

Children's Cabinet

October 27, 2025

Agenda

- Welcome and Introductions
- Vote on adoption of August meeting minutes
- Engaging parents in Early Childhood Systems – presentation
- Faulkner – Strategic Planning Session
- Public Comment
- Adjournment



Family Leadership

Learning how to engage families in leadership to improve state systems

October 27, 2025



P-3 (Prenatal to Age 3) Systems Coordination Grant

Structure:

- \$265,000/year for 5 years (currently in year 5);
- Grant coordinator with full-time equivalent hours;
- Paid family leader contributing at least 20 hours/month; and
- Flexibility to meet specific state needs.

P-3 (Prenatal to Age 3) Systems Coordination Grant

Goals:

- 1- Strengthen infrastructure and capacity of the P-3 system through better integrating healthcare professionals & family leaders in governance & program implementation across the system.
- 2- Increase coordination and alignment by increasing inclusion of health care providers and families.
- 3- Support primary care to strengthen partnerships with all sectors of the P-3 early childhood services and programs
- 4- Implement policy and financing strategies that support funding sustainability for multi-generational, evidence-based preventive services that equitably support and improve outcomes.
- 5- Intentionally integrate RI's priorities and strategies to support all families in advancing early childhood systems.

P-3 (Prenatal to Age 3) Systems Coordination Grant

Accomplishments to Date

- Years 1 & 2: Blended funding with Preschool Development Grant to train Doulas and implemented Medicaid funding for Family Visiting.
- Year 3: Funded DULCE through Care Transformation Collaborative to support families by supporting primary care.
- Years 4 & 5: Supported parent involvement in program/systems leadership through Parent Leadership Training Institute (PLTI).
- Year 5: Supporting PLTI, breastfeeding support, and Little Harvests.

P-3 (Prenatal to Age 3) Systems Coordination Grant

*Family Leadership Online Survey and
Focus Group Feedback*

Parent/Family Leaders

Parent/Family leaders are individuals who use their lived experiences to drive positive change—in their families, communities, and at the state and national levels.

By building on their knowledge and skills, they step into leadership roles across programs, agencies, and communities.

As trusted advocates, they elevate the “parent voice,” shaping services and policies that better support families like their own.

Background

To better understand the needs, challenges, and opportunities for family engagement, Rhode Island Department of Health (RIDOH) conducted an online survey in November 2024 and online focus groups in January 2025.

Goals:

- Identify the types of engagement and leadership opportunities that families find most meaningful;
- Understand why families find it difficult to be part of decision-making processes; and
- Collect suggestions for ways to better involve families in early childhood programs, healthcare, schools, and community support programs.

Background

Online Survey

- Surveys available in English and Spanish; and
- 179 respondents from 25 towns and cities.

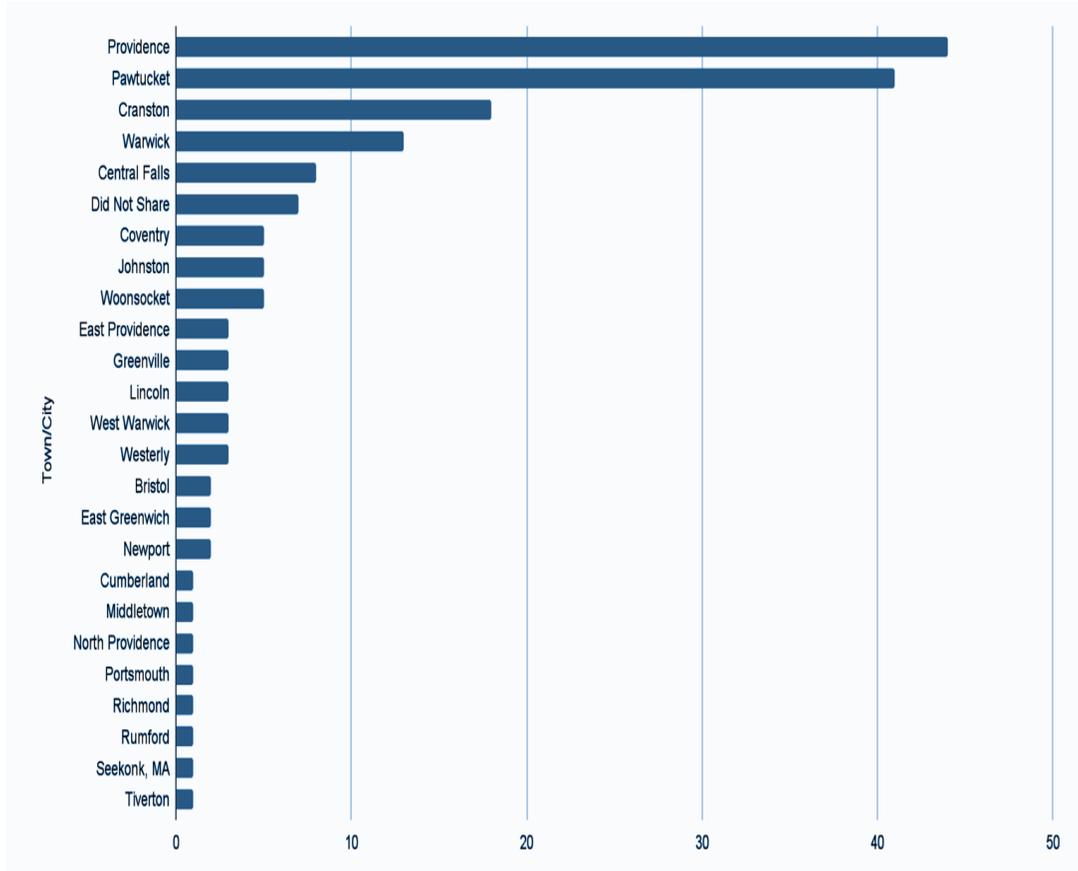
Focus Groups

- 4 online Zoom sessions with a Spanish interpreter present;
- 23 participants from 16 towns and cities;
- Had children mostly between ages 0-5;
- Diverse set of backgrounds.

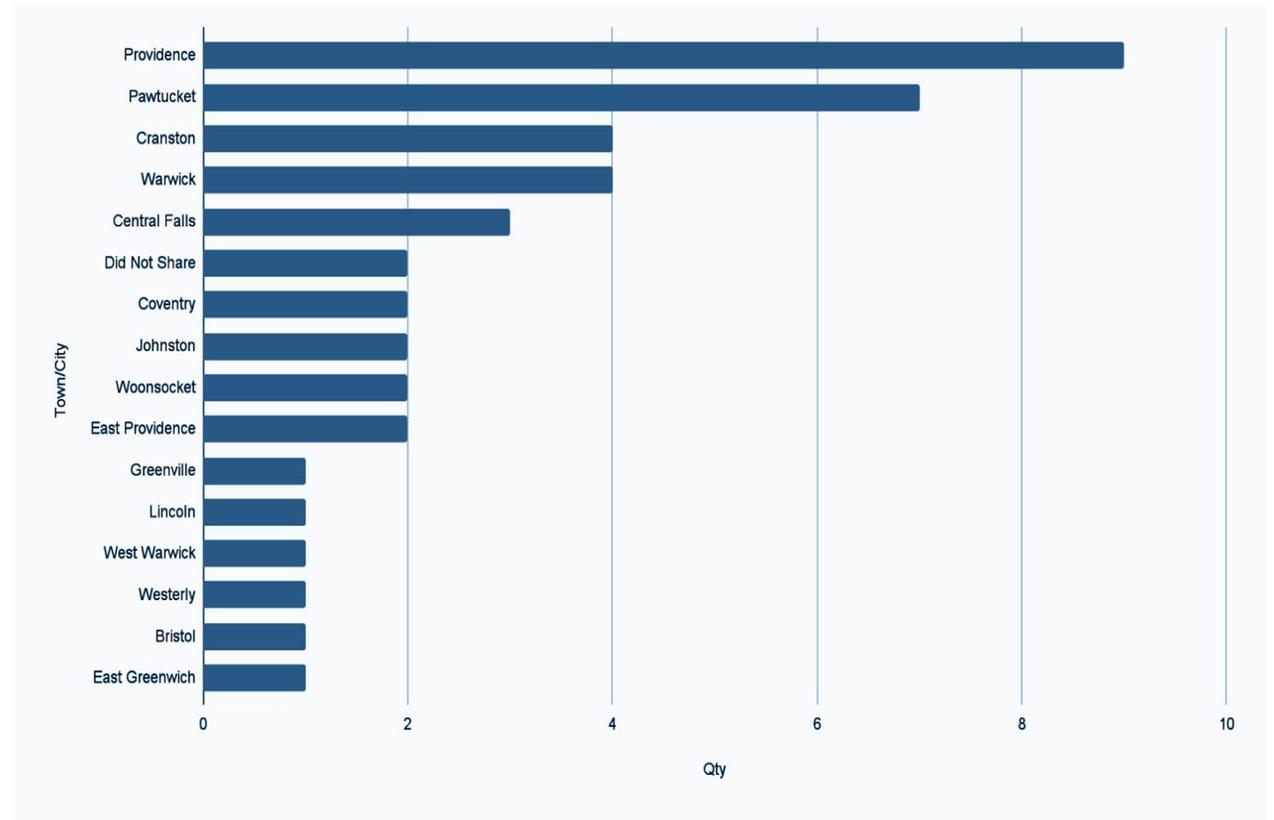
Overall Participation

- Primarily from Providence, Pawtucket, Cranston, and Warwick.

Participant Demographics: Residence

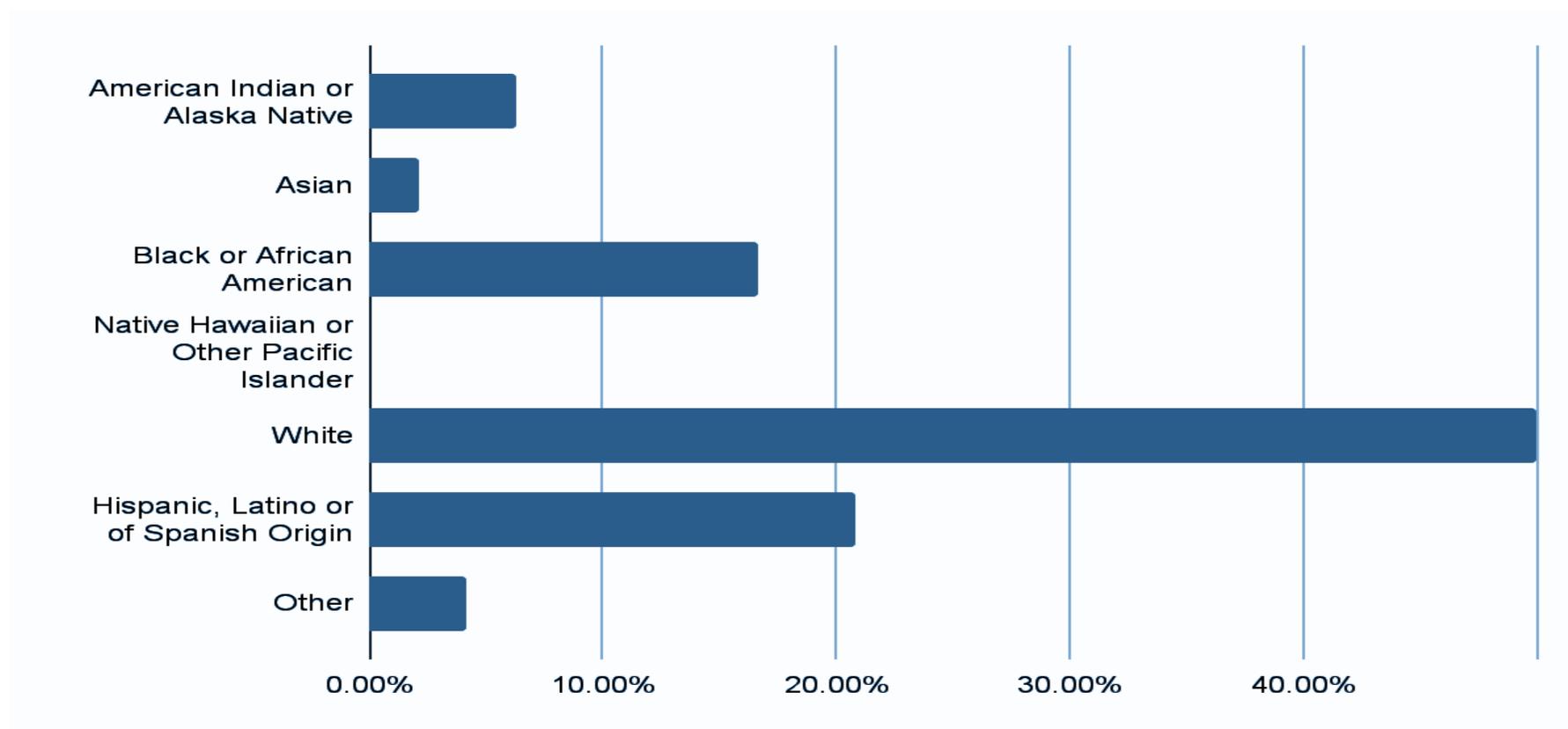


Survey Respondents



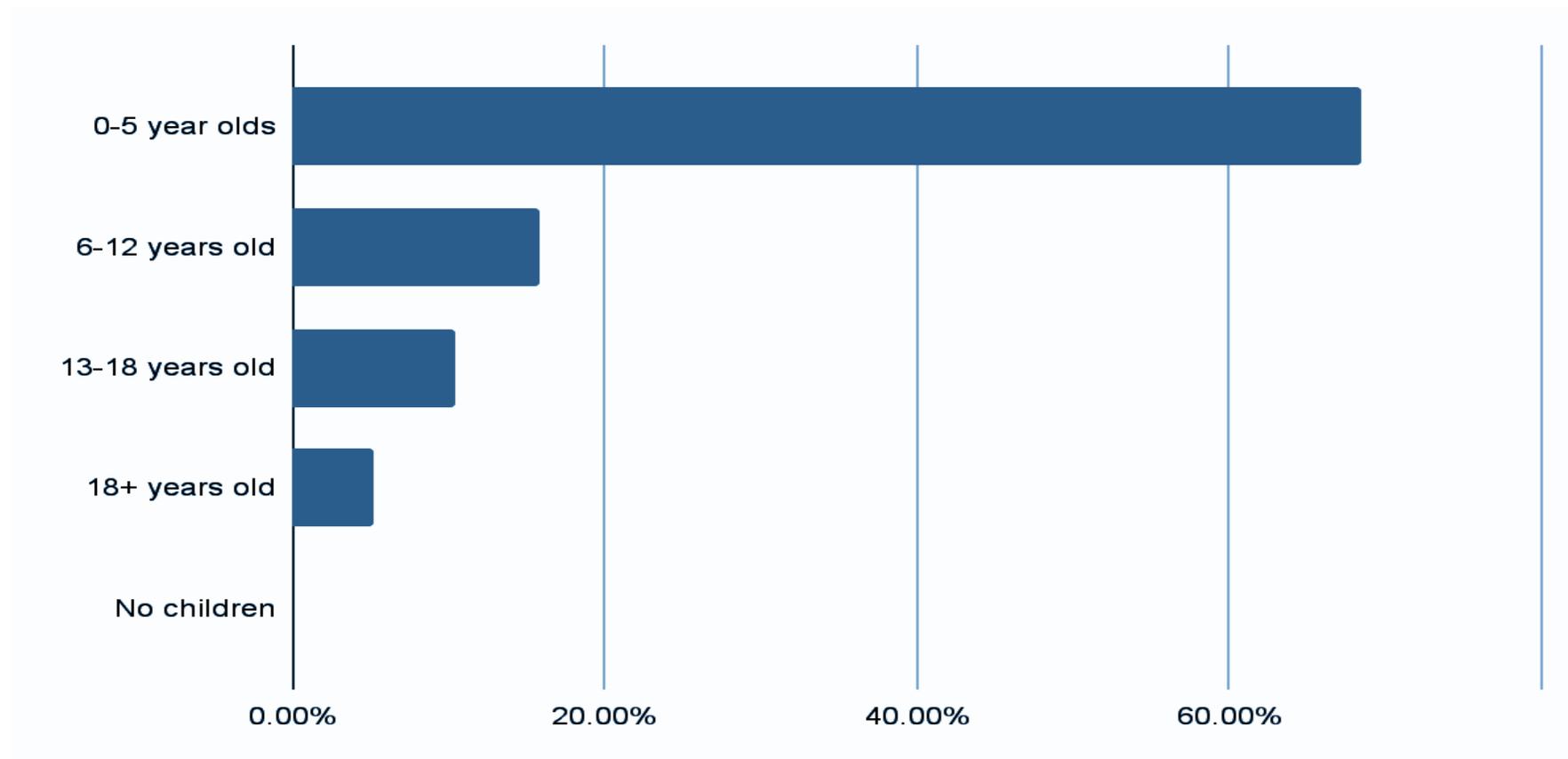
Focus Group Participants

Focus Group Participant Demographics: Race and Ethnicity



Focus Group Participant Demographics: Ages of Children

Focus groups included parents and caregivers with children mostly between ages 0-5.



How Families Want to Be Involved

Survey results show that families in Rhode Island are eager to be involved in their children's education and healthcare through a variety of different ways.

- Completing surveys
- Receiving information about opportunities
- Volunteering
- Participating in training

- Taking part in focus groups
- Participating in a parent family support group
- Being on an advisory board

How Families Want to Be Treated

Focus group families shared what made experiences positive:

- Professionals who listen
- Personalized guidance
- Involvement in decision-making
- Information on local resources and supports
- Follow-ups from system leaders and professionals

Need for Community and Connection

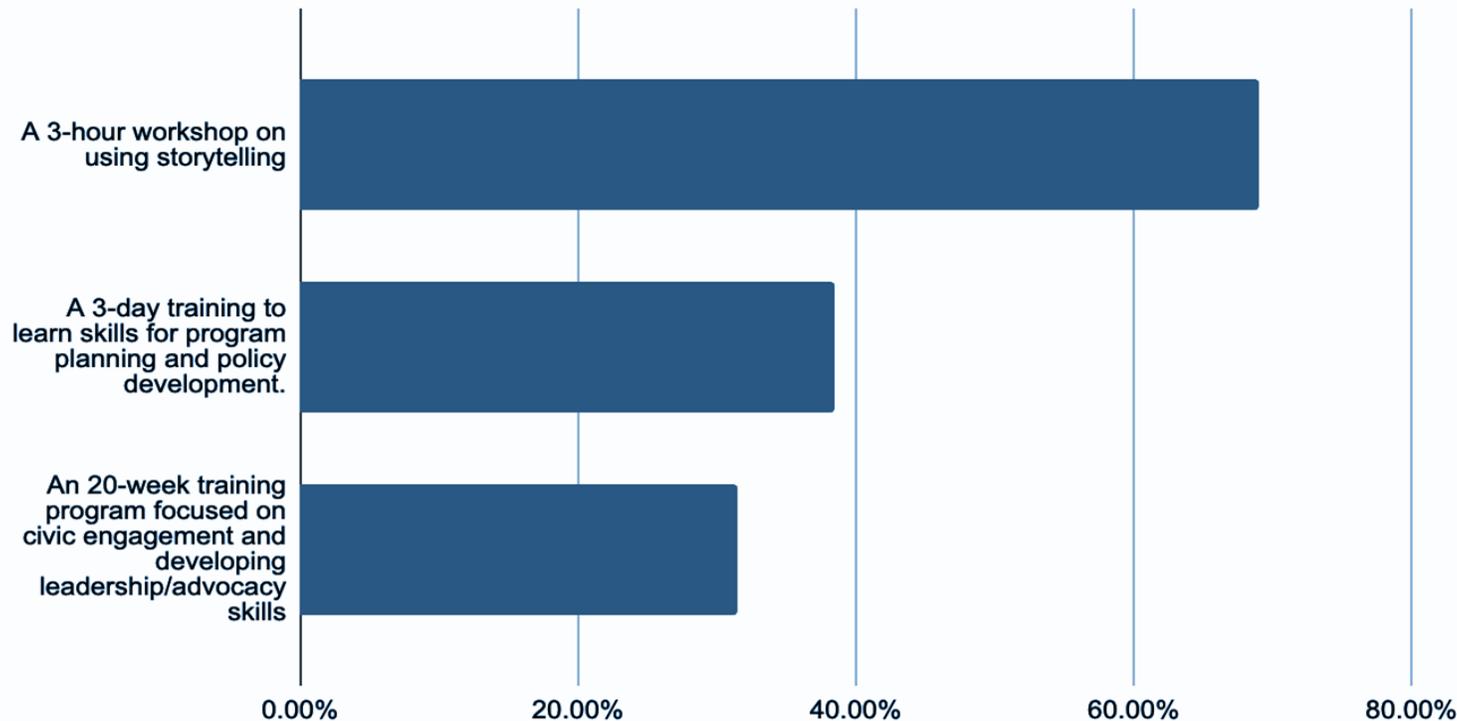
Focus group participants also spoke about the importance of community and connection.

Families want safe, welcoming spaces to connect with others, including:

- Parent groups and community building opportunities
- Workplace supports that acknowledges the dual roles of working parents/caregivers
- Support for healing, mental health, and personal growth

Interest in Family Leadership Training

Feedback showed participants had interest in joining leadership training programs that help them to advocate for their children and communities.



The most popular choice was a 3-hour workshop, teaching families how to use storytelling to share their message clearly and connect with organizations, funders, lawmakers, and others.

Challenges and Successes in Advocacy

Families shared via the survey that they have experienced more successes than challenges in advocacy.

When asked, “Have you **faced challenges** when advocating for your child and family with an organization, agency, policymaker, school, healthcare provider, etc?”

- 34.6% said YES to experiencing successes
- 65.4 said NO

When asked, “Have you **experienced successes** when advocating for your child and family with an organization, agency, policy maker, school, healthcare provider, etc.?”

- 76% said YES to experiencing successes
- 24% said NO

Barriers to Family Engagement

Despite families wanting to engage, they often face barriers making it hard for them to take part in their children's education, healthcare, or community events, such as:

- Limited time and access to information
- Financial challenges
- Lack of language accessibility
- Impact on mental health and well-being
- Lack of confidence

Recommendations to Systems Leaders

Families suggested ways to improve engagement

- Make it easier for families to find information about their community;
- Reach out to families ahead of important deadlines and meetings;
- Offer child care during meetings so parents can attend more easily;
- Provide financial support and incentives for participation; and
- Offer translation services and materials in different languages.

Recommendations to Systems Leaders

More ways to improve engagement

- Reach out and connect with non-English speaking families
- Support parents/caregivers with mental health resources
- Offer flexible ways for families to get involved
- Encourage parent/family engagement and leadership
- Create safe spaces for families to feel heard.

Field Notes

Insights from the ECCS Team and working with families

- Families scan for signals: translation, stipends, accommodations, etc.;
- Follow ups matter-families wanted to hear results;
- Social media promotions mentioning e-cards can lead to scams;
- Recruitment via listserv and private Facebook groups were most effective;
- Registration data highlighted that a noon time slot and virtual is preferred;
and
- Felt safety-icebreakers and intentions are important for engagement.

Additional Resources

Research shows that parent/family leadership helps make early childhood systems better. And there can be a gap between the desire for parent/family leadership and the capacity of systems to accommodate it.

Additional resources to consider:

- ❑ [Two Guides, One Goal: Partnering with Families to Transform Early Childhood Systems](#)
- ❑ [We're Glad You Asked! - What Can Parents Bring to Your Table?](#)
- ❑ [Stepping Up and Speaking Out: The Evolution of Parent Leadership in Michigan](#)
- ❑ [5 years of parent voices - RAPID Survey report](#)

An Executive Summary and full written report on our findings from the online survey and focus groups will be made publicly available soon.

Thank You

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RI Children's Cabinet Strategic Plan 2026 – 2030

RI Children's Cabinet Meeting 3
Review and Refine
October 27, 2025

Agenda & Goals for Today's Meeting

Today we will review refinements made to the strategic plan based on feedback collected at the last meeting and discuss success measures.

Agenda

1

Remind: Strategic Planning Process & Timeline

2

Refine: Review Refinements Based on Cabinet Feedback

3

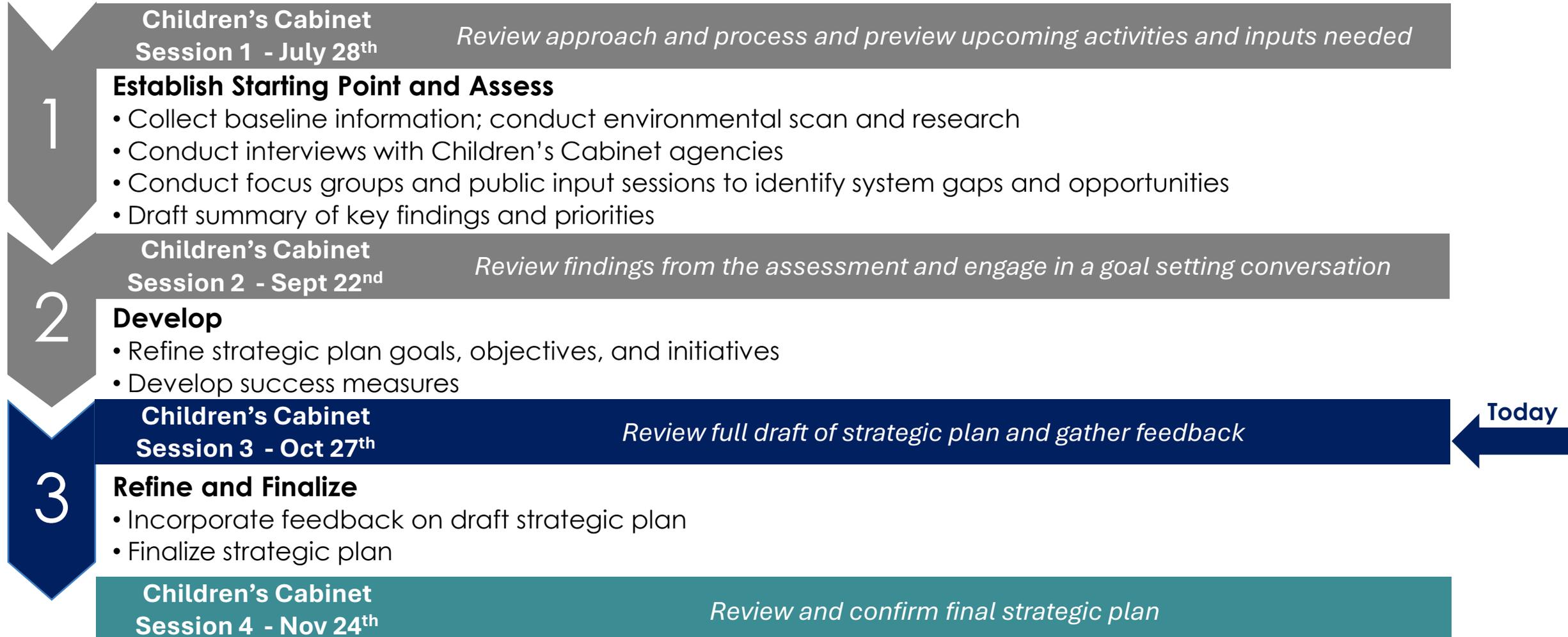
Discuss: Success Measures

4

Preview: Next Steps

Strategic Planning Process & Timeline

We have completed Phase 1 and 2. Today we will review the full draft strategic plan, which we will refine and finalize in the third and final phase of this process.



Summary of Feedback

We received feedback during the last Children's Cabinet meeting and via follow-up survey.

Goal 1:

Provide interagency coordination and leadership that drives improvement in the well-being of Rhode Island's children and youth.

- Expand the Cabinet's focus beyond health*
- Ensure Cabinet scope includes *all* children and youth (not just those involved in agency systems)*
- Ensure alignment with RI 2030 priorities*
- Clarify age range for "children and youth"*
- Avoid duplicative efforts with other interagency forums
- *Strengthen collaboration among state agencies*
- *Adopt an upstream focus and build up preventive initiatives to support children and youth before they become involved/at risk ^*

Goal 2:

Strengthen the Children's Cabinet's capacity to execute on its Mission.

- Decide whether interagency staff team representatives are content experts or coordinators*
- Form ad hoc committees to ensure the right staff / experts are present*
- Leverage existing measure sets and avoid duplicative reporting
- Create annual report on outcomes and activities
- *Engage community partners in the Cabinet's work**

Goal 3:

Align and maximize available funding to advance interagency priorities.

- Leverage the state budget process to propose any needed updates to statute*
- Establish an annual process for coordinating on state budget requests, considering key state budget deadlines*

* = Strategic plan refinement made
 ^ = Potential focus area
 Community feedback via survey

Refinements to Goal 1

Feedback Not Reflected in Original Draft	Location of Suggested Edit
Expand the Cabinet's focus beyond health	[O1] [S1]
Ensure Cabinet scope includes <i>all</i> children and youth (not just those involved in agency systems)	[O1] [S1]
Ensure alignment with RI 2030 priorities	[O1] [S1]
Clarify age range for "children and youth"	[O1] [S1]



External Stakeholders
(Rhode Island Children and Youth)

Goal 1:

Provide interagency coordination and leadership that drives improvement in the well-being of Rhode Island's children and youth

Objectives

[O1] Maximize collective impact

[O2] Improve outcomes for RI's children and youth

Strategic Initiatives

[S1] Ensure priorities are selected with consideration for serving *all* RI children and youth (ages 0-24), advancing the goals of RI 2030, and incorporating priorities across health, education, and workforce

[S2] Clearly define scope within the context of other interagency forums and coordinate as needed

[S3] Restructure meeting purpose, structure, and process around selected focus areas and work issues across multiple meetings

[S4] Strengthen interagency data-sharing, coordination, and collaboration

[S5] Work across agencies to understand, address, and communicate federal policy changes

[S1] Establish a data-driven framework and process for selecting focus areas

[S2] Select a limited number of high-impact priority and/or population focus areas

[S3] Develop a process for executing selected initiatives within focus areas

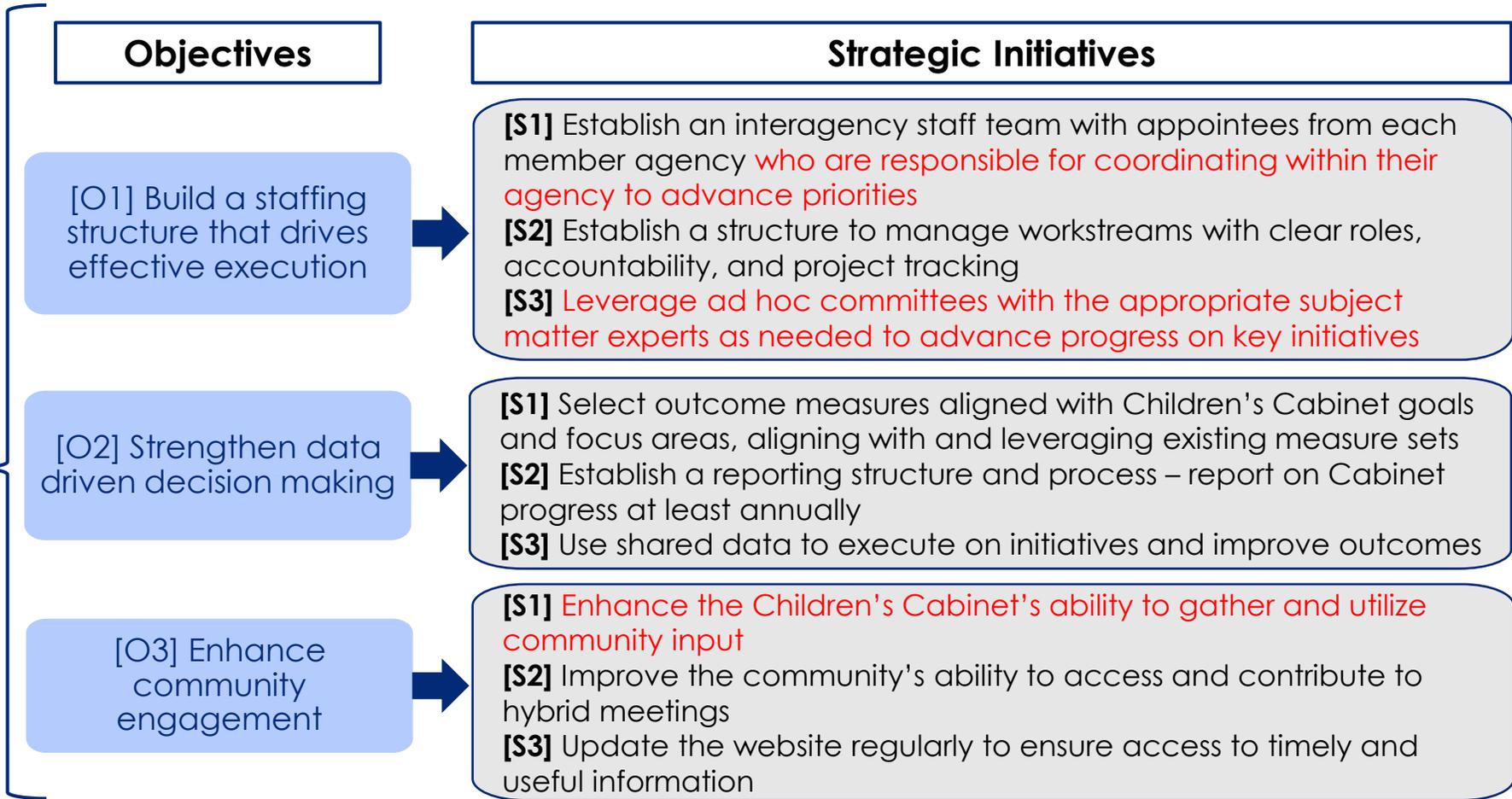
Refinements to Goal 2

Feedback Not Reflected in Original Draft	Location of Suggested Edit
Decide whether interagency staff team representatives are content experts or coordinators	[O1] [S1]
Form ad hoc committees to ensure the right staff / experts are present	[O1] [S3]
Engage community partners in the Cabinet's work	[O3] [S1]



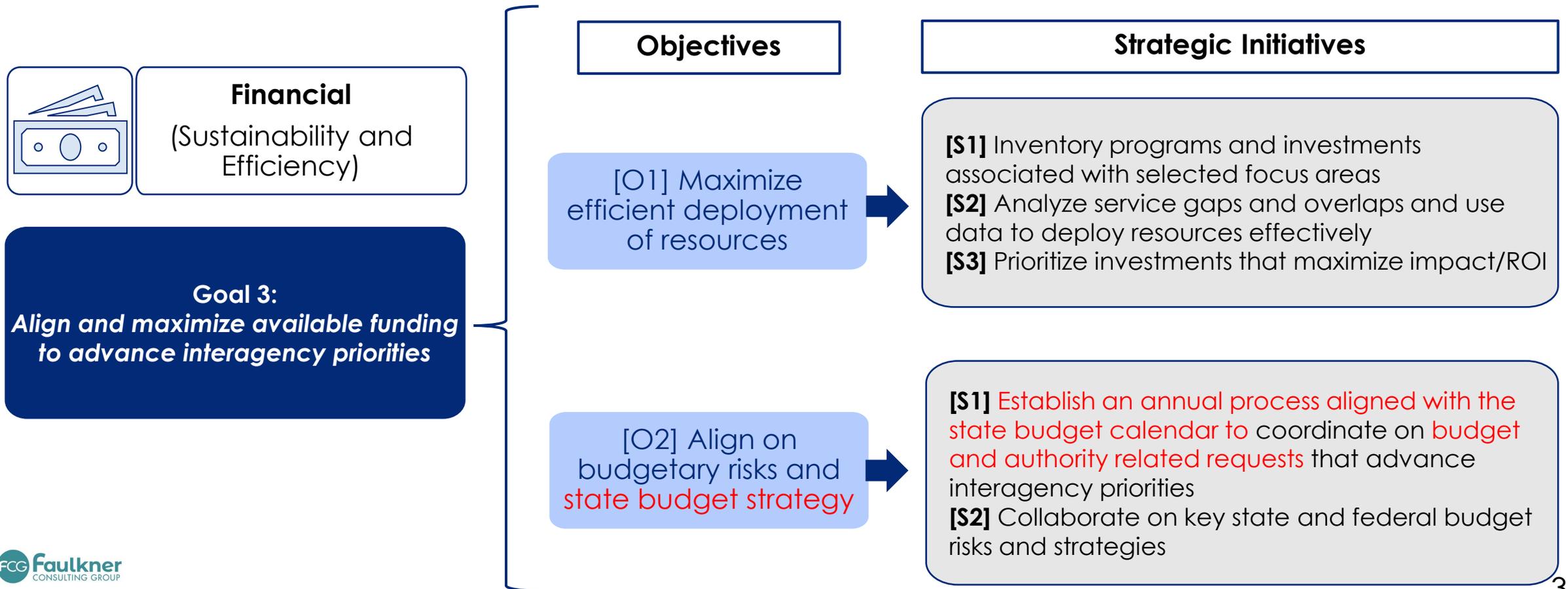
Organizational Capacity & Effectiveness
(People, Culture, Infrastructure, Systems, Processes)

Goal 2:
Strengthen the Children's Cabinet's capacity to execute on its Mission



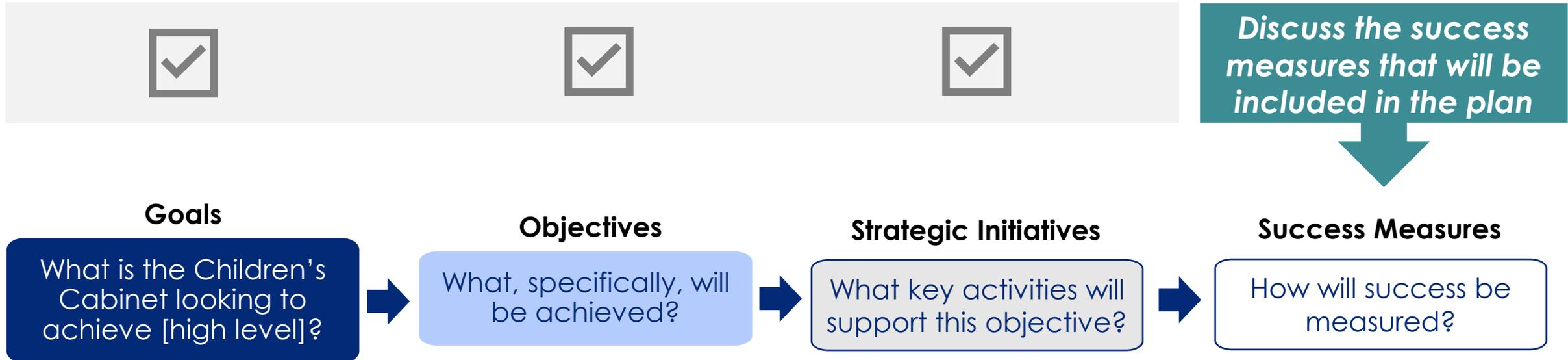
Refinements to Goal 3

Feedback Not Reflected in Original Draft	Location of Suggested Edit
Leverage the state budget process to propose any needed updates to statute	[O2][S1]
Establish an annual process for coordinating on state budget requests, considering key state budget deadlines	[O2][S1]



Review and Discuss Success Measures

During today's working session, we are aiming to:



We have drafted success measures corresponding to the goals, objectives, and initiatives we reviewed in the prior section – **together we will refine and adapt this starting point** to establish the measures that will be included in the final plan.

Success Measures: Introduction

The purpose of these measures is to track the Children's Cabinet's success in achieving the goals and objectives articulated in the strategic plan.

We will discuss three types of measures:

Process measures intended to evaluate the implementation of key strategic initiatives

- Have key initiatives been implemented to achieve the Cabinet's goals and objectives?
 - *Ex: Implementation of new meeting structure and process*

Satisfaction measures intended to evaluate stakeholder perceptions of the implementation process

- How satisfied are the Cabinet agencies and relevant parties with the implementation of the strategic initiatives?
 - *Ex: Member agency satisfaction with meetings, data sharing, and overall coordination and collaboration*

Outcome measures intended to evaluate impact on outcomes for RI children and youth

- Has there been improvement in outcome measures for RI children and youth related to selected focus areas?
- These measures will be selected to align with the Cabinet's priority focus areas
 - *Ex: Student chronic absenteeism rate (focus area: education outcomes)*

Goal 1: Potential Success Measures



**Goal 1:
Provide
interagency
coordination
and
leadership
that drives
improvement
in the well-
being of
Rhode Island's
children and
youth**

Objectives

**[O1] Maximize
collective
impact**

**[O2] Improve
outcomes for RI's
children and
youth**

Strategic Initiatives

[S1] Ensure priorities are selected with consideration for serving *all* RI children and youth (ages 0-24), advancing the goals of RI 2030, and incorporating priorities across health, education, and workforce
[S2] Clearly define scope within the context of other interagency forums and coordinate as needed
[S3] Restructure meeting purpose, structure, and process around selected focus areas and work issues across multiple meetings
[S4] Strengthen interagency data-sharing, coordination, and collaboration
[S5] Work across agencies to understand, address, and communicate federal policy changes

[S1] Establish a data-driven framework and process for selecting focus areas
[S2] Select a limited number of high-impact priority and/or population focus areas
[S3] Develop a process for executing selected initiatives within focus areas

Success Measures

[SM1] Establishment of focus area selection criteria that ensure the Children's Cabinet considers its objectives and the work of other interagency forums as it selects priority focus areas
[SM2] Implementation of new meeting structure and process
[SM3] Member agency satisfaction with meetings, data sharing, and overall coordination and collaboration

[SM1] Completion and documentation of framework and process for selecting focus areas
[SM2] Selection of high-impact focus areas and targeted outcomes measures
[SM3] Meet or exceed targeted outcomes for each focus area [measures TBD]

Goal 2: Potential Success Measures



**Goal 2:
Strengthen the
Children's
Cabinet's
capacity to
execute on its
Mission**

Objectives

[O1] Build a staffing structure that drives effective execution

[O2] Strengthen data driven decision making

[O3] Enhance community engagement

Strategic Initiatives

[S1] Establish an interagency staff team with appointees from each member agency who are responsible for coordinating within their agency to advance priorities
[S2] Establish a structure to manage workstreams with clear roles, accountability, and project tracking
[S3] Leverage ad hoc committees with the appropriate subject matter experts as needed to advance progress on key initiatives

[S1] Select outcome measures aligned with Children's Cabinet goals and focus areas, aligning with and leveraging existing measure sets
[S2] Establish a reporting structure and process – report on Cabinet progress at least annually
[S3] Use shared data to execute on initiatives and improve outcomes

[S1] Enhance the Children's Cabinet's ability to gather and utilize community input
[S2] Improve the community's ability to access and contribute to hybrid meetings
[S3] Update the website regularly to ensure access to timely and useful information

Success Measures

[SM1] All member agencies have appointed a staff person to the interagency staff team
[SM2] Establishment of interagency staff team project management structure and processes
[SM3] Member agency satisfaction with structure, role clarity, and accountability

[SM1] Establishment of annual report on selected outcome measures
[SM2] Member agency satisfaction with data reporting, data quality and use of shared data in decision-making

[SM1] Average # of non-Cabinet member participants in Cabinet meetings
[SM2] Member agency and external stakeholder satisfaction with enhancements [i.e., meeting structure, input gathering, website]

Goal 3: Potential Success Measures



**Goal 3:
Align and maximize available funding to advance interagency priorities**

Objectives

[O1] Maximize efficient deployment of resources

[O2] Align on budgetary risks and state budget strategy

Strategic Initiatives

[S1] Inventory programs and investments associated with selected focus areas
[S2] Analyze service gaps and overlaps and use data to deploy resources effectively
[S3] Prioritize investments that maximize impact/ROI

[S1] Establish an annual process aligned with the state budget calendar to coordinate on budget and authority related requests that advance interagency priorities
[S2] Collaborate on key federal and state budget risks and strategies

Success Measures

[SM1] Complete inventory of programs and investments associated with selected focus area
[SM2] Member agency satisfaction with resource prioritization and utilization

[SM1] Implementation of annual process aligned with state budget calendar
[SM2] Member agency satisfaction with coordination, collaboration, and alignment on agency budget requests and shared risks and strategies

Next Steps

We will integrate feedback from today's meeting to finalize the strategic plan.

We will provide an update on the final strategic plan at the **next meeting of the Children's Cabinet on November 24th from 2-3 pm**

- **In-Person:** Department of Administration, One Capitol Hill, 4th Floor
- Executive Conference Room, Providence, RI, 02908
- **Zoom:**
<https://riema.zoom.us/j/95389476268?pwd=sj16Fq5sMTYgr3F4WqixaPAanzxSVm>

Children's Cabinet
Meeting Link:





Appendix

Sample Focus Area Selection Framework

Sample Focus Area Selection Framework

This plan envisions the establishment of a framework and process that enables the Children’s Cabinet to select high-impact focus areas and associated priorities and outcome measures.

This process is envisioned to have two key components

1 Selection of Focus Areas

The Children’s Cabinet selects focus areas, considering criteria such as, “do the focus areas selected...”

- Incorporate priorities across health, education, and workforce?
- Incorporate priorities impacting a representative range of RI children and youth (ages 0-24)?
- Align with and advance the goals of RI 2030?
- Create duplication with any other interagency forum already working on or better positioned to address this focus area?

2 Selection of Priorities & Outcome Measures

The Children’s Cabinet adopts priorities and relevant outcome measures within each selected focus area

	Potential Focus Areas	Primary Domain	Populations Impacted	RI 2030 Aligned	Addressed by Another Interagency Forum	Priorities	Outcome Measures
EXAMPLE	Adolescent Substance Use	Health	Young adulthood	Yes	TBD	<i>See detailed slides for examples</i>	

Sample Focus Area Selection Framework - Details

Potential Focus Area

A non-exhaustive list of potential focus areas gathered from the stakeholder engagement sessions

Potential Priorities

A non-exhaustive list of potential priorities gathered from the stakeholder engagement sessions

Example Outcome Measures

Example measures that could be used to evaluate the impact of the Children's Cabinet's work on outcomes for RI children and youth

Measures come from the annual RI Kids Count report, RI state agency performance metrics, RI 2030 performance metrics, and national reports that include state-level data

Alignment with RI 2030

Areas of overlap between the potential priorities for the Children's Cabinet and the target areas of RI 2030

Focus Area – Adolescent Substance Use (Youth SUD)

Potential Focus Area

Adolescent Substance Use (Youth SUD)

Potential Priorities

- Coordinate prevention, early identification, treatment, and recovery supports
- Strengthen hand-offs between programs and agencies
- Stand up adolescent-appropriate care including residential step-downs

Example Outcome Measures

- Number of high school students reporting smoking, e-cig use, cigarette use, cigar use, or smokeless tobacco use (*Kids Count*)
- Percent of children 12-25 that did not receive substance use treatment in the past year, but are classified as needing it (*NSDUH Report*)
- Percent of juvenile offenses related to alcohol and drugs (*Kids Count*)

Alignment with RI 2030

RI 2030 also focuses on substance use and seeks to produce the following outcomes related to youth:

- Continue initiatives that prevent and reduce opioid overdose and fatalities
- Reduce current e-cigarette use in youth from 16.5 percent (2023 YRBS) to 10.1 percent by 2030
- Ensure a continuum of care to meet the needs of children and adolescents

Focus Area – Youth Behavioral Health Crisis

Potential Focus Area

Youth Behavioral Health Crisis

Potential Priorities

- Align school-, community-, and home-based services with crisis pathways
- Sustain and scale mobile response and stabilization
- Adapt CCBHC infrastructure to children’s needs
- Reduce institutional stays via home/community options

Example Outcome Measures

- Number of children 19 or younger that had a mental health related emergency department visit (*Kids Count*)
- Number of children 18 or younger treated at Rhode Island psychiatric hospitals (*Kids Count*)

Alignment with RI 2030

RI 2030 also focuses on behavioral health and seeks to produce the following outcomes related to children and youth:

- Improve and expand in-state behavioral healthcare services for children
- Ensure a continuum of care to meet the needs of children and adolescents

Focus Area – Access to Services (No Wrong Door)

Potential Focus Area

Access To Services
(No Wrong Door)

Potential Priorities

- Create a family facing navigation hub
- Publish and maintain a living cross-agency inventory of programs and services
- Coordinate plain-language, multilingual, printed outreach materials at universal touchpoints
- Improve re-engagement pathways for disconnected youth
- Normalize accessing DCYF services and supports, removing stigma

Example Outcome Measures

Selection of program and service access measures, e.g.:

- Number of children and youth enrolled in Medicaid (*EOHHS*)
- Number of children participating in SNAP (*Kids Count*)

Alignment with RI 2030

- RI 2030 also focuses on empowering individuals to navigate the system and aligning resources to meet needs:
- Empower individuals to navigate the healthcare system, understand medical information, and utilize tools like telehealth and self-monitoring to make informed decisions and take control of their health.
 - Universally screen all students academically, socially, and emotionally, and align resources to those needs.

Focus Area – Prevention & Social Determinants

Potential Focus Area

Prevention & Social Determinants

Potential Priorities

- Adopt an upstream focus and build up preventive initiatives to support children and youth before they become at risk
- Address social determinants that impact outcomes for children and youth as part of a whole-child agenda (e.g., housing, transportation, nutrition)
- Keep families connected to primary care & preventive services

Example Outcome Measures

- Percent of children fully immunized by 24 months (*Kids Count*)
- Number children and youth experiencing homelessness (*Kids Count*)
- Rhode Island's child poverty rate (*Kids Count*)
- Blood lead screening at 18 months (*DOH*)

Alignment with RI 2030

RI 2030 also focuses on prevention:

- Invest in preventive health and behavioral health initiatives to ensure children are on track for child and adolescent well visits, vaccinations, lead screenings, and behavioral health screenings.

Focus Area – Transitions And Handoffs

Potential Focus Area

Transitions And Handoffs

Potential Priorities

- Assign clear owners and service-level expectations for key transitions (e.g., Early Intervention (EI)→preschool Special ED (SPED))
- Reduce time-to-service and reductions in service access across transitions
- Improve service access and continuity for high-risk populations (e.g., youth in foster care, justice involved youth, and students with disabilities)

Example Outcome Measures

- Percent of children who reached age three while in EI and had eligibility determined for preschool special education (*RI Kids Count*)
- Percent of eligible former foster youth enrolled in Medicaid coverage (*RI Kids Count*)

Alignment with RI 2030

RI 2030 also focuses on improving transitions, especially related to education:

- Collaborate with the early learning sector to ensure coordination and alignment in order to improve transitions and ensure all students enter kindergarten on a path to reading proficiently.
- Increase coordination and alignment between the early learning system and the K-12 school system in each community to ensure all children are on a path to academic success.

Focus Area – Workforce Challenges

Potential Focus Area

Workforce Challenges

Potential Priorities

- Early childhood workforce: address wages, pipelines and infant/toddler slot capacity
- School- & community-based BH & nursing: expand pipelines; fund paid professional development and stackable credentials
- Teacher pipeline & shortage areas: targeted recruitment, preparation and retention

Example Outcome Measures

- Early learning program licensed capacity (*Kids Count*)
- Average annual salary of early childhood teachers and program directors compared to kindergarten teachers and K-12 school administrators (*Kids Count*)
- Percent of licensed early learning centers that accept children participating in the Child Care Assistance Program (*Kids Count*)

Alignment with RI 2030

RI 2030 also focuses on supporting the workforce that serves children and youth:

- Ensure that providers of key children’s services can hire and retain staff and address the need for services by enhancing wages and providing professional development opportunities.
- Create 5,000 new state-funded work-based-learning opportunities by 2030
- Increase the percentage of Rhode Islanders with postsecondary degrees to the level of its southern New England neighbors and increase the percentage of Rhode Islanders with postsecondary credentials

Focus Area – Early Learning Capacity & Inclusion

Potential Focus Area

Early Learning Capacity & Inclusion

Potential Priorities

- Stabilize infant/toddler care capacity with braided financing and provider supports
- Pair state Pre-K growth with special-education capacity
- Expand on-site therapies in community and family childcare settings
- Strengthen inclusion for children with significant developmental needs

Example Outcome Measures

- Percentage of children ages 3 and 4 enrolled in Head Start or RI Pre-K (*Kids Count*)
- Enrollment in programs with a high quality BrightStars rating (*Kids Count*)
- Preschool special education screen, eligibility, and inclusion rates (*Kids Count*)

Alignment with RI 2030

- RI 2030 also focuses on stabilizing, expanding, and strengthening early learning capacity and inclusion:
- Expand Rhode Island’s nationally top-ranked Pre-K program through a mixed delivery system that strengthens the entire ‘birth through age five’ system, inclusive of Head Start, Family Child Care, and center-based care
 - Increase coordination and alignment between the early learning system and the K-12 school system

Focus Area – Education Outcomes

Potential Focus Area

Potential Priorities

Example Outcome Measures

Education Outcomes

- Re-create shared campaigns (e.g., grade-3 reading)
- Reduce chronic absenteeism
- Improve graduation and postsecondary success
- Prioritize system-involved youth and students with disabilities

- Student chronic absenteeism (*RI 2030*)
- High school graduates earning Diploma Plus (*RI 2030*)
- Student graduation rate (*Dept. of Elementary and Secondary Education, Kids Count*)
- Post-secondary success indicator (*Dept. of Elementary and Secondary Education*)
- Disparities in school discipline by special education status and race/ethnicity (*Kids Count*)

Alignment with RI 2030

RI 2030 also focuses on supporting educational outcomes for RI children and youth:

- Reach or exceed Massachusetts' educational outcomes by 2030
- Universally screen all students academically, socially, and emotionally, and align resources to those needs
- Continue to build CTE programs designed to provide students with academic and experiential skills

Public Comment

