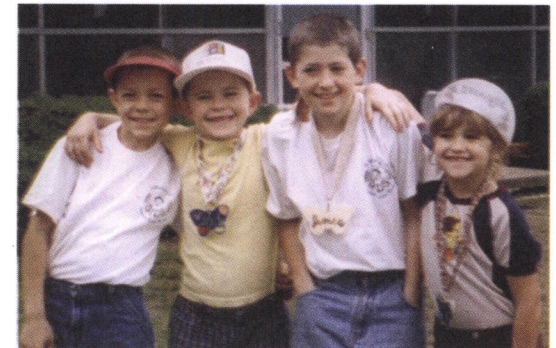
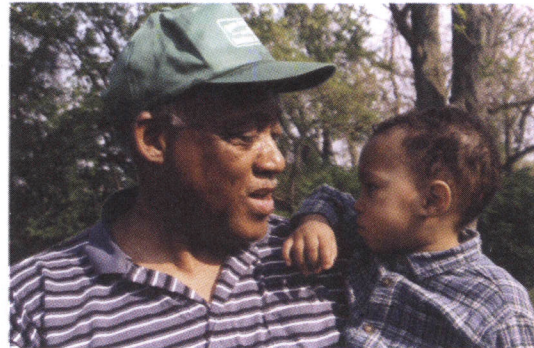
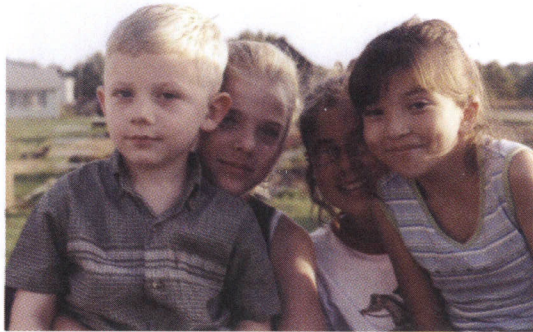


WELL-BEING CHALLENGES & STRENGTHS FOR QUEEN ANNE'S COUNTY CHILDREN



A YEAR 2002 ASSESSMENT AND STRATEGY SUMMARY OF QUEEN ANNE'S COUNTY RESULT AREAS FOR CHILDREN AND YOUTH

JANUARY 2003

Queen Anne's County
**COMMUNITY PARTNERSHIPS
FOR CHILDREN**
Our Local Management Board



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Centerville, MD 21617

Phone 410-758-6677



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ACKNOWLEDGEMENTS

The Queen Anne's County Community Partnerships for Children would, most importantly, like to thank the citizens of Queen Anne's County for your vital input toward the completion of this document. On the subject of children, you have openly expressed your views and honestly shared your concerns and ideas. Over the past few years at least 2,000 citizens have filled out surveys, met with public officials and attended community meetings. You have done this to help make Queen Anne's County children stronger, healthier, and safer. You have worked beside public servants such as teachers, nurses, law enforcement officers, social workers, juvenile intake workers, mental health counselors, and addictions counselors. Your ideas have become reality through projects such as FABRIC, HotSpots, Families First, Mom Movers, Response to Violence, Partnering For Youth, Healthy Families, Resource Promotion and Awareness Program, and the Community Partnership Plan. We salute you for your time and dedication and ask you continue to work along side of us as we confront our challenges and celebrate our strengths.

We would also like to thank the numerous public agencies and community organizations who have partnered along with us toward a mission of strengthening and preserving families. These include, but are not limited to: Alcohol and Drug Abuse Services, *Bay Times*, Board of Education of Queen Anne's County, Camp Pecometh, Camp Wright, Centreville Town Police, Chesapeake



College, Chesapeake College Child Care Resource Center, Child Care Administration, Council for Children and Youth, Crossroads Community, Department of Natural Resources, Even Start, Families First, Governor's Council on Adolescent Pregnancy, Governor's Office of Children, Youth and Families, Governor's Office of Crime Control and Prevention, Grasonville Community Center, Head Start, Infants and Toddlers Program, Inter-agency Council for Teen-age Pregnancy and Parenting, Kent & Queen Anne's Hospital, Local Management Boards of the Mid-Shore, Maryland Department of Health and Mental Hygiene, Maryland Department of Human Resources, Maryland Infant Mortality Commission, Maryland State Department of Education, Maryland State Police, Memorial Hospital at Easton, Mid-Shore Perinatal Advisory Council, Parent/Teacher Associations, Partnering For Youth Advisory Council, Prevention Office, Queen Anne's County Arts Council, Queen Anne's County Commissioners, Queen Anne's County Department of Business and Tourism, Queen Anne's County Department of Juvenile Justice, Queen Anne's County Department of Social Services, Queen Anne's County Health Department, Queen Anne's County Parks and Recreation, Queen Anne's County Sheriff's Department, Queen Anne's County State's Attorney's Office, *Record Observer*, School-Based Wellness and Behavioral Health Planning Team, United Way, University of Maryland Extension Office, and Washington College.

TABLE OF CONTENTS

Background and Report Format	1-2
Queen Anne's County Profile	3-5
Result Area 1: Babies Born Healthy	6-7
Result Area 2: Healthy Children	8-9
Result Area 3: Children Enter School Ready to Learn	10-11
Result Area 4: Children Successful in School	12-13
Result Area 5: Children Completing School	14-15
Result Area 6: Children Safe in Their Families and Communities	16-17
Result Area 7: Stable and Economically Independent Families	18-19
Result Area 8: Communities Which Support Family Life	20-21
Selected Community Partnership Plan Result Areas and Strategies	22-23
Additional Data	24-25
Community Assets	26-27
Information Sources	28-29



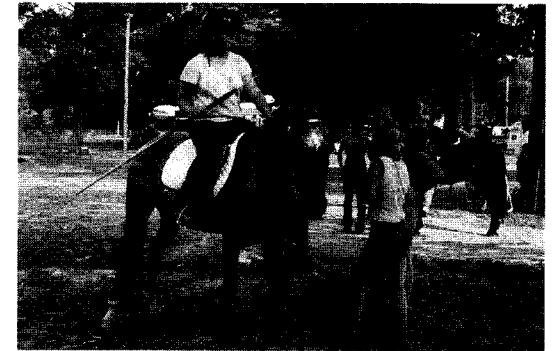
WELL-BEING CHALLENGES & STRENGTHS FOR QUEEN ANNE'S COUNTY CHILDREN A YEAR 2002 ASSESSMENT AND STRATEGY SUMMARY OF QUEEN ANNE'S COUNTY RESULT AREAS FOR CHILDREN AND YOUTH

As part of a "Systems Reform Initiative" under the authority of the Governor's Office of Children, Youth, and Families (OCYF), the State of Maryland created the designation of Local Planning Entities, later called "Local Management Boards" or LMB, in 1997. Funding resources were shifted from state departments to local jurisdictions with the goal to "ensure the implementation of a local interagency service delivery system for children, youth, and families." As an interagency entity composed of public and private members, each LMB was awarded long-term funds and encouraged to organize independently of State structure. In Queen Anne's County, the "Community Partnerships for Children," a quasi-governmental organization, was established with the approval of the Queen Anne's County Commissioners and the support of local public agencies having family and child preservation interests.

In recent years, OCYF has given the Local Management Boards across the State of Maryland the opportunity to competitively apply for supplemental funding toward efforts "to implement a full continuum of integrated services to children and families throughout the jurisdiction." Coincidentally referred to as the "Queen Anne's County Community Partnerships for Children," the LMB was one of three counties to be awarded these specialized funds in 2000.

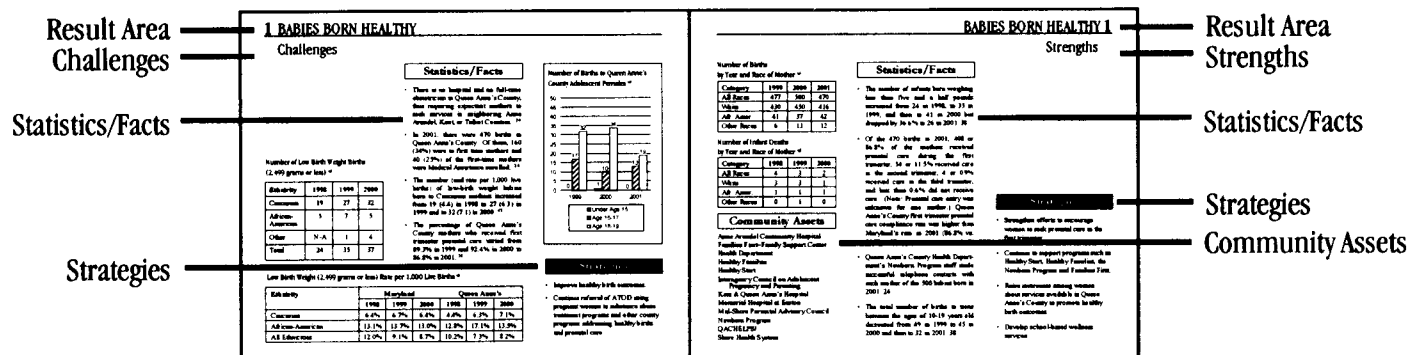
To foster efficient and effective service delivery for children and their families in Queen Anne's County and to complement the Community Partnership Plan, the LMB chose to commission a comprehensive needs assessment summary in 2000. This document is the updated 2002 version and is titled "Well-Being Challenges and Strengths for Queen Anne's County Children."

With both a needs assessment and strategic plan featured, the summary is formatted to highlight issues needing attention (challenges), outcomes showing promise (strengths), and other considerations. The report includes a county profile, a needs assessment, a strategic plan, and a list of community resources (or assets). A description of each of the report components is on the following page.



REPORT FORMAT

Result Areas – “Result Areas” are **long-term goals** for children, families and the communities in which they live. Maryland has identified eight Result Areas (or goals) affecting a child’s well-being or health, happiness, and security. Each LMB in Maryland generally strives to meet all Result Areas while emphasizing select Result Areas based on local statistics or facts. Queen Anne’s County LMB currently prioritized two goals: *Children Enter School Ready To Learn* and *Communities Which Support Family Life*. State and local statistics are routinely monitored to track the success or lack of success toward meeting Result Areas. These statistics or facts are also referred to as “indicators.” For example, an indicator of “Children Enter School Ready To Learn” is the number of preschool and childcare programs available for county youth. OCYF has suggested a list of indicators for the Result Areas, but each county is invited to customize their Result Area indicators.



Challenges, Strengths and Other Considerations – Data that may demonstrate progress toward reaching each Result Area is presented in two ways. First, if information trends are moving in a negative direction, or if compared to the state as a whole, show poor outcomes, then the data is placed in the “**Challenges**” category. Challenge data implies that efforts should be made to investigate the benefits of current services and to create new or expanded services to meet needs. Data listed under the “**Strengths**” category shows movement in a positive direction or, when compared to the State of Maryland, shows better outcomes. It is hoped services linked to the positive data are continued or enhanced. Highlighted statistics in both the challenges and strengths categories are not intended to be exhaustive, but are intended as a prompt toward better understanding of what programs may need to be created or strengthened and what programs may need to be maintained. Often, funding agencies have a tendency to direct resources in response to deficits

rather than to programs showing promising or positive changes. Data listed in the “Other Considerations” category (at the end of this document) may be interpreted as either a strength or a challenge.

Statistics/Facts As Indicators – Statistics are presented according to Maryland’s suggested indicators for each Result Area with related data added as deemed necessary by the LMB. For the eighth Result Area (Communities Which Support Family Life), no indicators were suggested by OCYF. Again, the LMB chose locally relevant statistics. Every attempt was made to collect the most recent data. However, in some cases the data was incomplete or was not available. Whenever possible, locally generated data, as opposed to State generated data, was used. For some indicators it is common for State agencies to present the frequency of an incident using the rate per 1,000 cases or per 100,000 cases. Since Queen Anne’s County’s population is

40,563 in the year 2000, this rating system does not always reflect a true frequency of occurrence.

Strategies – At least 50 local and State assessments, comprehensive plans, and strategic plans were reviewed for the purposes of this document. These reports represent the views of approximately 2,000 county citizens shared during focus groups, interviews, and in survey responses. Wherever applicable, suggested strategies were applied to corresponding Result Areas. Only the Community Partnership Plan strategies were designed specifically to specific Result Areas and is noted.

Community Assets – Resources corresponding to each Result Area are listed under the “Strengths” category. A full-alphabetized list of resources (with phone numbers) within or available to Queen Anne’s County residents is included at the end of this document.

QUEEN ANNE'S COUNTY PROFILE



Five years ago the Local Management Board in Queen Anne's County evolved from a strong desire of organizations and citizens to work together with a mission to strengthen and preserve children and families. This collaboration was the motivating force behind adopting the name of "Queen Anne's County Community Partnerships for Children." The Director, Mike Clark, has been employed with the LMB since its inception. He holds a BA degree in Psychology and a MS degree in Counseling and Human Relations and has nine years of experience in the human service field. The Partnership Board consists of 22 members. Organization heads make up approximately half of the membership while the remaining half of the members are community representatives.

Currently, the LMB receives \$1.4 million from the Governor's Office for Children, Youth, and Families. These funds are dedicated to 17 program areas: Administration, Family Preservation, Return Services, Diversion Services, Healthy Families, Education Program, Department of Juvenile Justice Prevention Services, Resource Development/Enhancement, After-School Program, Teaching and Educating Adolescent Mothers, Resource Promotion & Awareness, Family Net-

work System, Character Counts!, Community Service Initiative, In-State Diversion, Consolidated Youth Strategies, and the Governor's Council on Adolescent Pregnancy Programs.

In 2001, the LMB was awarded \$380,000 by the Governor's Office of Crime Control and Prevention through the Consolidated Youth Strategies Grant for services to include Character Counts!, Parents As Teachers, CASA START, Home-Based Support Team, Youth Resiliency Training and Administration.

The LMB finalized their Community Partnership agreement with the Governor's Office of Children, Youth and Families in 2002. At least \$250,000 per year over a period of five years is being awarded to Queen Anne's County to carry out initiatives including creating a centralized resource information access system, supporting youth-oriented character building, and hiring a program ombudsman to support agencies and non-profits toward efficient service provision for families.

Queen Anne's County's population was 40,563 in 2000 according to the U.S. Bureau of the Census. Of the nine Eastern Shore counties, Queen Anne's County is expected to experience the greatest consistent population growth – an increase of 29% by the year 2015.

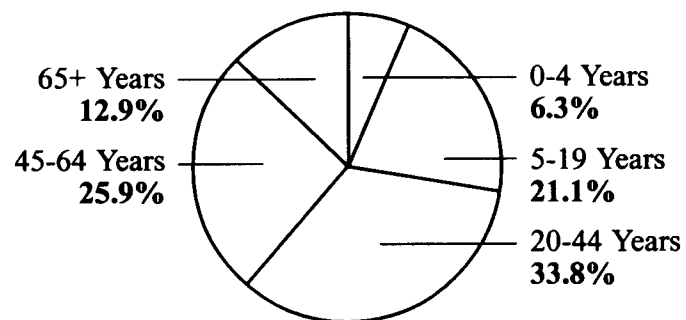
QUEEN ANNE'S COUNTY PROFILE

The following tables feature age and race distributions for Queen Anne's County children in 2000 as reported by the U.S. Bureau of the Census:

Population Distribution by Age Range ⁴³

Age Range	% In 2000	# In 2000
0-4 Years	6.3%	2,591
5-19 Years	21.1%	8,553
20-44 Years	33.8%	13,705
45-64 Years	25.9%	10,487
65 + Years	12.9%	5,227
Total	100.0%	40,563

Population Distribution by Age Range ⁴³



Population Distribution by Ethnicity ⁴³

Ethnicity	Percentage	Number
White (Caucasian)	89.0%	36,120
African-American	8.8%	3,560
American Indian, Alaskan Native	0.2%	90
Asian	0.6%	232
Hispanic	1.1%	444
Other ethnicity	0.3%	117
Total	100.0%	40,563

Queen Anne's County, Maryland has 372 square miles of land area and is known as the gateway to the Eastern Shore via the Chesapeake Bay Bridge. The Chester River separates the county from its northern neighbor, Kent County. The State of Delaware and Caroline County border Queen Anne's to the east, and Talbot County borders Queen Anne's to the south. The county has eight incorporated towns including the county seat of Centreville. County residents have access to two State parks, four golf courses, nine public boat ramps, numerous commercial marinas, and the Wye Island Wildlife Refuge.

Queen Anne's County is home to Chesapeake Community College and the University of Maryland's Wye Institute Research Center. The Board of Education oversees seven public elementary, three public middle, and two public high schools. The county has three private schools. In addition to college preparation courses, career and technical education courses including agriculture, auto mechanics, general office occupations, masonry, and welding are offered to Queen Anne's County and Kent Island High School students. In 2000, 19.9% of Queen Anne's County persons aged 25 or older had a college degree or higher.

Over 836 acres of Queen Anne's County land is industrially zoned including the Thompson Creek, Centreville, and Chesapeake Bay Business Parks. In March 2002, the Department of Labor, Licensing and Regulation reported the largest employers in Queen Anne's County as: Paul Reed Smith Guitars LTD PT, Land Links LLC, Delmarva Sash & Door, Co. Swift-Eckrich, Inc., Tidewater Publishing Corp., K-Mart Corp., Sisk Mailing Service, Inc., Kohl's Department Stores, Fisherman's Inn Inc., and Harris Crab House Inc. Over half (56.7%) of the county's residents commute out of Queen Anne's County for work. Only 16.2% of residents are employed in professional and technical occupations and 26.3% of residents are employed in manufacturing and trade. The 2001 average rate of unemployment and the Jan-Nov 2002 average were both 3.3%.

QUEEN ANNE'S COUNTY PROFILE

The average earning potential of Queen Anne's County citizens is close to that of citizens statewide. The median household income was an estimated \$47,433, while for Maryland it was \$48,421 in 2001. The average household income was \$55,013 compared to \$56,244 for Maryland. In 1999, 4.4% of Queen Anne's County's families were living below the poverty level compared to 6.1% of families in the State.

Based on trends in county indicators, Queen Anne's County Community Partnerships for Children has committed their resources to achieving the following Result Areas:

- **Children Entering School Ready to Learn**
- **Communities Which Support Family Life**

According to the 2001 Kids Count Factbook, Queen Anne's County has been assigned an overall child well-being ranking of 7 out of 24 jurisdictions in Maryland (1=best, 24=worst). Queen Anne's County had one or more problematic areas in the following child Result Areas: Babies Born Healthy (infant mortality) and Children Successful in School (absence from school). A "poor" ranking (17 to 24) in 2001 for the following two indicator areas was noted for Queen Anne's County:

2001 Kids Count Factbook Indicator Ratings ^{1, 2, 3}

Indicator Area	Rate	Year(s)	Ranking
Infant Mortality Rate	11.0	1995-99	21 st of 24
Absence From School	22.9%	2000	19 th of 24

The LMB is currently engaged in supporting 17 major program areas. Since FY 2002, the LMB has added several new programs to their annual agenda. These include: Resource Development and Enhancement Funding (five-county project), the five-year Consolidated Youth Strategies Grant, and the expanded Community Partnership initiative.

A list of the LMB's programs and associated primary program partners is provided next:

Program	Primary Partner
Administration	OCYF and GOCCP
Family Preservation Services	Department of Social Services
Return Services	LCC* and Crossroads
Diversion Services	LCC* and Crossroads
Healthy Families	Health Department
Suspension Prevention Services	Board of Education
Juvenile Justice Prevention Services	Board of Education, Parks & Recreation
Pregnancy Prevention Programs	Board of Education, Other Partners
Schools As Community Centers	Parks & Recreation
MD After-school Opportunity Grant	Partnering For Youth Advisory Team
Expanded Community Partnership	Multiple Partners
Resource Development Enhancement Funding	Board of Education
Consolidated Youth Strategies – Parents As Teachers	Health Department and GOCCP
Consolidated Youth Strategies – CASA Start	For All Seasons
Consolidated Youth Strategies – Character Counts!	Character Counts Advisory Council
Consolidated Youth Strategies – Home-Based Support Team	Judy Center

*Local Coordinating Council

Each program listed above, with the exception of the LMB administration services, is linked to several partners. Strong partnerships have proven vital to successful service outcomes.

1 BABIES BORN HEALTHY

Challenges



Number of Low Birth Weight Births
(2,499 grams or less) ⁴³

Ethnicity	1998	1999	2000
Caucasian	19	27	32
African-American	5	7	5
Other	N-A	1	4
Total	24	35	37

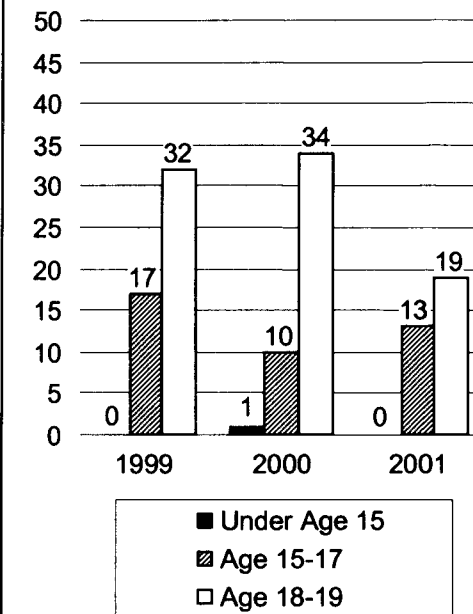
Low Birth Weight (2,499 grams or less) Rate per 1,000 Live Births ⁴³

Ethnicity	Maryland			Queen Anne's		
	1998	1999	2000	1998	1999	2000
Caucasian	6.4%	6.7%	6.4%	4.4%	6.3%	7.1%
African-American	13.1%	13.7%	13.0%	12.8%	17.1%	13.5%
All Ethnicities	12.0%	9.1%	8.7%	10.2%	7.3%	8.2%

Statistics/Facts

- There is no hospital and no full-time obstetrician in Queen Anne's County, thus requiring expectant mothers to seek services in neighboring Anne Arundel, Kent, or Talbot Counties. ²⁴
- In 2001, there were 470 births in Queen Anne's County. Of these, 160 (34%) were to first time mothers and 40 (25%) of the first-time mothers were Medical Assistance enrolled. ²⁴
- The number (and rate per 1,000 live births) of low-birth weight babies born to Caucasian mothers increased from 19 (4.4) in 1998 to 27 (6.3) in 1999 and to 32 (7.1) in 2000. ⁴³
- The percentage of Queen Anne's County mothers who received first trimester prenatal care varied from 89.3% in 1999 and 92.4% in 2000 to 86.8% in 2001. ³⁸

Number of Births to Queen Anne's
County Adolescent Females ⁴³



Strategies

- Improve healthy birth outcomes.
- Continue referral of ATOD using pregnant women to substance abuse treatment programs and other county programs addressing healthy births and prenatal care.

BABIES BORN HEALTHY 1

Strengths

Number of Births
by Year and Race of Mother ⁴³

Category	1999	2000	2001
All Races	477	500	470
White	430	450	416
Afr. Amer.	41	37	42
Other Races	6	13	12

Number of Infant Deaths
by Year and Race of Mother ⁴³

Category	1998	1999	2000
All Races	4	3	2
White	3	3	1
Afr. Amer.	1	1	1
Other Races	0	1	0

Community Assets

Anne Arundel Community Hospital
Families First—Family Support Center
Health Department
Healthy Families
Healthy Start
Interagency Council on Adolescent
Pregnancy and Parenting
Kent & Queen Anne's Hospital
Memorial Hospital at Easton
Mid-Shore Perinatal Advisory Council
Newborn Program
QACHELPS!
Shore Health System

Statistics/Facts

- The number of infants born weighing less than five and a half pounds increased from 24 in 1998, to 35 in 1999, and then to 41 in 2000 but dropped by 36.6% to 26 in 2001. ³⁸
- Of the 470 births in 2001, 408 or 86.8% of the mothers received prenatal care during the first trimester, 54 or 11.5% received care in the second trimester, 4 or 0.9% received care in the third trimester, and less than 0.6% did not receive care. (Note: Prenatal care entry was unknown for one mother.) Queen Anne's County first trimester prenatal care compliance rate was higher than Maryland's rate in 2001 (86.8% vs. 81.7%). ³⁸
- Queen Anne's County Health Department's Newborn Program staff made successful telephone contacts with each mother of the 500 babies born in 2001. ²⁴
- The total number of births to teens between the ages of 10-19 years old decreased from 49 in 1999 to 45 in 2000 and then to 32 in 2001. ³⁸



Strategies

- Strengthen efforts to encourage women to seek prenatal care in the first trimester.
- Continue to support programs such as Healthy Start, Healthy Families, the Newborn Program and Families First.
- Raise awareness among women about services available in Queen Anne's County to promote healthy birth outcomes.
- Develop school-based wellness services.

2 HEALTHY CHILDREN

Challenges

Statistics/Facts

- The number of children age 18 and under in substance abuse treatment programs increased by 23.8% from 99 in 1999 to 130 in 2001. ²⁴
- The Queen Anne's County Health Department offered 30 health promotions/health fair events in 1999 but currently do not offer health promotions nor participate in health fairs due to budget limits. ²⁴
- In 2000, adult tobacco use in Queen Anne's County was reported at higher rates (23.3%) compared to Maryland (17.5%). ³⁷
- In the year 2000, 48.8% of middle school students and 49.1% of high school students reported living in a household with cigarette smokers. ³⁶
- The percentage of Maryland children who were immunized upon entering Kindergarten was 98% in 1999 and decreased to 93% in 2000. ⁵
- The number of confirmed lead poisoning cases among Queen Anne's County children increased from zero in 1999, to one in 2000 and to two in 2001. ²⁴
- Queen Anne's rate of death per 100,000 children ages 1-14 has increased from 8.1 (1993-1997) to 10.7 (1994-1998), and to 13.0 (1995-1999). ^{1,2,3}
- Health room visits (to the school nurse) totaled 99,932 in 1999-00; 132,723 in 2000-01; and 124,661 in 2001-02 – a 19.8% increase in visits since 1999. ²⁴
- One third (33% or 95) of 284 Kent Island High School students who visited the school nurse in FY01 demonstrated one or more behavioral health issues. ⁸

2001 Maryland Adolescent Survey ³²

Substances in which the percentage of students reporting use of within the past 30 days was higher in Queen Anne's County than Maryland for grades 6th - 12th

Grade/Region/Substance	6 th Grade		8 th Grade		10 th Grade		12 th Grade	
	QA	MD	QA	MD	QA	MD	QA	MD
Cigarettes	3.2	2.5	18.6	10.6	28.4	16.6	34.6	25.5
Binge Drinking (5 + on same occasion)	0.8	2.3	21.4	9.3	37.7	21.1	46.7	31.4
Marijuana	1.6	1.2	11.3	10.6	30.6	19.8	26.2	22.7
LSD	1.0	0.6	3.9	2.2	7.2	3.7	8.7	3.7
PCP	1.1	0.5	2.0	2.0	3.7	2.1	6.5	1.6
Other Hallucinogens	0.5	0.3	5.6	1.9	7.0	3.4	7.7	3.7
Methamphetamines	1.1	0.5	2.2	1.3	5.0	2.2	4.7	1.8
Ritalin	3.2	2.5	18.6	10.6	28.4	16.6	34.6	25.5

As of October 2002,

the Eastern Shore Counties ranked worst among Maryland's regions in terms of dental care for children enrolled in Medicaid / CHIP. ⁷

Strategies

- Increase the number of school-age children who are alcohol, tobacco, and other drug free.
- Raise awareness of levels of alcohol, tobacco and drug use among school-age youth.
- Increase safe and healthy home environments for children.
- Strengthen availability of and access to mental health services, to dental care, and improve immunization rates for county youth through school-based wellness.
- Amplify existing funding for social skills training for preschool- and school-aged children.
- Enhance availability of family camps and respite services.
- Promote Nurturing skills for caretakers of behaviorally challenging children.

HEALTHY CHILDREN 2

Strengths



Community Assets

Alcohol & Drug Abuse Services
 Anne Arundel Medical Center
 Crossroads Community, Inc.
 Families First–Family Support Center
 Health Department
 Healthy Families
 Healthy Start
 Immunization Program
 Judy Center
 Infants and Toddlers Program
 Kent & Queen Anne’s Hospital
 Maryland Children’s Health Program
 Memorial Hospital at Easton
 Mid-Shore Mental Health Systems
 Prevention Office
 QACHELPS!
 School Health Nurse
 Shore Health System
 Tobacco Cessation Program
 Women, Infants, & Children Program

Statistics/Facts

- When comparing 1998 to 2001 figures, alcohol, tobacco, and other drug use has decreased for Queen Anne’s County sixth graders.³²
- Juvenile Justice intakes have dropped from 414 in 1998 to 396 in 2000, a 4% decrease compared to a 2% decrease in Maryland during the same time period.^{1,2,3}
- The use rates for “Smokeless Tobacco” and “Other Tobacco Products” in 2000 are lower for youth in Queen Anne’s County (4.4% and 14.5%) when compared to the use rates for youth in Maryland (5.0% and 17.1%).³⁷
- The rates of sexually transmitted infection (chlamydia, gonorrhea and primary and secondary syphilis) per 100,000 population were lower in Queen Anne’s County than in Maryland from 1996 through 2001.³⁸
- The Queen Anne’s County rate of primary and secondary syphilis (per 100,000) decreased from 5.0 in 1998 to 2.4 in 2001.³⁸

Sexually Transmitted Infection Rate
 Per 100,000³⁸

Chlamydia				
Region	1998	1999	2000	2001
Queen Anne	153.3	88.8	182.4	152.4
Maryland	261.6	261.0	274.4	292.7

Gonorrhea				
Region	1998	1999	2000	2001
Queen Anne	52.8	44.4	64.1	87.1
Maryland	219.4	200.9	185.7	176.4

Primary and Secondary Syphilis				
Region	1998	1999	2000	2001
Queen Anne	5.0	4.9	2.5	2.4
Maryland	12.9	6.7	5.7	5.0

Strategies

- Support current after-school programs and expand after-school programs into schools that do not have them.
- Strengthen community and school based character building programs with an emphasis on family values.
- Increase alcohol, tobacco, and other drug prevention programs for older youth.
- Continue efforts to reduce sexually transmitted infections among county citizens.

3 CHILDREN ENTER SCHOOL READY TO LEARN

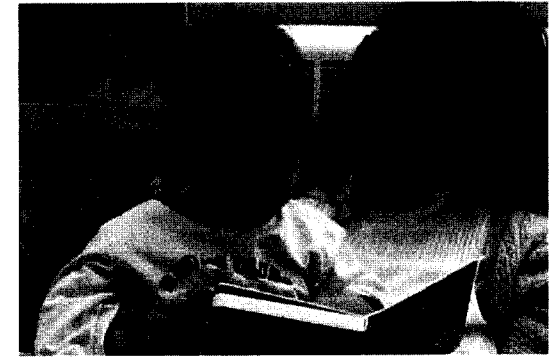
Challenges

Statistics/Facts

- The number of families Even Start has served increased by 76.5% from 17 families in 2000 to 30 families in 2002.²³
- The Infants and Toddlers Program served 38 children during 1999-2000 and 53 children during 2001-2002, an increase of 39% with no increase in staff.²⁷
- The percentage of students at the composite “Full Readiness” level on the Maryland Model for School Readiness/Work Sampling System (MMSR/WSS) was lower for African American students (38%) than Caucasian students (68%) in Queen Anne’s County as well as in Maryland (37% vs. 56%).³³
- The percentage of students at the composite “Full Readiness” level on the MMSR/WSS, who were previously enrolled in Head Start, was lower in Queen Anne’s County (36%) than Maryland (43%).³³
- In Queen Anne’s County, the number of childcare centers decreased by 23% (from 16 to 13) between 1997 and 2002.⁹
- The capacity of preschool/school age students in childcare centers decreased by 31% (from 766 to 585).⁹

Number of Licensed Daycare Places and Child Capacity²⁷

# of Providers & Capacity	Age of Child	2000		2001		2002	
		Centers	Homes	Centers	Homes	Centers	Homes
# of Providers	All ages	13	133	12	139	13	134
Child Capacity	All ages	622	845	577	884	617	859
	Infants	21	N-A	21	N-A	32	N-A
	Preschool	344		344		344	
	School-age	257		212		241	



Strategies

- Accommodate growth in county literacy needs with programs such as Even Start.
- Increase Infants and Toddlers Program staffing.
- Promote Nurturing skills for parents, providers, and teachers who care for behaviorally challenging children.
- Increase availability of affordable and educational day care services for pre-school children.
- Amplify existing funding for preschool playgroups and add social skills training at the Judy Center.
- Continue to increase infant, sick child, and special needs childcare slots.

CHILDREN ENTER SCHOOL READY TO LEARN 3

Strengths

Maryland Model for School Readiness / Work Sampling System*

Composite Percentage of Kindergarten Students ³³

Level of Readiness	Full	Appro- aching	Devel- oping
Queen Anne's	64%	35%	1%
Maryland	49%	44%	7%

*MMSR/WSS

Community Assets

Board of Education of
Queen Anne's County
Chesapeake College
Child Resource Center
Child Care Administration
Child Find
Community Partnerships for Children
Early Childhood Development Center
Even Start
Families First Family Support Center
Head Start – Shore Up!
Healthy Families
Healthy Start
Infants and Toddlers Program
Judy Center
QACHELPS!

Statistics/Facts

- *Healthy Families* served 13 families during FY 2000 (Jan-June) and served 40 families in FY 2002. ²⁵
- The Health Department's *Healthy Start* program served 105 families with children ages birth-2 in 2000 and 161 families in 2002, an increase of 53%. ²⁶
- Families First-Family Support Center served 22 families with young children in FY 1999, 129 families in FY 2000, 152 families in FY 2001, and 117 families in FY 2002 despite high staff turnover. ⁶
- The percentage of students at the composite "Full Readiness" level on the Maryland Model for School Readiness / Work Sampling System in 2001-2002 is higher in Queen Anne's than in Maryland for students previously enrolled in a child care center (65% vs. 45%), home/informal care (58% vs. 39%), non-public nursery (74% vs. 67%) and pre-kindergarten (66% vs. 47%). ³³
- Infant capacity in childcare centers increased by 78% (from 18 to 32) between 1997 and 2002. ⁹

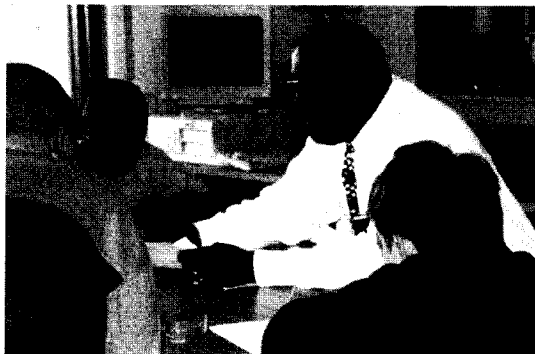


Strategies

- Maintain *Healthy Families* program for families with children ages 0-5.
- Continue *Healthy Start* program visits for at-risk pregnant and post-partum women and children.
- Increase funding to support Families First-Family Support Center in Grasonville.
- Expand credentialed early childhood programs sponsored by the Board of Education.

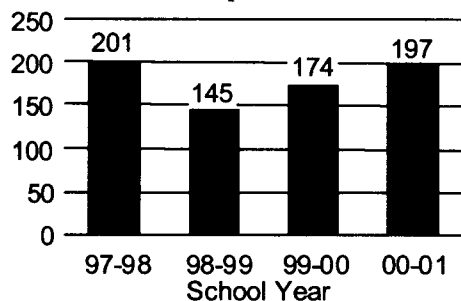
4 CHILDREN SUCCESSFUL IN SCHOOL

Challenges

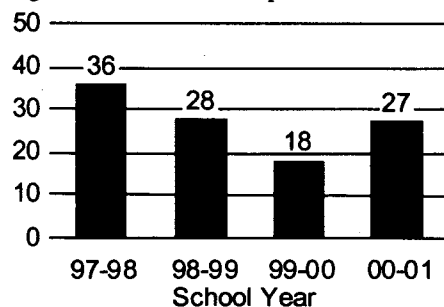


Percentage of Students Suspended by School Year ¹⁷

Violence-Related Suspensions



Drug/Alcohol-Related Suspensions



Note: Kent Island High School opened fall 1998.

Statistics/Facts

- In 2001, 40.9% of Queen Anne's County third graders scored at the satisfactory level in science; 45.4% of fifth graders scored at the satisfactory level in writing; and 29.1% of fifth graders scored at the satisfactory level in reading on the Maryland School Performance Assessment. ³⁴
- The percentage of Queen Anne's County 9th and 11th grade students who passed the Maryland Functional Tests for reading, math and writing declined from 99.2 in 1999 to 96.7 in 2001. ³⁴
- In the 2000-2001 school year, there were 51 (5.1%) special education students diagnosed as seriously emotionally disturbed in Queen Anne's County, compared to 4.1% in the Mid-Shore Region. ¹⁸
- One third (33% or 95) of 284 Kent Island High School students who visited the school nurse in FY01 demonstrated one or more behavioral health issues. ⁸
- Both violence and drug/alcohol-related suspensions have recently been on the rise. Violence-related suspensions increased by 13% and drug/alcohol-related suspensions increased by 50% from the 1999-2000 to the 2000-2001 school year. ¹⁷

High School Attendance Rate by Year ³⁴

Queen Anne's		
99-00	00-01	01-02
91.7	91.1	91.5

Maryland		
99-00	00-01	01-02
91.5	91.8	92.8

Strategies

- Develop school-based wellness services to include substance abuse education.
- Improve Maryland School Assessment Program scores in targeted subjects and grades.
- Strengthen behavioral health programs for students.
- Promote Nurturing skills for educators of behaviorally challenging children.
- Support current after-school programs and expand after-school programs into schools that do not have them.
- Establish a Character Counts community center or other family center in northern Queen Anne's County.

CHILDREN SUCCESSFUL IN SCHOOL 4

Strengths

Community Assets

Bayside Elementary School
Board of Education of
Queen Anne's County
Centreville Elementary School
Centreville Middle School
Church Hill Elementary School
Community Partnerships for Children
Council for Children and Youth
Even Start
Grasonville Elementary School
High School Athletic Programs
Kennard Elementary School
Kent Island Elementary School
Partnering For Youth
After School Program
Queen Anne's County Free Library
QACHELPS!
Queen Anne's County High School
Stevensville Middle School
Sudlersville Elementary School
Sudlersville Middle School
The Mid-Shore ESOL Program
University of MD
Cooperative Extension Office
Wings to the Future

Statistics/Facts

- *Healthy Families* served 13 families during FY 2000 (Jan-June) and served 40 families in FY 2002.²⁵
- The Health Department's *Healthy Start* program served 105 families with children ages birth-2 in 2000 and 161 families in 2002, an increase of 53%.²⁶
- Families First-Family Support Center served 22 families with young children in FY 1999, 129 families in FY 2000, 152 families in FY 2001, and 117 families in FY 2002 despite high staff turnover.⁶
- The percentage of students at the composite "Full Readiness" level on the Maryland Model for School Readiness / Work Sampling System in 2001-2002 is higher in Queen Anne's than in Maryland for students previously enrolled in a child care center (65% vs. 45%), home/informal care (58% vs. 39%), non-public nursery (74% vs. 67%) and pre-kindergarten (66% vs. 47%).³³
- Infant capacity in childcare centers increased by 78% (from 18 to 32) between 1997 and 2002.⁹

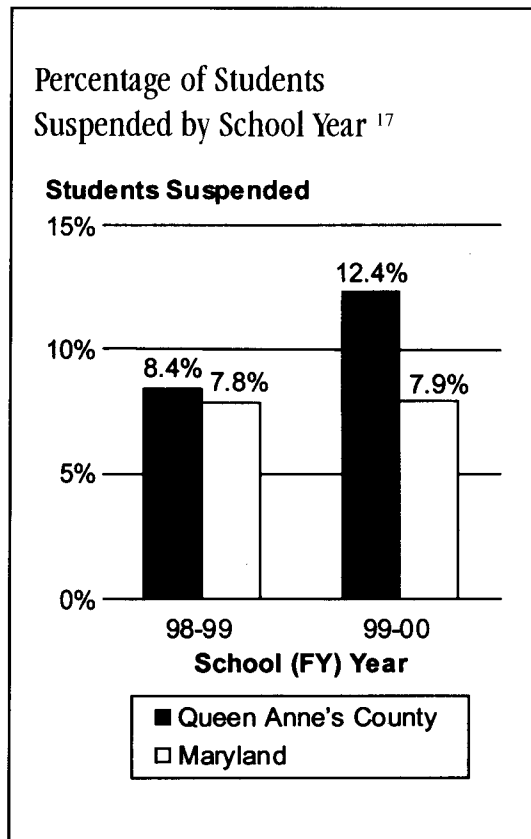


Strategies

- Continue school attendance incentive programs.
- Maintain improvements in academic skills for 3rd, 5th and 8th graders.
- Maintain improvements in college-preparatory skills for high school students.
- Continue and expand after school programs at elementary, middle and high school levels.

5 CHILDREN COMPLETING SCHOOL

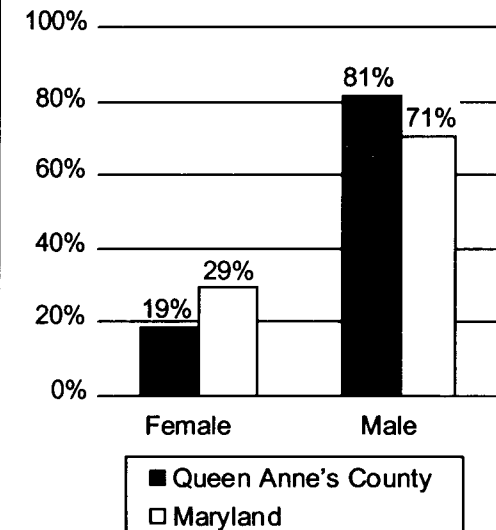
Challenges



Statistics/Facts

- The percentage of students suspended has increased at a higher rate in Queen Anne's County compared to Maryland (QA= 8.4% in 1998-1999 and 12.4% in 1999-2000; MD = 7.8% in 1998-1999 and 7.9% in 1999-2000). ¹⁷
- When comparing the percentage of graduates who have completed minimum course requirements qualifying them for admission to the University of Maryland system, Queen Anne's County percentages are consistently lower than percentages for Maryland graduates. ^{1,2,3}
- In 2000, 19.9% of Queen Anne's County and 31.4% of Maryland persons aged 25 or older had a college degree or higher. ^{1,2,3}
- Queen Anne's County Adult Education and Literacy Services Program high school graduates decreased by 50% from 26 in 1999 to 25 in 2000 and to 13 in 2001 while the number of graduates in Maryland increased by 23%. ²⁷

Percentage of Students Suspended by School Year ¹⁷

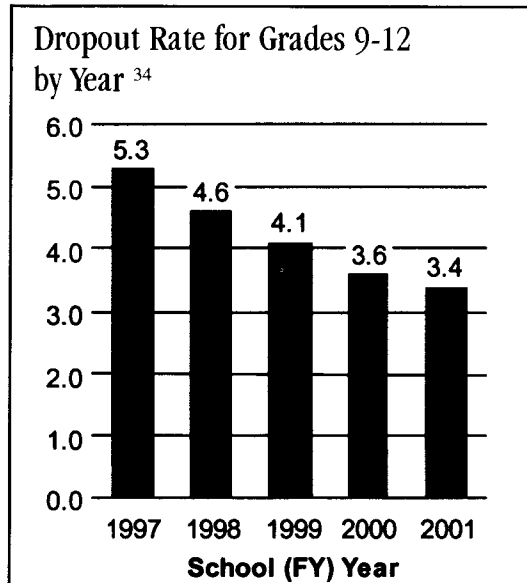


Strategies

- Strengthen behavioral health programs for students.
- Expand high school level after school and weekend programs for youth ages 13 to 19-years-old.
- Improve percentage of graduates completing college preparatory course requirements.
- Improve enrollment in and completion of GED courses for youth and adults ages 16 and over.

CHILDREN COMPLETING SCHOOL 5

Strengths



Community Assets

Adult Education/GED
 Board of Education of
 Queen Anne's County
 Chesapeake College
 Council for Children and Youth
 Even Start
 Families First
 Kent Island High School
 Maryland's Tomorrow
 Partnering For Youth After-School Program
 Queen Anne's County Free Library
 QACHELPS!
 Queen Anne's County High School
 Washington College

Statistics/Facts

- Queen Anne's County's on-time graduation rate increased from 79.2% in 1997-98, to 83.1% in 1998-99, and to 86.2% for 1999-2000, while Maryland's rate increased from 71.4% to 74.0% during the same period. ^{1,2,3}
- The Queen Anne's County drop out rate for grades 9-12 has not met the state standard of 3.0% in the past five fiscal years (5.3% in 1997, 4.6% in 1998, 4.1% in 1999, 3.6% in 2000, and 3.4% in 2001) but has steadily decreased. ³⁴
- Career and technology programs available in Queen Anne's public schools increased by 10% from 1,151 in the 1997-1998 to 1,267 in the 1999-2000 school year. ²⁷
- In 2000, 30.2% of Queen Anne's County and 26.7% of Maryland persons aged 25 or older had a high school diploma. ⁴³
- The "Character Counts!" program has engaged 3,320 students and 96 Character Coaches during the 2002-2003 school year. ¹⁹

Percent of Graduates Who Have Completed Minimum Course Requirements Qualifying Them for Admission to the University of Maryland System ^{1,2,3}

Region	1998	1999	2000
Queen Anne's	42.4	39.2	52.9
Maryland	57.6	58.3	57.7

Strategies

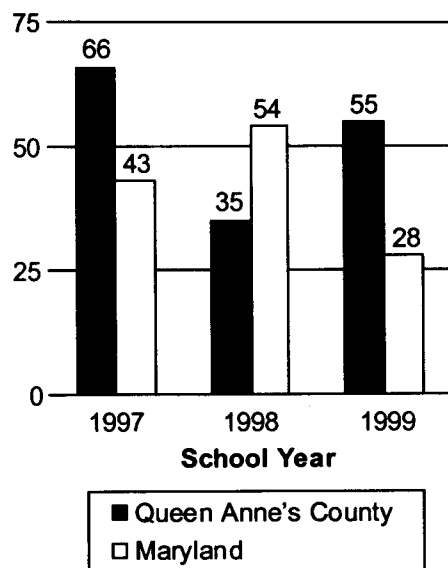
- Maintain and/or strengthen programs such as *Maryland's Tomorrow* to support the decrease in school drop out rates.
- Monitor the number of Advanced Placement Programs, participation in college dual enrollment, and interest in technology programs to correlate with high school completion.
- Expand community and school based character building programs to the high school level & general community.

6 CHILDREN SAFE IN THEIR FAMILIES & COMMUNITIES

Challenges



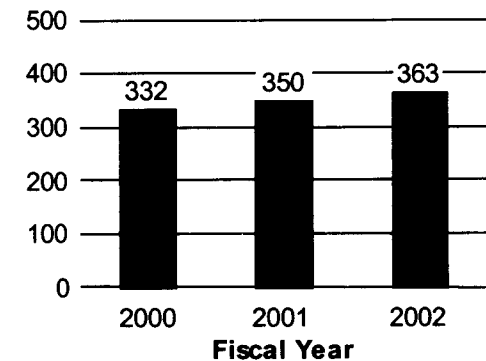
Juvenile Violent Offense Rate
Per 10,000 Juveniles Ages 10-17 ^{1,2,3}



Statistics/Facts

- The number of child abuse and neglect reports received by the Department of Social Services increased by 45% from 280 reports in FY 1998 to 406 in FY 2001. ²²
- Results of the 2001 Maryland Adolescent Survey indicate that 30% of Queen Anne's licensed 12th graders drove at least once in the past year after consuming one to four alcoholic beverages. ³²
- The number of driving while intoxicated (DWI) arrests increased by 5% from 386 in 1999 to 404 in 2001. ^{11,12,13}
- The number of domestic violence –related incidents that occurred in Queen Anne's County increased by 59% from 61 in 1997 to 97 in 2000. ¹⁵
- In the 2002 School-Based Mental Health and Violence Prevention Advanced Study, stakeholder interviewees gave priority to bullying and teasing prevention as a new strategy at the middle school level. ¹⁸

Investigations of Child Abuse and/or Neglect in Queen Anne's County ²⁴



Strategies

- Increase the number and type of parenting support programs available to Queen Anne's County families.
- Include children in planning and implementing drug-free and anti-violence programs.
- Increase alcohol, tobacco, and other drug education and treatment programs.
- Increase awareness of domestic violence prevention programs.
- Empower children to develop positive social skills.

CHILDREN SAFE IN THEIR FAMILIES & COMMUNITIES 6

Strengths

Statistics/Facts

- Queen Anne's County child abuse investigations have decreased from 280 in 1998 to 196 in 2001.²²
- *Foster Care* families opened their homes to 23 abused and/or neglected children in 1999 and to 20 abused and/or neglected children in 2002.²²
- The number of Department of Juvenile Justice intake cases decreased by 15% from 456 in 1999 to 396 in 2000.^{1,2,3}
- According to the Uniform Crime Report, "Part 1" (most serious) offenses as reported by the Queen Anne's Co. Sheriff's Department, Maryland State Police and the Centreville Town Police have decreased by 16.1% from 1,221 in 1999 to 1,024 in 2000.^{12,13,1}
- Residents are able to access the Queen Anne's County Resource Promotion and Awareness Program called "QACHELPS!" by calling a toll-free phone number: 1-866-QAC-HLPS (or 1-866-722-4577) as of Fall 2002.

Community Assets

Advanced Life Support
Centreville Police Department
Circuit Court
Coast Guard
Crossroads Community, Inc.
Department of Juvenile Justice
Department of Natural Resources
Department of Social Services
HotSpots Program
Judy Center
Maryland State Police

Mid-Shore Council on Family Violence
Mid-Shore Mental Health Systems
Neighborhood Watch
Parole and Probation
Queen Anne's County Detention Center
Queen Anne's County Free Library
QACHELPS!
Queen Anne's County Sheriff's Office
State's Attorney's Office
Victim-Witness Program
Volunteer Fire Companies

Rate* of Juvenile Crime Arrests
Among Youth Aged 10-17^{1,2,3}

Queen Anne's County			
Fiscal Year	1997	1998	1999
Violent	43.4	34.8	27.7
Non-violent	127.9	99.8	124.9

Maryland			
Fiscal Year	1997	1998	1999
Violent	66.3	53.5	54.5
Non-violent	262.1	227.8	214.7

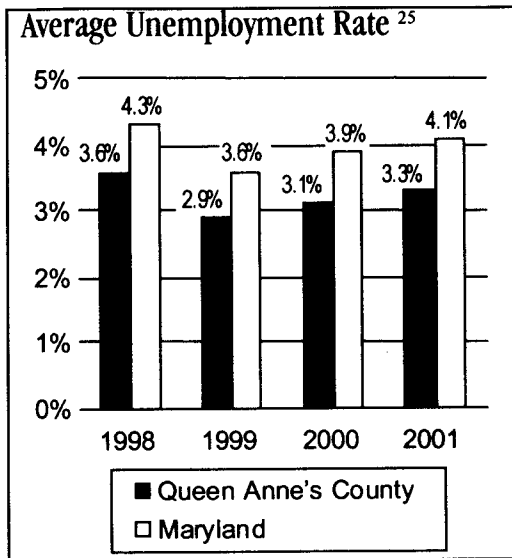
*Rate per 10,000

Strategies

- Continue programs to prevent child abuse and neglect.
- Maintain cooperative relationship with the State's Attorney's Office, Juvenile Services and law enforcement.
- Expand community and school based character building programs.
- Increase involvement in county and community programs that promote safety.
- Increase awareness of safety programs (such as Hot Spots) for families and children.

7 STABLE & ECONOMICALLY INDEPENDENT FAMILIES

Challenges



Percentage of Families Who Had Below Poverty Income in 1999 ⁴³

Family Type	All Families	Married-couple Families*
Queen Anne's	4.4%	2.1%
Maryland	6.1%	1.9%

*With/without own children under 18

Children/Infants Participating in WIC ^{1,2,3}

Region	1998	1999	2000
Queen Anne's	443	472	426
MD	73,872	73,274	73,738

Statistics/Facts

- The number of Queen Anne's County students eligible to receive free/reduced price meals has remained steady yielding 1,175 in 1998, 1,240 in 1999, and 1,114 in 2000. ^{1,2,3}
- Queen Anne's County Affordable Housing Committee projects a need for 1,169 more housing units for elderly/non-elderly homebuyers in 2008 compared to a need for 1,110 in 1998. ¹⁶
- There are significant shortages of affordable housing and the trend is worsening. The median price of a home sold in Queen Anne's was \$166,900 in 2000, \$182,900 in 2001 and \$205,000 for the first ten months of 2002 indicating most new home prices are well out of the reach of low- and moderate-income families. ¹⁶
- The number of Queen Anne's County people served by the Emergency and Transitional Housing and Services Program increased by 108% from 52 people in State Fiscal Year (SFY) 1996 to 108 people in SFY 2001. ⁴⁰



Strategies

- Expand county job base to improve individual and family economy.
- Increase awareness of and involvement in county programs such as WIC.
- Increase public transportation options.
- Encourage County's builders, developers, and real estate communities to work together cooperatively with County officials and other providers to bring about increased housing/residence opportunities for its low-income and moderate-income population.
- Establish a homeless shelter.
- Campaign for greater parental involvement in the lives of children.

STABLE & ECONOMICALLY INDEPENDENT FAMILIES 7

Strengths

Statistics/Facts

- The number of adults/children receiving Family Investment Program/Temporary Assistance for Needy Families has decreased from 54/143 in 1999 to 35/109 in 2000.^{1,2,3}
- The percentage of Queen Anne's County children under 18 who had a working mother decreased from 73.9% (3,218) to 68.3% (6,660) and in Maryland from 73.5% to 67.8% between 1990 and 2000.⁴³
- The percent of persons of all ages and the percent of children under 18 years of age who had an income below poverty level in 1999 was lower in Queen Anne's than in Maryland (All ages = 6.3% vs. 8.5% and Under 18 = 2.0% vs. 2.7%).⁴
- In the State of Maryland, the number of child care subsidies increased by 76.2% while in Queen Anne's County, the number increased by 1.5% (from 135 to 137) between SFY 1990 and SFY 2001.⁴⁰

Community Assets

Adult Education
Business and Tourism Office
Chesapeake College
County Ride
Department of Social Services
Even Start
Families First-Family Support Center
Families Now
Family Investment Program
Family Preservation
Healthy Families

Housing and Community Services
MD/VA Marriage Encounter
Mid-Shore Mental Health Systems
New Horizons Women's Services
Parents Supporting Parents
QACHELPS!
Queen Anne's Office of Child Support
Salvation Army
Small Business Development Center
The Parent Center

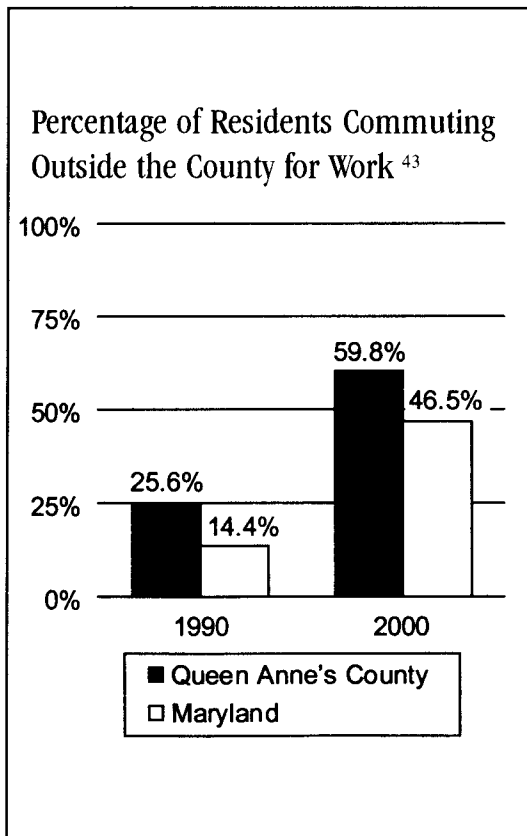


Strategies

- Maintain and/or strengthen programs to support economic self-sufficiency such as *Families First*.
- Increase awareness and understanding among families of community resources designed to stabilize families and encourage self-sufficiency.
- Enhance availability of family camps and respite services.
- Support cottage industries to promote economic development.

8 COMMUNITIES WHICH SUPPORT FAMILY LIFE

Challenges



Statistics/Facts

- The MD After-school Opportunity Grant proposal (2000) provider survey revealed a lack of evening and weekend programs for pre-teens and teens in Queen Anne's County.²⁰
- In Queen Anne's County there are no YMCA's, PAL Centers, Boys & Girls Clubs, youth/recreational centers, or movie theaters.²⁰
- In the 2002 School-Based Mental Health and Violence Prevention Advanced Study, stakeholder interviewees gave priority to individual and/or group family counseling.¹⁸
- A consistent theme in county focus groups, surveys, and interviews over the past five years has been the need for character education among the county's children and adults.⁴⁴
- Respite opportunities for families with children who are disabled or ill are severely limited in Queen Anne's County.²⁸
- The percentage of residents who commute out of the county for work was higher for Queen Anne's County than the Maryland average between 1990 and 2000.⁴³



Strategies

- Explore and enhance recreational options for county teens.
- Enhance opportunities for married couples to strengthen their relationship and for family gatherings.
- Expand community and school based character building programs.
- Provide respite services for families with special or mental health needs.
- Improve employment opportunities for county residents within county lines.

COMMUNITIES WHICH SUPPORT FAMILY LIFE 8

Strengths

Statistics/Facts

- The Partnering For Youth After School Program engaged 1,026 (duplicated) middle school students and 171 (unduplicated) high school students in after-school programming during 2000-2001.²¹
- Parks and Recreation served 1,704 children (pre-k - 8th grade) through 224 programs with 33 staff members in 1999 and served 4,501 children (all ages) through 253 programs with 50 staff members in 2002.²⁸
- The new Cross Island Trail, a span of six miles from west to east on Kent Island, connects communities and provides recreational and environmental opportunities.²⁸
- Queen Anne's County Office of Aging is collaborating with other mid-shore public transportation programs to provide expanded transportation services.²⁹
- The *Nurturing Program*, a parent/child communication-building class, served 37 families in FY 1999 and 50 families in FY 2001, a 35% increase.²²
- Queen Anne's County Public Library circulated 411,733 items in FY 2001. The Sudlersville Memorial Library, open 15 hours per week, circulated 10,793 items in FY 2001.^{30&42}

Community Assets

Arts Council
Camp Pecometh
Camp Wright
Chamber of Commerce
Church Hill Theatre
Civic Groups
Community Partnerships for Children
Council for Children and Youth
County Ride
Department on Aging
Families Now

For All Seasons, Inc.
Foster Care
Hospice of Queen Anne's
Kent Island Federation of Art
Kent Island Little League
Ministerial Association – Faith Centers
Parks and Recreation
QACHELPS!
The Nurturing Program
United Way of Queen Anne's County



Strategies

- Maintain and expand after school programs offered through Partnering For Youth and Parks and Recreation.
- Maintain and expand “family-focused services such as Families First, Families NOW and the Nurturing Program.
- Strengthen transportation options for county residents.
- Increase awareness of and access to existing services through a centralized information access system and an on-going mass marketing campaign.

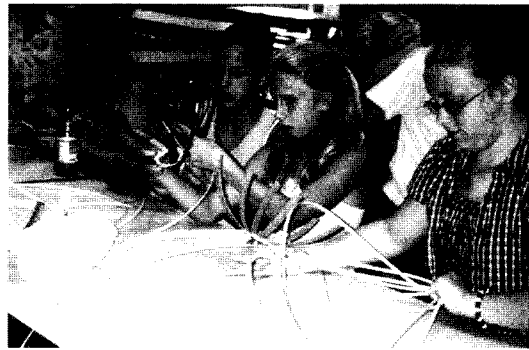
PLAN STRATEGIES 2003-2007



A summary of strategies contained in this document by result areas is presented below along with a list of supporting partners; year(s) targeted for implementation of the strategy, and corresponding Result Area(s).

Strategies	Partners	'03	'04	'05	'06	'07	Result Area(s)
• Continue referral of ATOD using pregnant women to substance abuse treatment programs and other county programs addressing healthy births and prenatal care.	ADAS, DSS, HD, FF	X	X	X	X	X	1
• Improve healthy birth outcomes by strengthening efforts to encourage women to seek prenatal care in the first trimester.	DSS, HD	X	X	X	X	X	1
• Continue to support programs such as Healthy Start, Healthy Families, the Newborn Program, Infants and Toddlers and Families First.	CPC, DSS, FF, HD	X	X	X	X	X	1, 3
• Continue efforts to reduce sexually transmitted infections among residents.	HD	X	X	X	X	X	2
• Increase safe and healthy home environments for children.	DSS, HD, SA	X	X	X	X	X	2
• Raise awareness of levels of alcohol, tobacco and other drug use among school-age youth.	ADAS, BOE, HD, P/F/C, C/VC	X	X	X	X	X	1, 2, 6, 7, 8
• Develop school-based wellness services to include substance abuse education, dental care, behavioral health and immunizations.	BOE, HD, PP	X	X	X	X	X	1, 2, 4
• Promote nurturing skills for parents, providers, and teachers who care for behaviorally challenging children.	BOE, DSS, FC, FF	X	X	X	X	X	2, 3, 4





Strategies	Partners	'03	'04	'05	'06	'07	Result Area(s)
<ul style="list-style-type: none"> Amplify existing funding for social skills training for preschool- and school-aged children. 	BOE, CCO, DSS	X	X	X	X	X	2, 3, 6
<ul style="list-style-type: none"> Maintain and expand "family-focused services" such as Families First, Families NOW, Nurturing Program, family camps, respite services, and other parenting support programs. 	CPC, DJJ, DSS, P&R	X	X	X	X	X	2, 3, 7
<ul style="list-style-type: none"> Expand community- and school-based character building programs with an emphasis on family values.* 	BOE, C/VC, CPC, FF	X	X	X	X	X	2, 4, 5, 6, 8
<ul style="list-style-type: none"> Continue and expand after school programs at elementary, middle and high school levels. 	BOE, CPC, P&R	X	X	X	X	X	2, 4, 6, 8
<ul style="list-style-type: none"> Increase alcohol, tobacco, and other drug education, prevention and treatment programs for youth and adults. 	ADAS, DSS, PP	X	X	X	X	X	2, 6
<ul style="list-style-type: none"> Accommodate growth in county literacy needs with programs such as Even Start. 	BOE, DSS	X	X	X	X	X	3
<ul style="list-style-type: none"> Increase availability of affordable and/or educational day care services for pre-school children, infants, special needs and sick children. 	BOE, CCO, DSS, PP	X	X	X	X	X	3

Result Area Key

- 1 Babies Born Healthy
- 2 Healthy Children
- 3 Children Enter School Ready to Learn
- 4 Children Successful in School

Plan Strategies for 2003-2007 are continued on page 30.

- 5 Children Completing School
- 6 Children Safe in Their Families & Communities
- 7 Stable & Economically Independent Families
- 8 Communities Which Support Family Life

COMMUNITY ASSETS

Adult Education/GED	410-758-2403	Even Start – Grasonville	410-827-6257
Advanced Life Support Services	410-758-5433	Even Start – Sudlersville	410-438-3164
Alcohol & Drug Abuse Services	410-758-1306	Families First – Family Support Center	410-827-7656
American Red Cross	410-822-2313	Families Now	410-758-8000
Anne Arundel Medical Center	443-481-1000	Family Investment Program	410-758-8000
Arts Council	410-758-2520	Family Support Network	410-827-6187
Bayside Elementary School	410-643-6181	For All Seasons, Inc.	410-822-1018
Board of Education	410-758-2403	Foster Care	410-758-8000
Business and Tourism Office	410-604-2100	Grasonville Elementary School	410-827-8070
Camp Pecometh	410-758-0304	Head Start – Shore Up!	410-827-3258
Camp Wright	410-643-4171	Health Department	410-758-0720
Centreville Elementary School	410-758-1320	Healthy Families	410-758-0720 ext. 328
Centreville Middle School	410-758-0883	Healthy Start	410-758-0720 ext. 351
Centreville Police Department	410-758-0080	High School Athletic Programs	410-758-0550 or 604-2070
Chamber of Commerce	410-643-8530	Home Instruction for Preschool Youngsters	410-827-8663
Character Counts	410-758-6904	Hospice of Queen Anne's	410-827-0426
Chesapeake College Child Resource Ctr.	410-822-5400 ext. 325	HotSpots Program	410-827-9215
Chesapeake College	410-758-1537	Housing and Community Services	410-758-3977
Child Care Administration	410-819-5801	Immunization Program	410-758-0720 ext. 365
Child Find	410-758-2403	Infants and Toddlers Program	410-827-6187 ext. 180
Church Hill Elementary School	410-556-6681	Interagency Council on Adolescent	410-758-6677
Church Hill Theater	410-758-8711	Pregnancy and Parenting	
Circuit Court	410-758-1773	Judy Center	410-827-4629
Civic Organizations	Varies	Kennard Elementary School	410-758-1166
Coast Guard	410-778-2201	Kent & Queen Anne's Hospital	410-778-3300
Community Partnerships for Children	410-758-6677	Kent Island Elementary School	410-643-2392
Council for Children and Youth	410-758-6677	Kent Island Federation of Art	410-643-7424
County Ride	410-758-2357	Kent Island High School	410-604-2070
Crossroads Community, Inc.	410-758-3050	Kent Island Little League	410-763-9310
Department of Aging	410-758-0848	Maryland Children's Health Program	410-758-0720 ext. 321
Department of Juvenile Justice	410-758-5225	Maryland State Police	410-758-1101
Department of Natural Resources	410-758-5254	Maryland's Tomorrow	410-758-0500 ext. 160
Department of Social Services	410-758-8000	MD/VA Marriage Encounter	410-758-0405
Early Childhood Development Center	410-827-5801		

COMMUNITY ASSETS

Memorial Hospital at Easton 410-822-1000
 Mid-Shore Council on Family Violence 800-927-4673
 Mid-Shore Mental Health Systems 410-770-4801
 Mid-Shore Perinatal Advisory Council 410-822-1000 ext. 5351

Queen Anne's County Sheriff's Office 410-758-0770
 Queen Anne's County Volunteer Fire 410-827-7676
 Company Chief's Association
 Queen Anne's Promise 410-758-6677



Ministerial Association – Faith Centers Varies
 Neighborhood Watch Varies
 New Horizons Women's Services 410-827-5824
 Newborn Program 410-758-0720 ext. 355
 Queen Anne's Office of Child Support 410-758-4347
 Parents As Teachers 410-758-0720 ext. 355
 Parents Assoc. with Child & Teachers 410-643-0851
 Parents Supporting Parents 410-827-7258
 Parks and Recreation 410-758-0835
 Parole and Probation 410-758-5070
 Partnering For Youth High School 410-758-4166
 After School Program
 Partnering For Youth Middle School 410-758-4584
 After School Program
 Prevention Office 410-758-1083
 Queen Anne's County Detention Center 410-758-3817
 Queen Anne's County Resource 1-866-722-4577
 Promotion and Awareness Program (QACHELPS!)
 Queen Anne's County Free Library 410-758-0980
 Queen Anne's County High School 410-758-0500

Salvation Army 410-758-1600
 School Health Nurse Varies
 Shore Health System 410-822-1000
 Small Business Development Center 410-827-5286
 State's Attorney's Office 410-758-2264
 Stevensville Middle School 410-643-3194
 Sudlersville Elementary School 410-438-3164
 Sudlersville Middle School 410-438-3151
 The Mid-Shore ESOL Program 410-758-2403 ext. 197
 The Nurturing Program 410-758-8026
 The Parent Center 410-758-3693
 Tiny Tots Program 410-758-0835
 Tobacco Cessation Program 410-758-1083
 U. of MD Cooperative Extension Office 410-758-0166
 United Way of Queen Anne's County 410-643-3982
 Victim-Witness Program 410-758-2264
 Washington College 410-778-2800
 Wings to the Future 410-758-2403
 Women, Infants and Children Program 410-758-0720 ext. 323

OTHER CONSIDERATIONS

When analyzing indicator data, the interpretation may vary greatly. Up to this point in the document, the data is categorized into either Challenges, which identify a negative trend, or Strengths, which identify a positive trend. The additional data featured next may be interpreted as either strengths and/or challenges due to uneven data trends or irregular data presentation.

Result Area 2: Healthy Children

- The number (and rate per 100,000) of indicated child abuse and neglect cases among youth ages 1-14 increased significantly from 20 (2.1) in 1998 to 38 (3.7) in 2000.²²
- In the 2002 School-Based Mental Health and Violence Prevention Advanced Study, stakeholder interviewees gave priority to more prevention services at the elementary school level and more treatment options for middle and high school students.¹⁸
- Queen Anne's County was federally designated as a Mental Health Professional Shortage Area and all publicly funded mental health clinics were eliminated statewide in 2002.³⁹
- The number (and %) of Queen Anne's childcare providers serving children with special needs increased from 23 (17%) in 1998 to 32 (26%) in '01.^{9&10}
- Number of Child Injuries per Hospital Discharge³⁶

Year / Manner of Injury / Age Range	1998			1999			2000		
	0-4	5-14	15-24	0-4	5-14	15-24	0-4	5-14	15-24
Unintentional	*	13	21	8	16	33	8	25	38
Assault	0	0	*	0	0	*	0	*	*
Self-Inflicted	*	0	*	0	0	*	0	0	13

* = DHMH uses this symbol to protect the child identity when the figure is lower than six.



Result Area 3: Children Enter School Ready to Learn

- The US Census identified 775 three and four-year-old children in Queen Anne's County in 2000. The number of children enrolled in public/non-public pre-kindergarten programs was 343 during 1997-98, 325 during 1998-99, 406 during 1999-00 and 421 during the 2000-01 school year.^{43,11}

Result Area 4: Children Successful in School

- The Board of Education provided pre-kindergarten programming* to 285 children during '99-'00, 279 children during '00-'01, 261 children during '01-'02 and 230 children during '02-'03.¹⁷
- The number of students enrolled in home schooling increased by 49% (from 170 to 253) between the 1997-1998 and 2001-2002 school years.¹⁷

Result Area 5: Children Completing School

- Graduation/School Completion of Children Diagnosed with Serious Emotional Disturbances (SED)³⁵

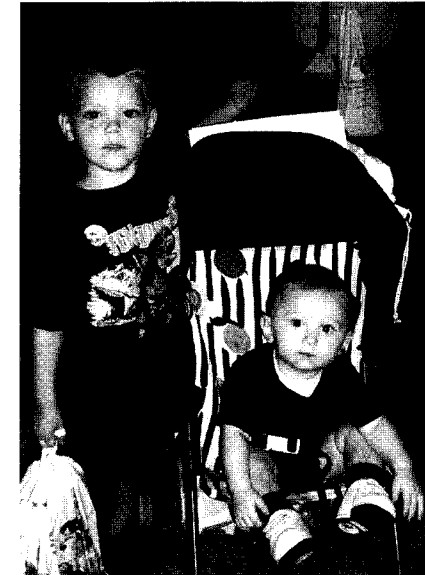
Fiscal Year / Region	'98	'99	'00
Queen Anne's	1	26	2
Maryland	478	607	461

Result Area 6: Children Safe in Their Families & Communities

- Graduation/School Completion of Children Diagnosed with Serious Emotional Disturbances (SED)³⁵

Year / Manner of Injury / Age Range	1999			2000		
	0-4	5-14	15-24	0-4	5-14	15-24
Unintentional	0	1	1	0	1	0
Homicide	0	0	0	0	0	0
Suicide	0	0	0	0	0	1

NOTE: A change in the way injuries were coded occurred in 1999. Data for 2001 and 2002 has not yet been released by the source.



Result Area 7: Stable and Economic Independent Families

- In 2000, Queen Anne's County's per capita income was \$20,747, and the median household income was \$47,453 while Maryland's per capita income was \$20,844 and the median household income was \$48,421.³¹

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- 7 Jones, Robert D. Maryland Association of County and City Dental Public Health Officials. Presented at the State Oral Health Advisory Committee. October 2002.
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- 37 State of Maryland. Department of Health and Mental Hygiene. Maryland Youth Tobacco Survey. Maryland Adult Tobacco Survey. 2000.
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PLAN STRATEGIES 2003-2007

Continued from page 23

Strategies	Partners	'03	'04	'05	'06	'07	Result Area(s)
• Continue school attendance incentive programs.	BOE	X	X	X	X	X	4
• Strengthen academic performance for school-aged youth.	BOE, P/F/C	X	X	X	X	X	4
• Improve enrollment in and completion of GED courses for youth and adults ages 16 and over and maintain/strengthen programs such as Maryland's Tomorrow to support the decrease in school drop out rates.	BOE, DJJ,	X	X	X	X	X	4, 5
• Improve percentage of graduates completing college preparatory course requirements and participating in Advanced Placement, college-preparatory, dual enrollment, and technology programs.	BC, BOE, IHL,	X	X	X	X	X	4, 5
• Continue programs to prevent child abuse and neglect.	DSS, LE, SA	X	X	X	X	X	6
• Include children in planning and implementing drug-free and anti-violence programs.	CPC, FF, P&R	X	X	X	X	X	6
• Increase involvement in county and community programs that promote safety.	LE, OA, SA	X	X	X	X	X	6
• Maintain a cooperative relationship with the State's Attorney's Office, Juvenile Services and law enforcement.*	DJJ, LE, P/F/C, SA	X	X	X	X	X	6
• Enhance opportunities to strengthen families and marriages and to increase parental involvement in the lives of children, i.e. family gatherings.*	BOE, CPC, DSS, FF, P/F/C	X	X	X	X	X	6, 7, 8
• Establish a homeless shelter.	DSS, FF			X	X	X	7
• Encourage County builders, developers, and real estate communities to work together cooperatively with County officials and other providers to bring about increased housing/residence opportunities for its low-income and moderate-income population.*	BC, CPC, DSS, OA, P/F/C, PP	X	X	X	X	X	7, 8
• Improve employment opportunities and access to jobs for county residents within county lines to improve individual and family economy, i.e. cottage industries, transportation, and job skill training.	BC, CPC, DSS, P/F/C, PP	X	X	X	X	X	7, 8
• Explore and enhance recreational options for county teens.	BOE, P&R		X	X	X	X	8
• Increase awareness of and access to existing services and county resources through a centralized information access system and an on-going mass marketing campaign.*	BC, CPC, P/F/C	X	X	X	X	X	1, 2, 6, 7, 8

*Strategies corresponding to the Queen Anne's County Community Partnership Plan.

Partner Key

ADAS Alcohol & Drug Abuse Services
BOE Board of Education
OA Office on Aging
BC Business Community
P/F/C Parents/Family/Children

CCO Child Care Organization
CVC Civic/Volunteer Community
CPC Community Partnerships for Children
DJJ Department of Juvenile Justice
DSS Department of Social Services

FC Faith Community
FF Families First
HD Health Department
IHL Institute of Higher Learning
LE Law Enforcement

P&R Parks & Recreation
PP Private Providers
SA States Attorney's Office