



Delta-Schoolcraft Counties

2016-2018

STRATEGIC PLAN



Table of Contents

Contents

Table of Contents..... 2

Community Letter..... 3

Executive Summary 5

Profile & History 8

Needs & Strengths..... 10

Goals & Objectives 23

Action Agenda..... 27

Secondary Priorities..... 40

Fund Development 44

Appendix..... 45

 ★ ABLe Change Overview 45

 ★ Root Cause Charts 46

 ★ List of Headlines and Mega Headlines 58

 ★ System Scan Questions 60

 ★ Levers for Change Survey Report..... 61



Community Letter

Dear Community Member:

The first eight years of a child's life are a time of tremendous growth and development. The foundation for language, behavior, problem solving, and social and emotional health are developed. Imagine how different things would be if all children had everything they needed to enter kindergarten safe, healthy and ready to succeed? It is the mission of the Delta-Schoolcraft Great Start Collaborative to assist all families in our 2-county area in providing a great start for their children.

The Delta Schoolcraft Great Start Collaborative is pleased to present our new three-year Strategic Plan to the community. It is the foundation in which we are continuing to build a comprehensive early childhood system that supports families and their children. We invite you to look through our plan and participate in our vision for the future.

If you have any questions regarding the information in our plan, or you would like more information, please contact me. It is our hope that our community can join us in this important work as we support our youngest citizens!

Sincerely,

Tara S. Weaver

Director, Delta-Schoolcraft Great Start Collaborative



Delta - Schoolcraft Great Start Collaborative Members

Bay College	LMAS District Health Department
Child Abuse and Neglect Council	Manistique Schools
Community Foundation of Delta County	Menominee Delta Schoolcraft Early Childhood Program
Department of Health and Human Services	OSF St Francis Hospital and Medical Group
Delta Schoolcraft Intermediate School District	Pathways
Early On	Small Wonders
Great Start Parent Coalitions	Schoolcraft Memorial Hospital
Great Start to Quality UP Regional Resource Center	United Way of Delta County
Hannahville Indian Community	Welcome Newborns
Little Light of Mine Childcare	

Thank you!

Thank you to everyone who participated in the planning and building of this Strategic Plan. A special thank you to the Executive Committee who dedicated countless hours to meeting throughout the year to analyze the data and determine the steps necessary to reach our goals! Your time, skills, and talents are greatly appreciated!



Executive Summary

Our Vision

A great start for every child in Delta and Schoolcraft counties; ensuring they are safe, healthy, and ready to succeed in school and life.

Our Mission

The mission of the Great Start Collaborative is to assure a coordinated system of community resources and supports to assist all families in Delta and Schoolcraft Counties in Michigan to provide a great start for their children from birth through age five.

Great Start Collaborative

The Delta-Schoolcraft Great Start Collaborative (DSGSC) is a partnership of community leaders, health care professionals, human service agencies, charitable and faith-based organizations, educators and parents. The DSGSC is dedicated to establishing and maintaining a comprehensive early childhood system. The goal of the Collaborative is to provide a network of support and resources for children and their families to help ensure children enter kindergarten ready and eager to learn.

A part of the Collaborative's success can be attributed to the hard work and dedication of the Parent Coalitions. The Parent Coalitions are a team of parents who work together to support the Collaborative by providing families with information, a support network, and a chance to make a difference for all children in our 2-county area.

Strategic Planning Process

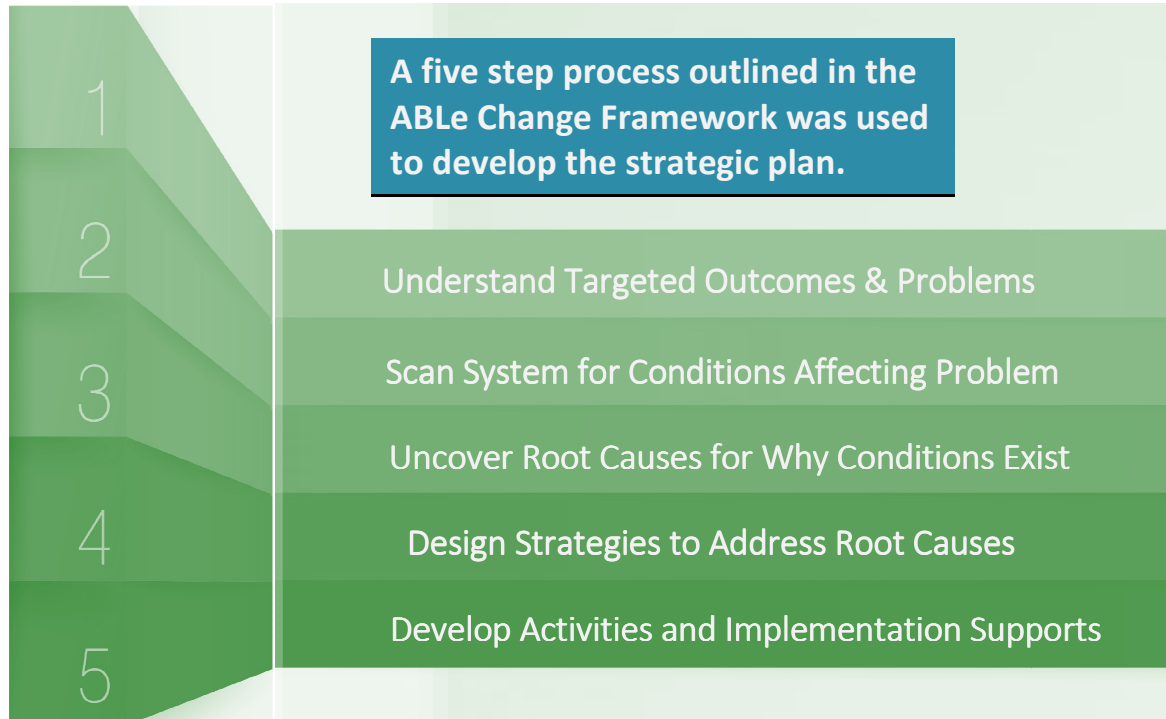
Over the past year, the DSGSC utilized tools and processes from the ABLe Change Framework¹ to help guide its strategic plan development. Funding for the Great Start Collaborative and Great Start Parent Coalition efforts are provided by a grant from the Michigan Department of Education, Office of Great Start. Additional technical assistance was provided by the Early Childhood Investment Corporation (ECIC) as well as Kay Balcer of Balcer Consulting & Prevention Services. The strategic planning process was designed to address Michigan's early childhood outcomes as outlined by Governor Rick Snyder and the Office of Great Start in the publication **Great Start, Great Investment, Great Future:**

1. Children are born healthy
2. Children are healthy, thriving and developmentally on track from birth to 3rd grade
3. Children are developmentally ready to succeed in school at the time of school entry
4. Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade

¹ Foster-Fishman & Watson, 2012



An *Early Childhood System Assessment* was conducted to determine the needs and strengths of the current system. The assessment process reviewed local and state level quantitative data as well as qualitative data gathered through local surveys and focus groups. The process identified the needs, strategies, and actions to be targeted over the next several years.



Through this process, the Great Start Collaborative identified themes regarding the needs of the early childhood service system. These needs were explored through root cause analysis. Further discussion led to the development of four goals:

- ★ **Goal 1: Families have access to high quality services and resources to utilize them.**
- ★ **Goal 2: Conditions in the system support providers and agencies.**
- ★ **Goal 3: Children have support and preparation to transition to kindergarten.**
- ★ **Goal 4: Services reflect the input of families and providers**

Objectives, strategies, and activities were organized in an action agenda that will guide the work of the DSGSC during 2016. An annual review of the root causes analysis and action agenda progress will be carried out. The annual review will enable DSGSC members to respond to lessons learned and emerging needs as they determined strategies and activities for 2017 and 2018.



Goal 1: Families have access to high quality services and resources to utilize them.

Outcomes Addressed:

- 1: Born Healthy
- 2: Healthy, thriving and developmentally on track
- 3: Ready to succeed in school
- 4: Reading proficiently

Objective 1: Number of families utilizing services will increase.

Strategy 1: Maximize the data included in 2-1-1

Strategy 2: Utilize technology to organize resources that are not in 2-1-1

Strategy 3: Develop a “No Wrong Door” training tool

Strategy 4: Align location and availability of services to meet family needs

Objective 2: The number of children that are screened for delays will increase.

Strategy 1: Increase Use of Evidence Based Screening Tools

Strategy 2: Inform parents of additional services when their child does not qualify for ISD services

Goal 2: Conditions in the system support providers and agencies.

Outcomes Addressed:

- 1: Born Healthy
- 2: Healthy, thriving and developmentally on track
- 3: Ready to succeed in school
- 4: Reading proficiently

Objective 1: Providers have information needed to make referrals and assist families.

Strategy 1: Leverage human resources by developing relationships within and across agencies

Strategy 2: Create a cross reference tool for making referrals

Strategy 3: Utilize information and referral tools developed under Goal 1 & Goal 2

Objective 2: There are effective partnerships & strong relational networks within the early childhood system.

Strategy 1: Increase sharing of resources among providers

Goal 3: Children have support and preparation to transition to kindergarten.

Outcomes Addressed:

- 3: Ready to succeed in school
- 4: Reading proficiently

Objective 1: Families have information and services to prepare their child for school.

Strategy 1: Develop a clear kindergarten readiness message

Objective 2: Kindergarten and Pre-K teachers have the resources and connection in place to align pre-k and kindergarten programs

Strategy 1: Develop a consistent transition plan

Goal 4: Services reflect the input of families and providers.

Outcomes Addressed:

- 1: Born Healthy
- 2: Healthy, thriving and developmentally on track
- 3: Ready to succeed in school
- 4: Reading proficiently

Objective 1: Families report they feel included and that services reflect input.

Strategy 1: Create a parent input best practice document.

Strategy 2: Encourage Additional Agencies to Collect Parent Input

Strategy 3: Develop a “master” form for release and sharing of information.



Profile & History

The ability to work together and collaborate across the early childhood sector made the formation of the Delta Schoolcraft Great Start Collaborative, in April of 2008, a natural transition. Over the last seven years, there has been tremendous growth, change, and collaboration in the early childhood community. Although there is a significant amount of work to be done, there have been some major accomplishments:

- ★ A regional dental grant from the Superior Health Foundation was awarded to administer a fluoride rinse program and a dental varnish program in schools and health care settings.
- ★ Through a collaborative effort of the DSGSC and Public Health Delta-Menominee (PHDM), a grant was received to administer the Healthy Families America Home Visiting program. The Healthy Families America program will operate through the local health departments across the Upper Peninsula.
- ★ A Home Visiting program has been established with 32P Program funds called Growing Families. Staff have been trained in the Parents As Teachers curriculum and the program is successfully enrolling families.
- ★ A partnership continues with the Gladstone and Manistique libraries and the Great Start Resource Center to provide parenting materials, information, toys and activities for families of young children. The materials can be checked out free of charge.
- ★ A monthly Parent Newsletter is produced and distributed in each county. The newsletter includes parenting and Great Start information, family activities, and local events.
- ★ A closet for foster families was created in Delta County and a Back-Pack program was created in Schoolcraft County to support foster families and the children in their care.
- ★ A city-wide ordinance was implemented in Escanaba to ban smoking within 100 feet of playgrounds, city buildings, parks and the beach. This was through the efforts of the ACHIEVE Committee.
- ★ Joint recruitment and enrollment occur with the Great Start Readiness Program and Head Start. The kick off for this effort is our annual preschool round-up event. The event assists families in choosing a preschool for their child and it helps the programs maximize funds.
- ★ Monthly family literacy nights are held at our local libraries through a partnership with our Parent Coalition.
- ★ Our Parent Coalitions constantly work to engage parents. FunFest, Table or Treat, and the Children's Back to School Health Fair are regular events that the Parent Coalitions lead and/or participate in.
- ★ The Parent Coalitions continually host events to support community programs and organizations: Read and Rise literacy events, Child Abuse and Neglect prevention, Good Neighbors, and St. Vincent de Paul.



Parent Coalition

The Delta and Schoolcraft Great Start Parent Coalitions have been a key part of our success. Each coalition has recruited and retained parents that are committed, energetic, and resourceful. The parent members of the coalitions have participated in community events, educational opportunities, legislative activities, and advocacy efforts at the local and state level. They continually take the initiative to speak out and educate others on the importance of early childhood education and programming.



Events and Impacts

The DSGSC and both parent coalitions have successfully participated in various events throughout the two-county area including community health fairs, Family Fun Fest, Library Story Hour, Folk Fest, United Way Chili Challenge, Brats for Books fundraiser, Christmas Giving Tree, Back to School Fair, and Table or Treat. Through these events, we have not only brought information to the community but we have connected families to valuable resources and raised funds to support important projects!

We have increased our visibility to the community as well as recruited additional organizations and parents to support our work.

The DSGSC Director and both parent liaisons are members of various community boards and groups including: the Early Childhood Council and the Community Collaborative in each of the two counties. Each also volunteer in their local communities, churches and schools.

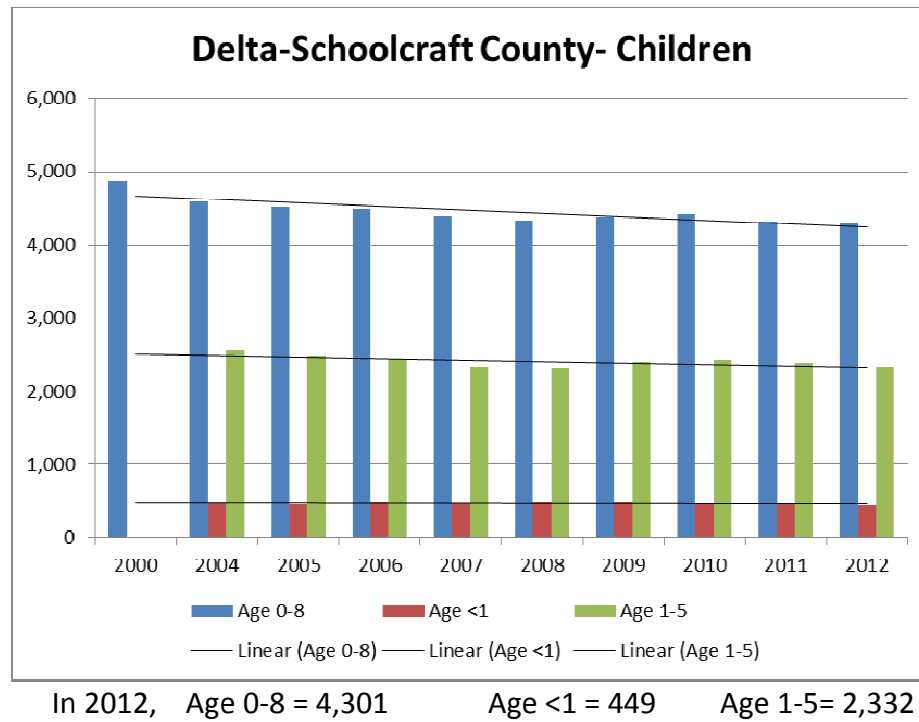


The Delta-Schoolcraft DSGSC Strategic planning process included a review of quantitative data and outcome indicators in order to better understand the problems facing children and families. Following review of the data, the DSGSC designed and implemented a system scan to explore needs and system conditions that are contributed to these outcomes. A system scan included looking at the early childhood system from four perspectives: families, direct service providers, community members, and decision makers. The system scan produced detailed qualitative data regarding six system conditions: power, mindsets, components, connections, regulations, and resources.

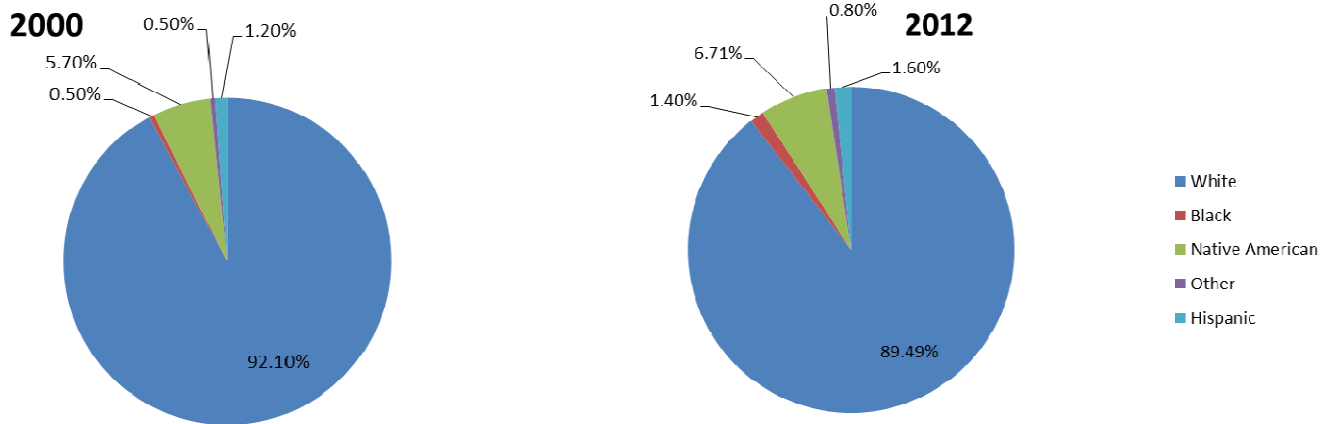
Needs & Strengths

System Characteristic	Description
Components	Range, quality, effectiveness and location of services, supports, and opportunities in the community
Mindset	Attitudes, values, and beliefs that shape behavior
Connections	Relationships and exchanges between and across different actors, organizations, and system characteristics
Regulations	Policies, practices, procedures, and daily routines that shape the behavior patterns of individuals, groups, and organizations
Resources	Human, financial, and social resources that are used within the system
Power	How decisions are made, who participates in decision-making, whose voice matters, and the structures available to support inclusive voice





Demographically, Delta and Schoolcraft Counties have seen a decrease in the number of young children but only slight changes in racial composition.



Analysis of the quantitative data identified strengths and needs within the outcome indicators.

Strengths

- ★ Lower rate of **single parent families** than Michigan and one peer.
- ★ % of people with **severe housing problems** (14%) was lower than Michigan and two peer counties.
- ★ Women with **adequate prenatal care** increased and was higher than two peer counties, and was lower than one peer county and Michigan.
- ★ **Low birthweight** rates have improved in Delta and are lower than the state and one Peer County.
- ★ **Pre-term births** in Schoolcraft are lower than peers and the state.
- ★ **Immunization rates** have improved and are higher than the state and peers.
- ★ **Childhood insured rates** have increased and are similar to peers and the state.
- ★ **Lead testing** and lead poisoning rates.
- ★ **Mothers with a high school diploma/GED** has increased and is better than state and three peers.
- ★ **Preschool participation** rates are higher than state and peers for Delta.

Indicated Needs

- ★ **Economic Indicators** show an increase in unemployment and poverty.
- ★ **Smoking during pregnancy** has increased in both counties and is higher than three peer counties and the state.
- ★ **Low birthweight rates** have increased in Schoolcraft County and is the same as the state and peers.
- ★ **Preterm births** are higher in Delta, have increased, and are higher than peer counties.
- ★ **Births to teens**, repeat teen births (8 births in 2013), and teen birth rate are generally increasing and higher than state and peers. Schoolcraft saw improvement in 2013.
- ★ **Breastfeeding** rates are lower than state and peers.
- ★ **Obesity** indicators are mostly worse than state and peers.
- ★ 19% of adults report **inadequate social support**.
- ★ **Excessive drinking rates** are higher than the state and one peer (only available for Delta county).
- ★ **Medical, dental, and mental health provider** ratios are higher than the state and two peers (higher=fewer providers per person)
- ★ Percent of **1st graders older than cohort** is higher than state and three peers, but has seen significant decreases.
- ★ **Access to Childcare**: Some forms of childcare have increased, but not at the same rate as group and family homes have decreased. Schoolcraft did not have any licensed providers for infants.
- ★ **Preschool participation rates** are lower than state and one peer for Schoolcraft.



Other observations in the data that are not clearly positive or negative:

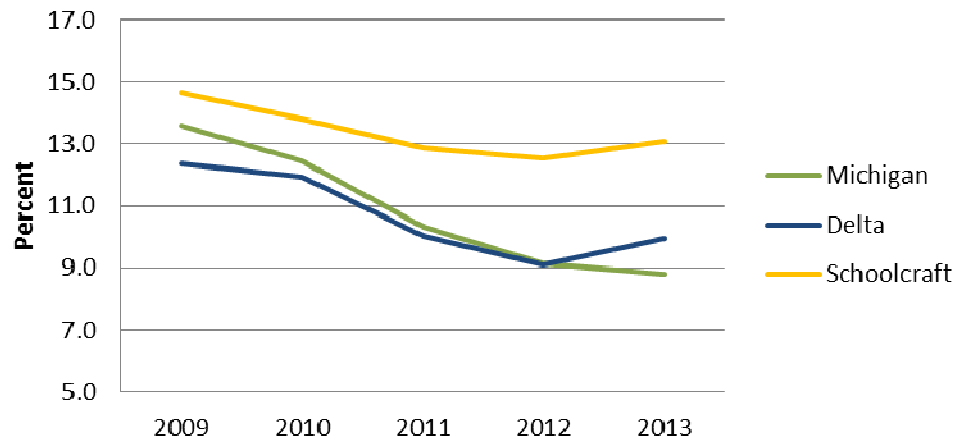


- ★ **Special education** participation rates for children 0-5 is higher than state and peers.
- ★ A high percentage of children **participate in WIC**.
- ★ **Proficiency** has mixed results with some improvement and in general with 4th grade rates better than 3rd grade rates. It may be most helpful to review detailed rates for individual school districts.
- ★ **Infant mortality rates** are not calculated each year due to low population count, but there are some indications that it may have increased and is higher than peers.
- ★ **Substantiated child abuse and neglect** rates are unclear as to if they illustrate an are increase in incidence, reporting, or substantiated cases.
- ★ **Foster care rates** have increased, but it is not clear if it is proportional to the increase in abuse/neglect rates.

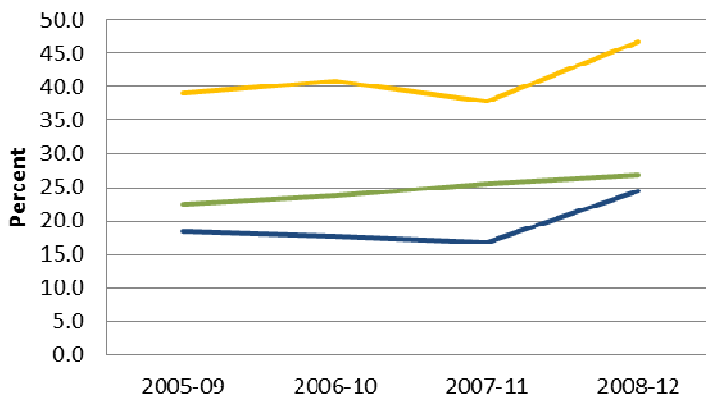


Three major economic conditions have gotten worse for Delta-Schoolcraft Counties children and families.

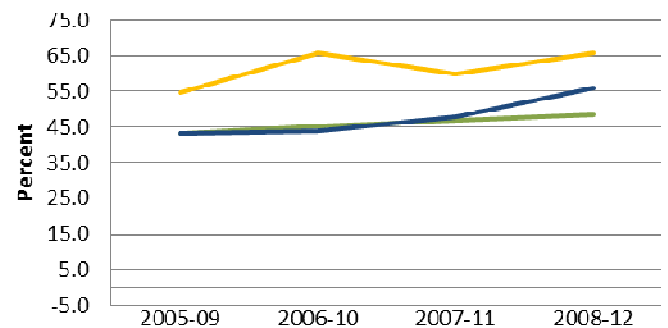
% Unemployment



Poverty Rate, % of Children age 0-5

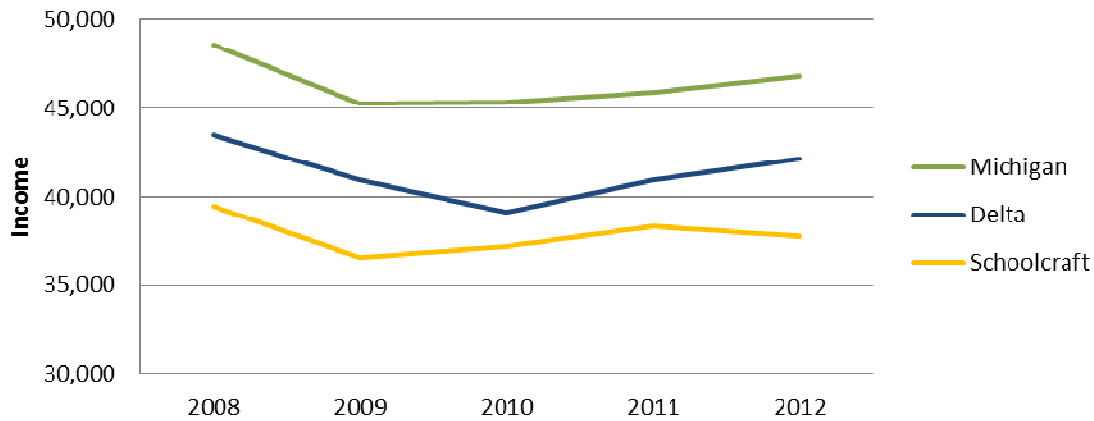


% Children under age 6, below 200% Poverty



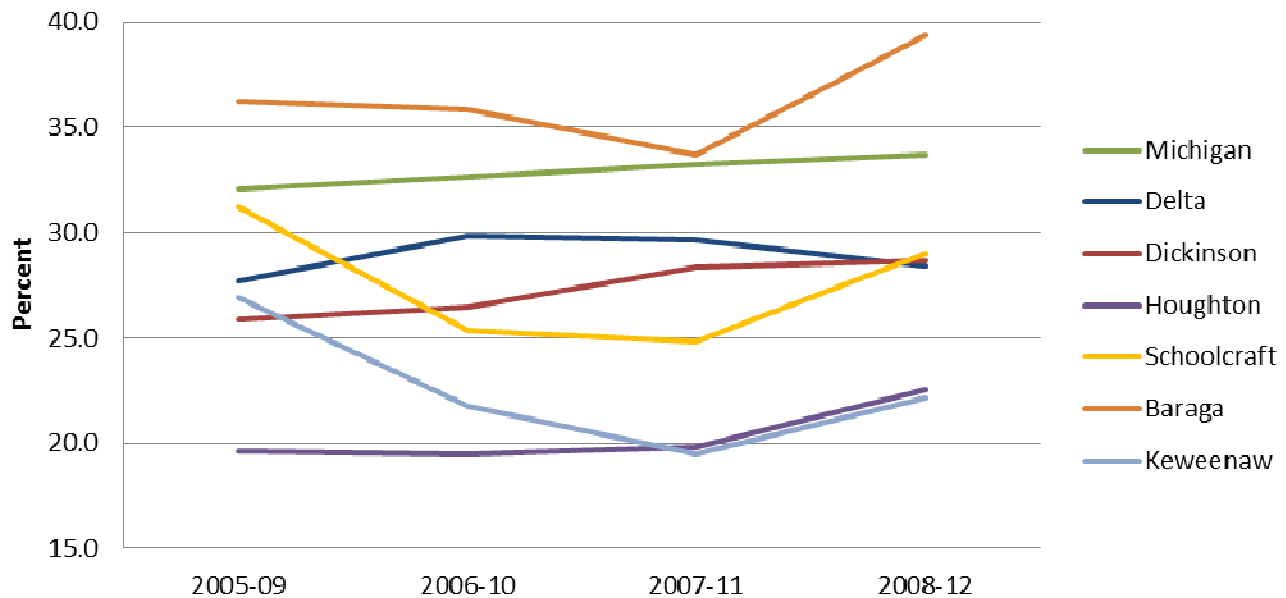
Two economic indicators show different results for the two counties

Median Income



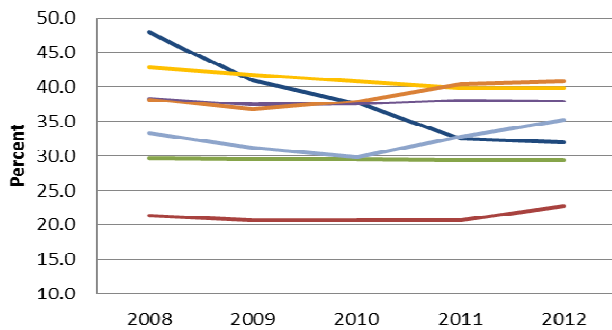
Median income has increased in Delta but decreased slightly in Schoolcraft. Both are below the state median income by \$4,500 to \$10,000.

Percent of Children Under 18 in Single Parent Families

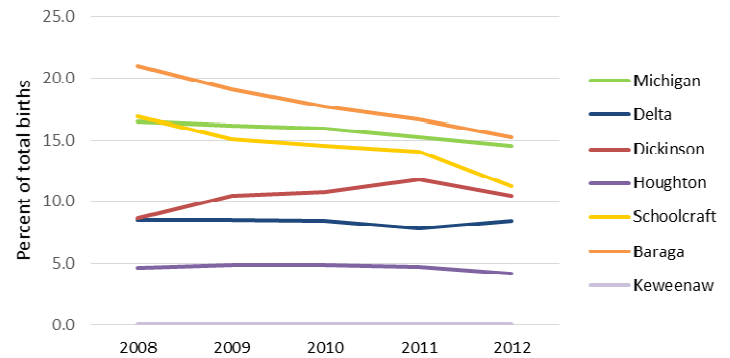


Outcome 1: Children are Born Healthy

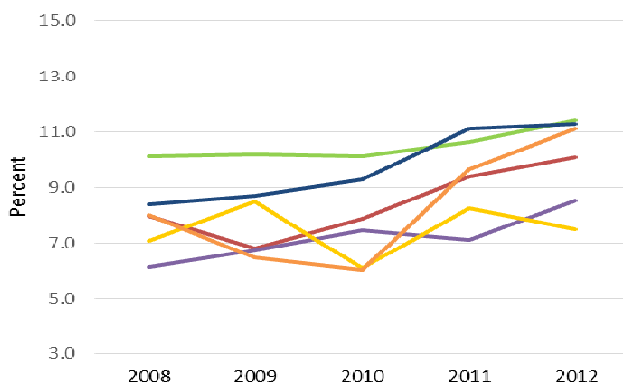
%of With Less Than Adequate Prenatal Care



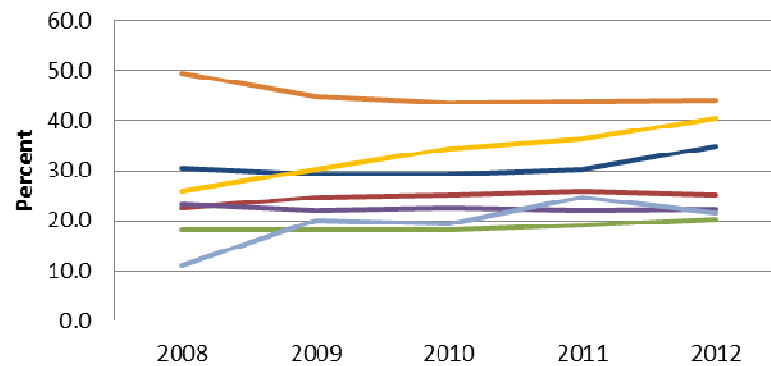
Mother without High School or GED



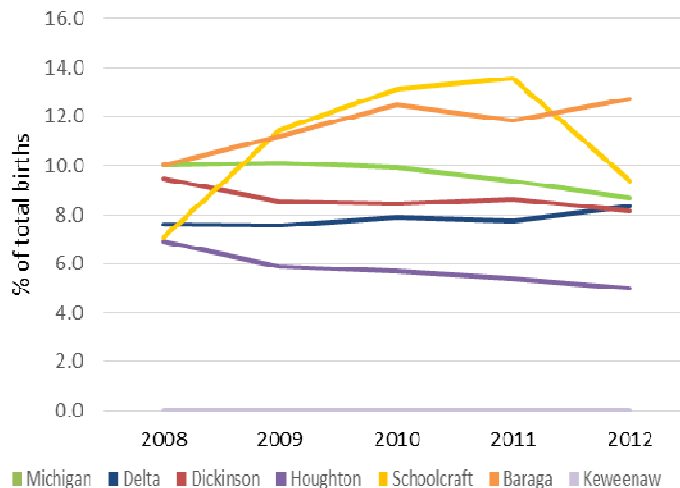
Preterm Births



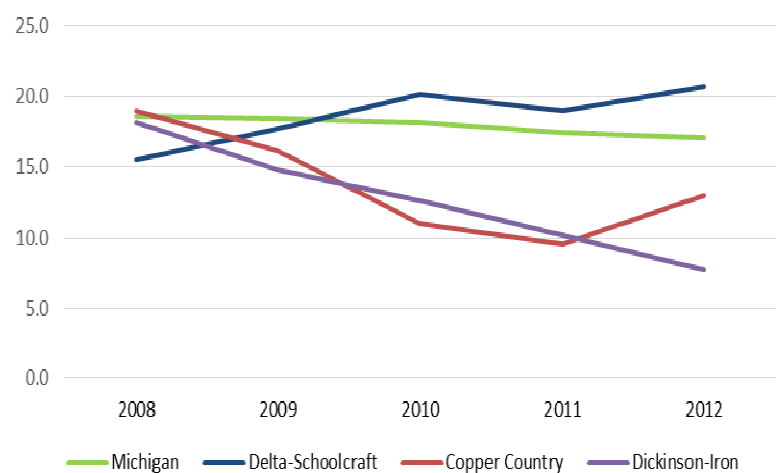
% Live Births to Women Who Smoked During Pregnancy



Mother younger than age 20



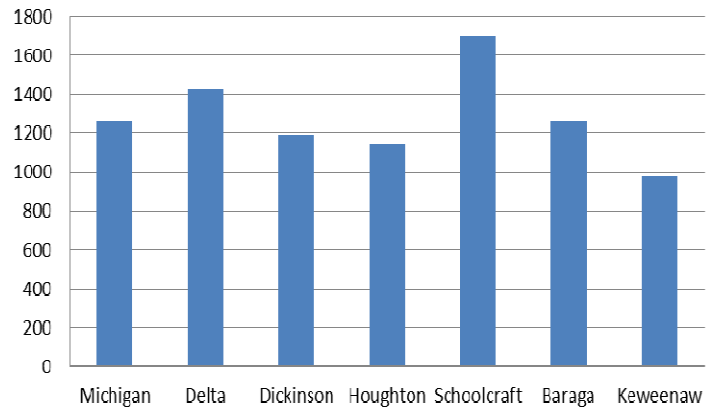
Repeat Teen Births



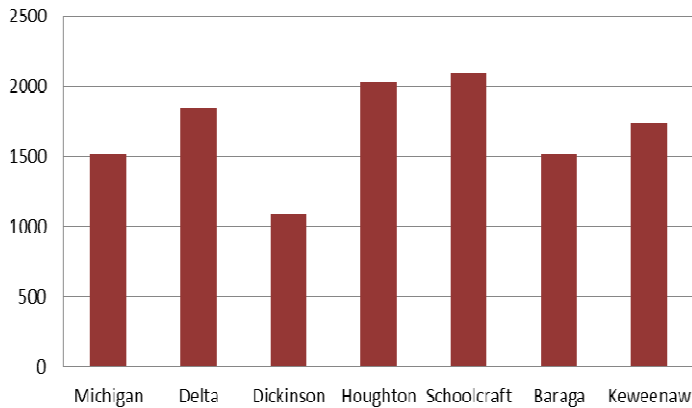
Outcome 2: Children are healthy, thriving, and developmentally on track from birth to 3rd grade.

Access to providers is a significant issue in Delta and Schoolcraft counties. A higher provider ratio indicates that there are more people per provider. This can lead to wait lists, limited providers accepting Medicaid or private pay patients, and long transportation times in rural communities.

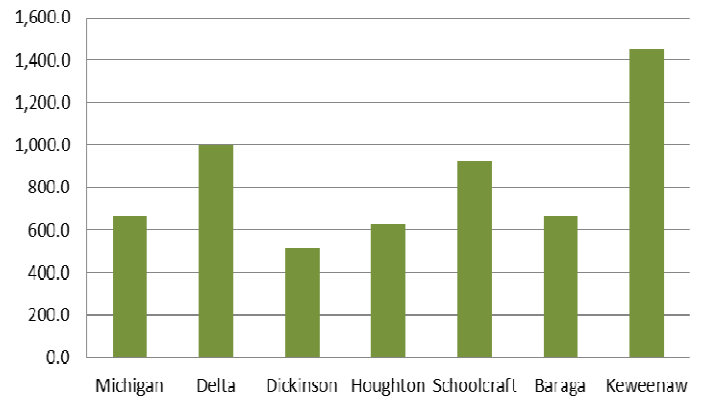
Medical Provider Ratio (lower indicates greater access)



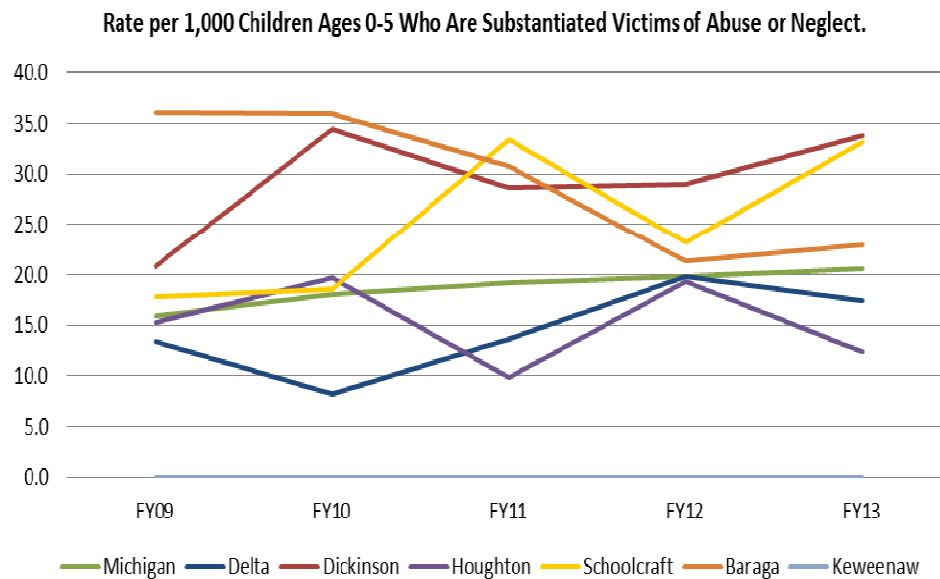
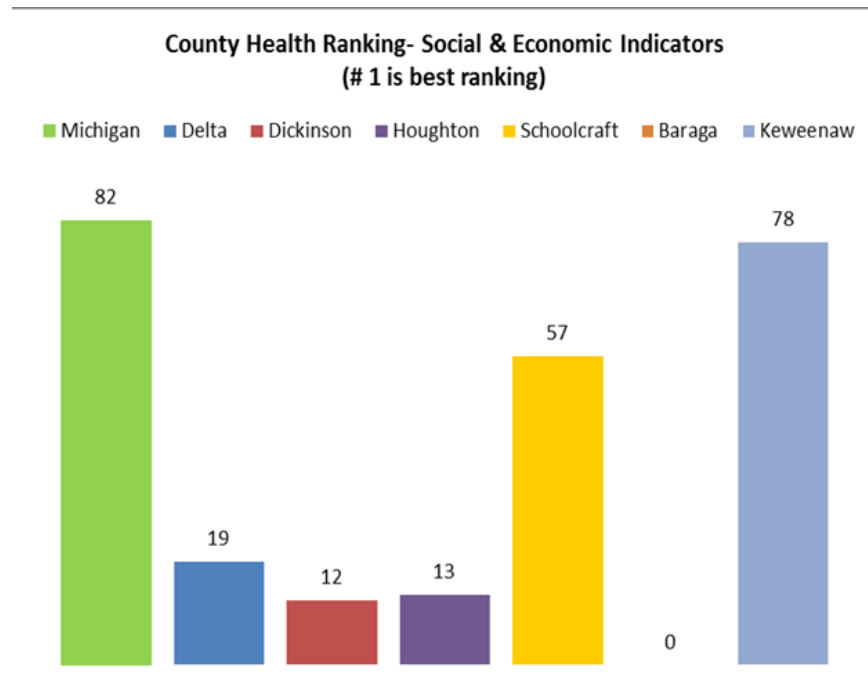
Dental Provider Ratio (lower indicates greater access)



Mental Health Provider Ratio (lower indicates greater access)



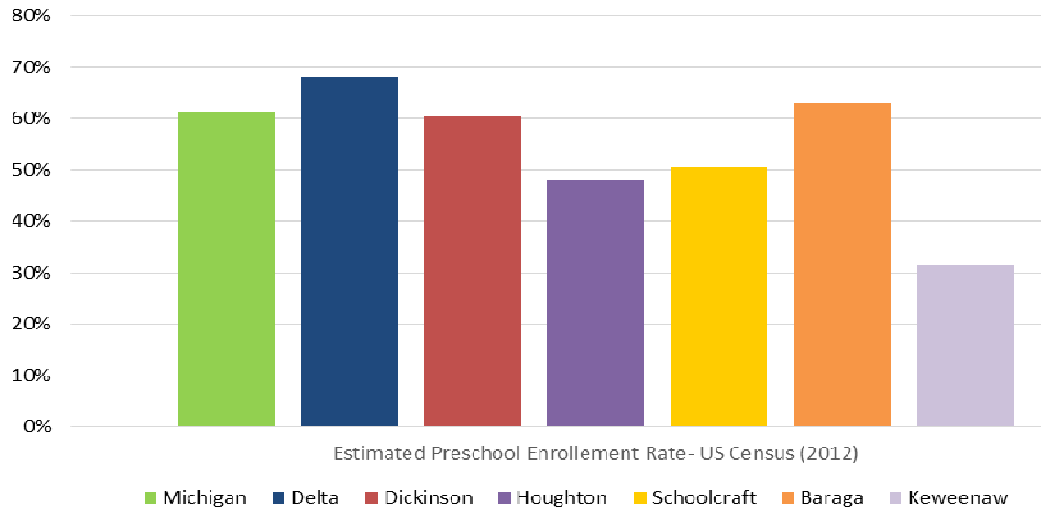
Social Emotional Health Indicators may also point to possible needs in the system.



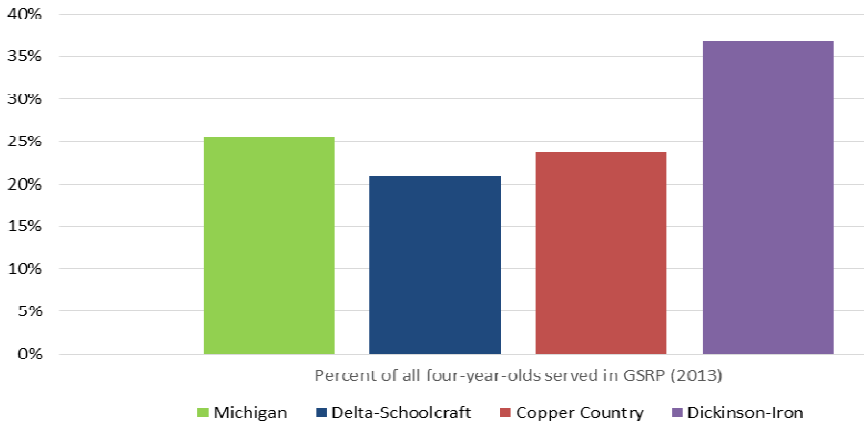
Outcome 3: Children are developmentally ready to succeed at time of school entry.

Preparing a child for school requires a partnership between families, schools, childcare providers, support services, and the community.

PreSchool Data



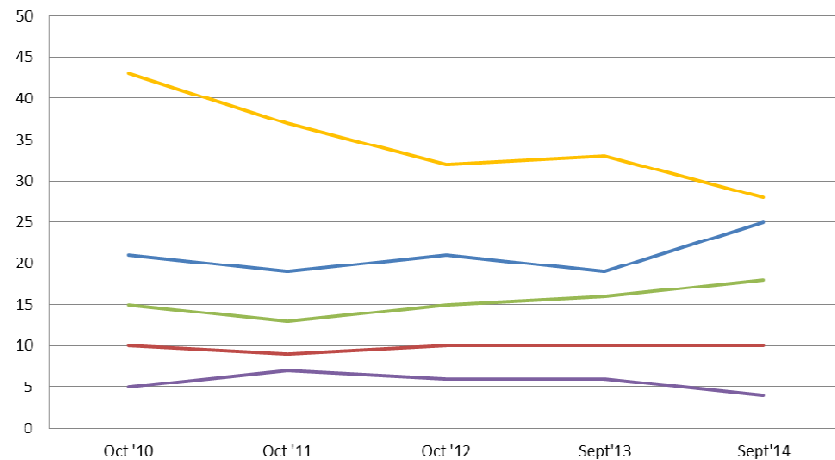
PreSchool Data



Home based licensed childcare decreased significantly for families with young children. In Schoolcraft county there are no centers accepting infants. Although there was an increase in center based care, those accepting infants and young children has not increased.

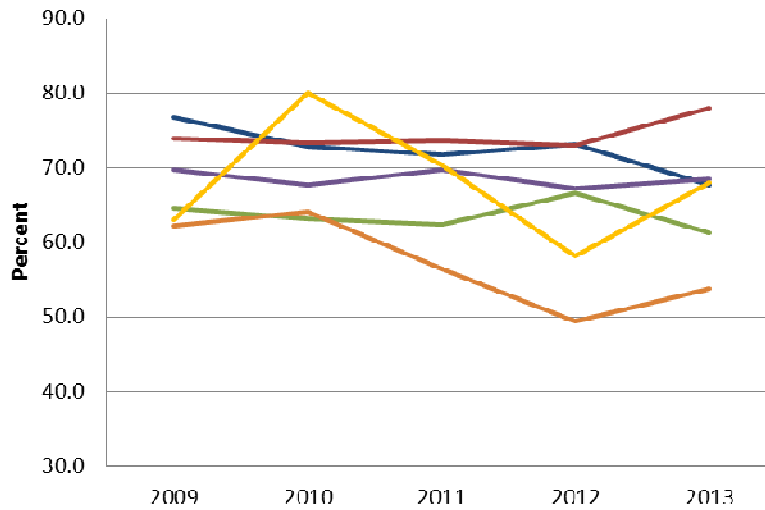
Delta- Schoolcraft Number of Liscensed Childcare by Type

- Total # Child Care Centers
- # Child Care Centers Accepting Infants
- # of Centers Offering Full Day Continuous Care
- Total # of Group Homes (Max 12 children)
- Total # of Family Homes (Max 5 children)

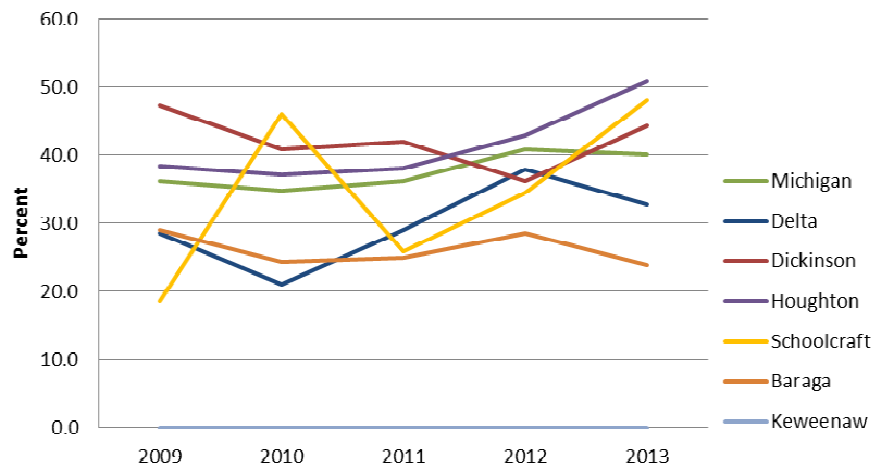


Outcome 4: Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.

3rd Grade Reading Proficiency



3rd Grade Math Proficiency



Quantitative analysis was considered as the DSGSC members continued to consider how the conditions in the early childhood system contribute to strengths or needs.

System Scan

The Delta Schoolcraft scan of the current early childhood system included conversation meetings, interviews, and surveys. Input was collected to reflect all four key perspectives:

1. Families;
2. Direct service providers;
3. Community Members; and
4. Decision makers.

Data collected through the system scan process was analyzed and compared to quantitative data. Through group process and qualitative data analysis, the information provided by these various groups was organized into four goals and 24 themes². Through a group prioritization process, the themes were identified for root cause analysis.

Prioritized Goals and Themes

★ **Goal 1: All families have access to high quality services and have the resources to utilize them.**

System Condition: Many available services are not utilized to capacity resulting in some children's needs being unmet.

Focus Area Themes

- Families are not utilizing available services
- Not all children at risk for delays receive screening and early intervention services.

Secondary Priority Themes

- Substance abuse prevents families from meeting the needs of their children.
- Not all children have access to high quality daycare/preschool

★ **Goal 2: Conditions in the early childhood system support providers and agencies working together to effectively meet the needs of families with young children.**

System Condition: Providers face numerous challenges to effectively coordinate services.

Focus Area Themes

- Providers do not have adequate information about services.

Secondary Priority Themes

- Lack of communication is a barrier to collaboration and system wide coordination.

★ **Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.**

System Condition: Not all children receive adequate preparation and support to transition to kindergarten

Focus Area Themes

- Families do not have the information needed to prepare their children for kindergarten.
- Transition supports and sharing of information between PreK and K staff is not adequate.

Secondary Priority Themes

- The assessment process for kindergarten is not always parent/child friendly.

★ **Goal 4: Services reflect the input of families and providers.**

² See Appendix for complete list of Mega Headlines and Headlines



System Condition: Decisions are made about services with limited input from families and direct service providers.

Focus Area Themes

→ There is a lack of family engagement.

Connecting Root Causes to Strategies:

During a strategic planning retreat on May 27, 2015, the Collaborative selected root causes as focus areas and secondary priorities³. The root causes were labeled by the six system characteristics: mindsets, components, connections, resources, power, and regulations. Utilizing reference materials from the ABL Change manual, the members selected strategies that were most likely to impact the cause based on its system label. The strategies were then assembled into an action agenda with goals, objectives, activities, timelines, and person responsible.



Developing the Action Agenda

A variety of approaches and guidelines were used to help develop an action agenda that would meet the criteria of the ABL Change Framework. DSGSC members were committed to developing a plan that would be actionable, feasible, powerful, and mission aligned. These criteria were discussed at each planning meeting. Members were reminded to scan the strategies and activities they selected to make sure that ...

1. The target audiences were ready for the change or that there were steps to build readiness for change.
2. The DSGSC and partners had the capacity for the activity or that there were activities planned such as training or acquiring resources to build capacity.
3. There was enough communication, promotion, and training planned to achieve diffusion and integration of the strategy.
4. Sustainability was considered early in the process to ensure that policies, training, and stable funding were planned to support continuation of the change.



³ See Appendix for root cause charts and analysis.



The Delta-Schoolcraft DSGSC used guidelines provided by the Office of Great Start, to frame their strategic plan and resulting action agenda. As root cause were identified, members assessed how addressing that root focus would impact the four outcomes that were adopted with the release of the **Great Start, Great Investment, Great Future** report.

Goals & Objectives

Four Outcomes

1. Children are born healthy.
2. Children are healthy, thriving, and developmentally on track from birth to third grade.
3. Children are developmentally ready to succeed in school at time of school entry.
4. Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.

The four outcomes are implemented with a holistic approach which addresses physical health, early care and education, social and emotional health, parent leadership, and family support. In addition, the six system conditions which have been shown to influence the effectiveness of early childhood services are integrated throughout the ABLe Change process utilized for strategic planning. System conditions addressed in this plan's action agenda include: resources, regulations, connections, components, mindsets, and power. The figure to the right illustrates how these concepts are interconnected. The DSGSC also follows the guiding principles and high leverage strategies that are outlined in **Great Start, Great Investment, Great Future**:



Seven Guiding Principles

1. Children and families are the highest priority.
2. Children with the greatest need must be served first.
3. Investing early increases impact.
4. Opportunities to coordinate and collaborate must be identified and implemented.
5. Parents and communities must have a voice in building and operating the system.
6. Efficiencies must be identified and implemented.
7. Quality matters.

Six high-leverage Strategies

1. Build Leadership within the System
2. Support Parents' Critical Role in Their Children's Early Learning and Development
3. Assure Quality and Accountability
4. Ensure Coordination and Collaboration
5. Use Funding Efficiently to Maximize Impact
6. Expand Access to Quality Programs



To ensure that the Action Agenda is aligned with these various guidelines, a checklist has been included at the top of each Action Agenda section. The strategic planning process emphasized the early childhood system of services. In order to ensure that the DSGSC operations were being assessed and needs addressed, the DSGSC completed an infrastructure “check in⁴” using the levers for change that were established during the evaluation process conducted by the Early Childhood Investment Corporation and Michigan State University in 2012. Three items were selected for focus over the next three years. These levers for change have been integrated throughout the action agenda:

- ★ Intentional Systems Change Actions
- ★ Effective Partnerships
- ★ Strong Relationship Networks

Goals, Objectives, and Strategies

The goals and objectives that were developed for the action agenda are aligned with the Office of Great Start Guidelines and reflect the root causes⁵ as they relate to the community needs and system conditions.

★ **Goal 1: All families have access to high quality services and have the resources to utilize them.**

→ Objective 1: The number of families utilizing services will increase over the next three years.

Strategy 1: Maximize the Data included in 2-1-1

Prioritized root causes related to the objective and addressed by this strategy:

- Families often lack the confidence "power" and the skills to advocate for services for their child. RESOURCES & POWER
- There is a lack of a centralized source of information. CONNECTIONS
- There is no individual or agency assigned to this task. RESOURCE

Strategy 2: Utilize Technology to Organize Resources that are not included in 2-1-1

Prioritized root causes related to the objective and addressed by this strategy:

- There is a lack of a centralized source of information. CONNECTIONS

Strategy 3: Develop an “Every door is the right door” training tool for use in agencies and organizations

Prioritized root causes related to the objective and addressed by this strategy:

- Families often lack the confidence "power" and the skills to advocate for services for their child. RESOURCES & POWER
- There is a lack of a centralized source of information. CONNECTIONS
- There is no individual or agency assigned to this task. RESOURCE

Strategy 4: Align location and availability of services to meet family needs

Prioritized root causes related to the objective and addressed by this strategy:

- The vast geography and isolation of rural areas does not support families. CONNECTION
- Lack of transportation makes it even more of an isolation issue and barrier to getting to services. RESOURCE
- The limited hours of services make it stressful for some families to get to services. COMPONENT

⁴ Results of Infrastructure Survey are included in the appendix.

⁵ Root cause analysis charts are included in the appendix.



→ Objective 2: The number of children that are screened for delays will increase over the next three years.

Strategy 1: Increase Use of Evidence Based Screening Tools

Prioritized root causes related to the objective and addressed by this strategy:

- Providers may not be explaining the importance. RESOURCES
- Parents used to only taking children in when sick. MINDSET

Strategy 2: Establish a process that informs parents of additional services when their child does not qualify for ISD services.

Prioritized root causes related to the objective and addressed by this strategy:

- Parents are not aware of next step in process. RESOURCES
- Families often lack the confidence "power" and the skills to advocate for services for their child. RESOURCES & POWER

★ **Goal 2: Conditions in the early childhood system support providers and agencies working together to effectively meet the needs of families with young children.**

→ Objective 1: Providers have information needed to make referrals and assist families in getting the services they need.

Strategy 1: Leverage human resources by developing relationships within and across agencies

Prioritized root causes related to the objective and addressed by this strategy:

- Agencies are not utilizing human resources to their full potential (i.e. people can represent multiple groups) RESOURCES & CONNECTIONS

Strategy 2: Create a cross reference tool for making referrals

Prioritized root causes related to the objective and addressed by this strategy:

- Lack of communication and understanding of community services

Strategy 3: Launch service information tools developed under Goal 1 & Goal 2

Prioritized root causes related to the objective and addressed by this strategy:

- Agencies do not prioritize dissemination of information beyond their own employees. MINDSET & RESOURCES

→ Objective 2: There are effective partnerships & strong relational networks within the early childhood system.

Strategy 1: Increase sharing of resources among providers

Prioritized root causes related to the objective and addressed by this strategy:

- Competition between providers makes it difficult to work together. MINDSETS

★ **Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.**

→ Objective 1: Families have information needed to prepare their child for kindergarten and to access services related to meeting their child's transition needs.

Strategy 1: Develop a clear Kindergarten readiness message

Prioritized root causes related to the objective and addressed by this strategy:

- There is no agreed upon definition of readiness. CONNECTIONS

→ Objective 2: Kindergarten and Pre-K teachers have the resources and connections in place to align pre-k and kindergarten programs.

Strategy 1: Develop a consistent transition plan

Prioritized root causes related to the objective and addressed by this strategy:

- There is no consistent transition process. REGULATIONS
- Some preschools do not know they should be participating in the "transition". RESOURCES



★ **Goal 4: Services reflect the input of families and providers.**

→ Objective 1: There is an increase in families that report that they feel included and that services reflect their input.

Strategy 1: Create a parent input best practice document.

Prioritized root causes related to the objective and addressed by this strategy:

- Questions and surveys are not family friendly (appearance and wording of questions) COMPONENT
- Surveys do not include an explanation of how results will be used. COMPONENT
- There is no consistent format for surveys. CONNECTIONS
- There are barriers to distributing and completing the survey including geography, internet access, stigma, and time. RESOURCE

Strategy 2: Encourage Additional Agencies to Collect Parent Input

Prioritized root causes related to the objective and addressed by this strategy:

- Family input is not a priority for some agencies. MINDSET
- There are barriers to distributing and completing the survey including geography, internet access, stigma, and time. RESOURCE

Strategy 3: Develop a “master” release and sharing of information form.

Prioritized root causes related to the objective and addressed by this strategy:

- Confidentiality rules are a barrier to sharing surveys and results. REGULATION

Year 1, 2 & 3 Activities:

The DSGSC members developed action steps for each strategy and those are organized into a one year action agenda for 2016. DSGSC members have adopted continuous learning and the action learning process as their model for operation. Progress toward the first year action agenda goals and objectives will be monitored through ongoing review and learning. The commitment to continuous learning makes it difficult to predict which activities will be the most appropriate in year two and three of the strategic plan. Near the end of each year Action Agenda, progress and emerging needs will be reassessed. The reassessment will be used to develop

the annual workplan and activities for the action agenda. Members will also examine other access issues and system conditions that are creating barriers. The root cause analysis will be reviewed to determine if there is readiness to address other system issues. The DSGSC will also review items that have been identified as secondary priorities for readiness to become part of the action plan.



Early Childhood Action Agenda – Delta Schoolcraft Great Start Collaborative

Goal 1: All families have access to high quality services and have the resources to utilize them.					
Targeting the following early childhood outcomes: <input checked="" type="checkbox"/> Children are born healthy. <input checked="" type="checkbox"/> Children are healthy, thriving, and developmentally on track from birth to third grade. <input checked="" type="checkbox"/> Children are developmentally ready to succeed in school at time of school entry. <input checked="" type="checkbox"/> Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.			Addresses the following early childhood components: <input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Child Care and Early Learning <input checked="" type="checkbox"/> Family Support		
Related Community Needs: <ul style="list-style-type: none">• Medical, Dental, and Mental health provider ratios are higher than the state and two peers (higher=fewer providers per person)• A high percentage of children participate in WIC.• 19% of adults report inadequate social support					
Objective 1: The number of families utilizing services will increase over the next three years.					
Strategy 1: Maximize the Data included in 2-1-1		Prioritized root causes: <ul style="list-style-type: none">• Families often lack the confidence "power" and the skills to advocate for services for their child. RESOURCES & POWER• There is a lack of a centralized source of information. CONNECTIONS• There is no individual or agency assigned to this task. RESOURCE		Performance Measures: 2-1-1 data shows an increase in services listed and requests for help by December 2018. (need to collect baseline data)	
Activities (small wins promoting the strategy and addresses root causes)		Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Meet with 2-1-1 for an overview of their capabilities and discussion of barriers for families		DSGSC Director	January 2016	2-1-1 contact and list of current agencies	Meeting scheduled
2. Collaborate with 2-1-1 to create a list of gaps in information contained in the 2-1-1 database		Family Support Committee, PL's, DSGSC Director	March 2016	2-1-1 contact and list of current agencies	2-1-1 presents at DSGSC meeting and list is accessed
3. Identify agencies that need to be approached about updating information		Family Support Committee, PL's, DSGSC Director	March 2016	Approach list is developed	5 agencies are approached to update or add their information to 2-1-1



4. Develop a process to quickly update 2-1-1 information	Family Support Committee, PL's, DSGSC Director	March 2016	Time	Process is developed and used
5. Promote use of 2-1-1 as a centralized place for services	Family Support Committee, PL's, DSGSC Director	May 2016	2-1-1 Promotional Materials	2-1-1 materials are provided to all DSGSC members
6. Identify additional needs for centralizing information not in 2-1-1 such as feasibility for hiring a navigator or central director of services.	Family Support Committee, PL's, DSGSC Director	June 2016	Interest and feasible resources	Need is identified and applications for potential funding resources are obtained.
Strategy 2: Utilize Technology to Organize Resources that are not included in 2-1-1	Prioritized root causes <ul style="list-style-type: none"> There is a lack of a centralized source of information. CONNECTIONS 		Performance Measures: Two technology based systems are in place to promote events by at least three DSGSC members.	
Activities (small wins promoting the strategy and <u>addresses root causes</u>)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. List current online systems used to promote events and who is using them (Facebook, google calendar, etc.)	Family Support Committee, PL's, DSGSC Director	Feb 2016	Technology Expertise, Time	A list of online promotion tools is created
2. Identify two systems to use for promoting events and develop processes for DSGSC members to post own events. (DSISD, Chamber etc.)	Family Support Committee, PL's, DSGSC Director	March 2016	Agreement on processes	A written process is developed and approved by DSGSC.
3. Train staff at agencies on posting information according to processes that have been developed.	Family Support Committee, PL's, DSGSC Director	May 2016	Secure systems for entering events	One or more staff members at _____ agencies are trained on posting events using the new processes.



Strategy 3: Develop a “No wrong door” training tool for use in agencies and organizations	Prioritized root causes: <ul style="list-style-type: none"> Families often lack the confidence "power" and the skills to advocate for services for their child. RESOURCES & POWER There is a lack of a centralized source of information. CONNECTIONS There is no individual or agency assigned to this task. RESOURCE 	Performance Measures: During the next strategic planning process in 2018, DSGSC members report that there is an increase in interagency referrals.			
Activities (small wins promoting the strategy and <u>addresses root causes</u>)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):	
1. Identify and gather resources for “No wrong door” training	Family Support Committee	Jan 2018	Samples of similar training/philosophy	Resources are identified	
2. Develop a plan to provide “No wrong door” training (training in each county, by agency, etc.)	Family Support Committee	Jan 2018	Interest in training	A plan for training is approved by the DSGSC	
3. Identify ways that agencies can imbed the “No wrong door” philosophy into daily practices (new employee orientation, registration forms, case notes forms, etc.)	Family Support Committee	March 2018	Samples	Samples of “every door is the right door” practices are gathered	
4. Create a quick reference tool for employees to use when families express a need (i.e. flow chart etc.)	Family Support Committee	May 2018	Listing of resources	Resources are organized and tool is created	
5. Schedule training for year 2 implementation	Family Support Committee	May 2018	Coordination of Schedules	3 dates for training are scheduled.	



Strategy 4: Align location and availability of services to meet family needs	Prioritized root causes: <ul style="list-style-type: none"> The vast geography and isolation of rural areas does not support families. CONNECTION Lack of transportation makes it even more of an isolation issue and barrier to getting to services. RESOURCE The limited hours of services make it stressful for some families to get to services. COMPONENT 	Performance Measures: Two services will modify how they offer services to meet family schedules and transportation barriers using methods like mobile services, co-locating, or coordination of schedules.			
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):	
1. Present the information on how to use co-location, scheduling, referral hub, cross training, and mobile clinics to reduce barriers.	Childcare and Early Ed Pediatric and Family Health	Sept 2016	Samples and information from orgs that use model	Information gathered and presented	
2. Brainstorm opportunities where similar services might collaborate.	Childcare and Early Ed Pediatric and Family Health	Sept 2016	Meet with orgs	Opportunities determined	
3. Pilot this change with one service.	Childcare and Early Ed Pediatric and Family Health	Sept 2017	Programs willing to participate	Pilot completed	
4. Evaluate pilot and determine modifications or new services to use this type of collaboration.	Childcare and Early Ed Pediatric and Family Health	Dec 2017	Group evaluation	Evaluation complete and goals set for expanded implementation	
5. Maintain and support existing programs that increase access by providing services in natural locations such as home visiting programs (uses evidence based Parents as Teachers or other programs).	DSGSC Director; Home visiting staff	Ongoing	Direct Service Program Money	Targets outlined annually via 32 P direct program section of workplan.	
6. Support access to dental services by providing follow up regarding dental grant that established fluoride and varnish programs at school locations, doctor offices.	Pediatric and Family Health	Annually in February	Committee members time	Sites have maintained the fluoride and rinse program.	
7. Assess the impact of additional referrals on the system, providers, and capacity. Identify gaps and areas where additional services are necessary or create innovative ways to handle the increased demand for services.	DSGSC Committees, DSGSC Board, DSGSC Staff	Annually in August	Provider feedback and planning process for 32 P application	The 32 P annual workplan includes strategies to address impact on providers and system.	

Objective 2: The number of children that are screened for delays will increase over the next three years.

Strategy 1: Increase Use of Evidence Based Screening Tools	Prioritized root causes: <ul style="list-style-type: none"> Providers may not be explaining the importance. RESOURCES Parents used to only taking children in when sick. MINDSET 	Performance Measures: Screenings are being used more consistently by at least three providers.			
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):	
1. Connect with providers to determine <ol style="list-style-type: none"> how they are promoting well screenings identify the tools that they are using for screening of developmental and social emotional delays (i.e. forms in their electronic medical records, paper growth charts). track number of children screening identify potential training participants 	Childcare and Early Ed Pediatric and Family Health	Jan 2016	Time, access to providers	Meet with 10 providers and discuss	
2. Provide information or training (ASQ and ASQ SE or other tools identified in #1) on promoting wellness screenings with children 3-5, providing screenings, and making referrals.	Childcare and Early Ed Pediatric and Family Health	Jan 2016	Time, access to providers, training materials	Provide training to staff	
3. Utilize home visitors to provided screenings (ASQ and ASQ SE for Parents as Teachers participants.	Home visitors	Ongoing	Screening Tools and Director Program Money	All PAT home visitors are trained and use screening tools.	
4. Obtain or develop materials for families that explain the importance of wellness screenings for children 3-5 years old including information that they are covered by most insurances.	Childcare and Early Ed Pediatric and Family Health	May 2016	Materials; plan for distribution	Materials are distributed/promoted to children enrolled in preschool, childcare providers, and via Facebook	
5. Partner with other DSGSCs and coalitions in the Upper Peninsula regarding social and emotional projects.	Social and Emotional Health Committee	September 2016	Time and resources from UP group	Participate in one UP project.	

Strategy 2: Establish a process that informs parents of additional services when their child does not qualify for ISD services.		Prioritized root causes: <ul style="list-style-type: none"> Parents are not aware of next step in process. RESOURCES Families often lack the confidence "power" and the skills to advocate for services for their child. RESOURCES & POWER 	Performance Measures: Families feel more informed after receiving screening services and have the confidence to pursue other supports for their child.		
Activities (small wins promoting the strategy and addresses root causes)		Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Identify processes and communication materials used by Child Find Staff		Childcare and Early Ed Pediatric and Family Health Social and Emotional Health	Jan 2016	Child find materials, time	Communication materials are reviewed.
2. Assess the need/value of creating a companion document for parents to be given after a screening: "What to do if you still have concerns."		Childcare and Early Ed Pediatric and Family Health Social and Emotional Health	Jan 2016	Time	Need is assessed for companion document
3. If determined necessary, develop companion document and processes for consistently distributing after a screening.		Childcare and Early Ed Pediatric and Family Health	Jan 2016	Time; willingness to change process	If needed, the companion document is created and a process is in place to distribute consistently.

Early Childhood Action Agenda – Delta Schoolcraft Great Start Collaborative

Goal 2: Conditions in the early childhood system support providers and agencies working together to effectively meet the needs of families with young children.					
Targeting the following early childhood outcomes: <input checked="" type="checkbox"/> Children are born healthy. <input checked="" type="checkbox"/> Children are healthy, thriving, and developmentally on track from birth to third grade. <input checked="" type="checkbox"/> Children are developmentally ready to succeed in school at time of school entry. <input checked="" type="checkbox"/> Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.			Addresses the following early childhood components: <input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Child Care and Early Learning <input checked="" type="checkbox"/> Family Support		
Related Community Needs: <ul style="list-style-type: none">19% of adults report inadequate social supportPreschool participation rates are lower than state and one peer for Schoolcraft.					
Objective 1: Providers have information needed to make referrals and assist families in getting the services they need.					
Strategy 1: Leverage Human Resources by Developing Relationships Within and Across Agencies		Prioritized root causes: <ul style="list-style-type: none">Agencies are not utilizing human resources to their full potential (i.e. people can represent multiple groups) RESOURCES & CONNECTIONS		Performance Measures: DSGSC Agencies have a contact person in place who is responsible for keeping up to date on resources and changes in services	
Activities (small wins promoting the strategy and addresses root causes)		Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Identify insider contacts in agencies and with providers that are “gatekeepers” or well positioned to refer families. (Need to know, nice to know etc.)		Executive Committee	July 2016	Names, Phone #	Task is assigned to a role- job description- to support sustainability. (contact list)
2. Plan an event or activity to promote relationships and knowledge between agency providers such as speed-networking or interagency lunches.		Executive Committee	July 2016	Time, space	Event is scheduled



Strategy 2: Create a Cross Reference Tool for Making Referrals based on service lists developed in Goal 1.	Prioritized root causes: <ul style="list-style-type: none"> Lack of communication and understanding of community services. CONNECTION 		Performance Measures: During the next strategic planning process, DSGSC members will indicate that communication between service providers has improved.	
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Using the services list created under Goal 1, create a chart of Services for cross-referencing (At-A-Glance Criteria Card)	DSGSC Exec Com, Family Support	Sept 2016	Time, 2-1-1 current directories	Chart is shared with DSGSC members.
2. Create a comprehensive list of agencies and how a referral is made to each	Family Support	Sept 2016	Expertise, Time	Referral processes are outlined and presented in a clear manner.
3. Communication- create multiple avenues of communication	Family Support	Dec 2016	Time, Willingness to use communication tools	Communication tree aligning methods of communication is developed.
Strategy 3: Launch Service Information tools Developed under Goal 1 & Goal 2 (Would follow when strategy 1 and 2 under Goal 1 are completed.)	Prioritized root causes: <ul style="list-style-type: none"> Agencies do not prioritize dissemination of information beyond their own employees. MINDSET & REOURCES 		Performance Measures: During the next strategic planning cycle, there is a decrease in “awareness of services” being listed during system scans and root cause analysis.	
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Locate or develop a comprehensive list of services for families (Schoolcraft & Delta)	Parent Coalitions	Dec 2016	Time, 2-1-1, Schoolcraft Needs Assessment Dir.	One click, easy access is accomplished.
2. Link parents and providers to information	Parent Coalitions	Dec 2016	Printed list of resources; electronic version of resources; presentation for professional development opportunities	# of PD trainings/presentations to staff regarding referrals and resources # of criteria cards distributed to agency contacts and electronic postings # of public locations providing copies of service lists or promoting technology tools (i.e. 2-1-1)
3. Brainstorm ways that agencies can imbed	Parent Coalitions	March 2017		List of agencies

information about 2-1-1 resources, speed networking information into their daily work (i.e. shared as an agenda items at staff meetings; create a special section of lunch room bulletin board, etc.)	Family Support Parenting Leadership			
---	--	--	--	--

Objective 2: There are effective partnerships & strong relational networks within the early childhood system.

Strategy 1: Increase Sharing of Resources Among Providers	Prioritized root causes: <ul style="list-style-type: none"> Competition between providers makes it difficult to work together. MINDSETS 		Performance Measures: During the next strategic planning process, there will be an increase in shared resources as indicated by comparing the list created in year 1 to an updated list of shared resources.	
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Create a list of current resources being shared	Family Support Parenting Leadership	Jan 2018	Time, knowledge of resource sharing	Chart is shared with DSGSC members.
2. Share list with partners and discuss other opportunities for sharing.	Family Support Parenting Leadership	Jan 2018	Time, leadership willing to discuss sharing resources	List is shared and discussed with at least 3 agencies.
3. At least 1 new sharing opportunities is pursued.	Family Support Parenting Leadership	March 2018	Time, Willingness to use share resources	The year 2 action plan includes one sharing opportunity.



Early Childhood Action Agenda – Delta Schoolcraft Great Start Collaborative

Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.					
Targeting the following early childhood outcomes: ☒ Children are born healthy. ☒ Children are healthy, thriving, and developmentally on track from birth to third grade. ☒ Children are developmentally ready to succeed in school at time of school entry. ☒ Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.			Addresses the following early childhood components: ☒ Pediatric and Family Health ☒ Social and Emotional Health ☒ Parenting Leadership ☒ Child Care and Early Learning ☒ Family Support		
Related Community Needs: <ul style="list-style-type: none">Percent of 1st graders older than cohort is higher than state and three peers, but has seen significant decreases.Access to Childcare: Some forms of childcare have increased, but not at the same rate as group and family homes have decreased. Schoolcraft did not have any licensed providers for infants.Preschool participation rates are lower than state and one peer for Schoolcraft.Proficiency has mixed results with some improvement and in general with 4th grade rates better than 3rd grade rates.Special education participation rates for children 0-5 is higher than state and peers.					
Objective 1: Families have information needed to prepare their child for kindergarten and to access services related to meeting their child’s transition needs.					
Strategy 1: Develop a Clear Kindergarten Readiness Message		Prioritized root causes: <ul style="list-style-type: none">There is no agreed upon definition of readiness. CONNECTIONS		Performance Measures Preschools and kindergarten teachers across districts in each county have an agreement to the “core” kindergarten readiness criteria.	
Activities (small wins promoting the strategy and addresses root causes)		Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Gather the information that is currently being used.		Childcare and Early Education (SRAC)	March 2016	Willingness to share info; common belief that a consistent definition is needed.	DSGSC has collected information for all GSRP, Head Start, and Kindergarten teachers, parents, and licensed providers in each county.
2. Align materials with TS Gold		SRAC	March 2016	TS Gold criteria	Create a crosswalk between TS Goal Criteria and existing criteria



3. Obtain agreement on a “core” list of readiness criteria	SRAC	March 2016	Common belief that a consistent definition is needed.	School communities (K-12, GSRP, HS, Private Preschool) have agreed to use the core list of criteria.
4. Create a K-ready marketing plan that is consistent with messaging and includes consideration of families that are not enrolled in pre-K programs or not connected to the system in other programs.	SRAC	May 2016	Messages that resonate with families; childcare providers; other teachers	Marketing plan is ready to implement in Year 2 in communities that are ready and in Year 3 with additional communities.

Objective 2: Kindergarten and Pre-K teachers have the resources and connections in place to align pre-k and kindergarten programs.

Strategy 1: Develop a consistent transition plan	Prioritized root causes: <ul style="list-style-type: none"> There is no consistent transition process REGULATIONS. Some preschools do not know they should be participating in the "transition" RESOURCES 		Performance Measures Transition policies and procedures are aligned across Preschool and K-12 systems by December 2018 with four school districts participating.	
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Review available plans that are currently in place and from other communities/DSGSCs. (i.e. Macomb Transition Binder)	Childcare and Early Education SRAC	March 2016	Plans from other DSGSCs; TA Helpline	Best Practices from other DSGSC are identified.
2. Connect with DSGSCs that have successfully adopted transition processes.		March 2016	TA Helpline; Regional Meetings; Macomb Transition Guide	Meet with or conference call with at least one DSGSC.
3. Develop a universal plan and resources through collaboration with PreK, Public Schools and parents.		March 2016	Time; willingness to adopt transition policies; involvement of both preschool and K Teachers, administrators and parents	There is consensus on the need for a consistent transition process and the year 2 action agenda includes a plan for development of forms and policies to support that process.



Early Childhood Action Agenda – Delta Schoolcraft Great Start Collaborative

Goal 4: Services reflect the input of families and providers.				
Targeting the following early childhood outcomes: <input checked="" type="checkbox"/> Children are born healthy. <input checked="" type="checkbox"/> Children are healthy, thriving, and developmentally on track from birth to third grade. <input checked="" type="checkbox"/> Children are developmentally ready to succeed in school at time of school entry. <input checked="" type="checkbox"/> Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.			Addresses the following early childhood components: <input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Child Care and Early Learning <input checked="" type="checkbox"/> Family Support	
Related Community Needs: <ul style="list-style-type: none">Economic Indicators show an increase in unemployment and poverty.Births to teens, repeat teen births (8 births in 2013), and teen birth rate are generally increasing and higher than state and peers. Schoolcraft saw improvement in 2013.Mothers with a high school diploma/GED has increased and is better than state and three peers.				
Objective 1: There is an increase in families that report that they feel included and that services reflect their input.				
Strategy 1: Create a parent input best practice document.	Prioritized root causes: There is a lack of family engagement POWER <ul style="list-style-type: none">Questions and surveys are not family friendly COMPONENTSurveys do not include an explanation of how results will be used. COMPONENTThere is no consistent format for surveys. CONNECTIONSThere are barriers to distributing and completing the survey. RESOURCE			Performance Measures There is increased participation in surveys by parents and use of data by agencies.
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Identify who is collecting parent input, how they are collecting it, and how they are using it.	DSGSC Members	October 2016	Time	List is developed
2. Create a “Ways to Get Involved” parent fact sheet using information in #1 (include how input is used)	Parent Coalition	January 2017	List from #1	List is available online-distributed electronically to DSGSC members.
3. Gather existing surveys used by different agencies and programs and other DSGSCs	DSGSC Members	November 2016	Willingness to share information, time	Surveys are collected and available in electronic format.
4. Compare for content to create some “core questions” to ask people on their survey. Focus on demographics and question type (i.e. multiple choice vs. fill in the blank, color in the box etc.)	DSGSC Members Parent Coalition	January 2017	Time; willingness to adopt survey; input to ensure meeting all agencies’ needs.	Survey questions are adopted by 5 agencies.

5. Seek TA from ECIC regarding survey wording and format.	Parent Coalition	May 2017	TA Helpline	Universal Survey is developed
6. Develop a list of best practice guidelines with suggestions from parents AND an explanation of the importance of power dynamics. (i.e. add information about how surveys are used to the instructions, check readability level, friendly format).	Parent Coalition Parenting Leadership	September 2017	Sample language from other surveys	Parent coalition provides input to wording.
7. Create and implement a feedback loop to parents which includes how their input is used (via Facebook, parent coalition, newsletters, etc.)	Parent Coalition Parenting Leadership	October 2017	Agencies willing to share how parent input makes a difference.	There is a process in place to help provided feedback to parents and families.
Strategy 2: Encourage Additional Agencies to Collect Parent Input	Prioritized root causes: <ul style="list-style-type: none"> Family input is not a priority for some agencies. MINDSET There is a lack of family engagement POWER 		Performance Measures: Two additional agencies will adopt regular practices for collecting family input.	
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Based on information collected in strategy 1, identify agencies not collecting family input.	Parenting Leadership	Jan 2017	Time, contacts	Agencies identified
2. Develop a list of benefits from collecting parent input	DSGSC members	Jan 2017	Time	Benefits list
3. Share benefits list and best practice guide with 5 agencies that are not regularly collecting family input.	DSGSC Members	May 2017	Contacts	Meetings held with five agencies.
Strategy 3: Develop a “master” form for release and sharing of information.	Prioritized root causes: <ul style="list-style-type: none"> Confidentiality rules are a barrier to sharing surveys and results. REGULATION 		Performance Measures : There will be 6-8 organizations using sharing form.	
Activities (small wins promoting the strategy and addresses root causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Gather currently used forms from other DSGSCs	DSGSC Director	Jan 2016	Forms	Forms are gathered.
2. Adjust form for local needs or review online based programs that might be applicable (i.e. MPower)	DSGSC members	July 2016	Time	First draft of form.
3. Develop form with a pilot group.	DSGSC Members	Sept 2016	Currently used forms; agencies willing to participate in pilot.	Form is created.

Secondary Priorities

PARTNERING TO ADDRESS REMAINING CAUSES: There were many other root cause and issues discussed during strategic planning. In order to manage our plan and our resources, the following items were identified as important but not focus areas for the first year's action agenda. We will be partnering with other organizations to ensure that these topics are addressed.

Related Goal	Root Causes your Organization is NOT targeting	Which other organizations in the community are currently working on this root cause?	Which other organizations in the community are uniquely positioned to address this root cause, but are not doing so yet?	How can you connect with these organizations to strengthen your efforts?
Goal 1: All families have access to high quality services and have the resources to utilize then.	Substance abuse prevents families from meeting the needs of their children.	DHS Health Department DARE Programs SAVE Council	Healthcare Facilities Private Foundations Service Organizations	Year 1: Partner with other organizations on prenatal exposure to substance abuse. Possible follow up: <ul style="list-style-type: none"> • Create a task force or expand the work of the current groups • Community Presentations • Integrate the information into schools
Goal 1: All families have access to high quality services and have the resources to utilize then.	Not all children have access to high quality daycare/preschool	Head Start Early On Early Head Start GSRP, Regional Resource Center	Public Schools Private Schools	<ul style="list-style-type: none"> • Ensure that all teachers receive school readiness information and are actively communicating with early care providers on expectations; • Expand SRAC; • investigate funding options for private preschool (grants) ; • advocate moving to universal free preschool

Related Goal	Root Causes your Organization is NOT targeting	Which other organizations in the community are currently working on this root cause?	Which other organizations in the community are uniquely positioned to address this root cause, but are not doing so yet?	How can you connect with these organizations to strengthen your efforts?
Goal 1: All families have access to high quality services and have the resources to utilize then.	<ul style="list-style-type: none"> Some families do not access services because they do not know about them. There is not a comprehensive media awareness campaign 	DHS Health Departments Head Start, Early Head Start Early On	Public Schools Private Schools Service Organizations	<ul style="list-style-type: none"> Relationships building across organizations Increase family nights and communications to providers and families Determine centralized location for all agencies to report activities and services before launching media campaign
Goal 1: All families have access to high quality services and have the resources to utilize then.	Lack of providers (especially mental health.) so that if you are not eligible you have no access to some services. COMPONENTS	Pathways Hiawatha Behavioral Health Private Practitioners	Healthcare	<ul style="list-style-type: none"> Coordinate focus group meetings with service providers (hospitals and private care) to determine root causes from funder/provider perspective, Explore whether collaboration could expand capacity
Goal 1: All families have access to high quality services and have the resources to utilize then.	The timeliness of responses leaves families without services (Put on a waiting list for one program; find out did not get in but don't have time to get into another program. CONNECTIONS	GSRP	Head Start, EHS State partners Regional Resource Center	Partner with Regional Resource and Head Start on actively engaging parents to be knowledgeable on all preschool options within their areas and the deadlines associated with enrolling their child

Related Goal	Root Causes your Organization is NOT targeting	Which other organizations in the community are currently working on this root cause?	Which other organizations in the community are uniquely positioned to address this root cause, but are not doing so yet?	How can you connect with these organizations to strengthen your efforts?
Goal 1: All families have access to high quality services and have the resources to utilize then.	<ul style="list-style-type: none"> Providers are not able to support families filling out paperwork. Service providers do not have training or knowledge in how to fill out paperwork. There is a lack of follow through from gatekeepers. 	NONE	<p>DHS was at one time interested in training people as navigators but to our knowledge there has be no activity.</p> <p>Public Schools</p>	<ul style="list-style-type: none"> Research options for navigator training or establishing centralized navigator. Parent Coalition Members could be trained as volunteer navigators.
Goal 1: All families have access to high quality services and have the resources to utilize then.	<p>Many providers are not trained to provide quality screenings.</p> <p>RESOURCES & COMPONENTS</p>	NONE	<p>Regional Resource</p> <p>Healthcare partners</p>	<p>Partner with Regional Resource to hold “training days” for each of the screening tools used in our areas</p>
Goal 1: All families have access to high quality services and have the resources to utilize then.	<ul style="list-style-type: none"> Services are often marketed as for “low income or class” which creates a sense of pride that gets in the way of using services. <p>MINDSET</p> <ul style="list-style-type: none"> Providers project a judgmental attitude toward some clients. <p>MINDSET</p>	NONE	<p>Health Departments</p> <p>Head Start</p> <p>Early Head Start</p>	<ul style="list-style-type: none"> Staff trainings - partner with agencies Share information from the system scan on how these mindsets are making it more difficult to prepare children for kindergarten. Having PC/Collaborative members present “every door is the right door” “training to gatekeepers

Related Goal	Root Causes your Organization is NOT targeting	Which other organizations in the community are currently working on this root cause?	Which other organizations in the community are uniquely positioned to address this root cause, but are not doing so yet?	How can you connect with these organizations to strengthen your efforts?
Goal 2: Conditions in the early childhood system support providers and agenda working together to effectively meet the needs of families with young children.	Lack of communication is a barrier to collaboration and system wide coordination.	NONE	Regional Resource School Boards Community Collaboratives Community Service Organizations Community Business Partners	<ul style="list-style-type: none"> Establish more community partners Focus on relationships Create a community page or calendar where organization can communicate what they are doing and encourage collaboration where possible
Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.	The assessment process for kindergarten is not always parent/child friendly.	None	Public Schools Private Schools	<ul style="list-style-type: none"> Fostering Relationships SRAC goals Helping parents to know what to expect at the screenings
Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.	K-12 teachers do not believe it is their responsibility to "deal with" social-emotional issues. MINDSET	None	Head Start, Holy Name, Conscious discipline Holy Name would be an ideal trial as all staff is attending Conscious Discipline Training in August.	<ul style="list-style-type: none"> Create a connection using the SRAC to develop a social-emotional Partnership with 1 school. -Training for embedding SE work into curriculum
Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.	There is no buy-in or mandate to consider Pre-K data. MINDSET & REGULATION	None	Head Start DHHS Public and Private Schools	Create connections using the SRAC to incorporate use of TS Gold data during the transition to Kindergarten.
Goal 4: Services reflect the input of families and providers.	There are barriers to distributing and completing surveys including geography, internet access, stigma, time. RESOURCE	None	Head Start, DHHS Public and Private Schools	<ul style="list-style-type: none"> Work Collaboratively on a process for survey distribution 1 - 2 x's year Use incentives



Fund Development

Funding for the core functions of the Great Start Collaborative and the Delta-Schoolcraft Parent Coalitions is provided by the Office of Great Start. For projects requiring additional funds, the DSGSC has established a Fund Development Committee.

Fund Development efforts have been underway since 2011 when the DSGSC established a fund with the Community Foundation of Delta County. Initially, matching funds were raised for preschool scholarships through a state grant. Efforts have continued over the last four years throughout our two-county area. We have been successfully holding events with growing support from the community.

Funds raised have been used to support various projects including scholarship opportunities, foster family support, and literacy initiatives. In developing the goals and strategies of our strategic plan, we understand that we have limited funding. We realize that we may need to seek additional community support through fundraising efforts or pursue larger grants. Many of our goals can be achieved through collaborative efforts in the community. We will continually seek opportunities to collaborate and blend funding within individual programs and throughout the early childhood community.

The following are opportunities that the DSGSC will pursue to achieve our goals:

1. The DSGSC will continue to pursue local, state and federal grants.
2. The DSGSC will continue to solicit in-kind contributions from community organizations and member agencies.
3. The DSGSC will continue to partner with local agencies to blend funding and will also look for new opportunities to blend and braid funding sources.
4. The Parent Coalitions in each county are a major resource. Parent volunteers not only want to volunteer, but they continue to support fund raising activities and seek out new opportunities for support.

The Fund Development Committee meets three times a year. The committee is composed of DSGSC members as well as parents and community stakeholders. This group determines how the DSGSC should move forward in securing funds for targeted projects. Members of this group assist in planning as well as implementation of fundraising efforts. Their first task will be to identify any additional resources needed to implement the Action Agenda. As part of the strategic planning process, resource needs have been identified and are listed on the action agenda. DSGSC members have identified the following activities and needs for additional funds:

- Home-visiting programs
- Tracking tool to measure impact and utilization of screening tools
- Resources to increase use of screening tools and training
- Funds to address capacity issues that may be created due to increased screening and referrals
- Funds dedicated to spearhead initiatives to address substance abuse and drug addicted babies.



★ ABLe Change Overview

The **ABLe Change Framework** is a model designed to help communities more effectively address the significant social issues affecting children, youth, and families. The model is based upon that premise that communities can achieve transformative results when they make local system and community conditions the intentional targets of their change initiatives, when they pursue the effective implementation of their efforts, and when they build a community engagement infrastructure that supports real-time learning and action across diverse stakeholders and sectors. Designed by Drs. Pennie Foster-Fishman and Erin Watson at Michigan State University, the ABLe Change Framework draws upon research from the successes and failures of prior organizational, community, service system, and international change efforts. The ABLe Change Framework is dynamic and adaptive to local conditions and problems, providing stakeholders with the flexibility they need to effectively address targeted community problems. The model is organized around 6 “simple rules” that, when pursued together, transform how community stakeholders work and learn together.



THINK SYSTEMICALLY: Change efforts often target the surface of problems, not the underlying systemic conditions causing local problems. Thinking systemically attends to and shifts system characteristics and their interactions.



ENGAGE DIVERSE PERSPECTIVES: Diverse stakeholders hold unique perspectives on the system, its problems, and possible solutions. The more perspectives accessed and understood, the more accurate the understanding and the more effective the solutions.



INCUBATE CHANGE; Transformative change is accelerated when communities create the conditions for rapid innovation across the community system. Incubating change includes fostering small actions across multiple community layers and leveraging systemic feedback loops to reinforce the change.



IMPLEMENT CHANGE EFFECTIVELY: Great strategic designs for promoting community change are not enough; systems change efforts must also attend to how effectively their proposed strategies are carried out by assessing and building a climate for effective implementation.



ADAPT QUICKLY: The problems facing our communities today are complex and ever-changing. Transformative change requires an ongoing, dynamic process, where understanding, learning and adapting become more important than planning. To adapt quickly, you must identify and quickly respond to emerging problems and opportunities.



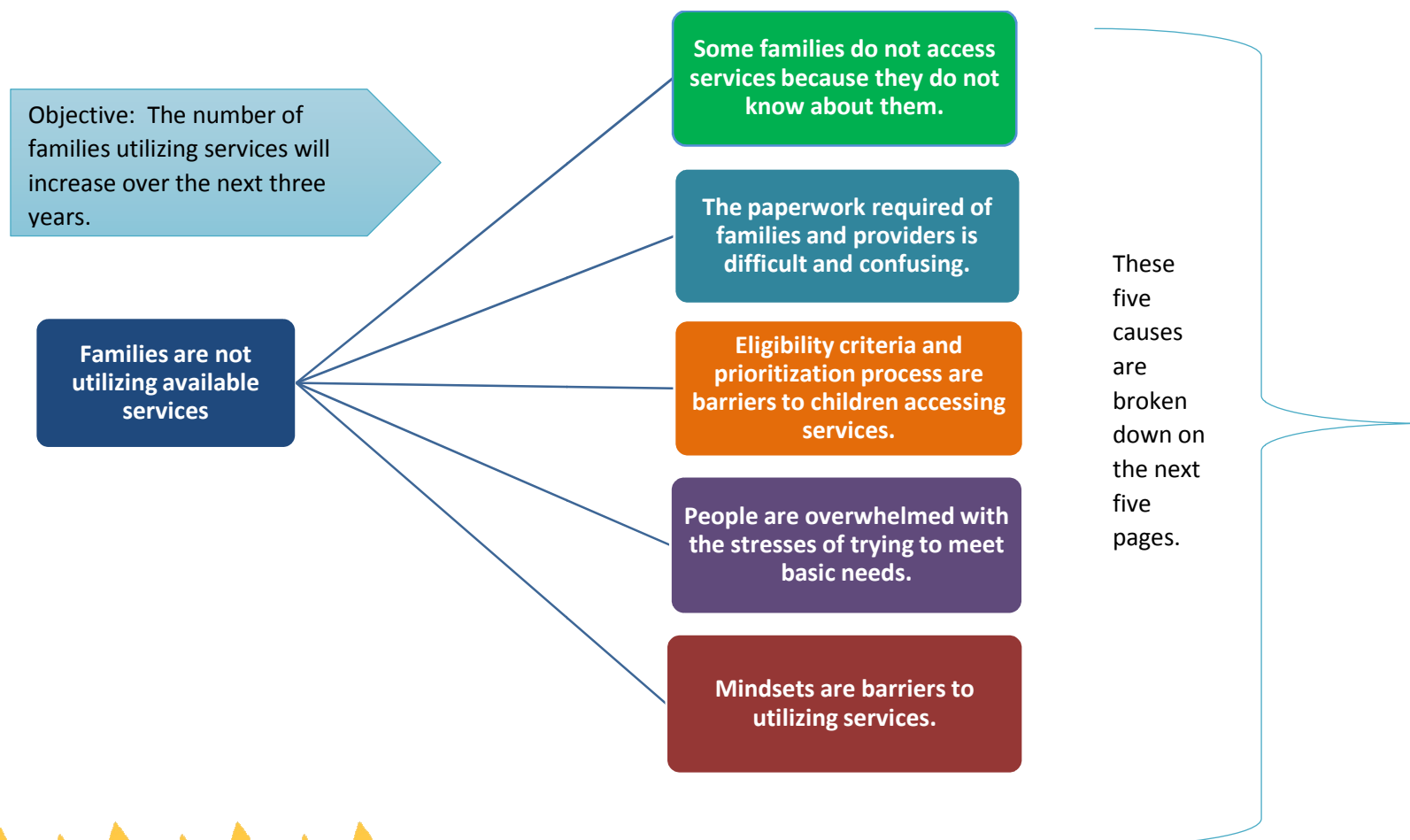
PURSUE SOCIAL JUSTICE: In order to really shift the status quo; one must understand disparities in outcomes and opportunities. Pursuing social justice includes identifying, acknowledging, and tackling the inequities that exist.

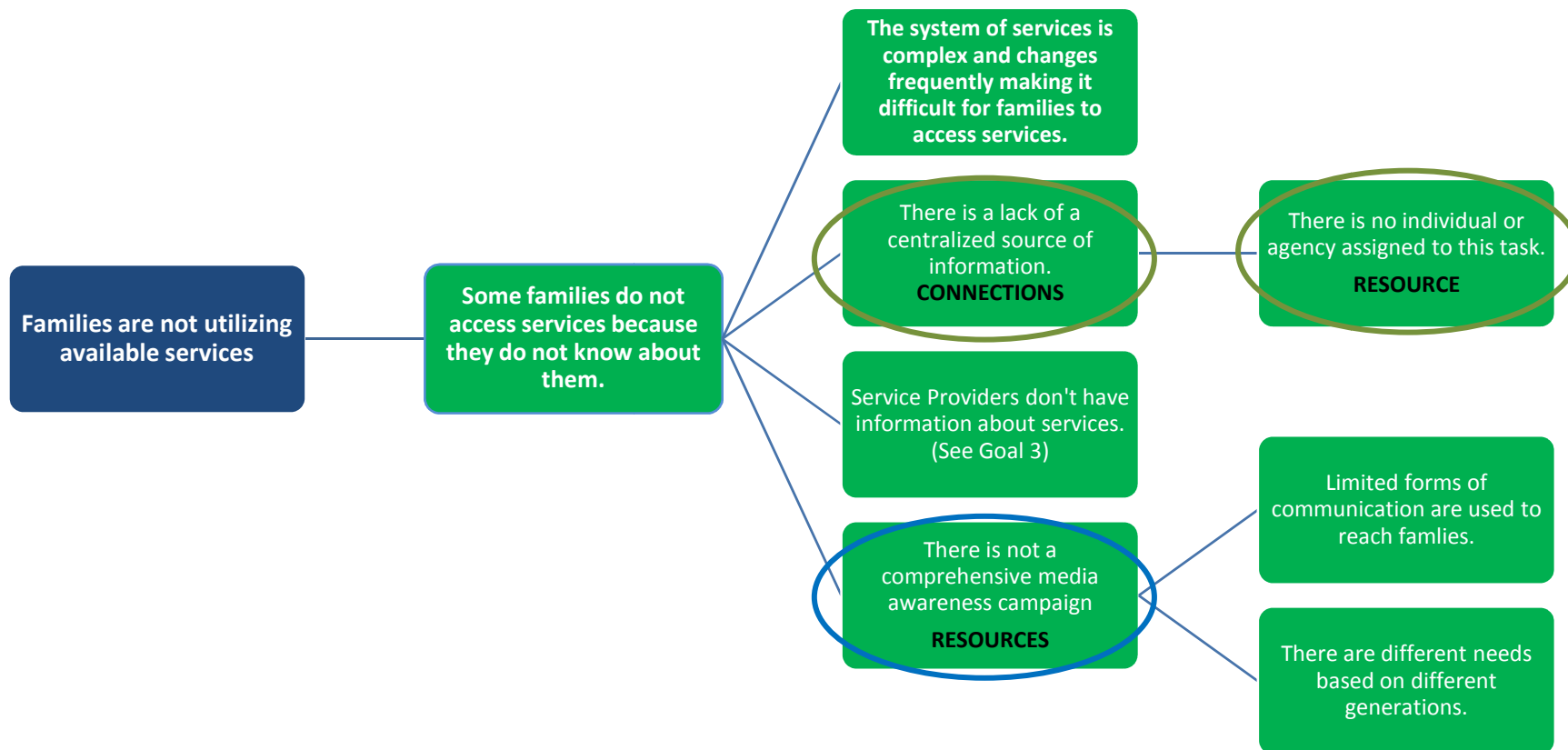


★ Root Cause Charts

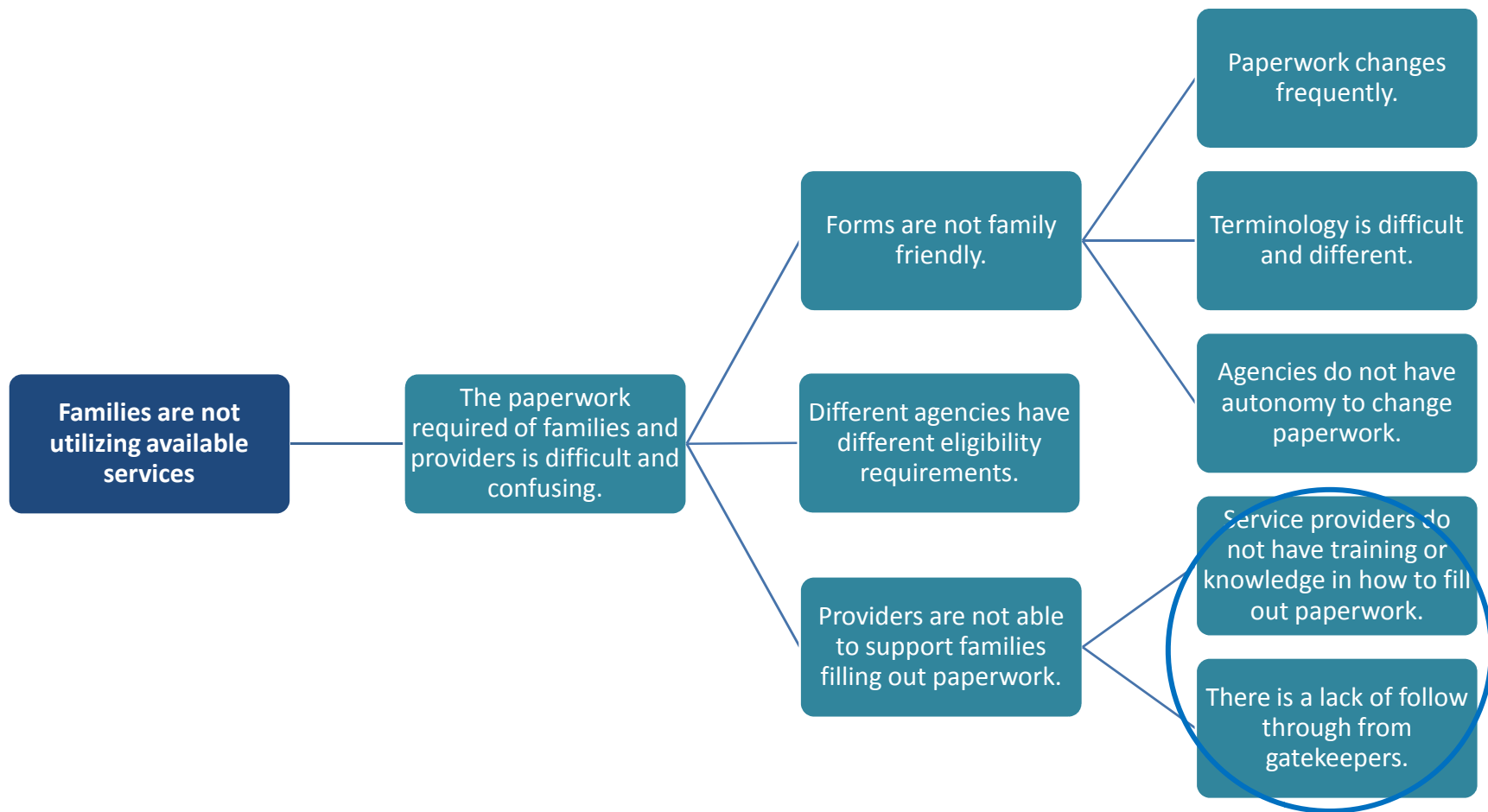
Goal 1: All families have access to high quality services and have the resources to utilize them.

Mega Headline: Many available services are not utilized to capacity resulting in some children's needs being unmet.



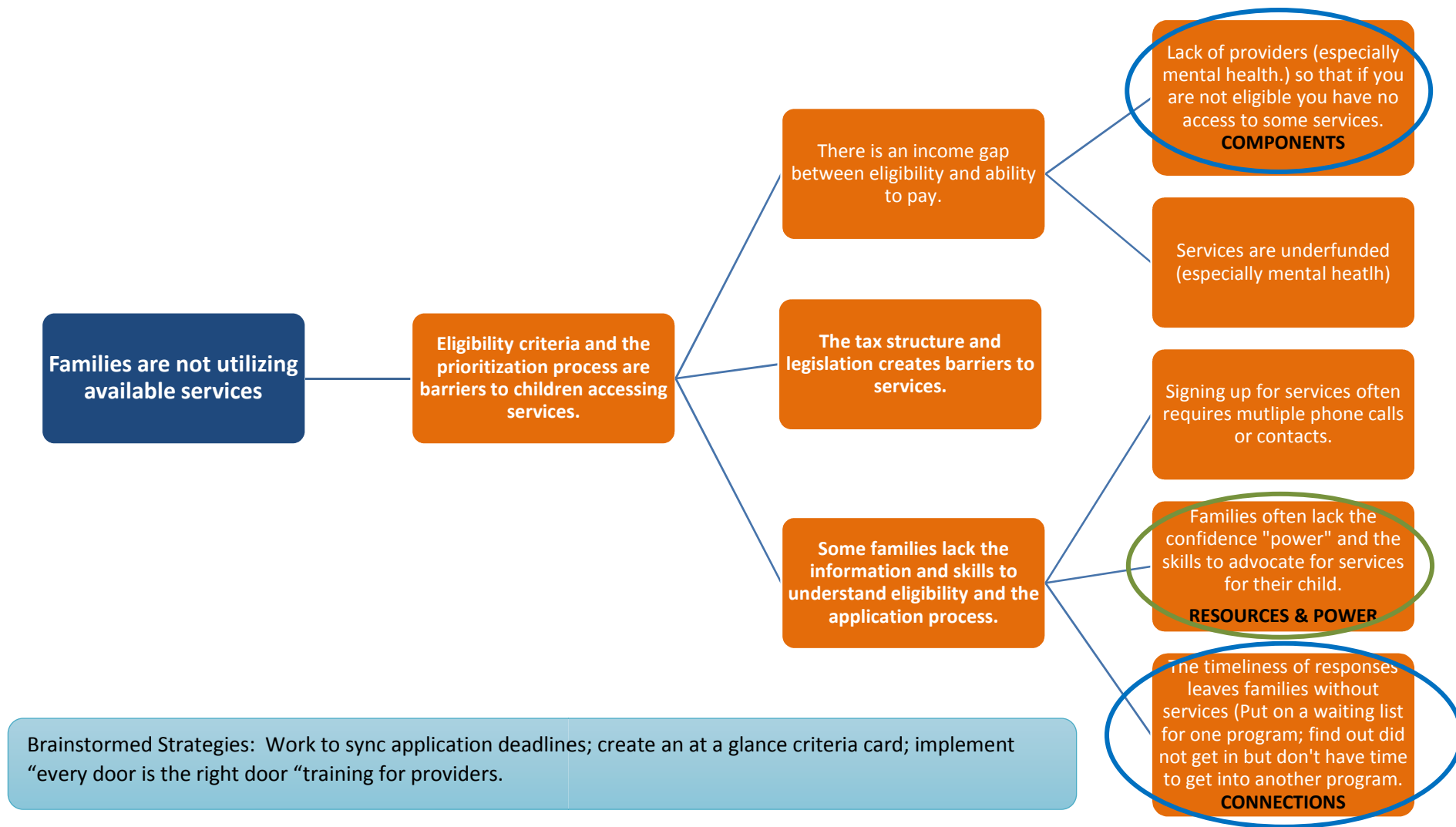


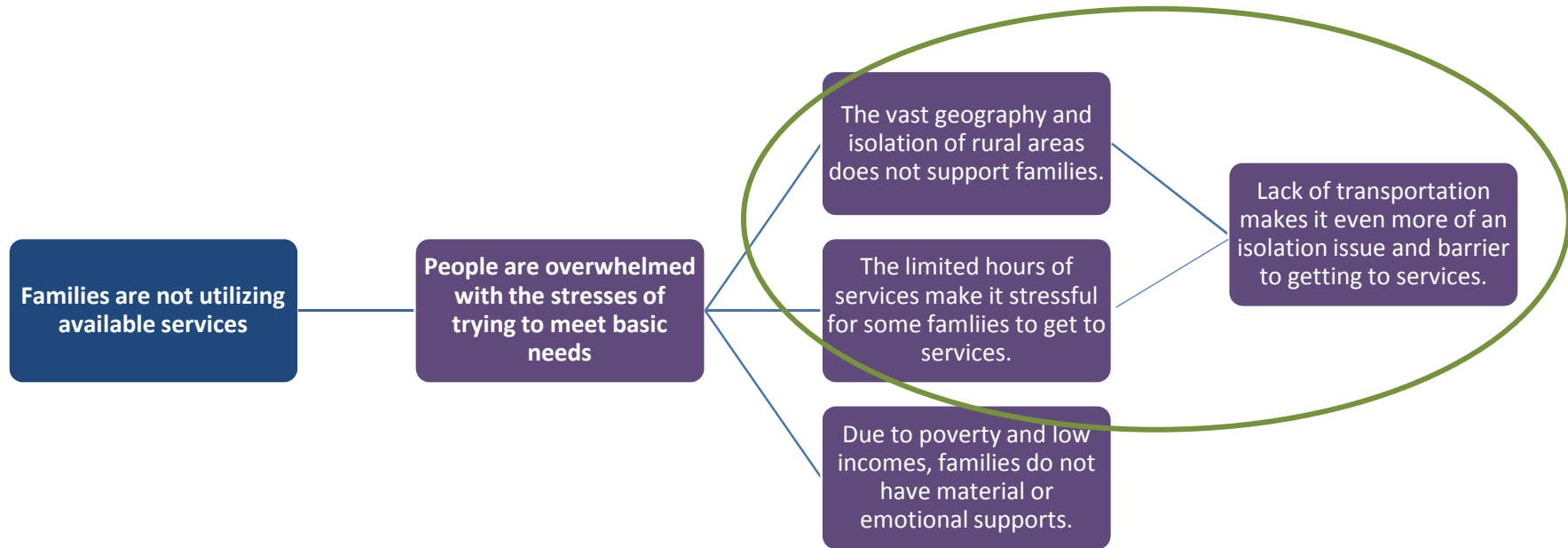
Brainstormed Strategies: Assess ability to hire someone to collect baseline information and create a system for quickly changing information (grant), Have a central director of services and event on a website; Facebook; Develop a community calendar.

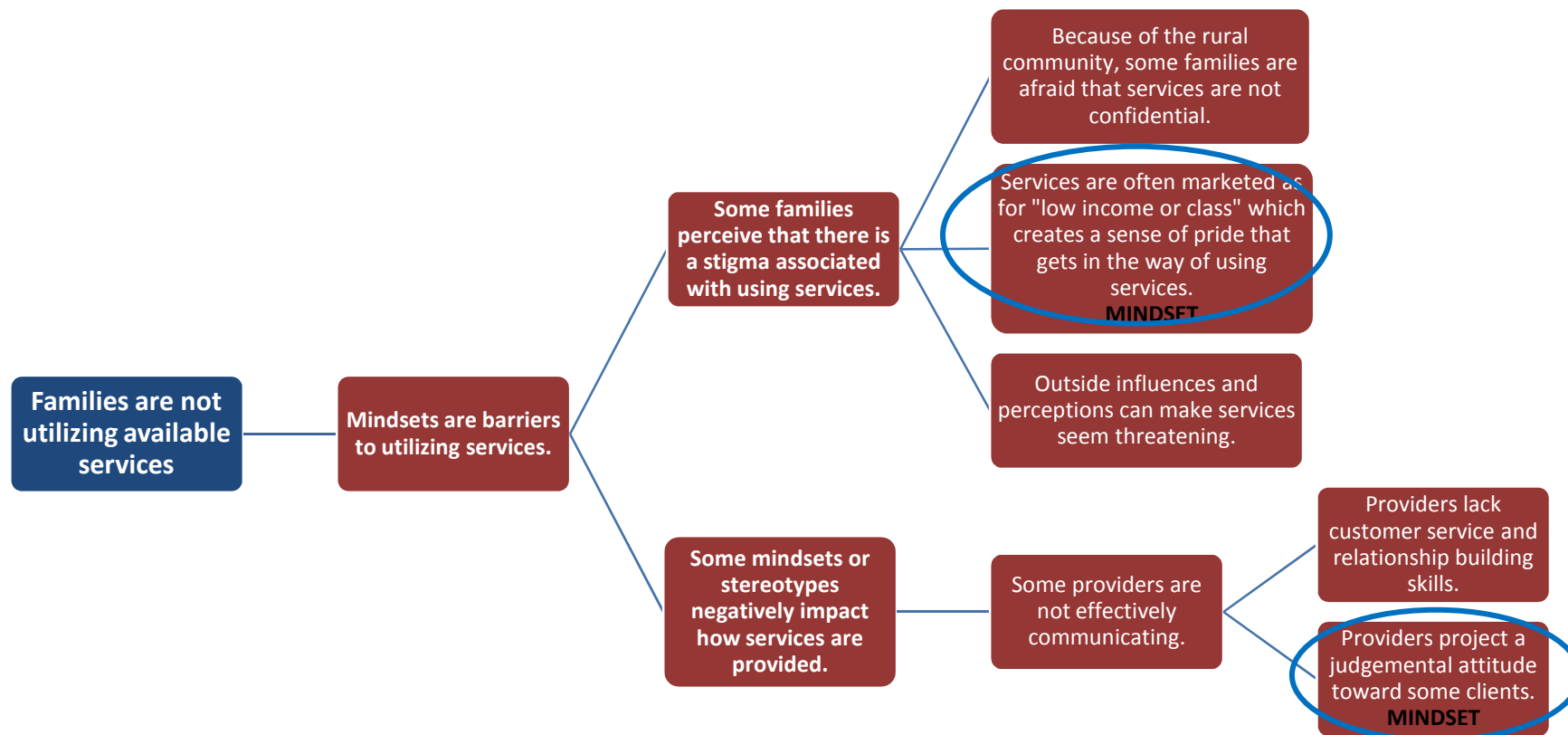


Brainstormed Strategies: Pursue a system navigator position; create or find a centralized source for information.







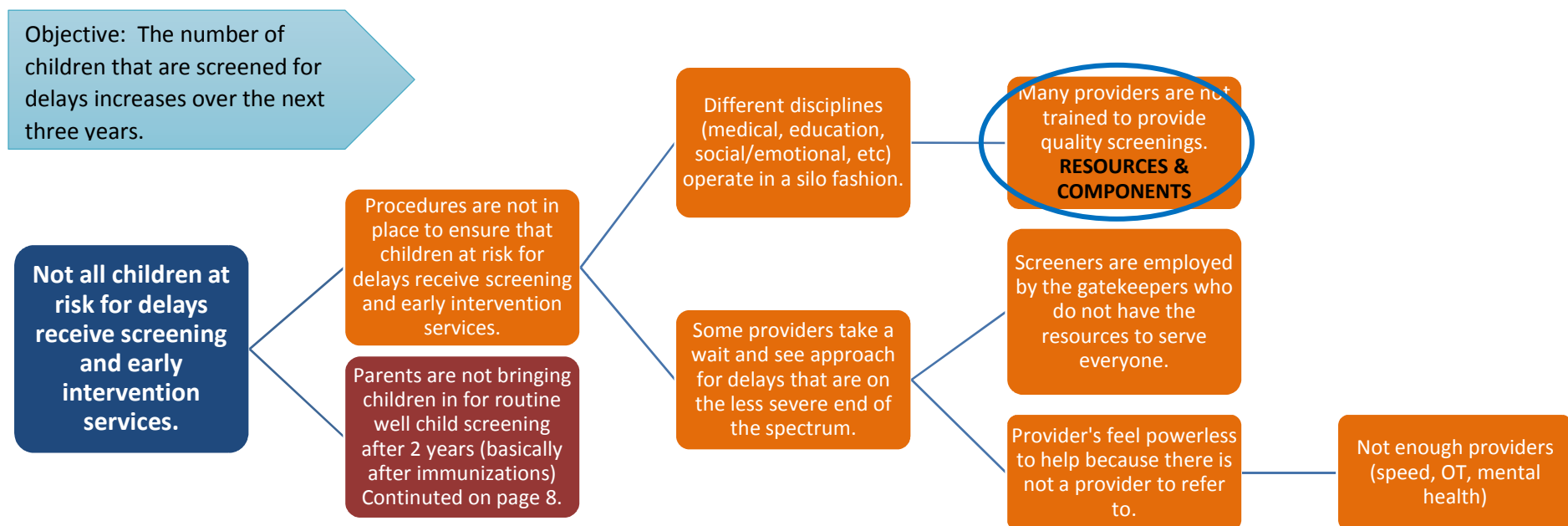


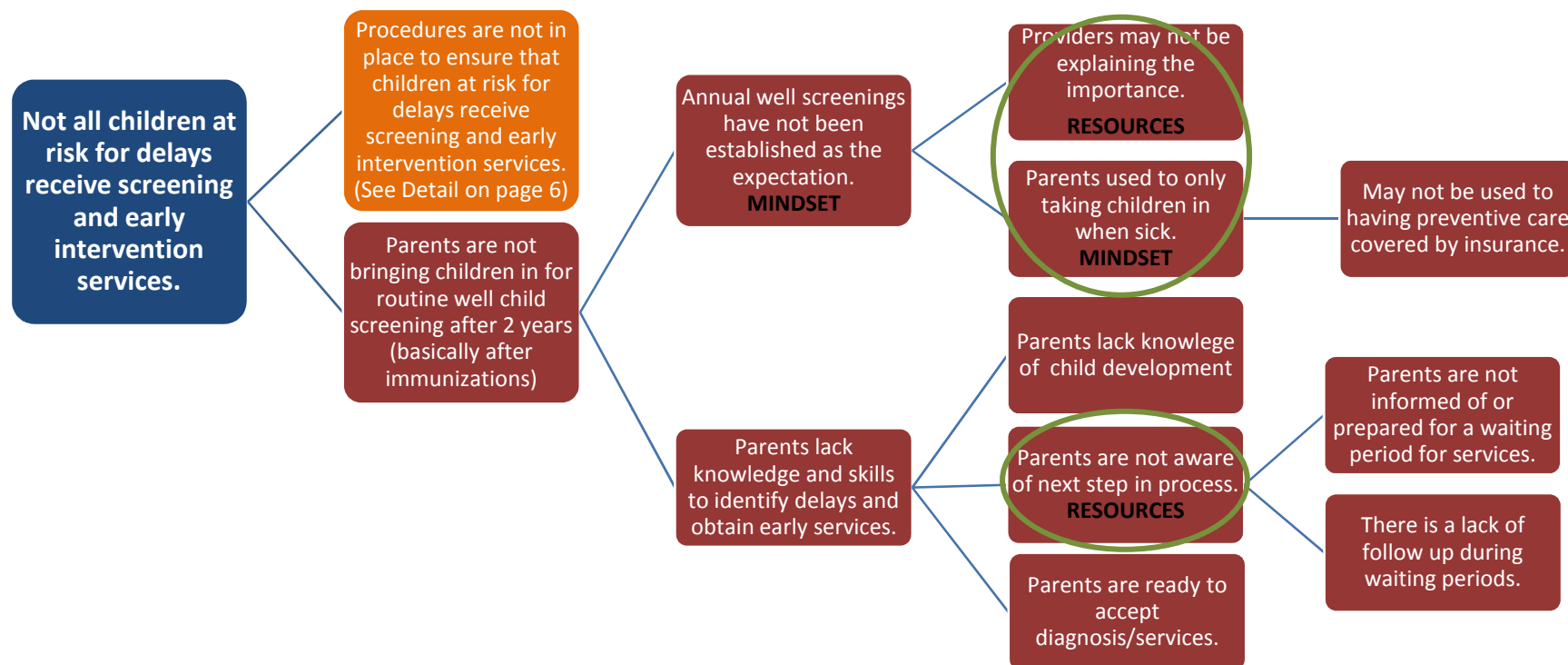
Brainstormed Strategies: "No wrong door" training for agencies.



Goal 1: All families have access to high quality services and have the resources to utilize them.

Mega Headline: Many available services are not utilized to capacity resulting in some children's needs being unmet.

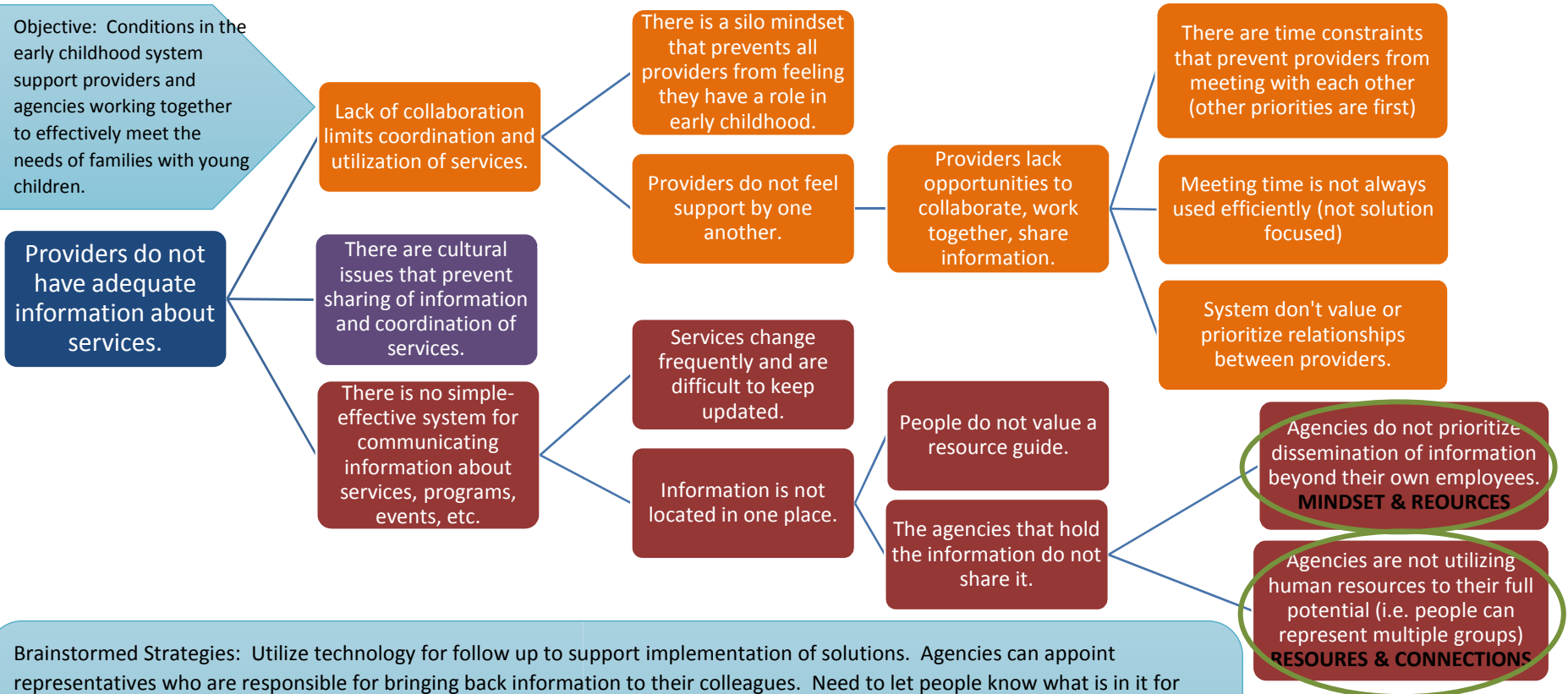




Brainstormed Strategies: Educational campaign targeting parents of 3-5 year old for annual well screenings. Companion document at child find: what to do next or if you still have concerns. Connect with providers to determine how they are promoting well screenings and the tools that they are using for screening.

Goal 2: Conditions in the early childhood system support providers and agencies working together to effectively meet the needs of families with young children.

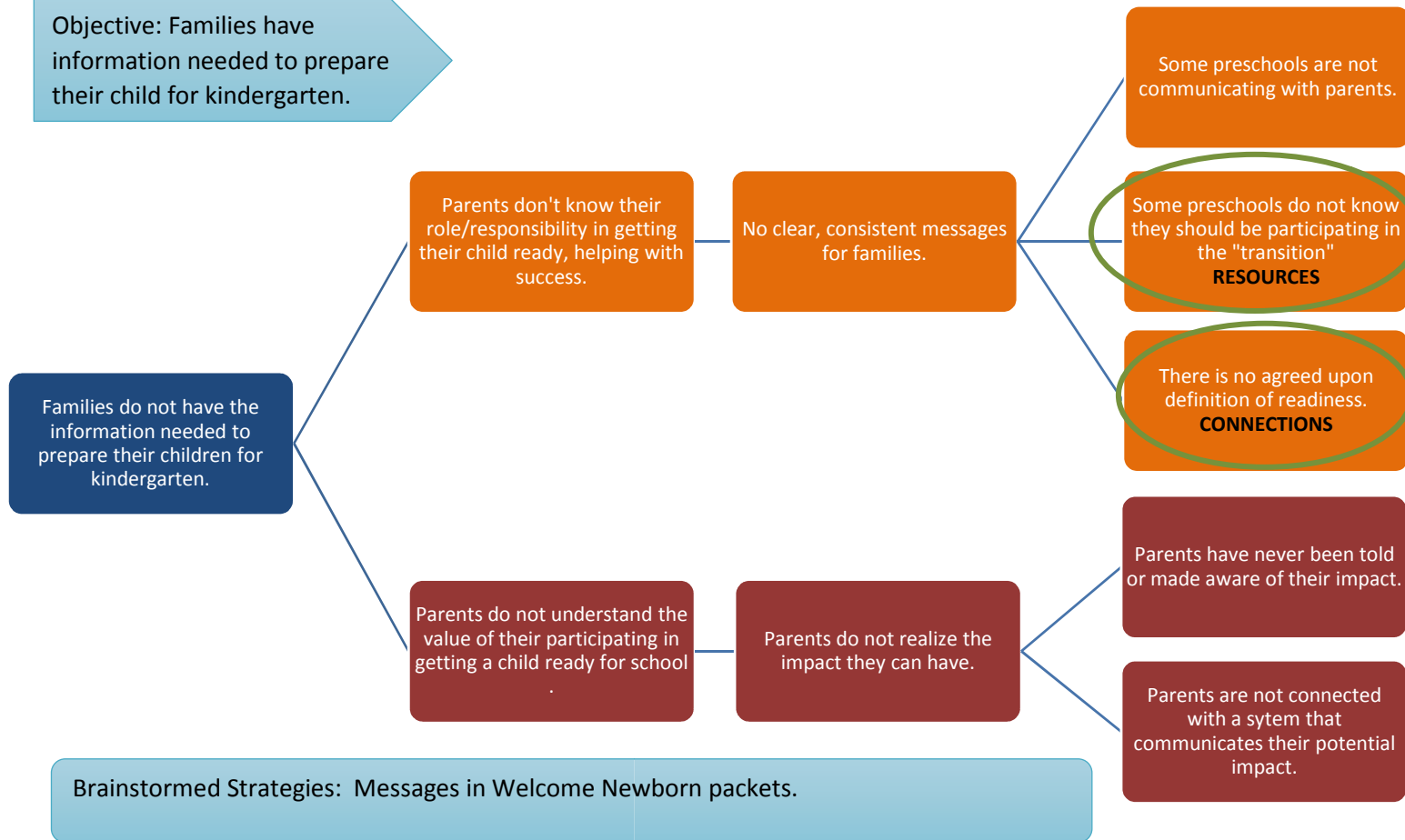
Mega-headline: Providers face numerous challenges to effectively coordinate services



Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.

Mega-headline: Not all children receive adequate preparation and support to transition to kindergarten.

Objective: Families have information needed to prepare their child for kindergarten.



Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.

Mega-headline: Not all children receive adequate preparation and support to transition to kindergarten.



Brainstormed Strategies: Monitor progress on KEA requirements and changes. Explore a partnership with one school to have a Social Emotional partnership for year 2.

Goal 4: Services reflect the input of families and providers.

Mega-headline: Decisions are made about services with limited input from families and direct service providers.

Objective: There is an increase in families that report that they feel included and that services reflect their input.

There is a lack of family engagement.



Brainstormed Strategies: Place demographic and income questions at the end of a survey and make optional. Change language of surveys and questionnaires to make them friendlier to target groups. Provide with the survey clearer goals for the information's use. Include explanations for each section of the survey. Make all people from all incomes, education levels, backgrounds, ethnicity, etc. feel valuable. Explain the important role that families play in identifying barriers. Ask organizations to adopt one mechanism for family input. Encourage multi-agency involvement and collaboration. Develop forms for joint sharing. Provide training for administrators on family needs and value of input.

★ List of Headlines and Mega Headlines

DSGSC Prioritization Survey-Delta Schoolcraft

Goal 1: All families have access to high quality services and have the resources to utilize then.						Focus Area=F
Mega Headline: Many available services are not utilized to capacity resulting in some children's needs being unmet.					Top 13	Secondary Priority-S
	System Characteristic	Powerful Score	Feasible Score	Total Score		
Theme - Families are not utilizing available services	Components	2.38	2.69	5.07	2	FA
Theme - Not all children at risk for delays receive screening and early intervention services.	Components	2.47	2.31	4.78	7	FA
Theme - Some parents of children with special needs lack information and skills to understand their child's education plan.	Resources	2.38	2.36	4.73	10	
Theme - Substance abuse prevents families from meeting the needs of their children.	Resources	2.69	2.00	4.69	13	S
Theme - Not all children have access to high quality daycare/preschool	Components	2.59	2.00	4.59		S
Theme - Some services are not available due to lack of program resources and capacity to meet the needs.	Resources	2.41	2.00	4.41		
Goal 2: Conditions in the early childhood system support providers and agenda working together to effectively meet the needs of families with young children.						Focus Area=F Secondary Priority-S
Mega-headline: Providers face numerous challenges to effectively coordinate services						
Answer Options	System Characteristic	Powerful Score	Feasible Score	Total Score		
Theme -Providers do not have adequate information about services.	Resources	2.47	2.77	5.24	1	FA
Theme- Not all providers are making referrals when a child is at risk for delays.	Connections	2.35	2.38	4.74	9	
Theme- Lack of communication is a barrier to collaboration and system wide coordination.	Connections	2.47	2.23	4.70	12	S
Theme- Policies across agencies are not consistent and can interfere with coordination of services.	Regulations	2.29	1.92	4.22		
Theme- There is inconsistent leadership/participation in the coordination of early childhood services	Regulations	2.24	1.85	4.08		
Theme- Services, supports and opportunities are effectively coordinated among and between some providers	Connections	2.06	2.00	4.06		
Theme- There is a lack of positive relationships between some providers which makes it difficult to work together.	Mindsets	2.12	1.92	4.04		
Theme -The level of coordination is highly dependent on individual caseworkers.	Connections	2.24	1.69	3.93		
Theme- There are some areas of services where competition and territorialism interfere with serving families and coordination of services.	Connections	2.12	1.69	3.81		



Goal 3: All children receive adequate support and preparation to successfully transition to kindergarten.						Focus Area=F Secondary Priority-S
Mega-headline: Not all children receive adequate preparation and support to transition to kindergarten						
Answer Options	System Characteristic	Powerful Score	Feasible Score	Total Score		
Theme- Families do not have the information needed to prepare their children for kindergarten.	Resources	2.44	2.62	5.05	3	FA
Theme- There is a lack of understanding of the value of early education and intervention	Mindset	2.44	2.54	4.98	4	
Theme- Transition supports and sharing of information between PreK and K staff is not adequate.	Connections	2.38	2.50	4.88	5	FA
Theme- The assessment process for kindergarten is not always parent/child friendly.	Components	2.06	2.69	4.75	8	S
Theme- Parents understanding of what readiness means is limited.	Resources	2.19	2.54	4.73	11	
Theme- There is a lack of services that support adults and therefore some families don't have the resources to prepare their child.	Components	2.25	2.23	4.48		
Theme- Some parents have concerns about how prepared their child is for kindergarten.	Resources	2.13	2.31	4.43		
Theme - Opportunities for successful kindergarten transitions are limited	Components	2.06	2.23	4.29		
Goal 4: Services reflect the input of families and providers. Mega-headline: Decisions are made about services with limited input from families and direct service providers.						Focus Area=F Secondary Priority-S
Answer Options	System Characteristic	Powerful Score	Feasible Score	Total Score		
Theme- There is a lack of family engagement	Power	2.53	2.31	4.84	6	FA



★ System Scan Questions

Connections

How coordinated are services and efforts in the community? How is this influencing getting all kids ready for school?

Resources

To what degree do families, service providers, and leaders know about all the services and supports available in the community, including which families are eligible?

- Which services do they know about? Why?
- Which services do they not know about? Why?

Components

Which early childhood services or supports are families choosing not to take advantage of?

- Which families are using these services?
- Which are they choosing NOT to take advantage of?
- Which families aren't using these services?

Regulations

- Are there any formal or informal policies or procedures getting the way of getting all kids ready for school?
- Are there any formal or informal policies or procedures making it difficult for families to get the services they need?
- Are there any formal or informal policies or procedures making it difficult for providers to work together?

Mindsets

What assumptions do people make about why not all kids in our community are ready for school?

- How is this influencing our ability to get all kids ready for school?

Power

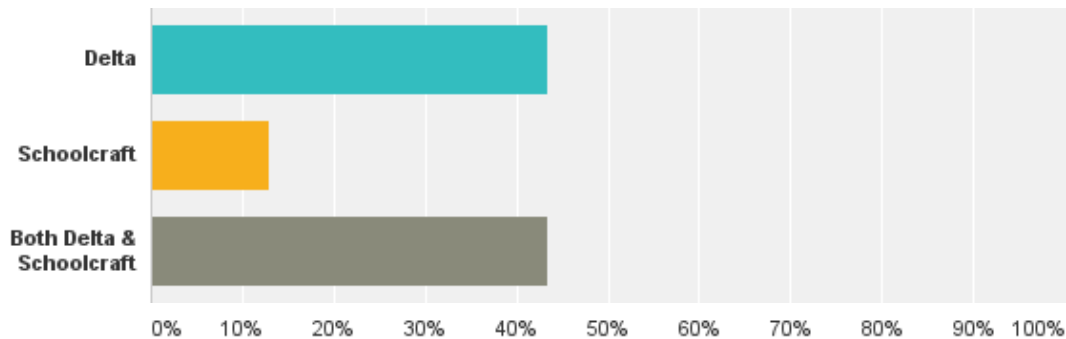
- To what degree do organizations use input from families or other community partners to guide decisions about their services or efforts?
- How is the amount of parent input influencing getting all kids ready for school?
- What's in place that's helping organizations use family input?



★ Levers for Change Survey Report

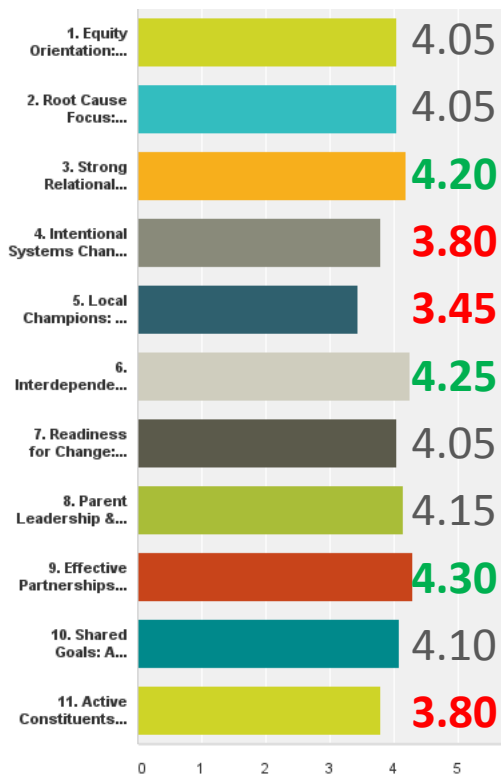
Great Start Collaborative Infrastructure Assessment

Participation: 23 Responses



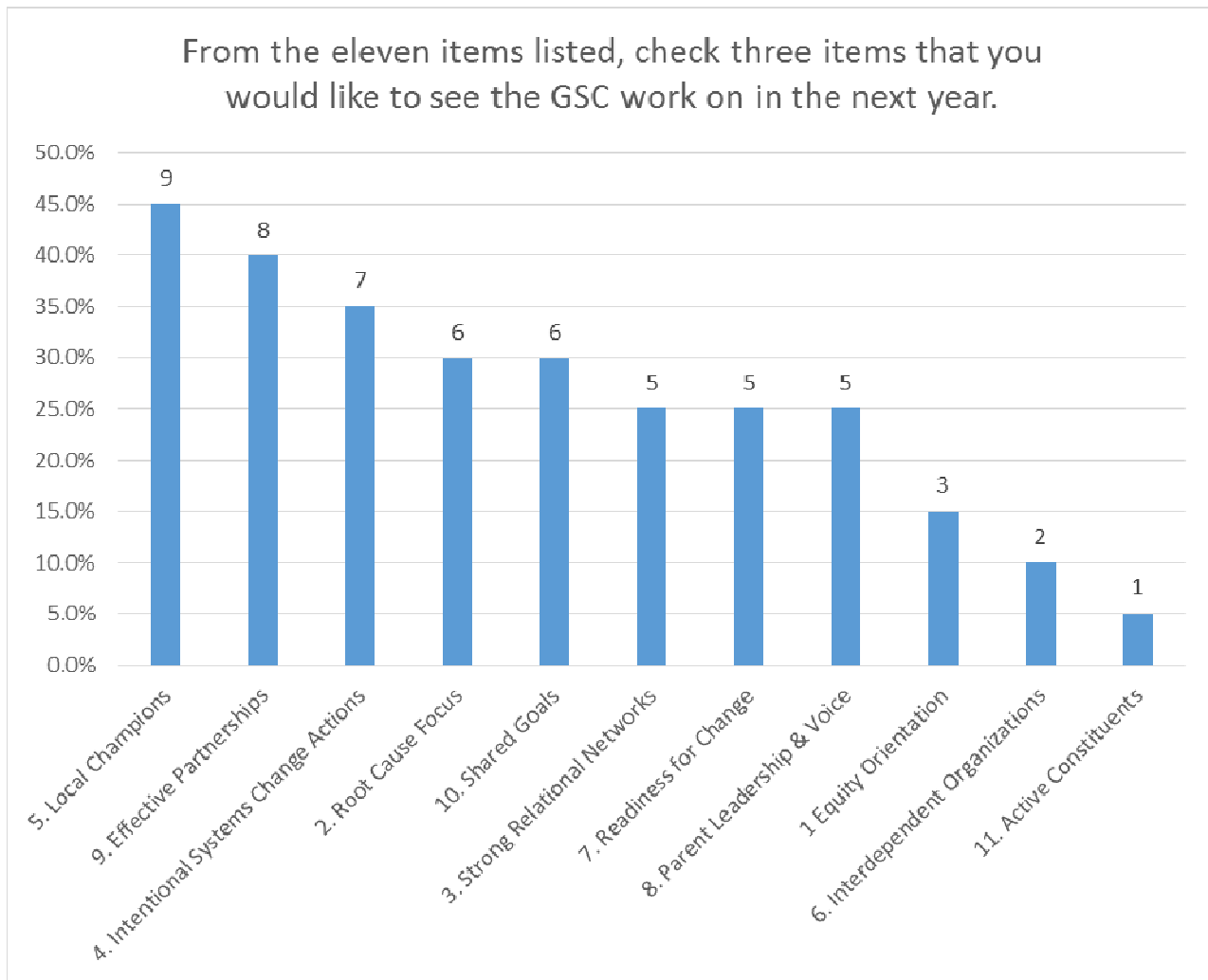
Q5: How well would you say that your DSGSC practices each of these principles?

(Scale of 1-5 with 5 being the highest score)



1. **Equity Orientation:** The needs of the most vulnerable and/or underrepresented children and families in a local community are understood and addressed in a systematic and meaningful manner. Input of vulnerable constituents is valued and disparities in outcomes are targeted.
2. **Root Cause Focus:** Identifying the underlying causes of community problems is a priority, and the complexity of these causes is recognized. Members understand that the coordinated effort of multiple organizations/agencies is required to target these root causes.
3. **Strong Relational Networks:** Strong relational networks easily exchange referrals, coordinate services and share resources across various agencies in the community.
4. **Intentional Systems Change Actions:** Active pursuit of system change efforts, such as shifting or adopting new policies, procedures, or programs to reduce barriers and improve the early childhood system.
5. **Local Champions:** The broader community understands the urgency of the Great Start effort and member organizations are aligning their own strategic plans with Great Start priorities. Community leaders, including those from the business and government sector, act in support of the Great Start effort in the community.
6. **Interdependent Organizations:** Member organizations see the value in the collaborative effort and support other partners at the table.
7. **Readiness for Change:** Individuals and organizations believe in the need for change and have the capacity to pursue it.
8. **Parent Leadership & Voice:** Parents are effective leaders and competent champions for early childhood and represent a knowledgeable, diverse, and visible parent constituency."
9. **Effective Partnerships:** Strong, effective ties between the DSGSC and GSPC, and also with key outside organizations in the community.
10. **Shared Goals:** A unified vision shared with the DSGSC and GSPC, including: an aligned understanding of, and agreement upon problems, possible solutions, and overall goals.
11. **Active Constituents:** Active and involved members making valuable contributions to the DSGSC/GSPC, including: speaking at meetings, holding an office, or advocating for early childhood in the community





If there are other things that you think the DSGSC should do to strengthen its operations, please describe them under other.

- Coordinated central information system (beyond 2-1-1)
- Improved system of dissemination of information to families
- Recruiting and maintaining providers and needed services

