six months (Jan-June and July-December). Data are submitted approximately 45 days after the end of the reporting period. County data are submitted to DHS either electronically or in a hard copy report. Data reported for the two six month reporting periods in a year may be combined into an annual report.

Lag time:

Data are available from DHS approximately four months after receipt. For example, annual data for 1997 (Jan-December) would be available about April 1998. Data accessed directly at the county-level may be available sooner.

Accessing data:

Data are available by county in the report listed below. Contact Technical Support for CMHRS at DHS if you have questions (651/297-2734). Phone number will change in December to: 651/582-1898.

Contact at the county level:

Each county Social Services Director is mailed a copy of the report listed below. The contact person for CMHRS data at the county-level should be able to provide annual data for his/her particular county as well.

Data disaggregation:

Data may be disaggregated by age, gender, race, and to a limited degree, disability status. At this time, data by urban area are not available (only county-level).

Computation of statistics:

Rate (or count) per 10,000 population = (number of children served in home-based or community-based mental health services multiplied by 10,000) and then divided by the total number of children younger than 18 in the same geographic area. Population data are available from the State Demographer's office (651/296-4100).

Rate (or count) per 100 collaborative clients = (number of children served in home-based or community-based mental health services multiplied by 100) and then divided by the total number of children who are collaborative clients in the same geographic area.

Comparison:

Compare the rate to the previous reporting period.

Report in which data are published:*Service Utilization Tables*

- Utilization of home-based or community-based mental health services are reported separately under several BRASS codes in these reports . Collaboratives would need to combine BRASS code data in order to report home-based and community-based together. Collaboratives might report data for each setting separately
- Published annually by DHS
- Data lag of approximately 4 months
- Data are reported for a one year period; a three-year trend report has recently been assembled
- Data are reported by county
- Available from county Social Services Directors or the Department of Human Services CMHRS Technical Assistance unit: 651/297-2734. Phone number will change in December to: 651/582-1898

Issues and hints:

- Each type of service has been assigned a BRASS code; these codes are used to record services provided to clients.
- Data collection for this indicator started in 1997 so historic trend information may not be available (unless someone at the county-level has been tracking this information).
- Reporting rate per 10,000 of the population or rate per 100 clients corrects for distortions associated with reporting a simple percentage (e.g., % of population or % of clients).
- Note that mental health services provided through the public schools are not currently captured in the CMHRS.
- The *Statewide Evaluation Plan for Collaboratives* (May 1997) includes a number of indicators that may serve as companions to this indicator: (i.e., Reduction in the number of days that children spend in inpatient treatment settings. Reduction in the number of children who receive residential treatment. Reduction in the number of days that children spend in residential treatment settings. Increase in the amount of MH expenditures used for home-based or community-based services.). Collaboratives may want to include performance data to these indicators in order to tell “a more complete story.” Data related to these indicators are available via the Department of Human Services CMHRS or SEAGR systems.
- DHS has plans to publish this information on its website in the coming year.

Proxy Indicator: Number and rate of out-of-home episodes that involve multiple placements

NOTE: Data related to the core indicator are not collected at this time: *Number of children who have experienced multiple placements prior to family reunification or permanent placement.* The above indicator represents an available “proxy indicator.”

Definition:

Out of home placement refers to a continuum of care for children who are removed from their parental homes. An *episode* of care is the period of continuous care between the dates a child enters and leaves out-of-home care (at least one day). A child who enters and leaves care more than once in a year is defined as having multiple episodes of care in that year. A *placement* refers to the particular kind of out-of-home living arrangement in which a child was placed. A child may have several placements in a single episode of care. At this time, data regarding the number of placements per episode of care are tracked. (Minnesota Department of Human Services, *Children in Out-Of-Home Care: A 1996 Minnesota Report*).

Data collection:

The 87 county welfare authorities submit data to the DHS semi-annually using the Substitute Care and Adoption System. These data are organized and edited at the state level, and published annually showing both state and county level data.

Lag time:

Data for the previous calendar year are usually available 6 months after that year. For example, the earliest 1997 data would be available is about July 1998.

Accessing data:

Data available by county in the reports listed below. In addition, the Community Services Division at the Minnesota Department of Human Services will run a special report that disaggregates available data upon request. Contact Leesa Betzold at 651/296-2831.

Contact at the county or school district level:

Varies by county; generally the county social services director.

Data disaggregation:

The data can be broken down by the demographic characteristics of the children (such as age, gender, race, and disability or special needs), and demographic characteristics of the foster parents. Out-of-home placement information is not available at the city level. A special report may be run to get information on the number of placements before a permanent situation is found.

Computation of statistics:

The standard information contained in reports is the number of placements and episodes per child.
Rate per 100 episodes = (add the number of episodes involving 2 or more placements and then multiply by 100) then divide by the total number of episodes.

Comparison:

Compare the number and rate to the previous year.

Reports in which data are published:*Children in Out-Of-Home Care: A 1996 Minnesota Report*

- Indicator defined as above
- Published annually by the Minnesota Department of Human Service
- Data lag of about 6 months
- Data are reported for the most recent calendar year available (would need to look in previous reports for historic trend data)
- Data are reported by county and statewide
- Available through the Community Services Division at the Minnesota Department of Human Services by calling Leesa Betzold at 651/296-2831

Issues and helpful hints:

- For now, you can get *Children in Out-Of-Home Care: A [1996] Minnesota Report* in hard copy only.
- Data regarding out-of-home placements available back to 1992 that can be assembled to look at trends.
- In a few counties, errors in reporting of placement dates have been found. These errors make the number of placements per episode for those counties unreliable. Verify any data used with your county social services director for accuracy.
- Data at the county level may be available earlier through the county social services director; this is more likely in the metro and larger counties.
- Rate per 100 episodes may be less distorted statistic to report from year to year than a simple percentage of the total episodes in a particular geographic area.

6a. Indicator: Rate of children living in households below the poverty line

NOTE: Collaboratives will need to identify an appropriate proxy measure related to child or family poverty. The following option is based on free- or reduced-price lunch data available via the public schools and the Department of Children, Families and Learning.

Indicator proxy:

Number and rate of school age children who are income eligible to receive free- and reduced-price lunch.

Definition:

Children qualify for free school meals if their family earns below 130% of Federal Poverty Guidelines
Children qualify for reduced-price school meals if their family earns below 185% of Federal Poverty Guidelines. In addition to qualifying based on household income, students are "categorically eligible" for free school meals if they participate in MFIP, Food Stamps, or the Food Distribution Program on Indian Reservations.

Data collection:

School districts submit data related to participation for the fall reporting period and current overall student enrollment to the Department of Children, Families, and Learning by January of each year. Prior to 1997/98, schools reported total number of students receiving free or reduced-price lunches by grade and school through the MARSS system. Beginning in 1997/98, data are entered through the MARSS system at the student level (rather than totals by grade and school).

Lag time:

Data for the school year (fall count) are usually available before the end of the end of the school year (generally in April).

Accessing data:

In addition to the sources listed below, contact Lois Pirsig, Data Management, at the Department of Children, Families and Learning for questions (651/296-5032).

Contact at the school district level:

Contact the MARSS coordinator at the school district central office.

Data disaggregation:

Data disaggregation is limited. To request any type of new report or analysis, send a written request to Carol Hokenson, Department of Children, Families and Learning, Capitol Square Building, 550 Cedar Street, St. Paul, MN 55101.

Computation of statistics:

Rate per 1000 public school students computed by multiplying total number eligible for free- or reduced-price lunch by 1000 and then dividing by total number enrolled in the public school district as of a certain date.

Percent qualifying for free- or reduced-price lunch computed by dividing the number qualifying by the total number enrolled as of a certain date and then multiplying by 100.

Comparison:

Compare the rate and percentage to the previous year.

Reports in which data are published:

Minnesota Department of Children, Families & Learning's Data Center

- Indicator defined as above (reports number of children)
- Updated annually by the Minnesota Department of Children, Families & Learning
- Data lag of about 6 months – fall populations are available by spring.
- Data are reported for the most recent calendar year available (would need to look in previous reports for historic trend data)
- Data are available by school and district
- Available on the World Wide Web at <http://cfl.state.mn.us/Datactr/datactr3.htm>
-

Issues and hints:

- Free- or reduced-price lunch data are an incomplete measure of poverty because not all children are included (e.g., preschool-age children or students who are eligible but do not complete the forms to qualify). This will continue to be true for past data; as of 1997/98, however, the figures will more closely represent an economic indicator since they will count the number of children eligible, regardless of access or participation.
- School districts might not refer to the person who assembles and reports this information to the Department of Children, Families and Learning as “the MARSS coordinator.” You may need to ask specifically: “Who assembles and reports free- and reduced-price lunch data to the DCFL in this district?”
- Website users must “download” data file using a particular file format. Data can be viewed directly on the website screen by using the Adobe Acrobat Reader plug-in for your webb browser. Contact your district or organization technical support staff person if you need assistance in installing the Adobe Acrobat Reader plug-in.
- Rate per 1000 (or 100 if it is a very small district) public school students may be a less distorted statistic to report from year to year than the simple percentage.

6b. Indicator: Rate of children living in households below the poverty line

NOTE: Collaboratives will need to identify an appropriate proxy measure related to child poverty. The following option is based on participation in the Minnesota Family Investment Program (MFIP). Minnesota began enrolling families in MFIP in January 1998. MFIP replaces Aid to Dependent Children (AFDC) as of 1998. July 1998 was the first month that all families with children receiving cash assistance were participating in MFIP.

Indicator proxy:

Rate and percentage of children who are MFIP recipients.

Background and Definition:

MFIP combines four programs and is intended to simplify and streamline program administration. The program's focus is to move families on the most direct path to unsubsidized employment. For adult recipients in general, benefits are limited to 60 months in a lifetime. Two-parent families are required to participate in employment services immediately. Single-parent families are required to participate in work or training activities within six months of receiving assistance. Counties have the option of requiring single parents to participate sooner. Participants do not go off public assistance until they earn up to 120 percent of the 1996 Federal poverty level (annual income for a family of 4 = \$15,600; monthly income for a family of 4 is approximately \$1,060).

A child MFIP recipient is defined as an "eligible child" 19 years or younger who lives in a family that receives an MFIP grant.

Data collection:

Individuals apply for MFIP at the county level; counties enter information into an automated system to determine eligibility (using income and asset information). Data are available from the automated system through the Department of Human Services at the state-level; counties may view county-level or state-level data that has been entered into the automated system.

Lag time:

Data for the previous fiscal year (July 1 to June 30) are available one month after the end of the fiscal year.

Accessing data:

Reports are available through the Minnesota Department of Human Services by contacting George Hoffman at 651/296-6154. A typical report by fiscal year includes by county, the annual number of MFIP cases, caretakers, children, persons, total payments, average payment by case, and average payment by person.

Contact at the county level:

Contact with the Department of Human Services is the best option since both county and state level data are aggregated at this level.

Data disaggregation:

If a special report is requested, data can be broken down by zip code and along demographic criteria (ethnicity, age, gender). Time to respond to a request will depend upon available resources.

Computation of statistic:

Rate per 1000 children = (number of child MFIP recipients multiplied by 1000) and divided by the total number of children (same age range) living in the same geographic area. (Population statistic should be available from the MN State Demographer's office: 651/296-4100.)

Percentage = number of child MFIP recipients divided by the total number of children (same age range) living in a targeted geographic area.

Comparison:

Compare the rate and percentage to the previous reporting period.

Reports in which data are published:

Data are not published in a regular public report. County level reports may be requested from the Minnesota Department of Human Services by contacting George Hoffman at 651/296-6154.

Issues and hints:

- MFIP data as an indicator of child poverty is more up-to-date than the census data, but not all poor children get welfare benefits; thus, the rate or percentage participating is smaller than the true measure.
- MFIP data reported for fiscal year 1998 (July 1 - June 30) include transitional AFDC data since MFIP started in January 1998.
- Historic data on AFDC participation provides a proxy measure prior to 1998. AFDC numbers are not exactly comparable to MFIP, but the level of benefits is basically similar.
- Information on AFDC participation is included in the *Children's Services Report Card* at http://www.lmic.state.mn.us/dnet/maplib/r_card.htm
- Contact Richard Fong at MN Planning for assistance in accessing data from the web (651/296-6866)
- DHS plans to provide basic summary data on a website in the coming year.

6c. Indicator: Rate of children living in households below the poverty line

NOTE: Collaboratives will need to identify an appropriate proxy measure related to child or family poverty. The following option is based on U.S. census data.

Indicator proxy:

Rate and percentage of children living in households below the federal poverty line.

Definition:

The federal poverty line is an estimate of the income necessary for households of various sizes to meet basic living costs. It includes pretax income and excludes capital gains and noncash benefits, such as employer-paid health insurance, food stamps and Medicaid. The U.S. Department of Commerce adjusts the poverty line annually to reflect changes in the consumer price index. In 1995, the federal poverty line for a family of four was \$15,150; in 1996 it was \$15,600.

Data collection:

The U.S. Census Bureau collects data about family income as part of the decennial census (1990, 2000, etc.). These data are the only reliable county-level data regarding child poverty. The Census Bureau has begun to issue state-level poverty estimates every three years by race, and county-level poverty estimates by age. Margins of error for these estimates are quite high, especially in small counties.

Lag time:

Data in the *1996 Minnesota Health Profiles* reports children ages 0-19 living below the poverty line as of 1995. Poverty data may be dropped from future *Minnesota Health Profiles*.

Accessing data:

The easiest source of county-level data regarding the total number of children ages 0-19 living in the county and the number of children ages 0-19 living in poverty is the *Minnesota Health Profiles*.

Contact at the county level:

None

Data disaggregation:

Information not available to determine.

Computation of statistics:

Rate per 1000 in the population = (number of children ages 0-19 living in households below the federal poverty level multiplied by 1000) divided by total number of children ages 0-19 living in the county.

Percentage = number of children ages 0-19 living in households below the federal poverty level divided by the total number of children ages 0-19 living in the county.

Comparison:

Compare the rate or percentage to previous reporting periods.

Reports in which data are published:*Minnesota Health Profiles*

- Indicator defined as above
- Published every two years by the MN Department of Health
- Data reported as annual figure (current report includes 1995 data)
- Available for \$7; send a check to MN Department of Health – Center for Health Statistics, PO Box 9441, Minneapolis, MN 55440-9441 (612/676-5370); include the name of specific county (ies)
- Available on the World Wide Web: <http://www.mnplan.state.mn.us/datanetweb/health.html>

Issues and hints:

- Remember the county-level estimates every three years have a large margin of error, especially in small counties. Changes from reporting period to reporting period may be due to this error rather than changes in the poverty status of families in the county.
- The *Minnesota Health Profiles* include a number of other measures related to poverty that may be of interest to the collaborative: average number of households using food stamps in a calendar year (could compute percentage of households by dividing this average by the total number of households in the county); unduplicated number of WIC participants.
- Rate per 1000 in the population may be a less distorted statistic to report than the simple percentage.

7. Indicator: Rate of infant mortality

Definition:

For children less than one year old, both the annual number of deaths and the average mortality rate.

Data collection:

Medical examiners and coroners file death certificates with the Minnesota Department of Health on an on-going basis.

Lag time:

Data for the previous calendar year are usually available 18 to 24 months after that year. For example, the 1997 data will be available in December 1998.

Accessing data:

Data available by county in the reports listed below. The Center for Health Statistics at the Minnesota Department of Health will run a special report upon request if the data are not readily available in any of its published reports. The cost is usually \$50 minimum, but may be waived in special circumstances (i.e., medical research). Contact Angela Sechler at the Center for Health Statistics at 651/297-1232.

Contact at the county or city level:

County level public or community health services. Data for Minneapolis and St. Paul are available from the respective city health departments.

Data disaggregation:

The annual MN Health Statistics report gives information on the number of infant deaths by state, county, and limited categories of race. Limited data at a city level are available for urban areas with a population of 2500 or more. State and county level data are broken down into neonatal and postneonatal deaths, while causes of infant death only are given for the state. If a special report is requested from the Center for Health Statistics, data may be broken down by other vital statistics categories such as race, ethnicity, cause.

Computation of statistics:

Rate = number of deaths of children under one year of age divided by the total number of live births for a given geographic area multiplied by 1000.

Percentage = same calculation except you multiply by 100.

Comparison:

Compare the number and rate to current statistics at a state or national level.

Compare previous reporting periods to look for trends; for trend analyses be sure to compare at least 3-5 years of data to ensure reliability.

Reports in which data are published:

Minnesota Health Statistics

- Indicator defined as above
- Published annually by the Minnesota Department of Health – Center for Health Statistics
- Data lag of approximately two years
- Data are reported for the most recent calendar year available; historic data showing overall infant death rates for the state is given in every report and currently goes back to 1940.
- Data are reported by state, county, Minneapolis, St. Paul, and Duluth (would need to look in previous reports for historic trend data).

- Available in major public and university libraries. Only the most recent copies (usually the last two years) are available through the Minnesota State Bookstore for \$10.95 (651/297-3000).

Children's Report Card

- Indicator defined as above.
- Published every two years by Minnesota Planning
- Data lag of 2 years
- Data are reported for three-year periods at two year intervals (1994, 1996, etc.)
- Data are reported by county
- Print copy available from MN Planning at 651/296-3985
- Available via the World Wide Web at http://www.lmic.state.mn.us/dnet/maplib/r_card.htm
- [Contact Richard Fong at MN Planning for assistance in accessing data from the web \(651/296-6866\)](#)

Minnesota Health Profiles

- Indicator defined as above
- Published every two years by the MN Department of Health – Center for Health Statistics
- Data lag of one year
- Data reported as a five year average rate (current report covers 1991-95), plus total number of infant deaths in a one year period; upcoming report due December 1998 will include 1993-97
- Data are reported by county with statewide data, MN Health Improvement goals and U.S. health goals alongside for comparison
- Hard copies available for \$7 each; send a check to MN Department of Health – Center for Health Statistics, PO Box 9441, 717 Delaware St., SE, Minneapolis, MN 55440-9441 (612/676-5370); include the name of specific county (ies)
- Available via the World Wide Web at <http://www.mnplan.state.mn.us/datanetweb/health.html>

Hints:

- In addition to data regarding infant mortality, *Minnesota Health Profiles Online* provides information on more than 200 health indicators. You can get county level data on demographic and vital statistics, morbidity and health care utilization, chemical health indicators, environmental health, and maternal and child health.
- For now, you can get *Minnesota Health Statistics* in a print version only. The Department of Health does plan to publish it on the Web by December 1998.
- Since statistics are computed differently, collaboratives should select one data source and use it consistently.

8. Proxy Indicator: Rate of preschool children between the ages of three and four who are identified as having new potential immunization problems

NOTE: Statewide data related to the core indicator are not collected annually at this time: *Percent of children who are immunized on an appropriate schedule.* The above indicator represents an available “proxy indicator.”

Definition:

Minnesota children between the ages of 3 and 4 years who are found during early childhood screening to have not received adequate immunizations as required by state law: polio, DPT (diphtheria/tetanus/pertussis), and MMR (measles/mumps/rubella). Parents typically show written evidence of immunization at screening.

Data collection:

Previously known and new problems associated with immunization of young children screened as a component of the early childhood screening (ECS) program are reported as part of an annual report of ECS data by school districts to the Department of Children, Families and Learning. The ECS program has recently revised its data collection system, so comprehensive trend data go back only to 1996.

Lag time:

School districts report data covering the period from July 1 to June 30 to DCFL by August 15th of each year, so data at the school district level should be available after that date. The DCFL- ECS program aggregates the data and prepares a state-level report by December of the same year.

Accessing data:

In addition to the reports listed below, the ECS program, which is one of the Early Childhood and Family Initiatives of the DCFL, will provide information upon request. Contact Debbykay Peterson at 651/296-1398.

Contact at the school district level:

Contact the preschool screening coordinator at the school district central office.

Data disaggregation:

It is not currently possible to disaggregate the data according to demographic characteristics of children.

Computation of statistics:

Percentage = total number of children with potential problems related to immunization (previously known + new) divided by total number children screened on this component.

Rate per 100 children = (total number of children with potential problems related to immunization multiplied by 100) and then divided by total number children screened on this component

Comparison:

Compare the percentage or rate to previous years or to the state as a whole.

Reports in which data are published:

School District Reports

- Indicator defined as above (rate or percentage would need to be calculated using numbers reported)
- FSCs should ask district ECS coordinator for copy of form ED-01611-XX, and refer to page three, columns one, two, and three
- Available annually through school districts
- Data lag of about 2 months

Minnesota Public Schools Early Childhood Screening Factsheets

- Indicator defined as above (rate or percentage would need to be calculated using numbers reported)
- Published annually by the Department of Children, Families and Learning
- Data lag of about six months
- Data are reported for the current and previous year
- Data are reported for the state
- Available on the World Wide Web at <http://cfl.state.mn.us/ecfi/ecscrnfact.htm>
- Also available in hard copy through Debbykay Peterson at 651/296-1398

Issues and hints:

- Minnesota school districts are required to offer ECS to all children once before school entrance, targeting children ages 3 to 4 years old. In 1992 participation in screening became a requirement for children prior to public school enrollment. A child may participate in the school district ECS program or he/she may receive services from a comparable program offered by a private or public health provider (an estimated 5% of Minnesota children screened each year). School districts submit annual reports of their ECS data each year to the Department of Children, Families and Learning.
- Note that Hepatitis B vaccinations will be required for kindergarten entrance as of 2000.
- Names and phone numbers of district ECS coordinators are available via the website listed above
- Two other statewide screening programs (Child and Teen Check-ups or C&TC and Child and Teen Check-ups – nurse approved programs or C&TC-nurse approved – formerly EPSDT) are geared to providing screening periodically through a child's infancy, early childhood and could continue into the adolescent years. These screening programs are targeted to children from low income families or those with other special needs. When school districts or their contractors provide a comprehensive ECS program (the optional and required components) it is equivalent to the C&TC.
- Collaboratives may need to aggregate screening data from multiple sources. While data from screenings completed by private or public health providers are typically shared with the school district, collaboratives should check to make sure aggregated screening data reflects all children.
- Full, comprehensive retrospective kindergarten studies are completed every four years by the MN Department of Health, Office of Disease Prevention and Control. The first was conducted on 1992-93 data, the second on 1996-97 data. The next retrospective study will be conducted on 2000-2001 data. This study provides information by county on the percentage of newly enrolled kindergartners who had been fully protected at the ages of 4, 6, 8, 17, 20, and 24 months. The data are based on a retrospective analysis of preschool immunization records for Minnesota children who entered kindergarten during the school year under study. Data from the retrospective studies may be broken down by race/ethnicity (5 categories), and zip codes. This information is available on the Disease Prevention and Control web site at <http://www.health.state.mn.us/divs/dpc/adps/retrosur.htm>. In hard copy, reports are available for the state and all of the counties. These may be obtained either through the immunization coordinator at the county level (in the local public health authority); at the state level from Margo Roddy at 612/623-5237 or Susan Soliva at 612/623-5166. FSCs may also contact these people for other information and data requests.

9. Proxy Indicator: Rate of preschool children between ages 3 and 4 years who are identified as having a potential problem related to lack of health care coverage

NOTE: Statewide data related to the core indicator are not collected annually at this time: *Percent of children and families covered by health insurance.* The above indicator represents an available “proxy indicator.”

Definition:

Minnesota children between the ages of 3 and 4 years who are found during early childhood screening not to have health care coverage at the time of screening. Parents self-report this information as one component of the screening.

Data collection:

Lack of health care coverage for children (ages 3 to 4 years) screened as part of the Early Childhood Screening (ECS) program are reported as part of an annual report of ECS data by school districts to the Department of Children, Families and Learning. The ECS program has recently revised its data collection system, so comprehensive trend data go back only to 1996.

Lag time:

School districts report data covering the period from July 1 to June 30 to DCFL by August 15th of each year, so data at the school district level should be available within 2 months. The DCFL-ECS program aggregates the data and prepares a state-level report by December of the same year.

Accessing data:

In addition to the reports listed below, the ECS program, which is one of the Early Childhood and Family Initiatives of the DCFL will provide information upon request. Contact Debbykay Peterson at 651/296-1398.

Contact at the county level:

Contact the ECS coordinator at the school district central office.

Data disaggregation:

It is not currently possible to disaggregate the data according to demographic characteristics of children.

Computation of statistics:

Percentage = total number of children with potential problems related to health care coverage (previously known + new) divided by total number of children screened on component.

Rate per 100 children screened = (total number of children with potential problems related to health care coverage multiplied by 100) and then divided by total number of children screened on component.

Comparison:

Compare the percentage or rate to the previous years or the state as a whole.

Reports in which data are published:

School District Reports

- Indicator defined as above (rate or percentage would need to be calculated using numbers reported)
- FSCs should ask district ECS coordinator for copy of form ED-01611-XX, and refer to page three, columns one, two, and three
- Data lag of about 2 months
- Data are reported for the current year
- Data are reported for the school district
- Available annually through school districts

Minnesota Public Schools Early Childhood Screening Factsheets

- Indicator defined as above (rate or percentage would need to be calculated using numbers reported)
- Published annually by the Department of Children, Families and Learning
- Data lag of about six months
- Data are reported for the current and previous year
- Data are reported for the state
- Available on the World Wide Web at <http://cfl.state.mn.us/ecfi/ecscrnfact.htm>
- Also available in hard copy through Debbykay Peterson at 651/296-1398

Issues and Hints:

- The percentage of children covered by health insurance is a state-level variable covered in the Current Population Survey of the Census Bureau. Because of the small numbers surveyed, it is not available below the state level. Reliable small area (county-level) data exist only from the decennial census (1990, 2000, etc.). Therefore, collaboratives may want to use the proxy indicator.
- Two other statewide screening programs (Child and Teen Check-ups or C&TC and Child and Teen Check-ups – nurse approved programs or C&TC-nurse approved – formerly EPSDT) are geared to providing screening periodically through a child's infancy, early childhood and could continue into the adolescent years. These screening programs are targeted to children from low income families or those with other special needs. When school districts or their contractors provide a comprehensive ECS program (the optional and required components) it is equivalent to the C&TC.
- Collaboratives may need to aggregate screening data from multiple sources. While data from screenings completed by private or public health providers are typically shared with the school district, collaboratives should check to make sure aggregated screening data reflects all children.
- Minnesota school districts are required to offer ECS to all children once before school entrance, targeting children ages 3 to 4 years old. In 1992 participation in screening became a requirement for children prior to public school enrollment. A child may participate in the school district ECS program or he/she may receive services from a comparable program offered by a private or public health provider (an estimated 5% of Minnesota children screened each year). School districts submit annual reports of their ECS data each year to the Department of Children, Families and Learning.
- Names and phone numbers of district preschool screening coordinators are available via the website listed above

10. Indicator: Rate of preschool children between the ages of three and four who are identified as having new potential vision problems
Rate of preschool children between the ages of three and four who are identified as having new potential hearing problems

Definition:

Children for whom a potential problem with vision and/or hearing is detected as part of early childhood screening. A vision problem is defined as not passing the vision screening component or a concern is reported by the parent; the same definition applies to hearing.

Data collection:

Previously known and new problems associated with vision and hearing of young children screened as a component of the early childhood screening (ECS) program are reported as part of an annual report of ECS data by school districts to the Department of Children, Families and Learning. The ECS program has recently revised its data collection system, so comprehensive trend data go back only to 1996.

Lag time:

School districts report data covering the period from July 1 to June 30 to the Department of Children, Families and Learning by August 15th of each year, so data at the school district level should be available within 2 months. The CFL-ECS program aggregates the data and prepares a state-level report by December of the same year.

Accessing data:

In addition to the reports listed below, the ECS program, which is one of the Early Childhood and Family Initiatives of the Department of Children, Families and Learning will provide information upon request. Contact Debbykay Peterson at 651/296-1398.

Contact at the county level:

Each school district must have an Early Childhood Screening Coordinator. This individual should be able to assist the collaborative in accessing available screening data from all sources.

Data disaggregation:

The annual report does not provide for the reporting of data by child demographic characteristics.

Computation of statistics:

Percentage = total number of children with potential problems (previously known + new) divided by total children screened by component.

Rate per 100 children = (total number of children with potential problems related to immunization multiplied by 100) and then divided by total number children screened on this component

Comparison:

Compare the percentage or rate to previous years or state as a whole.

Reports in which data are published:

School District Reports

- Indicator defined as above (rate or percentage would need to be calculated using numbers reported)
- FSCs should ask district ECS coordinator for copy of form ED-01611-XX, and refer to page three, columns one, two, and three
- Data lag of about 2 months
- Data are reported for the current year
- Data are reported for the school district
- Available annually through school districts

Minnesota Public Schools Early Childhood Screening Factsheets

- Indicator defined as above (rate or percentage would need to be calculated using numbers reported)
- Published annually by the Department of Children, Families and Learning
- Data lag of about six months
- Data are reported for the current and previous year
- Data are reported for the state
- Available on the World Wide Web at <http://cfl.state.mn.us/ecfi/ecscrnfact.htm>
- Also available in hard copy through Debbykay Peterson at 651/296-1398

Issues and hints:

- Minnesota school districts are required to offer ECS to all children once before school entrance, targeting children ages 3 to 4 years old. In 1992 participation in screening became a requirement for children prior to public school enrollment. A child may participate in the school district ECS program or he/she may receive services from a comparable program offered by a private or public health provider (an estimated 5% of Minnesota children screened each year).
- Names and phone numbers of district ECS coordinators are available via the website listed above.
- Two other statewide screening programs (Child and Teen Check-ups or C&TC and Child and Teen Check-ups – nurse approved programs or C&TC-nurse approved – formerly EPSDT) are geared to providing screening periodically through a child's infancy, early childhood and could continue into the adolescent years. These screening programs are targeted to children from low income families or those with other special needs. When school districts or their contractors provide a comprehensive ECS program (the optional and required components) it is equivalent to the C&TC.
- Collaboratives may need to aggregate screening data from multiple sources. While data from screenings completed by private or public health providers are typically shared with the school district, collaboratives should check to make sure aggregated screening data reflects all children.
- Children with potential vision and hearing problems identified through screening may be found to be normal; the annual report requests follow-up information. Collaboratives may want report on children for whom a problem was confirmed.
- Required ECS components include vision, hearing, development, height/weight, identification of risk factors that may influence learning, immunization review, and a summary review. Optional components include a health history; physical inspection, including an oral inspection and blood pressure measurement; laboratory tests; dental screening; nutrition assessment. Additional optional factors include family factors and a mental health screening. Collaboratives may be able to report aggregate results related to any of these components. For example, collaboratives could report number and percent of children screened each year who have four types of potential developmental problems (speech/language, cognitive, fine/gross motor, social/emotional/behavioral) or health concerns that are learning risks.

11. Indicator: Percent of infants born with health or environmental risks such as late or no prenatal care, low maternal weight gain, smoking during pregnancy, three or more older siblings, or closely spaced births

Definition

Health or environmental risk factors associated with pregnancy are reported on the medical supplement portion of birth certificates and only are available in aggregate form. Risk factors are defined as the following:

- Births to women with four or more previous live births
- Births to women with previous live birth within one year
- Late or no prenatal care – prenatal care began in 3rd trimester or none
- Other risk factors: low maternal weight gain and tobacco use

Data collection

Minnesota hospitals are the principal sources for collection of data associated with certificates of birth. Birth certificates are filed with the Vital Records section of the Minnesota Department of health. Ninety-five percent of hospitals now file birth certificates directly with the state electronically. All county Departments of health receive hard copies of birth certificates.

Lag time:

Data for the previous calendar year is usually available 18 to 24 months after that year. For example, the 1997 data would be available December 1998.

Accessing data:

Except for *low maternal weight gain*, data are available by state and county in the reports listed below. The Center for Health Statistics at the Minnesota Department of Health will run a special report upon request if the data are not readily available in any of its published reports. The cost is usually \$50 minimum, but may be waived in special circumstances (i.e., medical research). Contact Angela Sechler at the Center for Health Statistics at 651/297-1232.

Contact at the county or school district level:

Contact at the state level is best option since birth certificate data are kept electronically in aggregate form.

Data disaggregation:

The annual *Health Statistics* report gives the *percentage of women receiving prenatal care in the 3rd trimester or none*. Data by urban area (except Minneapolis and St. Paul) are not available. The *MN Health Profiles* has the remaining health and environmental risk factors identified above by state and county except *maternal weight gain*. To obtain data on *maternal weight gain* or other demographic statistics such as race, age group, educational level, etc., a special report would have to be requested from the Center for Health Statistics at the Department of Health.

Computation of statistics:

Percentage = number of births where a given risk factor is reported on the birth certificate divided by the total number of live births for a given geographic area multiplied by 100.

Comparison:

Compare the number and percentage to current statistics at a state or national level.

Compare previous reporting periods to look for trends; for trend analyses, be sure to compare at least 3-5 years of data to ensure reliability.

Reports in which data are published:*Minnesota Health Statistics*

- Indicator: late or no prenatal care (3rd trimester or none)
- Published annually by the Minnesota Department of Health – Center for Health Statistics
- Data lag of approximately two years
- Data are reported for the most recent calendar year available; would need to look in previous reports for historic trend data
- Data are reported by state, county and Minneapolis and St. Paul
- Available in major public and university libraries. Only the most recent copies (usually the last two years) are available through the Minnesota State Bookstore for \$10.95 (651/297-3000)

Minnesota Health Profiles

- Indicators: Fertility and family planning (includes previous and closely spaced birth data) and socio-demographic factors (including smoking during pregnancy)
- Published every two years by the MN Department of Health – Center for Health Statistics
- Data lag of two years
- Data reported as percentages for most current calendar year (current report contains 1995 data); upcoming report due December 1998 will have 1997 data
- Data are reported by county with state wide data, MN Health Improvement Goals and U.S. Health Goals alongside for comparison
- Available for \$7 each; send a check to MN Department of Health – Center for Health Statistics, P.O. Box 9441, 717 Delaware St., SE, Minneapolis, MN 55440-9441 (612/676-5370) Include the names of specific county (ies)
- Available on the World Wide Web (for 1995 unless stated otherwise):
<http://www.mnplan.state.mn.us/datanetweb/health.html> or <http://www.health.state.mn.us/factsfig/factsfig.html>

Issues and helpful hints:

- There is a considerable delay between the time the data are reported and collected and when they become available to the public -- generally 18 months to two years depending on the source of information. As of the date of this publication, data available in the *MN Health Statistics* report are from 1996; data in the 1996 *MN Health Profiles* are from 1995; data for 1997 will be published in December 1998.
- *Minnesota Health Profiles Online* provides information on more than 200 health indicators. You can get county level data on demographic and vital statistics, morbidity and health care utilization, chemical health indicators, environmental health, and maternal and child health.
- For now, you can get *Minnesota Health Statistics* in a print version only. The Department of Health does plan to publish it on the Web, but no target date has been set.
- In addition to data regarding teen pregnancy, Minnesota Planning provides information on 20 other indicators regarding children as part of the *Children's Service's Report Card*.
- Since indicator definitions may vary and statistics are computed differently, collaboratives should select one data source and use it consistently.

12. Proxy Indicator: Percent of women who receive adequate or better prenatal care

NOTE: Data related to the core indicator are not collected at this time: *Percent of women who receive appropriate prenatal care and anticipatory guidance, diagnosis, and treatment services.* The above indicator represents an available “proxy indicator.”

Definition:

Prenatal care is classified as adequate or better; intermediate; inadequate or none. Factors taken into account to determine adequacy include: time when prenatal care began: none; first, second, or third trimester), weeks of gestation, and number of prenatal visits.

- *Adequate or better:* Prenatal care started in 1st trimester and woman had an adequate # of visits
- *Intermediate:* Prenatal care started in 1st or 2nd trimester and woman had an intermediate # of visits
- *Inadequate or none:* No prenatal care or prenatal care started in 3rd trimester or woman had inadequate range of visits, regardless of when prenatal care began

Data collection:

Prenatal care data are collected in the medical supplement portion of birth certificates. Minnesota hospitals collect the data for birth certificates and file these birth certificates immediately after birth with the Vital Statistics Section of the Minnesota Department of Health. Most hospitals now file birth certificates with the state electronically. All county Departments of Health receive hard copies of birth certificates.

Lag time:

Data for the previous calendar year are usually available 18 to 24 months after that year. For example, 1997 data will be available in 1998.

Accessing data:

Data are available by state and county in the reports listed below. The Center for Health Statistics at the Minnesota Department of Health will run a special report upon request if the data are not readily available in any of its published reports. The cost is usually \$50 minimum, but may be waived in special circumstances (i.e., medical research). Contact Angela Sechler at the Center for Health Statistics at 651/297-1232.

Contact at the county or school district level:

Contact at the state level is best option since birth certificate data are kept electronically in aggregate form.

Data disaggregation:

If a special report is requested from the Center for Health Statistics, data may be broken down by demographic characteristics of the mother or child (race and ethnicity, age group, marital status, educational level, method of delivery, weeks of gestation). Data by urban area are not available.

Computation of statistics:

Percentage = number of single births in the county (or state) for which prenatal care (by trimester) was or was not received divided by total number of newborns in the county (or state) multiplied by 100.

Comparison:

Compare the number and percentage to current statistics at a state or national level.

Compare previous reporting periods to look for trends; for trend analyses be sure to compare at least 3-5 years of data to ensure reliability.

Reports in which data are published:*Children's Report Card*

- Indicator defined differently than above: Number and percentage of newborns whose mother had not seen a doctor before her seventh month or at any time during her pregnancy.
- Published every two years by Minnesota Planning
- Data lag of 2 years
- Data are reported for one year periods (1994, 1996, etc.)
- Data are reported by county
- Print copy available from MN Planning at 651/296-3985
- Available via the World Wide Web at http://www/lmic.state.mn.us/dnet/maplib/r_card.htm

Minnesota Health Profiles

- Indicator defined as above for most current calendar year
- Published every two years by the MN Department of Health
- Data lag of one year
- Data reported for one year periods
- Data are reported by county with statewide data, MN Health Improvement Goals and U.S. Health Goals alongside for comparison
- Available for \$7; send a check to MN Department of Health – Center for Health Statistics, P.O. Box 9441, 717 Delaware St., SE, Minneapolis, MN 55440-9441 (612/676-5370)
- Available on the World Wide Web (for 1995 unless stated otherwise):
<http://www.mnplan.state.mn.us/datanetweb/health.html>

Hints:

- In addition to data regarding adequacy of prenatal care, *Minnesota Health Profiles Online* provides information on more than 200 health indicators. You can get county level data on demographic and vital statistics, morbidity and health care utilization, chemical health indicators, environmental health, and maternal and child health.
- Since statistics are computed differently, collaboratives should select one data source and use it consistently.

13. Indicator: Rate of school attendance

Definition:

School attendance is defined as being present in the classroom or, in other words, “not absent.”

Data collection:

School districts report three types of information to the Department of Children, Families and Learning as part of the MARSS system: (1) number of days (or hours) a student is enrolled in the district (this is the same as “membership”), (2) number of days (or hours) a student attends, and (3) the number of school days (or hours) for each grade. By definition, attendance can never be greater than membership.

The MARSS Edit program (a computer application run at the district and state level) then computes the average daily membership (ADM) and the average daily attendance (ADA) for each student. School and district ADM and ADA then computed by adding enrolled student-level ADM and ADA information.

ADM = the number of days (or hours) a student is enrolled divided by the number of days (or hours) scheduled.

ADA = the number of days (or hours) an enrolled student attends divided by the number of days (or hours) scheduled.

Lag time:

Data are available from DCFL in the Spring of the year for the preceding school year.

Accessing data:

Data are not currently published in a report. DCFL plans to report % of attendance by school site, district, and statewide, as part of a web page organized by school district in early 1999. Historic data (prior to the 1997-98 school year) will not be available via this web page and will need to be obtained from “turnaround” reports that the DCFL sends to school districts (collaboratives will need to compute the rate using the ADA and ADM information printed in these reports). ADA and ADM information is sent back to the district at a number of different levels, generally by school and by district.

Contact at the district level:

Contact the MARSS coordinator at the school district, particularly for historic data (prior to 1997-98).

Data disaggregation:

Data broken down by student demographic characteristics and disability classification are generally not available. Larger school districts with research and evaluation departments may have the capacity to disaggregate attendance data by the demographic characteristics of students (gender, race/ethnicity, special education status).

Computation of statistic:

Rate (same as %) is computed by dividing the total ADA by the total ADM (for the same school year) and multiplying the result by 100. NOTE: To report by district, first compute the total ADA for the district by adding the individual school ADA figures together; then compute the total ADM for the district by adding the individual school ADM figures together. These ADA and ADM figures are printed in a variety of “turnaround” reports that the DCFL sends to districts.

Comparison:

Compare the rate to current statistics at a state level or compare the rate to previous years. For trend analysis, be sure to compare at least 3-5 years of data to ensure reliability.

Reports in which data are published:

None at this time. DCFL plans to report % of attendance by school site, district, and statewide, as part of a web page organized by school district in early 1999. Historic data (prior to the 1997-98 school year) will not be available via this page.

Issues and hints:

- Districts may vary in their definition of “absent.” In addition, the data may not reflect the students who leave school after attendance is taken.
- Note early graduates and homebound students are considered absent for data collection purposes. For independent study students, days of attendance are not monitored or reported by school districts.
- A number of different types of enrollment may impact the attendance rate: Students enrolled in the Post Secondary Enrollment Options (PSEO) may show exaggerated attendance figures (a reporting anomaly) and students enrolled in Independent Study programs may show low attendance figures (limited strictly to student-teacher contact time). Additionally, a high number of homebound students may impact a school’s rate of attendance as well as high number of enrolled preschool students. None of these issues should significantly affect most schools or districts, but for those few schools/districts where they have large numbers of these types of students, collaboratives will need to cite these factors in a footnote when reporting the data.
- ADM and ADA figures are reported separately for Area Learning Centers. If the ALC is within a school district, the figures “roll up” into the district total ADM and ADA. If the ALC is a cooperative program that involves a number of school districts, the ADM and ADA figures remain separate. This means that attendance data for students attending an ALC that is a cooperative program are reported separately (not the district where the student resides). Individual ALCs may be able to give you attendance data by resident district.
- School attendance overall is generally high. Collaboratives may want to focus on percentage of students with higher rates of absence (i.e., number and % of enrolled students whose attendance rate is below 90%). Collaboratives will need to work closely with the district MARSS coordinator to conduct such an analysis.
- The service area of the collaborative and the schools for which existing attendance data are available may not be the same. Try to for the best overlap possible and note in a footnote the geographic area reported on and/or school districts included.
- For more information call the Data Management Team at the MN Department of Children, Families and Learning (651/296-2400).

14. Indicator: Rate of students dropping out of school

Definition:

The *annual dropout rate* is defined as the number of students in grades 7-12 who dropout of school during a single school year divided by the October 1 enrollment. A dropout is defined as a secondary student in any of grades 7-12 who (a) was enrolled in school at some time during the previous school year; and was not enrolled by October 1 of the following school year; (b) has not graduated from high school or completed a state or district approved educational program; and (c) does not meet any of the following exclusionary conditions: transfer to another public school district, private school, or state or district approved education program; temporary absence due to suspension or school approved illness; or death.

Data collection:

School districts report dropout data by student on an annual basis to Data Management at the Department of Children, Families, and Learning as part of the MARSS reporting system. Data are submitted through the end-of-year MARSS reporting cycle.

Lag time:

Data are available from DCFL in Spring of each year for the previous school year.

Accessing data:

Data are available by school district and statewide in the DCFL reports listed below; data by school, district, and statewide are available on the DCFL Data Center website: (<http://cfl.state.mn.us/Datactr/datactr2.htm>). The DCFL is planning to post dropout data (both the annual dropout rate and the four-year dropout rate) on a web page organized by school district in the coming year. This web page will start with current data and go forward so data from previous years will need to be obtained from past DCFL reports or each school district.

Contact at the district level:

Contact the MARSS coordinator at the school district.

Data disaggregation:

Data available by school district may be broken down by demographic characteristics of the student (including race/ethnicity, grade level, and gender). Individual districts may or may not have the capability to disaggregate data by special education status of the student, particularly EBD.

Computation of statistics:

District Rate (same as percentage) = (total number of students in grades 7-12 defined as dropping out for a particular year divided by the district's total number of enrolled students in grades 7-12 as of October 1 of the same year) multiplied by 100.

Comparison:

Compare the rate to current statistics at the state level or to previous years. For trend analysis, be sure to compare at least 3-5 years of data to ensure reliability.

Reports in which data are published:

Information on Minnesota High School Graduates & Dropouts

- Indicator defined as above
- Published annually by Data Management, Department of Children, Families and Learning
- Data lag of about one-year

- Data by school district are reported for most recent school year available (would need to look in previous reports for trend data); statewide trend data disaggregated by student gender and race/ethnicity are included in each annual report
- Print copy available from Data Management, DCFL at 651/296-2400
- DCFL plans to report the annual dropout rate by school district and statewide as part of a web page organized by school district in early 1999. Historic data (prior to the 1997-98 school year) will not be available via this page

Completion Study for the Class of 96. . . for the Class of 97

- Indicator defined as the four-year dropout rate (see definition below)
- Report for the Class of 96 published in June 1997 by Data Management, Department of Children, Families and Learning; report for the Class of 97 will be available in October 1998
- Data by school district are reported for the “graduating class;” statewide data disaggregated by student ethnicity/race
- DCFL plans to report the four-year dropout rate by school district and statewide as part of a web page organized by school district in early 1999; historic data (prior to the 1997-98 school year) will not be available via this page

Children's Services Report Card

- Indicator defined differently than above: Number and county's percentage of students who should be in the 12th grade but have not attended school for a year
- Published every two years by Minnesota Planning
- Data lag of 2 years
- Data are reported by calendar year (1994, 1996, etc.)
- Data are reported by county and state as a whole
- Print copy available from MN Planning at 651/296-3985
- Data for 1994 and 1996 available by county on the World Wide Web (hit “county report cards”): http://www.lmic.state.mn.us/dnet/maplib/r_card.htm
- [Contact Richard Fong at MN Planning for assistance in accessing data from the web \(651/296-6866\)](#)

Issues and hints:

- The same definition of and calculation of dropout rate should be used from year-to-year in reporting trend data. Note that the *annual dropout rate* reflects students who drop out of school during a single school year; the *four-year dropout rate* tracks the same cohort of students over a four-year period to determine each student’s final ending status (transferred, continued, graduated, or dropped out). For districts with relatively stable populations, the four year drop out rate is generally higher than the annual dropout rate.
- The service area of the collaborative and the schools for which existing dropout data are available may not be the same. Try to for the best overlap possible and note in a footnote the geographic area reported on and/or school districts included.
- Dropout data reflect information based on where students are served (the location of the administrative office of the school that serves the student) rather than where they reside.
- School districts might not refer to the person who assembles and reports this information to the Department of Children, Families and Learning as “the MARSS coordinator.” You may need to ask specifically: “Who assembles and reports student data to the DCFL in this district?”
- The Department of Children, Families and Learning is planning to post dropout data (both the annual dropout rate and the four-year dropout rate) on a web page organized by school district in the coming year. The web page will start with current data and go forward so data from past years will need to be obtained from each school district or past reports.
- For more information call the Data Management Team at the MN Department of Children, Families and Learning (651/296-2400).

15. Indicator: Percent of 3rd graders scoring “proficient” or better on statewide math tests
 Percent of 3rd graders scoring “proficient” or better on statewide reading tests

Definition:

Percent of students in the third grade who fall into the Level III (solid academic performance and Level IV (superior performance) on the Minnesota Comprehensive Assessment. Levels I and II represent limited to partial knowledge and skills. These tests are “aligned” with the Minnesota Graduation Standards so students placing in Levels III and IV are considered close to being able to meet the requirements of the state standards.

Data collection:

Public schools in Minnesota administer the Minnesota Comprehensive Assessment to all 3rd graders on an annual basis in March.

Lag time:

Scores are publicly available in June of the same school year.

Accessing data:

School and District Summary Reports may be obtained from the Department of Children, Families and Learning website: <http://children.state.mn.us/grad/results.htm>

Questions may be e-mailed to Cathy Wagner at DCFL (cathy.wagner@state.mn.us).

In the coming year, the DCFL expects to make these and other school district data available on a website organized by school district.

Contact at the school district level:

Each school district’s graduation standards technician and superintendent are sent detailed information regarding these tests to be able to interpret the data. Additionally, some districts may have assessment staff who can provide the data.

Data disaggregation:

Scores are publicly reported as the percentage of students who fall into each of the four scoring categories: (level I = little evidence of the knowledge and skills; level II = partial knowledge and skills; level III = solid academic performance; and level IV = superior performance) statewide, by school district, and school site (these are aggregate data). The data provided by DCFL on the website are broken down by district and school site, but not by the demographic characteristics of students. Districts are provided these test results and may or may not have the data management capacity to further disaggregate these data by student demographic characteristics (gender, ethnicity/race, eligibility for free- or reduced-price lunch, limited English proficiency [LEP], or special education status). This type of analysis would involve linking student demographic data reported as part of the MARSS system with the test results.

Computation of statistics:

Percent of students scoring at least proficient computed by adding Level III and Level IV percentages.

Comparison:

Starting with the 1997-98 school year, data may be compared from year to year.

Reports in which data are published:

- School and District Summary Reports may be obtained from the Department of Children, Families and Learning website: <http://children.state.mn.us/grad/results.htm>
- Print copies of stateside, district, and site summary reports are sent by the testing company to each school district.

Issues and hints:

- A scale score is not a percent or total correct score; it is a score that represents the number of points earned on these tests. State, district and school reports include the average scale score and the percent of students in each of four achievement levels.
- You can also compare the average scale score for the district to the state average and the DCFL will be producing reports that show the standard error. Scale scores are not that meaningful to the public, however.
- The performance of 3rd graders in reading and mathematics should be reported separately.
- A collaborative with initiatives in particular school sites may want to report data by site for comparison purposes.
- School districts also have their own testing programs using norm-referenced and/or criterion-referenced tests. Some districts test all grades; others test students in selected grades. Since tests and grades tested may vary across districts, collaboratives may want to use the Minnesota Comprehensive Assessment results.
- Since 1997-98 was the first year the MCAs were administered statewide, historic trend data are not available.
- You may want to report in a footnote the percentage of 3rd grade students who did not complete the test (number of students not tested divided by total number of students enrolled on test day).
- District and site data can be viewed directly on the website screen. Website users can also “download” data file using a particular file format. Contact e-mail address at the bottom of the website for assistance in downloading information.
- Districts also receive a copy of test results on a diskette.
- The service area of the collaborative and the schools for which existing data are available may not be the same. Try for the best overlap possible and note in a footnote the geographic area reported on and/or school districts included.
- The Department of Children, Families and Learning is planning to post student test data with other performance data by school district and school site in the coming year.

16. Indicators: Percent of 5th graders scoring “proficient” or better on statewide reading tests
 Percent of 5th graders scoring “proficient” or better on statewide mathematics tests
 Percent of 5th graders scoring “proficient” or better on statewide writing tests

Definition:

Percent of students in the fifth grade who fall into the Level III (solid academic performance and Level IV (superior performance) on the Minnesota Comprehensive Assessment. Levels I and II represent limited to partial knowledge and skills. These tests are “aligned” with the Minnesota Graduation Standards so students placing in Levels III and IV are considered close to being able to meet the state standards.

Data collection:

Public schools in Minnesota administer the Minnesota Comprehensive Assessment to all 5th graders on an annual basis in March.

Lag time:

Scores are publicly available in June of the same school year.

Accessing data:

School and District Summary Reports may be obtained from the Department of Children, Families and Learning website: <http://children.state.mn.us/grad/results.htm>
 Questions may be e-mailed to Cathy Wagner at DCFL (cathy.wagner@state.mn.us).

In the coming year, the DCFL expects to make these and other school district data available on a website organized by school district.

Contact at the school district level:

Each school district’s graduation standards technician and superintendent are sent detailed information regarding these tests to be able to interpret the data. Additionally, some districts may have assessment staff who can provide the data.

Data disaggregation:

Scores are publicly reported as the percentage of students who fall into each of the four scoring categories: (level I = little evidence of the knowledge and skills; level II = partial knowledge and skills; level III = solid academic performance; and level IV = superior performance) statewide, by school district, and school site (these are aggregate data). The data provided by DCFL on the website are broken down by district and school site, but not by the demographic characteristics of students. Districts are provided these test results and may or may not have the data management capacity to further disaggregate these data by student demographic characteristics (gender, ethnicity/race, eligibility for free- or reduced-price lunch, limited English proficiency [LEP], or special education status). This type of analysis would involve linking student demographic data reported as part of the MARSS system with the test results.

Computation of statistics:

Percent of students scoring at least proficient computed by adding Level III and Level IV percentages.

Comparison:

Starting with the 1997-98 school year, data may be compared from year to year.

Reports in which data are published:

- School and District Summary Reports may be obtained from the Department of Children, Families and Learning website: <http://children.state.mn.us/grad/results.htm>
- Print copies of stateside, district, and site summary reports are sent by the testing company to each school district.

Issues and hints:

- A scale score is not a percent or total correct score; it is a score that represents the number of points earned on these tests. State, district and school reports include the average scale score and the percent of students in each of four achievement levels.
- You can also compare the average scale score for the district to the state average and the DCFL will be producing reports that show the standard error. Scale scores are not that meaningful to the public, however.
- The performance of 5th graders in reading, mathematics, and writing should be reported separately.
- A collaborative with initiatives in particular school sites may want to report data by site for comparison purposes.
- School districts also have their own testing programs using norm-referenced and/or criterion-referenced tests. Some districts test all grades; others test students in selected grades. Since tests and grades tested may vary across districts, collaboratives may want to use the Minnesota Comprehensive Assessment results.
- Since 1997-98 was the first year the MCAs were administered statewide, historic trend data are not available.
- You may want to report in a footnote the percentage of 5th grade students who did not complete the test (number of students not tested divided by total number of students enrolled on test day).
- District and site data can be viewed directly on the website screen. Website users can “download” data file using a particular file format. Contact e-mail address at the bottom of the website for assistance in downloading information.
- Districts also receive a copy of test results on a diskette.
- The Department of Children, Families and Learning is planning to post student test data with other performance data by school district and school site in the coming year.
- The service area of the collaborative and the schools for which existing data are available may not be the same. Try for the best overlap possible and note in a footnote the geographic area reported on and/or school districts included.

17. Indicator: Percent of 8th graders passing statewide reading tests
 Percent of 8th graders passing statewide mathematics tests
 Percent of 10th graders passing statewide writing tests

Definition:

Percent of students in the 8th grade (for reading and mathematics) who receive the minimum passing score (75%). Percent of students in the 10th grade (for written composition) who achieve a score of 3 or higher. These tests represent the basic skills that all students should have in a literate society.

Data collection:

Public schools in Minnesota administer the Basic Skills Tests to all 8th graders in reading and mathematics and all 10th graders in writing composition in January or February each year.

Lag time:

Scores are available in the Spring (March or April) of the same school year.

Accessing data:

Data by school district and site may be obtained from the Department of Children, Families and Learning website: <http://children.state.mn.us/grad/results.htm>

Questions may be e-mailed to Cathy Wagner at DCFL (cathy.wagner@state.mn.us).

In the coming year, the DCFL expects to make these and other school district data available on a website organized by district and school site.

Contact at the school district level:

Each school district's graduation standards technician and superintendent are sent detailed information regarding these tests to be able to interpret the data. Additionally, some districts may have assessment staff who can provide the data.

Data disaggregation:

The data provided by DCFL on the website are broken down by district and school site, but not by the demographic characteristics of students. Districts are provided these test results and may or may not have the data management capacity to further disaggregate these data by student demographic characteristics (gender, ethnicity/race, eligibility for free- or reduced-price lunch, limited English proficiency [LEP], or special education status). This type of analysis would involve linking student demographic data reported as part of the MARSS system with the test results.

Computation of statistics:

Percent of students who achieve the state standard of 75% on the reading or mathematics test or at least a score of 3 in writing. NOTE: Students who "Pass Individual" are not included in the statistic reported on the DCFL website. District, however, may report higher percentages of students because they include these students in the computation of the statistic.

Comparison:

Starting with the 1997-98 school year, data may be compared from year to year. NOTE: In 1996-97 the minimum state passing score was 70% so percentages of passing students cannot be compared to subsequent years.

Reports in which data are published:

- District Summary Reports may be obtained from the Department of Children, Families and Learning website: <http://children.state.mn.us/grad/results.htm>
- Print copies of stateside, district, and site summary reports are set by the testing company to each school district.

Issues and hints:

- The performance of students in reading, mathematics, and written composition should be reported separately.
- School districts also have their own testing programs using norm-referenced and/or criterion-referenced tests. Some districts test all grades; others test students in selected grades. Since tests and grades tested may vary across districts, collaboratives may want to use the Basic Standards Tests.
- While the state has set a minimum passing score for reading and mathematics (75%), local districts may require a higher standard for graduation. Collaboratives need to use the same standard from year to year and when reporting data across districts (or at least clearly indicate when a district is using a higher standard).
- Remember that writing is scored on a four point scale, with a score of 3 or higher being a passing score.
- Note that students who "Pass Individual" (meaning they achieved a standard that was individually established in an IEP or 504 accommodation plan) are not included in the statistic computed and available on the DCFL website.
- Collaboratives may want to report in a footnote the percentage of 8th or 10th grade students who did not complete the test (exempt or absent). Compute by dividing number of enrolled students who did not completed the test by the total enrollment on the day of the test.
- District and school site data can be viewed directly on the website screen. Website users can "download" data file using a particular file format. Contact e-mail address at the bottom of the website for assistance in downloading information.
- Districts receive a copy of test results on a diskette.
- The Department of Children, Families and Learning is planning to post student test data with other performance data by school district and school site in the coming year.
- The service area of the collaborative and the schools for which data are available may not be the same. Try for the best overlap possible and note in a footnote the geographic area reported on and/or school districts included.

18. Indicator: Rate of high school graduation

Definition:

Percentage of ninth grade students tracked over a four-year period who graduate or receive a completion certificate at the end of the school year in which most members of the cohort would be expected to graduate. Data from the last Minnesota school district serving the student are used in the calculation. Students who left the Minnesota public school system or students with an unknown ending status are removed from the calculation. NOTE: Statistics reported at the district-level exclude students whose last reported district is different from the originating district (four-years prior).

Data collection:

School districts report graduation data by student on an annual basis to Data Management at the Department of Children, Families, and Learning as part of the MARSS reporting system. Data are submitted through the end-of-year MARSS reporting cycle.

Lag time:

Data are available from DCFL in June or July of the year for the previous school year.

Accessing data:

Data are available by school district and statewide in the DCFL report listed below. The DCFL is planning to post graduation data (the four-year graduation rate) on a web page organized by school district in the coming year. The web page will start with current data and go forward so data from previous years will need to be obtained from past DCFL reports or each school district.

Contact at the district level:

Contact the MARSS coordinator at the school district.

Data disaggregation:

Statewide data available in the report listed below are disaggregated by student gender, race/ethnicity, and minority status. Districts would need to have the capacity to conduct a special study that disaggregates their data by demographic characteristics of the student (race/ethnicity, gender, special education status). Collaboratives may want to join with member school districts to contract the Data Management Team at DCFL to make arrangements for a special study.

Computation of statistics:

District Rate (same as percentage) = (total number of graduating grade 12 students whose reported district was the same as the district that served them in 9th grade divided by number of grade 9 students whose last reporting district was the same four years later) multiplied by 100. Graduating students include those receiving completion certificates. See the *Completion Study for the Class of 96* (listed below) for a detailed explanation of how the statistic is computed.

Comparison:

Compare the rate to current statistics at the state level.

Compare the rate to previous years. For trend analysis, be sure to compare at least 3-5 years of data to ensure reliability.

Reports in which data are published:

Completion Study for the Class of 96 . . . for the Class of 97

- Indicator defined as the four-year graduation rate
- Study for Class of 96 published in June 1997 by Data Management, Department of Children, Families and Learning; study for Class of 97 will be available in October 1998
- Data by school district are reported for the “graduating class;” statewide data disaggregated by student ethnicity/race
- DCFL plans to report the four-year graduation rate by school district and statewide as part of a web page organized by school district in early 1999; historic data (prior to the 1997-98 school year) will not be available via this page

Issues and hints:

- The commonly used definition is the *graduation rate*, defined by the U.S. Department of Education as a percentage based on the number of graduates in a particular year divided by the number of ninth grade pupils four years previously. Because it is computed from aggregate numbers of pupils, it can be distorted by in and out migration, pupils who graduate before or after other members of their class, and dropouts. This measure also does not count as graduates those who obtain a General Equivalency Diploma (GED). The Department of Children, Families and Learning has shifted to reporting the four-year graduation rate as a more rigorous measure that is less distorted.
- The same definition of and calculation of graduation rate should be used from year-to-year in reporting trend data. Note that the *four-year graduation rate* tracks the same cohort of students over a four-year period to determine each student’s final ending status (transferred, continued, graduated, or dropped out).
- The service area of the collaborative and the schools for which existing graduation data are available may not be the same. Try to for the best overlap possible and note in a footnote the geographic area reported on and/or school districts included.
- Graduation data reflect information based on where students are served (the location of the administrative office of the school that serves the student) rather than where they reside.
- School districts might not refer to the person who assembles and reports this information to the Department of Children, Families and Learning as “the MARSS coordinator.” You may need to ask specifically: “Who assembles and reports student data to the DCFL in this district?”
- The Department of Children, Families and Learning is planning to post graduation data (the four-year graduation rate) on a web page organized by school district in the coming year. The web page will start with current data and go forward so data from past years will need to be obtained from each school district or past DCFL reports (available for Class of 96 and Class of 97).
- For more information call the Data Management Team at the MN Department of Children, Families and Learning (651/296-2400).

19. Indicator: Rate of school disciplinary incidents

Definition:

Disciplinary incidents that are reported by school districts to the Department of Children, Families and Learning (DCFL). Disciplinary incidents refer to action taken by the school or district to suspend, expel, or exclude a student for a day or longer, or the removal of a student to an alternative educational setting for disciplinary reasons.

Data collection:

School districts annually report in July the number of students who have been subject to disciplinary action to the Department of Children, Families and Learning as part of the MARSS Reporting System.

Lag time:

Data for the previous school year are available in January.

Accessing data:

Data are not currently published in a report. DCFL plans to report number and an index statistic of disciplinary incident reports by school site, district, and statewide, as part of a web page organized by school district in early 1999. Historic data (prior to the 1997-98 school year) will not be available via this web page.

Contact at the district level:

The district contact will vary from district-to-district; start with the MARSS coordinator.

Data disaggregation:

Data disaggregation is limited. To request any type of new report or analysis, send a written request to Carol Hokenson, Department of Children, Families and Learning, Capitol Square Building, 550 Cedar Street, St. Paul, MN 55101. NOTE: Address will change in November 1998.

Computation of statistics:

Rate = (number of incidents divided by average daily membership in K-12 as of October 1) multiplied by 100.

Comparison:

Compare the rate to the previous years. Collaboratives will need to obtain historic data (prior to the 1997-98 school year directly from the school district).

Reports in which data are published:

None at this time. Data will be available in early 1999 on a web page organized by school and district.

Issues and hints:

- School districts might not refer to the person who assembles and reports this information to the Department of Children, Families and Learning as “the MARSS coordinator.” You may need to ask specifically: “Who assembles and reports student disciplinary data to the DCFL in this district?”
- Districts vary in how consistently these reports are submitted to the DCFL; collaboratives may want to verify the number of incidents reported with school administrators before using them to calculate statistics.
- Be sure to use the same denominator (K-12 enrollment as of October 1 – not PK-12 enrollment) from year to year when calculating the statistic.

- The Department of Children, Families and Learning is planning to post disciplinary data on a web page organized by school and district. The web page will start with current data and go forward so data from past years will need to be obtained from each school district or past reports.
- For more information call the Data Management Team at the MN Department of Children, Families and Learning (651/296-2400).