



Eastern Upper Peninsula Great Start Collaborative

Strategic Plan 2014-2017



Eastern Upper Peninsula

www.eupkids.com



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September 15, 2014

Dear Community Members of the Eastern Upper Peninsula,

The members of the Eastern Upper Peninsula Great Start Collaborative (EUPGSC) present a call to action on behalf of the youngest community members, children birth to eight years of age, and their families. The EUP Great Start Collaborative promotes the understanding and importance of the first eight years of a child's life. The intent of the EUPGSC is to build a strong and comprehensive network of public and private supports and services for young children and their families within the Eastern Upper Peninsula. Our mission is to assure every child in the Eastern Upper Peninsula will begin kindergarten safe, healthy, and ready to succeed in school and life.

The first eight years of a child's life are a time of tremendous opportunity. Early years are a strong predictor of later academic and life success. Young children's early experiences and environments directly impact brain development. Everything children see, every word they hear, everything they do...from their first breath, shapes the rapidly developing architecture of their brains. We know a vast amount of development occurs in the first eight years of life. The foundation for language, social behavior, problem solving ability and emotional health will be mostly created...or not...by the time children enter kindergarten.

To be successful in school and in life, Michigan's young children must grow up in an environment that develops self-confidence, positive social and emotional skills, and a love for learning. There is much that communities can do to make sure that every young child has this foundation.

Community leaders in Chippewa, Luce and Mackinac Counties, who understand the vital importance of investing in young children, have come together to form our Great Start Collaborative. The EUPGSC is comprised of members representing many different areas within early childhood. Our *Great Start Collaborative Strategic Plan* and *Action Agenda* will lay out the actions we need to take going forward to ensure that every child has a great start.

The membership of the EUP Great Start Collaborative endorses this strategic plan and action agenda as the living documents that will guide systemic change in regional early childhood systems. The information contained within this strategic plan addresses the goals and objectives which were developed through feedback from parents of young children, community leaders, early childhood professionals, businesses, and key stakeholders within the community using the ABL Change Framework™, developed by Michigan State University. Community statistics, national research, and local experiences and priorities were closely examined over the past year in development of this plan.

It is our hope and vision that all community members will respond to this plan of action and provide a sturdy foundation for young children as they learn, grow, and develop into future leaders.

Please join us in preparing the next generation to be productive, meaningful citizens of our community.

Sincerely,

Heather Bird, GSC Director

Becky Freitas, GSC Parent Liaison

Eastern Upper Peninsula Great Start Collaborative Membership

Bay Mills Child Development Center
Central Savings Bank
Chippewa Co. Health Department
Department of Human Services
Central Child Care
CLM Community Action Agency
DeTour Public Library
Early On®
EUP Intermediate School District
Great Start Readiness Preschool
Great Start to Quality
Great Parents, Great Start
Hiawatha Behavioral Health
Immanuel Lutheran Church
Intertribal Council
Lake Superior State University
LMAS Health Department
Mackinac County Court House
Mackinac Straits Health System
Michigan Works!
Northeast Regional Resource Center
St. Ignace Area Public Schools
Sault Chamber of Commerce
Sault Tribe Early Childhood Programs
Sault Tribe Transformation Grant
Stuart Spencer, Mackinac County Prosecutor
A Therapy World
United Way of the EUP

EXECUTIVE SUMMARY

MISSION

To ensure that every child is well prepared, safe, healthy, and ready to succeed throughout school and life.

SYSTEM

A comprehensive, interconnected early childhood network of public and private sectors supporting and promoting a sturdy foundation for all young children and families.

SYSTEM COMPONENTS

Social and emotional health, parent leadership, pediatric and family health, basic needs, and early care and education.

GREAT START COLLABORATIVE

The Eastern Upper Peninsula Great Start Collaborative (EUPGSC) consists of parents, members from community agencies, faith based communities, private businesses, law enforcement and non-profit organizations. This interconnected network of consumers, public, and private services work together to support and promote the above mission and work of the EUP Great Start Collaborative.

GREAT START PARENT COALITION

The EUP Great Start Parent Coalition (GSPC) is a strong and dedicated volunteer group of parents with children birth to age 8. The GSPC promotes and displays parent leadership initiatives to support the above mission. This group also provides a consumer voice to the Great Start Collaborative Board while working as a strong partner of the Great Start Collaborative.



Moving back to the area with my 1 1/2 year old I knew I had to find a way to get involved with other moms and kids my daughter's age. I was introduced to the Parent Coalition shortly after I moved home and I'm glad I was. I was able to find a group of parents with children around the same age as my daughter. Together we planned events and play groups for positive family experiences. I've learned a lot from the other families I've met through the coalition. Being a part of the Parent Coalition and having the opportunity to be a parent leader in my community helped the transition of re-locating to a small town easier on family."

~Jenalee Fenwick, Parent Coalition member

INTRODUCTION

The future of tomorrow starts with the youngest community members of today. The first eight years of child's life are a time of great opportunity. The Eastern Upper Peninsula Great Start Collaborative (EUPGSC) has been dedicated to helping young children and families achieve a great start in life since the establishment of the collaborative in 2006.

The Eastern Upper Peninsula Great Start Collaborative has worked to build and expand a comprehensive, intertwined early childhood system to support a strong and promising future for young children and families. The EUP Great Start Collaborative work over the past 8 years has helped more community members recognize the importance of early childhood investment. Although awareness has improved, young children and families still face significant challenges.

To understand these ongoing challenges, the EUP Great Start Collaborative (EUPGSC) & Parent Coalition (GSPC) completed a year of research. During this time, the EUPGSC and GSPC reached out to tri-county community members to learn about strengths and challenges they experience in ensuring overall success (as defined by our mission) for each and every child and family.

The ABLe Change Framework™ (Appendix B), developed by Pennie Foster-Fishman, Ph.D and Erin Watson, Ph.D of Michigan State University System Exchange, was utilized to gain a diverse understanding of the strengths and challenges facing the EUP region. The ABLe Change Framework™ has been proven to create long lasting systemic change which is necessary to create a seamless early childhood system where children and families are successfully supported. *(Please see appendices B, C, and D for more information regarding ABLe Change Framework™).*

Utilizing the ABLe Change Framework™, the EUPGSC and community members applied the system components outlined below and analyzed how each of these components impact our current early childhood system. Through system scanning and root cause analysis, levers of systemic change were identified and became a driving force of the Early Childhood Action Agenda (found on pages 26-35 of this report).

SYSTEM COMPONENTS

MINDSETS

What attitudes, values, and beliefs impact young children in our community?

PROGRAM COMPONENTS

Do the range, quality, effectiveness, and location of services meet current needs?

CONNECTIONS

How can we improve relationships and/or increase connections across different early childhood services, businesses, community organizations, and other stake holders?

POLICIES

Do policies, practices, procedures, and daily routines support early childhood development and a coordinated system of services?

RESOURCES

How can the human, financial, and social resources that support young children and their families be used effectively and efficiently?

POWER

Are families and direct service providers involved in decisions?

“As a County Prosecutor, former Defense Attorney and more importantly as a member of society, I can think of few things more important than investing in the youth of America. They are the future leaders of the world. Unfortunately we have too many programs that want to start addressing the needs of children and society after the children reach age five or ten and very few programs that focus on the five and under group. It has been my experience that if the child does not have the proper training and guidance by the time they start school, they are much more likely to fall in with the “wrong crowd” and become drags on society. We owe it to the child and society as a whole to make sure our young people are provided the proper tools to succeed, starting with manners, expectations, social skills and family values. It is for the above reasons that I believe in the Great Start Collaborative.”

~J. Stuart Spencer, Mackinac County Prosecutor

The assessment of our early childhood system in the Eastern Upper Peninsula (EUP) revealed young children and families face many barriers that impact academic and life success. Generational poverty, isolation related to transportation challenges, and substance abuse are three consistent and startling themes reflected in our community conversations and data analysis. These three themes have strong under currents that create far reaching ripple effects for every child and family.

In continuation of the work done since 2006, some of the challenges identified year after year still remain consistent today and represent common themes we found during this strategic planning year. In response to these themes and more current needs, the strategic plan and early childhood action agenda will guide the Eastern Upper Peninsula’s Great Start Collaborative work for the next three years. Below outlines the identified outcomes and strategies that will be addressed during this strategic plan.

IDENTIFIED OUTCOMES

(as established by the Michigan Department of Education - Office of Great Start)

- ★ All children are born healthy.
- ★ All children are healthy, thriving, and developmentally on track.
- ★ Children are developmentally ready to succeed in Kindergarten by entry.
- ★ Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.

KEY STRATEGIES

Strategies to address the four outcomes listed above were developed based on root cause data analysis, Chippewa County Community Assessment, Communities that Care Data Report (Luce County), 2013 Mackinac Straits Community Assessment, and Kids Count 2013. The strategies represent key findings and seek to address gaps in support and services for young children and families in the EUP.

Outcome 1: All Children born healthy

- ★ Increase awareness of, and enhance access and availability to prenatal services.
- ★ Promote healthy lifestyles and prenatal care through parenting education and resources.
- ★ Increase prenatal and postnatal resources for all families.
- ★ Promote increased father support in their child's growth and development.
- ★ Enhance and increase coordination of services and resources to support healthy social/emotional attachment and well-being of children.
- ★ Establish partnerships with high school counselors, school social workers, and school-based rural health clinics for prenatal education and prevention efforts to the teen population.
- ★ Promote and enhance substance abuse prevention initiatives.
- ★ Decrease smoking among pregnant mothers and fathers

Outcome 2: All Children born healthy, thriving, and developmentally on track from birth to third grade.

- ★ Increase high quality preschool and child care opportunities in the community for all children.
- ★ Collaborate with Great Start to Quality to increase overall quality in group and relative care. Increase prenatal and postnatal resources for all families.
- ★ Promote family networks, supports, and education to empower positive parenting skills.
- ★ Increase coordination of family services among education, community agencies, and the medical community.
- ★ Promote evidenced based, family centered practices for school and community based services.
- ★ Increase access to developmental screening tools or supports for parents of children birth to five.
- ★ Increase parental access to early intervention resources and services.
- ★ Increase family awareness and knowledge of support of social-emotional development in young children.

Outcome 3: Children are developmentally ready to succeed in Kindergarten by entry

- ★ Establish common school readiness expectations and transitions for Pre-K and Kindergarten programs.
- ★ Increase parental awareness and access to school readiness information.
- ★ Utilize local data to inform instruction, programming, and professional development decisions.
- ★ Increase student achievement and competency skills in Pre-K to 3rd grade.

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

- ★ Enhance access and financial support of the Dolly Parton Imagination Library for children birth to five.
- ★ Increase literacy outreach and education to high need populations.
- ★ Increase parenting awareness of the importance of early literacy.

EUP GREAT START COLLABORATIVE

PROFILE AND HISTORY

The Eastern Upper Peninsula Great Start Collaborative (EUPGSC) was first introduced in Chippewa, Luce, and Mackinac counties in 2006. At that time we were one of only a few Great Start Collaboratives state-wide. The EUPGSC was born out of dedication and commitment from dynamic and dedicated early childhood professionals within the region. Several strong local collaborations and connections among our tri-county Multipurpose Human Service Collaborative Boards, Local Inter-agency Coordinating Council (LICC), Great Start Readiness Program (GSRP), Early Head Start/Head Start, and local school districts contributed to the establishment and on-going success of the EUP Great Start Collaborative. Additionally, Sault Tribe of Chippewa Indians and Bay Mills Indian Community have been active and engaged participants in our work and have helped ensure the success of young children and families over the past several years.

The EUP Great Start Collaborative & Parent Coalition have worked for the past eight years to help EUP communities realize the benefits of investing in children through the age of 8 years old, help their members successfully connect to appropriate partners to create system change, and ensure these communities are well informed of early childhood system strengths and gaps. This work supports the overall mission of ensuring a seamless early childhood system that guarantees every child is prepared for kindergarten and will be successful throughout school and life.

As the EUPGSC enters into the third strategic plan, the community collaboration remains strong. The EUP region covers nearly 4,000 sparsely populated square miles. The region as a whole often has limited resources and forges forward through collaboration and commitment among consumers, agencies, businesses, and faith communities. Our membership represents the diversity and uniqueness of our region. The EUPGSC Director works closely with human service agencies, schools, businesses, faith communities and parents to ensure the mission of the GSC remains active and relevant in our communities.

Since the inception of the EUP Great Start Collaborative in 2006, many challenges and barriers have been recognized. Structurally organizing one GSC to cover such a vast and remote geographic region has resulted in several organizational changes. Retention of parent liaisons has been a continuous struggle. Working with parents, collaborative board members, and community leaders has helped the GSC to grasp the various geographic dynamics and community needs. Work plans and more investment in retaining employees are challenges that have been identified and a plan has been developed to help address this challenge.

The EUP Great Start Collaborative has made measurable progress over the years. We anticipate the same as we work towards supporting the four outcomes determined by the Office of Great Start. We continually strive to create system change to ensure that all systems are aligned in supporting the four outcomes.

EUP GREAT START COLLABORATIVE PAST SUCCESSES

- ★ Foster care necessity bag initiative
- ★ Home visiting opportunities for pregnant moms and/or underserved children
- ★ Joint preschool enrollment application (Appendix C)
- ★ Joint preschool recruitment efforts and events (Appendix D)
- ★ Becky Davis Early Learning Scholarship
- ★ Increased enrollment in the Dolly Parton Imagination Library
- ★ Common coordinated effort between the Local Interagency Coordinating Council (LICC) and EUP Great Start Collaborative (EUPGSC)
- ★ Partnership and advertising of smoke free environments
- ★ Green to Grow Scholarship for licensed home child care providers
- ★ Social-emotional education conferences and opportunities for professionals and parents
- ★ Upper Peninsula and northern lower Michigan smoke free conference for professionals and parents
- ★ Increased awareness and partnership of medical home
- ★ Parent leadership education opportunities
- ★ Distribute Great Start to Quality Lending Library kits
- ★ Substance abuse media coverage
- ★ Parent directed education opportunities and playgroups



“The Great Start Parent Coalition has provided placement packs for our children removed from their parent's home. Often times, children placed into foster care are moving with only a moment's notice. The simple comforts of home do not travel with them. These gifts of clothing, personal care items, and toys helps them ease into their new environment. It also gives them something of their very own during an uncertain time in their lives.”

~Jennifer Dunton, Chippewa, Luce, Mackinac County Dept. of Human Services

COMMUNITY NEEDS AND STRENGTHS ASSESSMENT

ELEMENT 1: DATA COLLECTION, ANALYSIS, AND REVIEW

This report represents various community data and information gained during strategic planning using the ABLe Change Framework™ from the Michigan State University System Exchange. Strategic planning began with the Eastern Upper Peninsula Great Start Collaborative (EUPGSC) conducting a system scan of the current EUP early childhood system. Following the initial system scan meeting, seventeen focus group meetings were convened with a diverse representation of Chippewa, Luce, and Mackinac counties. Focus groups included consumers and providers from human service agencies, educational entities, and community groups. Each focus group provided a more comprehensive perspective to the current early childhood system in our region.

After system scan, three in-depth root cause meetings were held, comprised of the Great Start Collaborative board members. These meetings were used to analyze the system scan data. During these meetings, participants sought to gain a better understanding of what strengths and gaps the EUP early childhood system is currently experiencing.

Additional data that was used to enhance our understanding of the current early childhood system included community data from Kids Count, Luce County Communities that Care Data Report, War Memorial Hospital Community Report, Mackinac Straits Hospital Community Report, parent surveys, the EUP Great Start Collaborative Evaluation conducted by the Early Childhood Investment Corporation (ECIC) and Michigan State University. Please see data charts on pages 14-23 or more information regarding community data. This report also includes detailed and summarized versions of our Early Childhood Action Agenda in each of the four outcome areas.

ELEMENT 2: STRATEGIC REVIEW

Two Great Start Collaborative Board meetings were held in order for board members to analyze root cause data. Board members identified strengths and gaps within the current system and reviewed resources that could be utilized in addressing the gaps. The Early Childhood Action Agenda for the upcoming year was developed based on priorities, goals and objectives the group identified.

2014-2015 ACTION AGENDA GOALS

Outcome 1: All Children born healthy

- ★ Promote healthy lifestyles and prenatal care through parent education and resources.
- ★ Promote and enhance substance abuse prevention initiatives.

Outcome 2: All children are healthy, thriving, and developmentally on track from birth to third grade

- ★ All children will experience a high quality preschool, child care, or other high quality learning opportunity during their early years.
- ★ Family services among education, community, agencies, and the medical community will have a seamless understanding of current local resources to support families that they are working with.

Outcome 3: Children are developmentally ready to succeed in Kindergarten by entry.

- ★ Parents, Pre-K, and Kindergarten teachers will have aligned definitions of school readiness.
- ★ Convene a workgroup focused on making recommendations of community services that support all children's school readiness, also serving as an advisory to the Great Start Readiness Program

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

- ★ Increase quality literacy experiences for children ages infant to age 8.

EARLY CHILDHOOD INFRASTRUCTURE REVIEW

The Eastern Upper Peninsula Great Start Collaborative and Parent Coalition Evaluation Report, prepared by Dr. Pennie Foster-Fishman and the Michigan State University System exChange Evaluation Team (Appendix A) revealed eight factors critical to promoting Great Start accomplishments or “Levers for Change.” Below is our progress in enhancing our GSC (Great Start Collaborative)/GSPC (Great Start Parent Coalition) Levers for Change. Most numbers reflect the percent of individuals responding “quite a bit” or “a great deal”. *Strong Relational Networks* reflects the percent of service referral/access exchanges happening between GSC member organizations. *Active Constituents* reflects the average level of involvement of GSC/GSPC members.

The data summarized shows the EUP GSC and GSPC (see Appendix A for more detailed information):

STRENGTHS	Shared goals, active constituents, effective partnerships, and readiness for change
WEAKNESSES	Intentional system change actions, equity orientations, and strong relational networks
OPPORTUNITIES	Increased availability of partners with a shared agenda, parent leadership and voice, local early childhood champions
BARRIERS	Transportation, generational poverty

NEXT STEPS

The 2014-2017 Eastern Upper Peninsula Great Start Collaborative (EUPGSC) strategic plan has reviewed the past work of the Collaborative and the goals and objectives set to move us forward. Each year the EUPGSC will develop and use the Early Childhood Action Agenda, based on prioritized needs, to guide the work of EUPGSC.

Eastern Upper Peninsula Great Start Collaborative (EUPGSC) will:

- ★ Continue to build a diverse membership.
- ★ Maintain and update an Early Childhood Action Agenda annually.
- ★ Maintain effective governance structures and shared goals.
- ★ Collaborate with community partners to enhance cooperation across programs.
- ★ Expand and seek new funding sources to support the work of EUPGSC.
- ★ Continue to promote community awareness of EUPGSC and its mission.

“Our goal must be to create a coherent system of health and early learning that aligns, integrates and coordinates Michigan’s investments from prenatal to third grade. This will help assure Michigan has a vibrant economy, a ready work force, a pool of people who demonstrate consistently high educational attainment, and a reputation as one of the best states in the country to raise a child.”

—Governor Rick Snyder, April 2011



MICHIGAN'S CALL TO ACTION

The local efforts of the EUP Great Start Collaborative and Parent Coalition would not be possible without the investment and commitment from state officials, Michigan Department of Education – Office of Great Start, and Early Childhood Investment Corporation (ECIC). In the 2013 report, **Great Start, Great Investment, Great Future** (Appendix F), Michigan laid out a plan for early learning and development of young children being raised in the state of Michigan.

The EUP Great Start Collaborative is committed to focusing on the six high-leverage areas defined within the report to improve opportunities for children and families across our area.

Areas of high impact as defined by **Great Start, Great Investment, Great Future**, published by Michigan Department of Education – Office of Great Start:

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

Strategies to address each of the high impact areas, as listed above, are embedded within the *EUPGSC 2014-2017 Strategic Plan* and *Early Childhood Action Agenda*.

Great Start, Great Investment, Great Future Report The Plan for Early Learning and Development in Michigan

-Michigan Statistics-

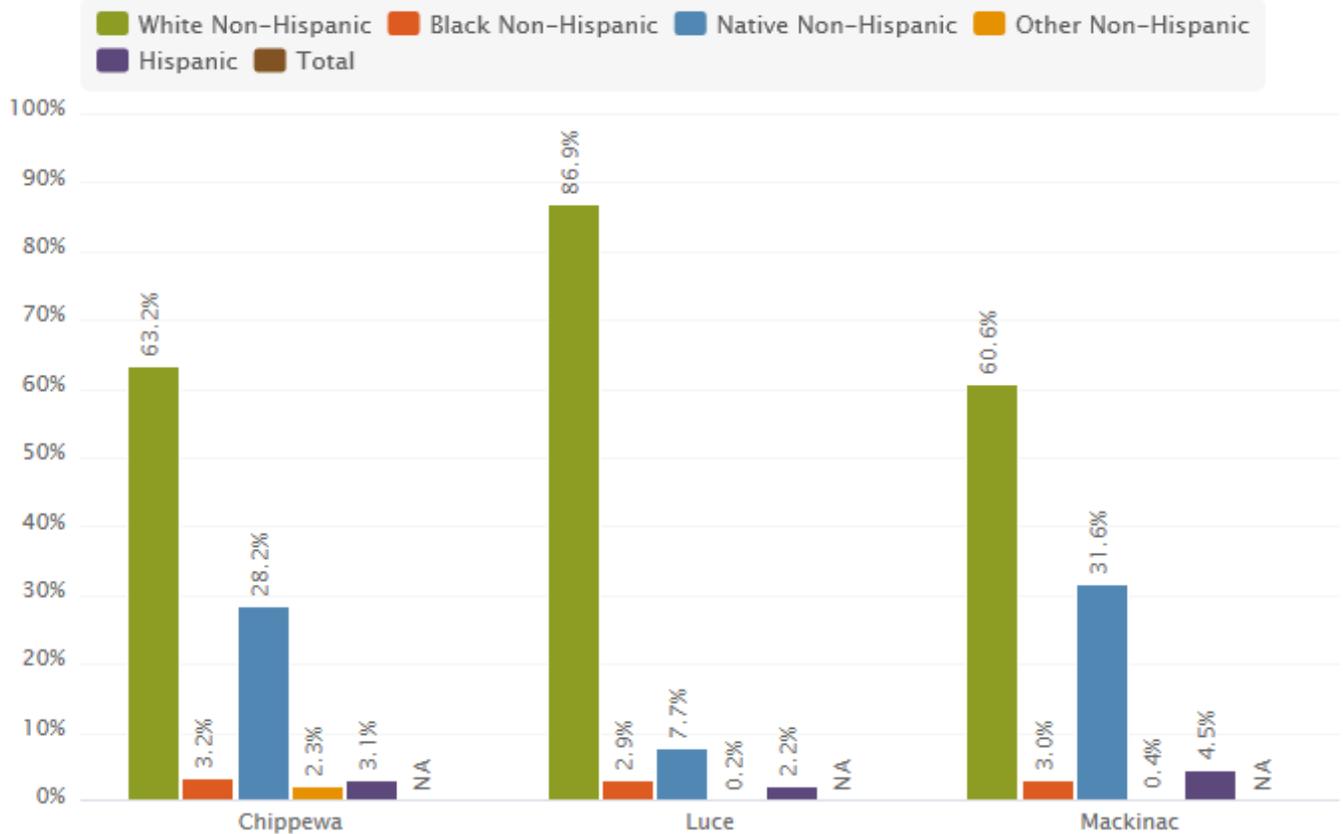
- 89 federal and state programs support children in Michigan
- Annual investment - \$9.4 billion
- State investment - \$4.6 billion
- Federal investment - \$4.8 billion
- Funding for children from birth through age four - \$3.7 billion
- Funding for children ages five through eight - \$5.7 billion
- Funding per child from birth through age eight - \$8,800
- \$6,500 per child from birth through age four
- \$11,500 per child for ages five through eight

-Michigan Department of Education – Office of Great Start, May 2013



DATA CHARTS

COMMUNITY CONDITIONS

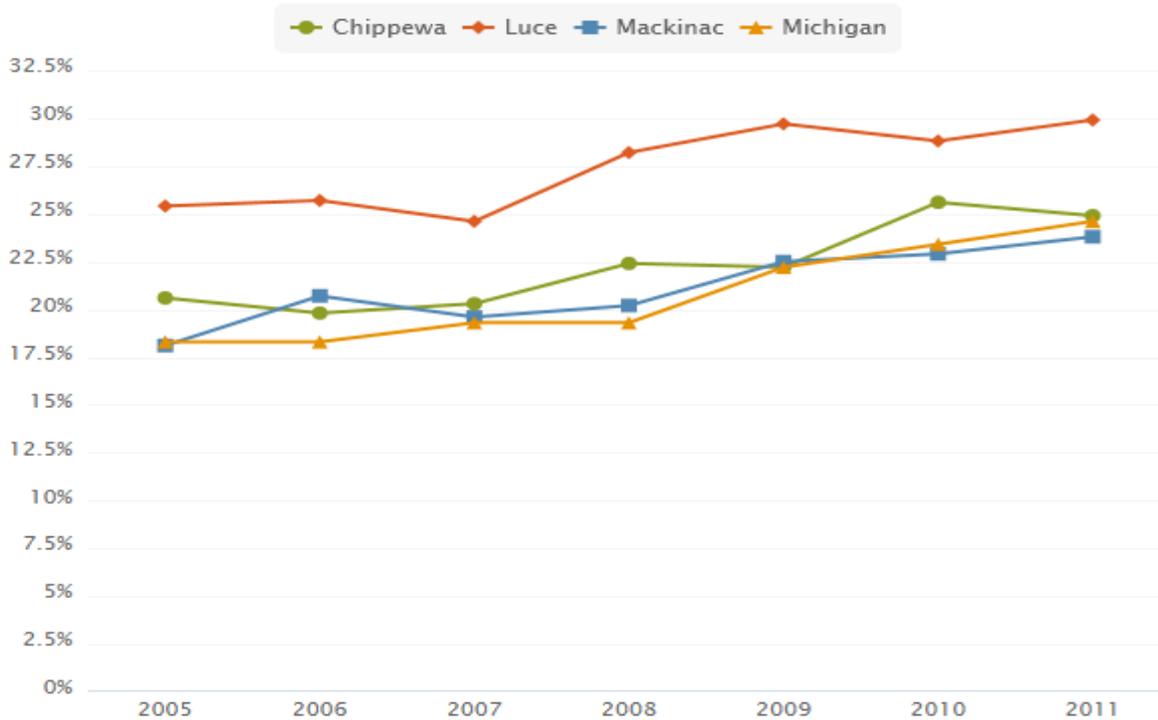


POPULATION AGES 0-8 BY RACE: ALL (PERCENT) - 2012

Michigan League for Public Policy
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation



COMMUNITY CONDITIONS



POVERTY - CHILDREN AGES 0-17 - SAIGE (PERCENT)

Michigan League for Public Policy
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation

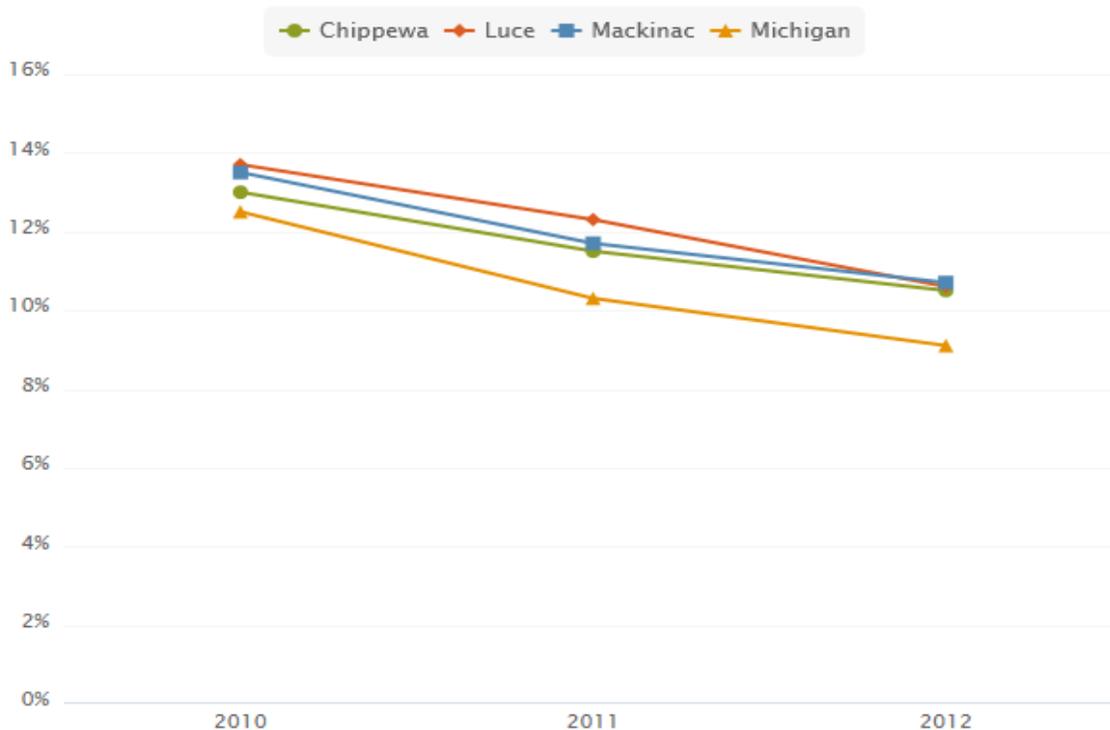
Small Area Income and Poverty Estimates (SAIGE) are produced for school districts, counties, and states.

“Early childhood, which spans the period up to 8 years of age, is critical for cognitive, social, emotional and physical development. During these years, a child’s newly developing brain is highly plastic and responsive to change as billions of integrated neural circuits are established through the interaction of genetics, environment and experience. Optimal brain development requires a stimulating environment, adequate nutrients and social interaction with attentive caregivers.”

-Unicef



COMMUNITY CONDITIONS



UNEMPLOYMENT (PERCENT)

Michigan League for Public Policy
KIDS COUNT Data Center, datacenter.kidscount.org
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The unemployment rates have steadily decreased throughout the state and region over the past three years.

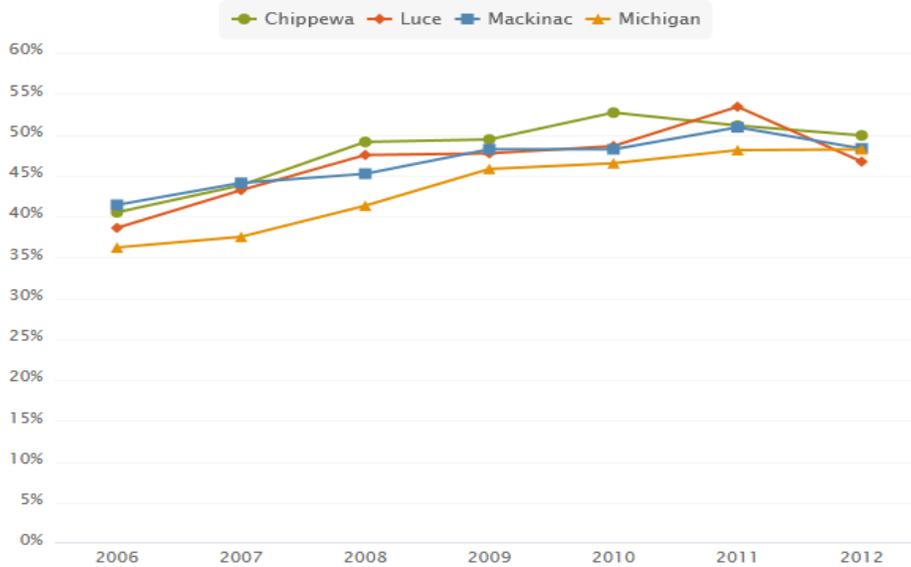
In 2012, Chippewa, Luce, and Mackinac counties still remained higher than the state average for unemployment.

2012 Unemployment Rates

State-wide	9.1%
Chippewa	10.5%
Luce	10.6%
Mackinac	10.7%

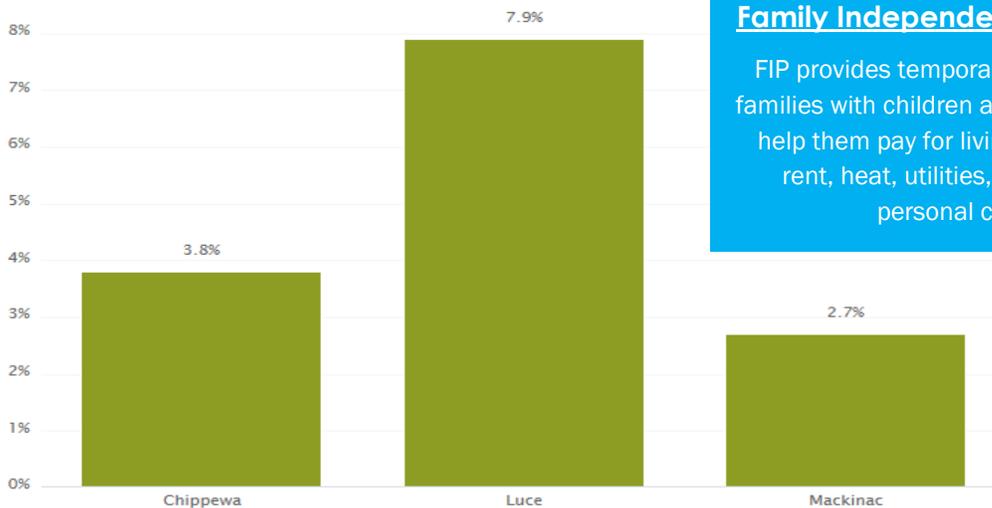
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COMMUNITY CONDITIONS



STUDENTS ELIGIBLE FOR FREE OR REDUCED PRICED LUNCH (PERCENT)

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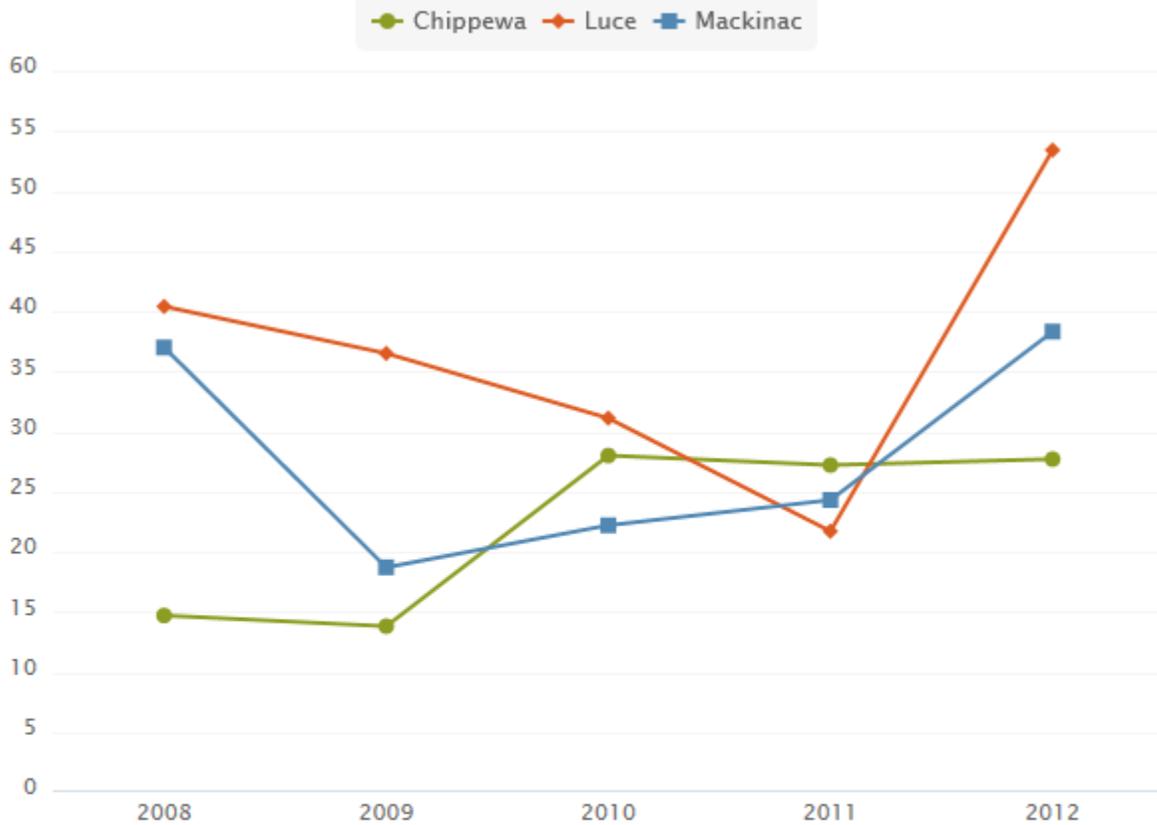
Family Independence Program (FIP)

FIP provides temporary cash assistance to families with children and pregnant women to help them pay for living expenses such as rent, heat, utilities, clothing, food and personal care items.

CHILDREN AGES 0-8 RECEIVING FIP (PERCENT) - 2012

Michigan League for Public Policy
KIDS COUNT Data Center, datacenter.kidscount.org
A project of the Annie E. Casey Foundation

BASIC NEEDS AND WELL-BEING



CONFIRMED VICTIMS OF ABUSE AND/OR NEGLECT, AGES 0-8 (RATE)

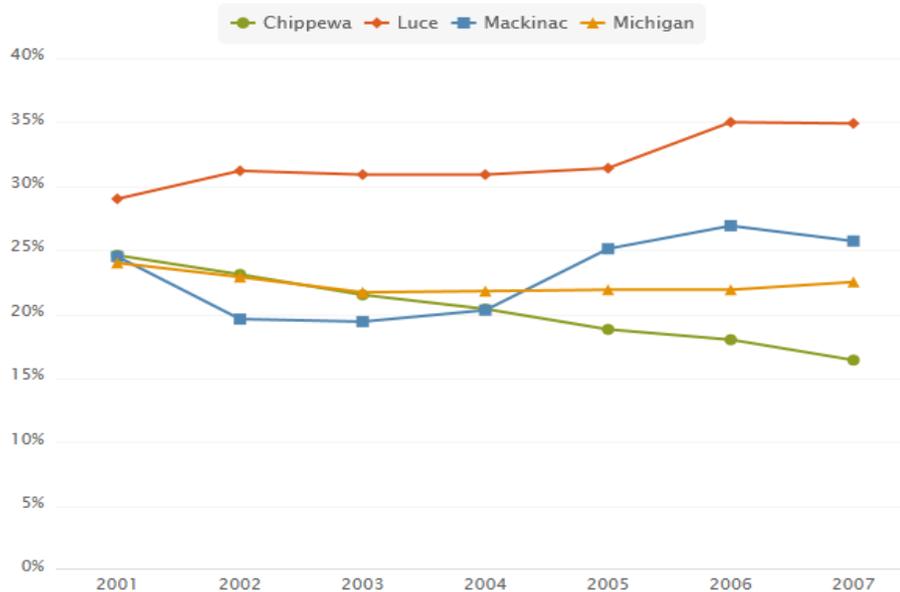
Michigan League for Public Policy
KIDS COUNT Data Center, datacenter.kidscount.org
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"Data shows that the greatest challenges facing our country – from school dropout rates, to crime to rising health-care costs, to the necessity of competing in the global marketplace – can only be met by focusing on the development of all our children, beginning at birth."

-Ounce of Prevention Organization Fund

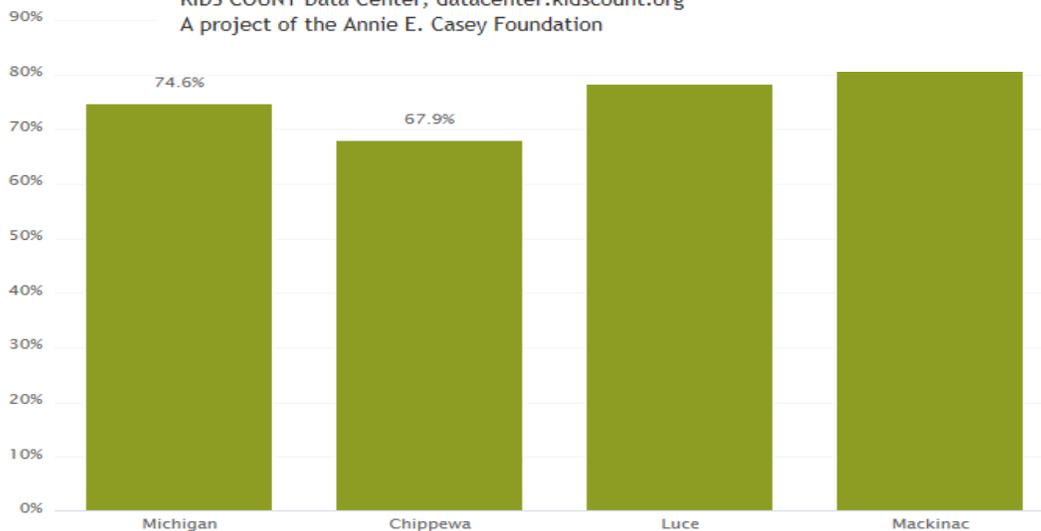


PEDIATRIC AND FAMILY HEALTH



BIRTHS WITH LESS THAN ADEQUATE PRENATAL CARE (PERCENT)

Michigan League for Public Policy
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Vaccination Series

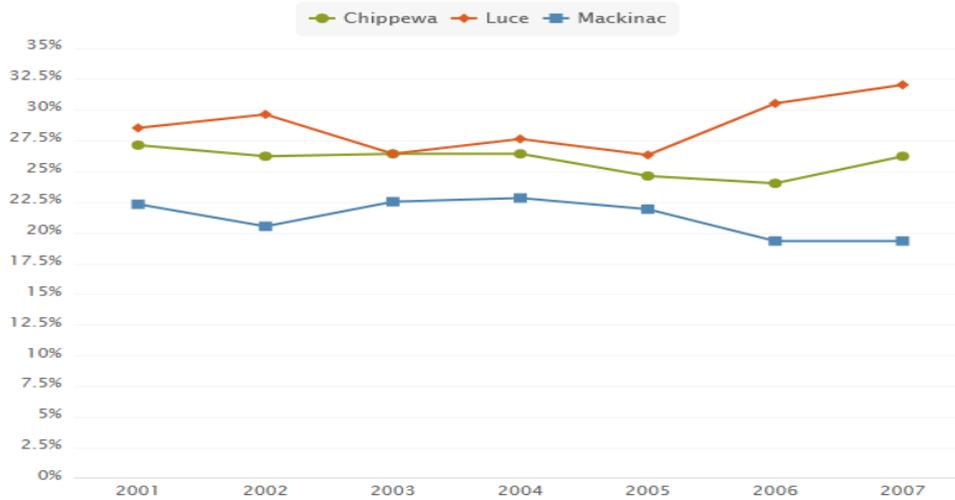
The required vaccination series is 431331, i.e., 4 DTaP, 3 Polio, 1 MMR, 3 HIB, 3 HepB and 1 VAR.

Please note that these rates are based solely on data that has been entered into the Michigan Care Improvement Registry (MCIR)

CHILDREN AGES 19-35 MONTHS WITH IMMUNIZATIONS 431331 (PERCENT) - 2012

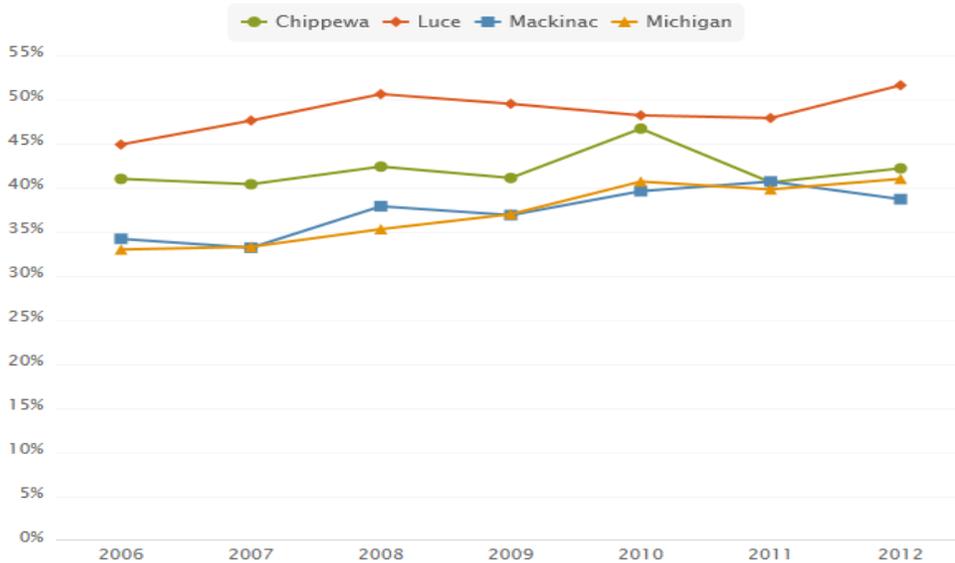
Michigan League for Public Policy
KIDS COUNT Data Center, datacenter.kidscount.org
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PEDIATRIC AND FAMILY HEALTH



BIRTHS TO MOTHERS WHO SMOKED DURING PREGNANCY (PERCENT)

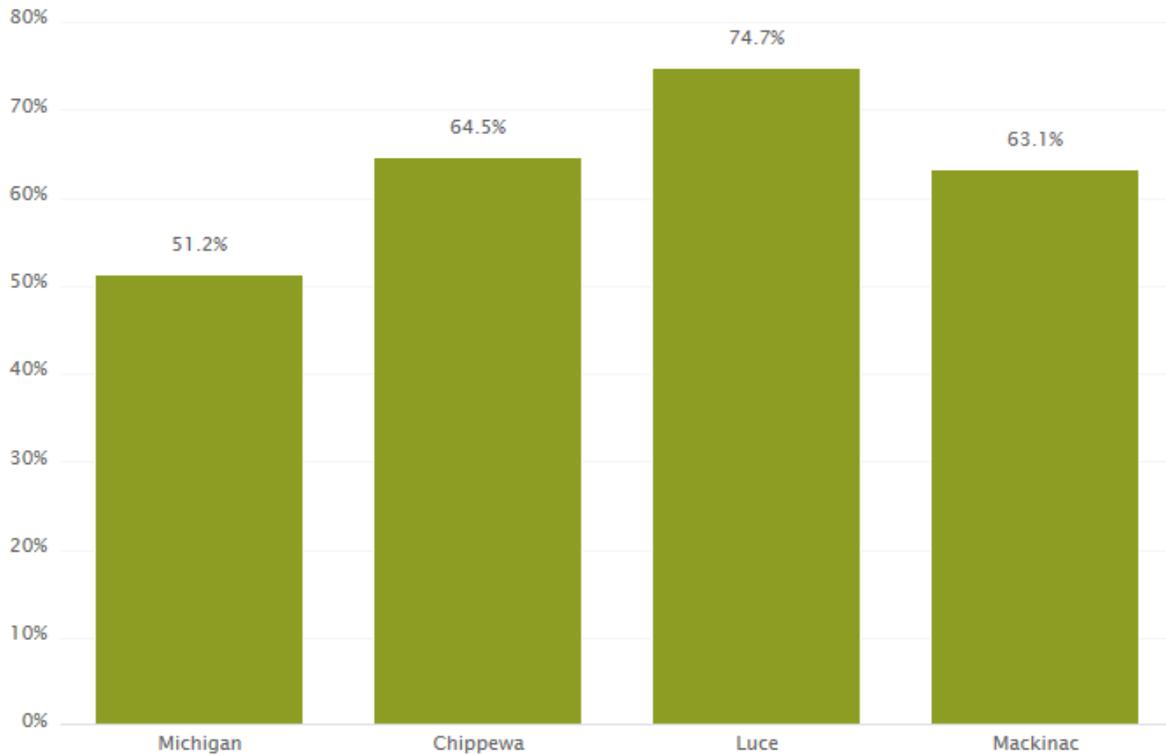
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CHILDREN AGES 0-18 INSURED BY MEDICAID (PERCENT)

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PEDIATRIC AND FAMILY HEALTH



CHILDREN AGES 0-4 RECEIVING WIC (PERCENT) - 2012

Michigan League for Public Policy
KIDS COUNT Data Center, datacenter.kidscount.org
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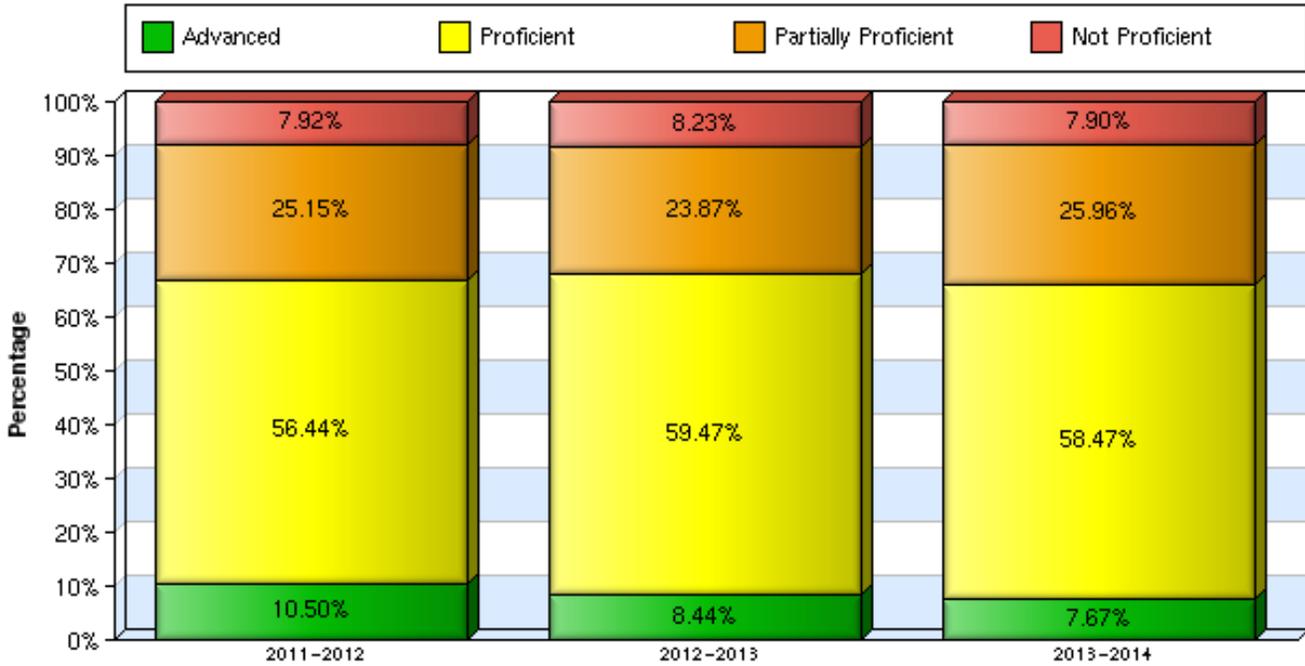
POINTS TO PONDER

- ★ Are children birth to age 5, developmentally on track and ready to succeed at school entry and beyond?
- ★ How prepared is the early care and education workforce to provide effective education and care for all children?
- ★ What policies and investments lead to a skilled and stable early care and education workforce?
- ★ What policies and investments lead to school readiness, life success, and productive citizens?

EARLY CARE AND EDUCATION

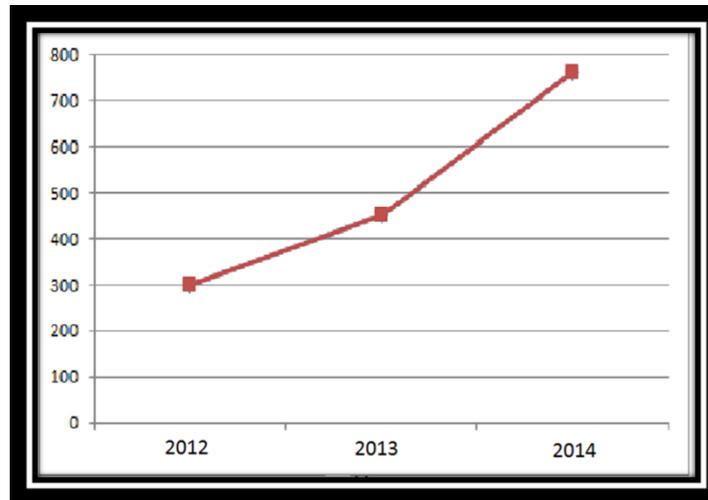
Multi-Year Comparison Report for MEAP ELA READING (Grade 3)

Eastern Upper Peninsula Intermediate School District, All Teachers



Dolly Parton Imagination Library Enrollment Chippewa, Luce, and Mackinac Counties

30% of the birth to 5 year old population in the EUP are currently enrolled in Imagination Library



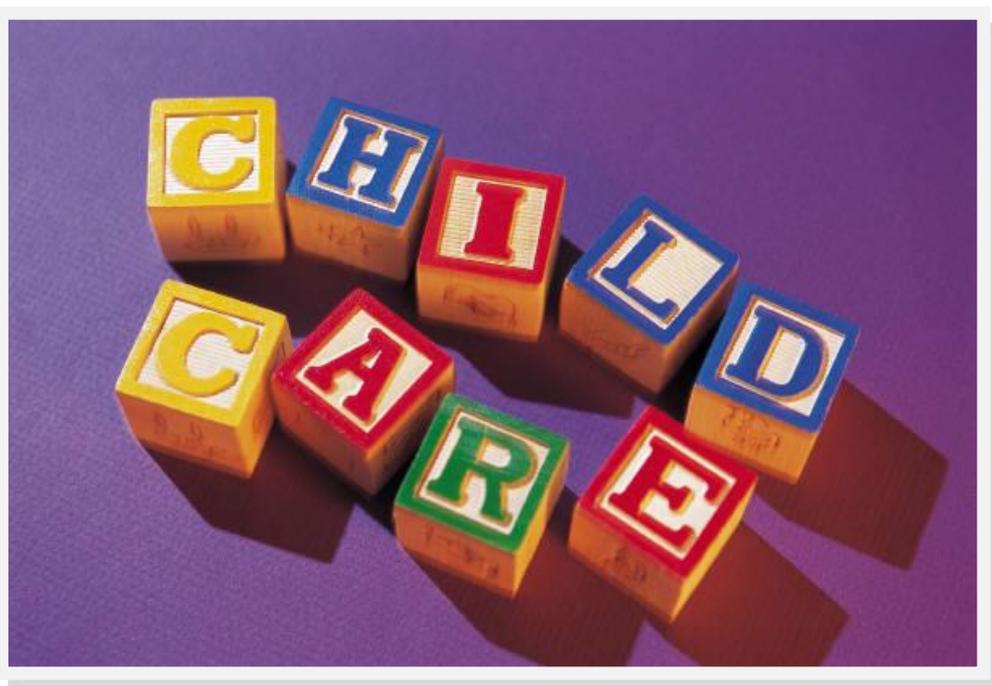
EARLY CARE & EDUCATION

Licensed Childcare Providers in Chippewa, Luce, and Mackinac Counties

as of Sept. 2014

	Chippewa Co	Luce Co	Mackinac Co
Total # providers/centers	53	9	20
Family / Group Homes	35	7	11
Centers	18	2	9
# that accept infants	35	7	11
% of programs that accept infants	66%	78%	55%

Source: Upper Peninsula Regional Resource Center



2014-2017 GOALS AND STRATEGIES

Outcomes identified below have been established by the Office of Great Start. The strategies outlined below are based on local 2014 Strategic Planning Process based on the ABL e Change Framework™, Root Cause Data Analysis, Chippewa County Community Assessment, Communities that Care Data Report (Luce County), 2013 Mackinac Straits Community Assessment, and Kids Count 2013. The strategies represent key findings and seek to address gaps in support and services for young children and families in the EUP.

Outcome 1: All Children born healthy

Local System Gaps (see Appendix H for more detailed root cause analysis)

- ★ Parent education, services, and resources are not accessible and/or utilized by families.
- ★ Lack of coordination for referrals and services among community agencies and organizations.
- ★ Limited services and resources are available to support healthy social/emotional attachment and well-being of children.

Strategies:

- ★ Increase awareness of and enhance access and availability to prenatal services.
- ★ Promote healthy lifestyles and prenatal care through parenting education and resources.
- ★ Increase prenatal and postnatal resources for all families.
- ★ Enhance and increase coordination of services and resources to support healthy social/emotional attachment and well-being of children.
- ★ Establish partnerships with High School Counselors, School Social Workers, and School-Based Rural Health Clinics for prenatal education and prevention efforts to the teen population.
- ★ Promote and enhance substance abuse prevention initiatives.

Outcome 2: All Children are healthy, thriving, and developmentally on track from birth to third grade

Local System Gaps (see Appendix H for more detailed root cause analysis)

- ★ Lack of quality social/emotional and mental health services and supports to meet needs of children and families.
- ★ Lack of critical support and resources available to families and children in need.
- ★ Lack of quality medical care and specialty services available to all families.

Strategies:

- ★ Increase high quality preschool and child care opportunities in the community for all children.
- ★ Collaborate with Great Start to Quality to increase overall quality in group and relative care.
- ★ Promote family networks, supports, and education to empower positive parenting skills.
- ★ Increase coordination of family services among education, community agencies, and the medical community.

2014-2017 GOALS AND STRATEGIES

- ★ Promote evidence based, family centered practices for school and community based services.
- ★ Increase access to developmental screening tools or supports for parents of children birth to five.
- ★ Increase parental access to early intervention resources and services.
- ★ Increase family awareness and knowledge of support of social-emotional development in young children.

Outcome 3: Children are developmentally ready to succeed in Kindergarten by entry

Local System Gaps (see Appendix H for more detailed root cause analysis)

- ★ Parents, schools, and communities have unaligned definitions and expectations of school readiness.
- ★ Early childhood programs and services are not accessible to all families.
- ★ Lack of coordination efforts between parents, schools, and community agencies

Strategies:

- ★ Establish common school readiness expectations among parents, communities, and schools regarding preschool and kindergarten school readiness
- ★ Convene a workgroup focused on making recommendations of community services that support all children's school readiness, also serving as an advisory to the Great Start Readiness Program
- ★ Increase high quality preschool and child care opportunities and information sharing.
- ★ Increase coordination of child and family services among parents, schools, and community agencies.

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

Local System Gaps (see Appendix H for more detailed root cause analysis)

- ★ Literacy intervention programs and supports are not accessible in all schools and communities within the EUP region.
- ★ Lack of parental understanding of early literacy

Strategies:

- ★ Enhance access and financial support of the Dolly Parton Imagination Library for children birth to five.
- ★ Increase literacy outreach efforts to children ages 5-8 that are not reading proficiently.
- ★ Increase parenting awareness of the importance of early literacy.

2014-2015 Early Childhood Action Agenda

Overall Strategy (Goal) 1	Promote healthy lifestyles and prenatal care through parent education and resources.						
	Objective 1:	Increase prenatal and postnatal resources for families					
Michigan's Early Childhood Outcomes	Component Area(s)	Activities	Responsible Entities	Target Dates	Resources Needed	Progress Measures (activities)	Performance Measures (objectives)
<input checked="" type="checkbox"/> Born Healthy <input type="checkbox"/> Healthy, Thriving & Developmentally on Track <input type="checkbox"/> Ready to Succeed at School Entry <input type="checkbox"/> Reading Proficiently by end of 3 rd grade	<input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	1. Partner with community agencies to increase awareness and coordinate prenatal and postnatal resources for families.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Medical Community Health Department <input checked="" type="checkbox"/> Early Head Start <input checked="" type="checkbox"/> Early On <input checked="" type="checkbox"/> Chippewa County Council For Youth and Families (Welcome Wee Ones)	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Collaborative efforts <input checked="" type="checkbox"/> Educational Resources <input checked="" type="checkbox"/> Feedback Loops	1. Research and evaluate the effectiveness of current partnerships or efforts that are already existing in the community 2. Partnership agreements established among participating agencies 3. Medical community utilizing resources to educate patients on the importance of social/ emotional health before and after a baby is born. 4. Education & resources utilized for families (emphasis on siblings) with a child experiencing medical trauma after birth.	Community agencies will actively share and promote prenatal and postnatal resources through collaborative partnerships.

						5. Surveys established to evaluate the effectiveness of increased coordination efforts.	
	<input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	2. Promote fathers and mothers as equal supports in their child's growth and development.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Community Agencies <input checked="" type="checkbox"/> Medical Providers <input checked="" type="checkbox"/> Friend of the Court <input checked="" type="checkbox"/> Department of Human Services <input checked="" type="checkbox"/> Other identified partners	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Educational materials promoting equal parenting and increasing father involvement	1. Provide 6 outreach efforts (3) to the medical community, (3) to the general community promoting dads in active parenting roles 2. Establish "Spotlight Champion Fathers" recognition program and media outreach 3. Track outreach efforts	Fathers will be engaged as equal partners through outreach efforts
	<input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	3. Promote positive relationships between parents/caregivers and community agencies by sharing information and resources to create common and consistent messages.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Health Dept. <input checked="" type="checkbox"/> DHS <input checked="" type="checkbox"/> EHS <input checked="" type="checkbox"/> Head Start <input checked="" type="checkbox"/> Parents <input checked="" type="checkbox"/> Childcare Providers <input checked="" type="checkbox"/> EC Programs	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Common language and collaboration among agencies	1. Research and evaluate the effectiveness of current information sharing among agencies in the region 2. Community agencies will develop a partnership agreement and agree upon	Community agencies are utilizing common messaging and resources with families.

						<p>common resources and tools to use with families/ caregivers.</p> <p>3. Providers will promote the importance of the parents being the child's most valuable resource</p> <p>4. Create feedback loops with providers</p>	
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Overall Strategy (Goal) 2	Promote and enhance substance abuse prevention initiatives.						
	Objective 1	Promote the importance of a substance free life for parents and families					
Michigan's Early Childhood Outcomes	Component Area(s)	Activities	Responsible Entities	Target Dates	Resources Needed	Progress Measures (activities)	Performance Measures (objectives)
<input checked="" type="checkbox"/> Born Healthy <input checked="" type="checkbox"/> Healthy, Thriving & Developmentally on Track <input checked="" type="checkbox"/> Ready to Succeed at School Entry <input type="checkbox"/> Reading Proficiently by end of 3 rd grade	<input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	1. Raise awareness among parents, child care providers and the community regarding resources for substance abuse issues.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Chippewa County Smoke Free Coalition <input checked="" type="checkbox"/> Sault Tribe Transformation Committee <input checked="" type="checkbox"/> Great Start to Quality <input checked="" type="checkbox"/> Families Against Narcotics (FAN) <input checked="" type="checkbox"/> Medical Providers	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Collaborative partnerships <input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Educational materials to distribute to partners and families	1. Partnership with FAN will be established to increase resources and education outreach 2. Three outreach activities will be formed to increase resources and education to all parents. A minimum of 15 parents will be impacted through outreach efforts 3. Promote Michigan Quit Hotline as cessation resource	Distribution efforts will be tracked Outreach activities will include a pre and post survey to parent attendees to track attendance and outcomes.
	<input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	1. Educate expecting parents about the lasting effects of substance abuse exposure to children prenatally.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Great Start to Quality <input checked="" type="checkbox"/> Luce County Communities that Care <input checked="" type="checkbox"/> Medical Providers <input checked="" type="checkbox"/> Early Intervention <input checked="" type="checkbox"/> FAN	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Collaborative Partnerships <input checked="" type="checkbox"/> Educational materials to support efforts	1. Evaluate current efforts and resources available. 2. Educational resources will be provided to parents and early childhood providers 3. Promote two activities with Strengthening Families to promote substance free living	Resource data and outreach will be tracked. Outreach data will be tracked and participants will be provided pre & post surveys.

Overall Strategy (Goal) 3		All children will experience a high quality preschool, child care, or other high quality learning opportunity during their early years.					
Objective 1		Increase high quality preschool and child care opportunities in the community for ALL children.					
Michigan's Early Childhood Outcomes	Component Area(s)	Activities	Responsible Entities	Target Dates	Resources Needed	Progress Measures (activities)	Performance Measures (objectives)
<input type="checkbox"/> Born Healthy <input checked="" type="checkbox"/> Healthy, Thriving & Developmentally on Track <input checked="" type="checkbox"/> Ready to Succeed at School Entry <input type="checkbox"/> Reading Proficiently by end of 3 rd grade	<input type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	1. Partner with Great Start to Quality and Michigan State University Extension to educate group home, relative care providers, nannies, and parents about what "High Quality" entails for the provider and for the child	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Great Start to Quality <input checked="" type="checkbox"/> MSU-Extension	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Educational Materials <input checked="" type="checkbox"/> Collaborative Partnerships <input checked="" type="checkbox"/> Outreach opportunities for parents and providers	1. Two training opportunities for providers will be established, reaching at a minimum 15 providers 2. Three outreach activities for parents will be established, reaching a minimum of 15 parents	Pre & Post surveys will be provided to participants to track learning outcomes. Outreach data will be tracked
	<input type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	2. Increase preschool scholarship capacity for children that do not meet existing program income eligibility requirements but are unable to afford private preschool.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> other identified partners	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Partnerships with local preschools	1. One fundraiser will take place to help to support the scholarship fund. 2. Two Early Learning Scholarships will be awarded	Fundraising efforts will be tracked Scholarship receipts will be tracked to measure learning outcomes

Overall Strategy (Goal) 4	Family Services among education, community, agencies, and the medical community will have a seamless understanding of current local resources to support all families						
	Objective 1	Increase coordination of child and family services among education, community agencies, and the medical community.					
Michigan's Early Childhood Outcomes	Component Area(s)	Activities	Responsible Entities	Target Dates	Resources Needed	Progress Measures (activities)	Performance Measures (objectives)
<input checked="" type="checkbox"/> Born Healthy <input checked="" type="checkbox"/> Healthy, Thriving & Developmentally on Track <input checked="" type="checkbox"/> Ready to Succeed at School Entry <input type="checkbox"/> Reading Proficiently by end of 3 rd grade	<input checked="" type="checkbox"/> Pediatric and Family Health <input type="checkbox"/> Social and Emotional Health <input type="checkbox"/> Early Care and Education <input type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	1. Create a common information sharing system to ensure all family service agencies or groups are continuously informed with up to date local resources to support children and families	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Community Agencies <input checked="" type="checkbox"/> Medical Providers	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Common resource information sharing system	1. Establish a common information resource sharing system among providers 2. Create common language and divert use of acronyms between agencies	A MOU will be utilized between partners to outline use of system and common language
	<input checked="" type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	2. Provide an evidenced based outreach training for local providers working with families to provide a consistent, common approach with families	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Great Start to Quality <input checked="" type="checkbox"/> Chippewa County Children's Trust Fund	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Training Materials	1. Provide a training regarding the 5 Protective Factors with participation from 20 providers at minimum	Pre and Post surveys will be completed by attendees demonstrating increased understanding of the 5 protective factors.

Overall Strategy (Goal) 5	Convene a workgroup focused on making recommendations of community services that support all children's school readiness, also serving as an advisory to the Great Start Readiness Program.						
	Objective 1 & 2	<ol style="list-style-type: none"> Assist the Great Start to Quality Resource Centers with recruitment and engagement of licensed and registered providers to both enter into the Great Start to Quality, as well as achieve higher levels of quality. Review the components of the Great Start Readiness Program and make recommendations. 					
Michigan's Early Childhood Outcomes	Component Area(s)	Activities	Responsible Entities	Target Dates	Resources Needed	Progress Measures (activities)	Performance Measures (objectives)
<input type="checkbox"/> Born Healthy <input checked="" type="checkbox"/> Healthy, Thriving & Developmentally on Track <input checked="" type="checkbox"/> Ready to Succeed at School Entry <input type="checkbox"/> Reading Proficiently by end of 3 rd grade	<input type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	<p>1a. Recruit parents and providers who represent the diversity of the area and programs and services targeted, to ensure equal representation and engagement.</p> <p>1b. Parent Coalition develops and implements strategies to increase parent awareness and choice of high quality settings</p>	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> Great Start to Quality <input checked="" type="checkbox"/> Childcare Providers	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Collaborative Partnerships <input checked="" type="checkbox"/> Promotional materials	<ol style="list-style-type: none"> Review existing efforts Partner with Great Start to Quality to provide a minimum of two outreach activities. 	Licensed childcare providers will increase and the quality will improve among providers.
	<input type="checkbox"/> Pediatric and Family Health <input checked="" type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	<p>2a. Advise in improvements to joint recruitment and enrollment.</p> <p>2b. Increase awareness, use and success of joint recruitment and enrollment for publicly-funded programs.</p>	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> GSRP <input checked="" type="checkbox"/> CLMCAA <input checked="" type="checkbox"/> Head Start Sault Tribe <input checked="" type="checkbox"/> Head Start Bay Mills <input checked="" type="checkbox"/> Head Start Private Preschools	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Collaborative Partnerships <input checked="" type="checkbox"/> Recruitment Resources	<ol style="list-style-type: none"> Continue region wide Joint Recruitment and Enrollment work. Outreach to local schools, community agencies and medical providers to increase awareness 	An active school readiness advisory committee, meeting regularly and addressing all required tasks.

Overall Strategy (Goal) 6	Parents and schools (preschool, head start, K-12) will have common school readiness expectations						
	Objective 1	Establish common expectations among parents and schools regarding pre-k and kindergarten school readiness.					
Michigan's Early Childhood Outcomes	Component Area(s)	Activities	Responsible Entities	Target Dates	Resources Needed	Progress Measures (activities)	Performance Measures (objectives)
<input type="checkbox"/> Born Healthy <input checked="" type="checkbox"/> Healthy, Thriving & Developmentally on Track <input checked="" type="checkbox"/> Ready to Succeed at School Entry <input checked="" type="checkbox"/> Reading Proficiently by end of 3 rd grade	<input type="checkbox"/> Pediatric and Family Health <input type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	1. Develop a common transition form among all preschools in the region	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> School Readiness Committee	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff time for meeting and collaborating	1. Evaluate and compare current transition forms and procedures. 2. Develop one common transition form	Common transition form completed & utilized with throughout the region
	<input type="checkbox"/> Pediatric and Family Health <input type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	2. Increase parental awareness and access to school readiness information by beginning the work of creating a common definition of "School Readiness" among preschools, head starts, parents, and the K-12 school community	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> School Readiness Committee	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff time for meeting and collaborating	1. Collaborative efforts with local schools to define district level school education supports, policies, and resources will be established.	An outline of district level school readiness expectations and policies will be created to educate parents on expectations
	<input type="checkbox"/> Pediatric and Family Health <input type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	3. Promote all parents as being active in their child's education before school, during school, and through summer break.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> School Readiness Committee	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Resources to promote this shared education from educator to parent	1. Evaluate current efforts 2. Parents will receive information on how to promote learning with children	Outreach efforts to educate parents will be tracked to evaluate the effectiveness of efforts

						children during school breaks.	
	<input type="checkbox"/> Pediatric and Family Health <input type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	4. Promote parents as leaders in their child's education	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> School Readiness Committee	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff Leadership Materials <input checked="" type="checkbox"/> Parent Leadership Materials	3. Two Parent Leadership training opportunities will be provided in the region	Pre & Post surveys will be completed by participants to demonstrate effectiveness of outreach efforts.

Overall Strategy (Goal) 7	Increase quality literacy experiences for children, birth to age 8.						
	Objective 1	Increase exposure to literacy opportunities for children, birth to age 8.					
Michigan's Early Childhood Outcomes	Component Area(s)	Activities	Responsible Entities	Target Dates	Resources Needed	Progress Measures (activities)	Performance Measures (objectives)
<input type="checkbox"/> Born Healthy <input checked="" type="checkbox"/> Healthy, Thriving & Developmentally on Track <input checked="" type="checkbox"/> Ready to Succeed at School Entry <input checked="" type="checkbox"/> Reading Proficiently by end of 3 rd grade	<input type="checkbox"/> Pediatric and Family Health <input type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	1. Enhance access and financial support of Dolly Parton Imagination library for children birth to five.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> EUPISD <input checked="" type="checkbox"/> local libraries	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Fundraising opportunity <input checked="" type="checkbox"/> Recruitment materials	1. One fundraiser will be implemented 2. Enrollment numbers in Imagination Library will increase as a result of increased awareness	Data will track the outcome of the fundraiser. Ex) Amount of funds & how many children will be impacted Annual family literacy surveys will be distributed and evaluated
	<input type="checkbox"/> Pediatric and Family Health <input type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	2. Increase literacy resources and supports available to children ages 5 to 8 with a focus on children that are not reading proficiently.	<input checked="" type="checkbox"/> GSC <input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> EUPISD <input checked="" type="checkbox"/> local libraries <input checked="" type="checkbox"/> Luce County Communities that Care	Oct. 1, 2014 to Sept. 30, 2015	<input checked="" type="checkbox"/> Staff <input checked="" type="checkbox"/> Literacy supports for children 5 to 8	1. Evaluate current local efforts. 2. Partnerships with local libraries and Luce County Communities That Care will be established to provide support and resources to children 5 to 8 that are not reading proficiently.	Local literacy efforts for targeted population and student test scores will be tracked.
	<input type="checkbox"/> Pediatric and Family Health	3. Increase and	<input checked="" type="checkbox"/> GSC	Oct. 1, 2014	<input checked="" type="checkbox"/> Staff	1. Participation in	Outreach

	<input type="checkbox"/> Social and Emotional Health <input checked="" type="checkbox"/> Early Care and Education <input checked="" type="checkbox"/> Parenting Leadership <input checked="" type="checkbox"/> Family Support	<p>promote parent education resources regarding the importance of early literacy opportunities.</p>	<input checked="" type="checkbox"/> GSPC <input checked="" type="checkbox"/> local libraries, schools <input checked="" type="checkbox"/> READ EUP Literacy Committee	<p>to Sept. 30,2015</p>	<input checked="" type="checkbox"/> Parent Education Resources & Outreach	<p>EUP region wide community literacy outreach efforts established by the READ EUP Literacy Committee</p>	<p>efforts and participation will be tracked.</p>
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EUP GREAT START COLLABORATIVE

FUND DEVELOPMENT

The Eastern Upper Peninsula prides itself on the strong collaborative partnerships that have been in existence for many years. The supportive attitude has created a culture with a strong desire to improve programs and services to the greater community. By working together many organizations are able to share resources and provide more support to children and families across the region.

Examples of collaborative efforts are:

- ★ Annual Pre-K Summit for Great Start Readiness Program (GSRP), head starts, private preschools, and kindergarten teachers
- ★ Collaborative effort for one School Readiness Advisory Committee that consists of representation and input from tribal and non-tribal head starts, GSRP, private preschools, local educational agencies (LEAs), human service organizations, and the EUP Great Start Collaborative
- ★ Joint recruitment and enrollment for GSRP, head starts, and private preschools
- ★ Fundraising initiatives for Dolly Parton Imagination Library, Becky Davis Early Learning Scholarship, and United Way of the EUP
- ★ Joint training for early childhood professionals and providers, as well as cross-agency training when appropriate
- ★ Dolly Parton Imagination Library recruitment and enrollment, a project of the Great Start Collaborative and the Eastern Upper Peninsula Intermediate School District
- ★ Collaborative family-focused events: Community Baby Shower, Month of the Young Child Spring Celebration, READ Sault Ste. Marie, and many other community events
- ★ Monthly cross-agency provider meetings
- ★ Co-meeting of the GSC and Local Interagency Coordinating Council (LICC) boards
- ★ Free vision and hearing screening for any child under the age of five through shared equipment purchased by the EUPISD and used by GSRP, Special Education, and Early On

With respect to the specific goals and strategies in this Strategic Plan, many resources are already in place and available due to our collaborative community commitment. For example, fundraising efforts have been successful in gathering businesses support and raising funds for special projects such as preschool scholarships and literacy initiatives in our region. Recently, a fundraising partnership was established between the Great Start Collaborative, Parent Coalition, and United Way of the EUP. The organization of the event, workload, and profits are equally divided between the EUPGSC and the United Way of the EUP. This is an excellent example of how partnering has allowed us to increase our capacity and to serve more children and families through multiple avenues within our area.

Some of the objectives within the action agenda require fund raising and fund development. The EUP Great Start Collaborative is committed to effectively utilizing existing resources and expanding efforts to leverage other funding sources with the intent of sustainability and growth in the future. The EUP Great Start Collaborative is building capacity for fund-raising activities; looking for grant opportunities; and exploring contributions from the community and civic organizations.

Along with these efforts, we have had the very generous support of our business community in the past and presently. Many local businesses contribute supplies or donations for fundraising events, playgroups, and more.

Successful implementation of the strategic plan and action agenda requires:

STAFF

The EUP Great Start Collaborative is funded by a grant through the Michigan Department of Education and provides support for:

- ★ EUP Great Start Collaborative Director to oversee the operation of the Great Start Collaborative, implement and monitor the EUPGSC action agenda, and provide important linkages with community agencies, schools, parents, and businesses.
- ★ EUP Great Start Parent Liaisons to oversee the operation of the Parent Coalition and provide an important linkage between the Great Start Parent Coalition and the Great Start Collaborative Board.
- ★ EUP Great Start Support Staff to provide assistance with data collection, record keeping, reports and events.

COLLABORATIVE COMMITMENTS

The EUP Great Start Collaborative is committed to building a comprehensive early childhood system for the young citizens of Chippewa, Luce, and Mackinac counties. To meet this commitment, it may be necessary to secure additional funding for staff, resources, and efforts outlined in this report through:

- ★ On-going funding from the Michigan Department of Education through the Office of Great Start for sustainability.
- ★ Maintaining the collaboration of resources through the EUPISD, community agencies, organizations, and businesses who freely share resources and collaborate routinely by writing grants, providing leadership, offering space, providing in-kind and cash match funds, developing new programs by blending resources and offering staff trainings across the tri-county region.
- ★ Seeking additional funding and resources from community and civic organization in order to accomplish the goals, objectives and action steps set forth in the early childhood action agenda.
- ★ Remaining committed to utilizing the current available resources to carry out the early childhood action agenda and to create additional resources with the intent of sustainability.



“We have found it critically important to invest our resources and time in the EUP Great Start Collaborative because we realize the importance of investing in young children. It is imperative we as a community, including citizens, businesses, non-profit organizations, foundations, etc. invest in the development during essential learning years, to not only benefit the future of these children but to benefit the greater society.”

-Mark Savoie, Executive Vice President – Central Savings Bank

APPENDICES

Appendix A: EUP Great Start Evaluation Results

Building the Levers for Change

The 2010 survey results revealed eight factors critical to promoting Great Start accomplishments. These are called the “Levers for Change.” Below is your progress in enhancing your GSC/GSPC Levers for Change. **Most numbers reflect the percent of individuals responding “quite a bit” or “a great deal”.** *Strong Relational Networks* reflects the percent of service referral/access exchanges happening between GSC member organizations. *Active Constituents* reflects the average level of involvement of GSC/GSPC members.

Eastern Upper Peninsula GSC/GSPC Levers for Change		2010	2010 to 2012	2012
Systems Change Climate	Strong Relational Networks (pg 60-61) Strong relational networks easily exchange referrals, coordinate services and share resources across various agencies in the community.	23.9%	↑	48.2%
	Intentional Systems Change Actions (pg 59) 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.	0.0%	→	0.0%
Readiness for Change	Interdependent Organizations (pg 55) Member organizations see the value in the collaborative effort and support other partners at the table.	38.5%	↑	72.7%
	Readiness for Change (pg 56-57) Individuals and organizations believe in the need for change and have the capacity to pursue it.	64.1%	↑	83.3%
Authentic Leadership and Voice	Parent Leadership & Voice (pg 52-54) Parents are effective leaders and competent champions for early childhood and represent a knowledgeable, diverse, and visible parent constituency.	28.2%	↑	66.7%
	Effective Partnerships (pg 51) Strong, effective ties between the GSC and GSPC, and also with key outside organizations in the community.	57.6%	↑	87.5%
Engaged Constituents	Shared Goals (pg 49) A unified vision shared with the GSC and GSPC, including: an aligned understanding of, and agreement upon problems, possible solutions, and overall goals.	48.5%	↑	83.3%
	Active Constituents (pg 50) Active and involved members making valuable contributions to the GSC/GSPC, including: speaking at meetings, holding an office, or advocating for early childhood in the community.	67.0%	↑	85.1%

Your Great Start Effort: Moving Forward

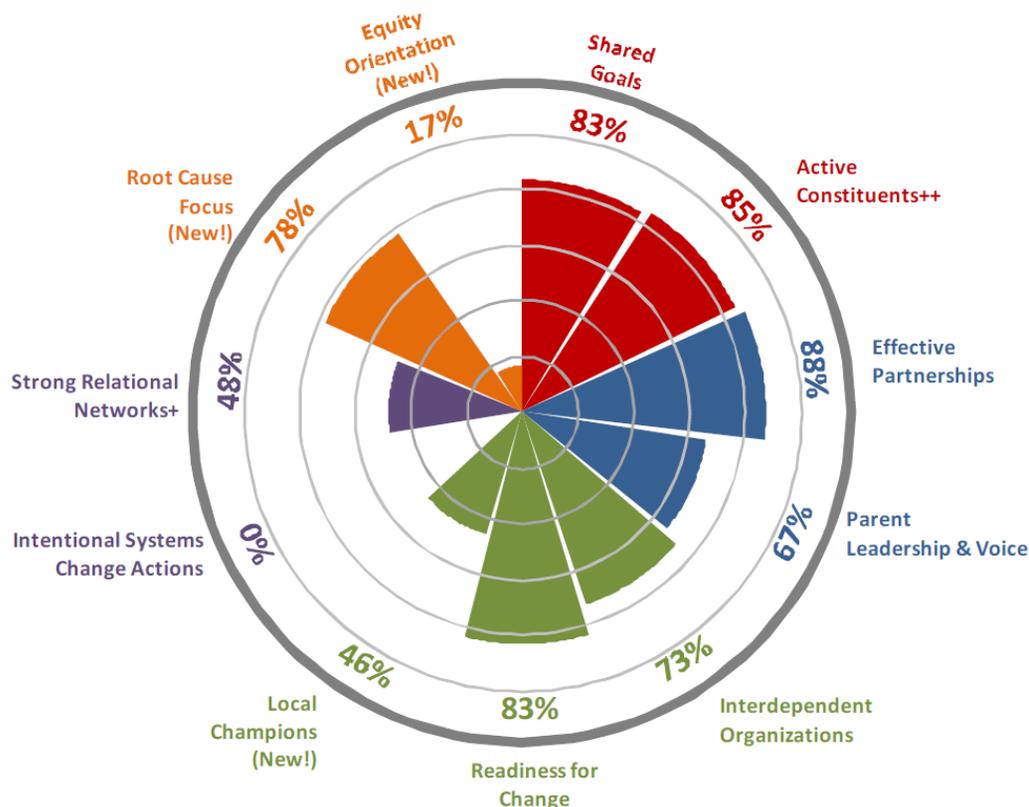
In addition to seeing how your Great Start Collaborative and Coalition has changed over time, it is also useful to look at where your GSC/GSPC is in 2012 to identify strengths and areas that need additional attention.

Eastern UP GSC/GSPC 2012 Performance

% responding Quite a Bit or a Great Deal

+Strong Relational Networks: % of all possible service delivery access connections

++Active Constituents: Average level of involvement of GSC/GSPC members



Use this diagram to see how you're doing on each lever.

1. Each wedge displays your performance for a lever in 2012.
2. The colored portion of each wedge (and the number) represent the extent to which stakeholders report that your GSC/GSPC has this component.
3. Identify your strengths, successes, and opportunities for growth. **Use this information to plan your next steps!**

Moving Forward: Your 2012 Highlights

Your Strongest Areas:

- ★ Effective Partnerships
- ★ Active Constituents
- ★ Shared Goals
- ★ Readiness for Change

Areas to Target for Improvement:

- ★ Intentional Systems Change Actions
- ★ Equity Orientation
- ★ Local Champions

Appendix B: ABLe Change Framework™ 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. The **Able Change Simple Rules** include:



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.

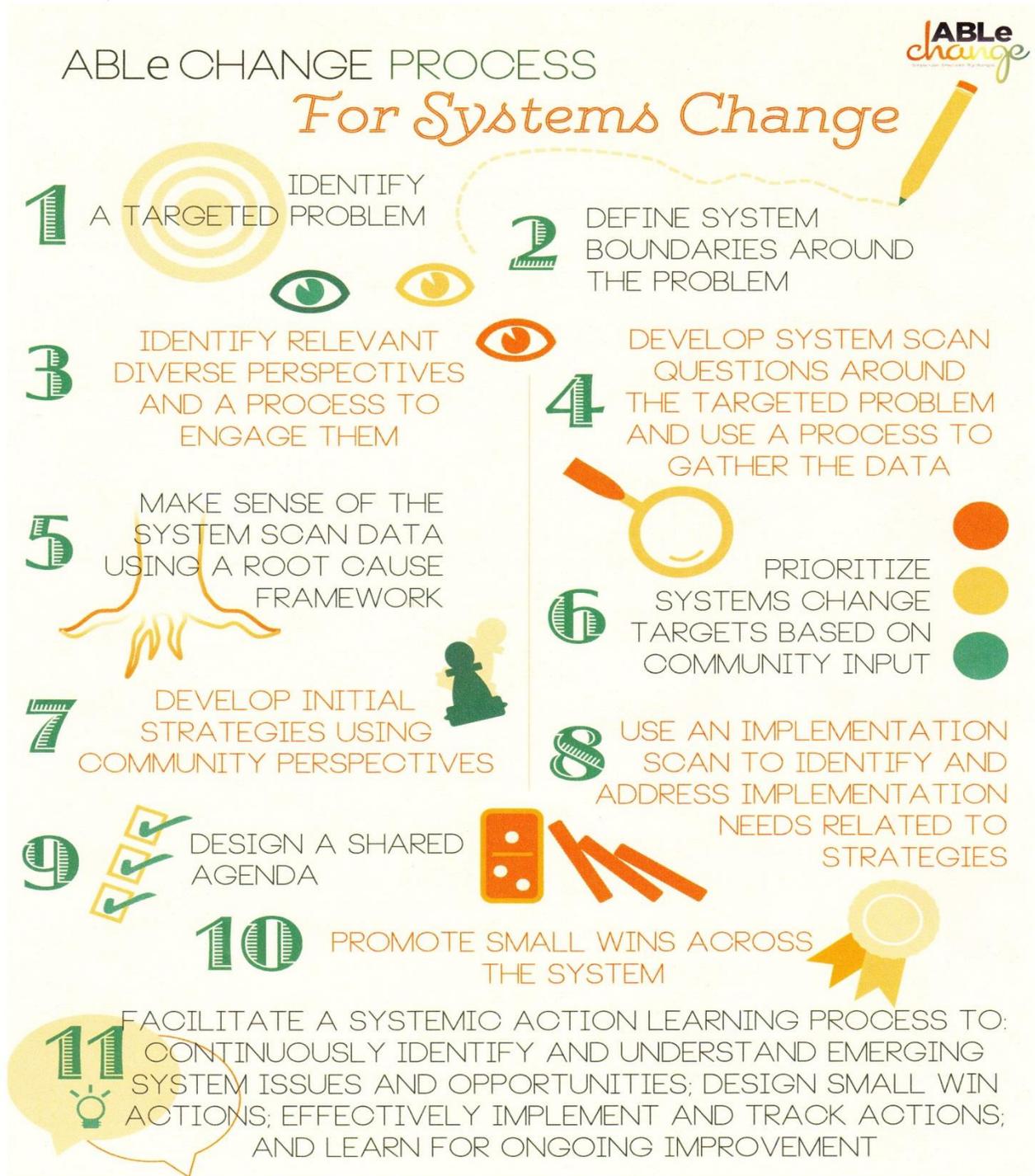


PURSUE SOCIAL JUSTICE

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.

System exChange at Michigan State University - systemexchange.msu.edu - 517-355-3825

Appendix C: ABLe Change Framework™ Systems Change Rules



Menu of ABLe Change System Scan Questions

Foster-Fishman & Watson
Michigan State University

<p>PROBLEM CLARIFICATION</p> <ul style="list-style-type: none"> - What does [targeted problem] look like in our community?
<p>MINDSETS</p> <ul style="list-style-type: none"> - What local attitudes and beliefs might be getting in the way of addressing [targeted problem]? <ul style="list-style-type: none"> o Where are you most likely to encounter these mindsets? - Do people in the community see [targeted problem] as a priority? - What assumptions do people have about why [targeted problem] is happening in our community? How are these assumptions influencing our ability to address this problem? - To what extent do families and professionals define “high quality services and supports” differently? How is this influencing our ability to address [targeted problems]? - What attitudes do people have about the families experiencing [targeted problem]? How are these influencing our ability to address this problem?
<p>COMPONENTS</p> <ul style="list-style-type: none"> - Which services in your community are NOT easily accessible to all families with young children? In what ways are they not accessible, and for which families? - Which available services are families NOT taking advantage of? Which families aren’t using these services? - To what extent are local services and supports high quality? - To what extent do local services and supports fit with families’ cultural traditions? - What additional high quality services and supports are still needed in the community?
<p>CONNECTIONS</p> <ul style="list-style-type: none"> - What specific types of information are not being shared between organizations, making it more difficult to do good work and address [targeted problems]? When does this happen? Which types of organizations are not sharing this information? - What specific types of information are not being shared between <u>organizations and families</u>, making it more difficult to address [targeted problems]? When does this happen? Which types of organizations are not sharing this information? - What specific types of service referrals are not being shared between organizations, making it more difficult to do good work and address [targeted problems]? When does this happen? Which types of organizations are not sharing these referrals? - What specific types of resources are not being shared between organizations, making it more difficult to do good work and address [targeted problems]? When does this happen? Which types of organizations are not sharing these resources?
<p>REGULATIONS</p> <ul style="list-style-type: none"> - Are there any formal or informal policies or procedures getting in the way of addressing [targeted problem]? Making it difficult for families to get the services they need? Making it difficult for providers to share information with each other? <ul style="list-style-type: none"> o <u>For each policy you list</u>, how is it getting in the way of addressing [targeted problem]? Where is it in place?

RESOURCES

- What skills or knowledge do professionals need, that they currently don't have, to better address [targeted problems]?
 - o Are there particular settings where these skills or knowledge are most needed?
- What skills or knowledge do families and community members need, that they currently don't have, to better address [targeted problem]?
- To what extent are families and professionals aware of all the available services and supports in the community, including eligibility rules? How is this affecting our community's ability to address [targeted problems]?
- Are we using all available community assets (e.g., skilled stakeholders, building space, technology, etc.) to address this problem? What assets are currently being ignored?
- To what extent are community resources (e.g., transportation, playgrounds, living wage jobs, etc.) equally distributed to all members of the community? How is this affecting the [targeted problem]?

POWER

- To what extent is power shared within the community? Are people or groups genuine in their inclusion of others in decision-making processes? How do these dynamics influence the community's ability to improve [targeted problem]?
- To what extent are there opportunities for families to give input on how to design local programs and efforts to meet their needs? Where are these opportunities located?
 - o Which of these opportunities are families NOT taking advantage of – and why?
 - o How accessible are these opportunities to all families? In what ways are they not accessible (e.g., times, location), and for which families?
- To what extent is family input used by local organizations to design their programs and efforts?
 - o To what extent do staff share family input with people in their organization who have the power to make changes?

EUP EARLY LEARNING COLLABORATIVE

Applying Child's Information (Applicant): Male Female (please check box that applies)
 Legal Name: _____ Date of Birth: _____ Place of Birth (city, state) _____
Last First M.I.
 Race/Ethnicity *Check all that apply:* Black White Asian Native American Pacific Islander Hispanic Other _____
 Home Address: _____ City: _____ Zip Code: _____ County: _____
 Mailing Address: _____ City: _____ Zip Code: _____ County: _____
 Phones: _____ Family Language: English Spanish Other _____
 Home Cell Home Cell Home Cell Do you require an Interpreter? Yes No
 Work Message Work Message Work Message
 Session Preference: AM PM All Day Any Note: We cannot guarantee the session you choose, but we will do our best.
 Does your child have a diagnosed disability? Yes No Type of Disability: _____ Does your child attend Early Childhood Special Education?: Yes No
 Does or has your child received services through Early On? Yes No Type of Service: _____ IEP or IFSP? Yes No If yes, please provide copy
 Do you suspect a disability or behavior problem? Yes No If yes, describe: _____
 Health Insurance? Yes No Medicaid? Yes No, If yes, number: _____ Does your child have health conditions or allergies? Yes No
 If yes, please describe: _____

Parent/Guardian Information:

<u>Name</u>	<u>Date of birth</u>	<u>Relationship to applicant</u>	<u>Live with applicant</u>	<u>Employed at least 25 hours per week</u>	<u>Attending School/college</u>	<u>Email Address</u>
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____

Is there a specific Custody/Parenting Time/Foster Care Order on file for your child that restricts parental rights? Yes No *If yes, please attach legal documentation*

Program of Choice (please rank 1st, 2nd, and 3rd choice for programs of interest):

FREE –OR- LOW COST PROGRAMS FOR ELIGIBLE CHILDREN	TUITION BASED PROGRAMS
Early Head Start - EHS (For children 0-3) _____ CLMCAA EHS _____ Sault Tribe EHS _____ Bay Mills EHS Head Start (For children 3 on or before October 1st) _____ CLMCAA Head Start _____ Sault Tribe Head Start _____ Bay Mills Head Start _____ Great Start Readiness Program (GSRP) (For children 4 on or before Oct. 1st) Site Location: _____ Transportation: Pick Up Address: _____ Drop Off Address: _____ <i>*Transportation may not be available in all areas.</i>	Private Preschool (For 3 and 4 year old children) _____ Soo Cooperative Nursery School _____ St. Mary's Catholic School _____ Little Lakers _____ Little Lambs – Immanuel Lutheran Childcare Centers _____ Sault Tribe Child Development Center _____ Bay Mills Child Development Center <i>*Transportation Not Available For Private Preschool</i>

I am interested in learning more about Becky Davis Early Learning Scholarship (Scholarship program for tuition based programs for children in need) Yes No

This application may be shared with all programs listed on cover page? <input type="checkbox"/> Yes <input type="checkbox"/> No If transportation is unavailable, are you willing to transport? <input type="checkbox"/> Yes <input type="checkbox"/> No	***** Complete both pages 1 and 2 before submitting application *****
---	--

*** Filling out this application does not mean your child is enrolled or is qualified for any program. The agencies involved will determine what program your child may be eligible for and will send your paperwork to the appropriate program. ***

Applying Child: _____ DOB: _____

Family Information – REQUIRED for Early Head Start, Head Start, and GSRP

in Household: _____ # of Children by Age: 0-3 _____ 4-5 _____
in Family: _____ # of Parents in household: _____

First & Last Name of Children in home	Date of Birth	Sex	Related To	How Related
		M F		
		M F		
		M F		
		M F		
		M F		
		M F		

Related to Codes:

B12=Both Parents A02= Second Adult A01=Primary Adult

How Related Codes:

NC=Natural Child F=Foster O=Other G=Grandchild N=Niece/Nephew

Below list family member income information

(THIS INCOME WILL BE VERIFIED AT ENROLLMENT-thru Tax forms, W-2's, etc.)

Name:	Amount Received:	Time Period:
_____	\$ _____	_____
_____	\$ _____	_____
_____	\$ _____	_____

Do you receive: FIP/DHS Cash Assistance? Yes No WIC? Yes No
Food Assistance Program (FAP)? Yes No

Do you or any household family member receive?

SSI (Supplemental Security Income): Yes No

Is your family currently homeless (i.e. living in a shelter, campground, church, with family members or friends, going through foreclosure)? Yes No

Other Confidential Information to Determine Eligibility Based on Need

Please complete only if applying for Head Start or GSRP Programs

Child's behavior prevented participation in other group settings: OR child was referred for counseling or behavioral evaluation Yes No

A parent or guardian cannot read (illiteracy) or has low educational attainment Yes No

English is not the primary language in the home Yes No

Child OR sibling has been abused or neglected OR family member OR someone in the home abuses alcohol, prescription medication, or non-prescription drugs Yes No

Child has chronic illness like asthma, allergies, frequent ear infections, OR lead poisoning; OR prenatal exposure to drugs, alcohol, or nicotine; OR lives in unsafe or crowded housing; OR unsafe neighborhood; OR lack of access to critical resources Yes No

Please explain: _____

Sibling has chronic illness, severe behavior problem, OR other issue that negatively affects the child/family Yes No

Loss of parent due to death, divorce/separation, incarceration, chronic illness, OR loss of sibling due to death; OR parent is a single parent; OR a grandparent is raising the child Yes No

Child has a parent with a long term absence for military service or employment Yes No

Please list any additional comments or concerns for consideration:

Your response is voluntary and the information provided about your child is confidential.

I certify that the above information on pages 1 and 2 is true and accurate. I understand that should verification determine that any part of the application is false, it may hinder the application process. I also understand that the information contained will be held in confidence and used to determine eligibility and program planning.

Applicant's Signature: _____ Date: _____

In accordance with Federal law and U.S. Department of Agriculture policy, this institution is prohibited from discriminating on the basis of race, color, national origin, sex, age, or disability. To file a complaint alleging discrimination, write USDA, Office of Adjudication, 1400 Independence Avenue, SW, Washington, D.C. 20250-9410 or call toll free (866) 632-9992 (Voice). Individuals who are hearing impaired or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (Spanish). USDA is an equal opportunity provider and employer.

Please mail or return this application to this address

EUP Intermediate School District
Attn: EUP Early Learning Collaborative
315 Armory Place, PO Box 883
Sault Ste. Marie, MI 49783
Phone: (906) 632-3373

For Staff use only: Distributed by: _____ Tracking # _____

Date Received in Data: _____

Appendix F: Great Start, Great Investment Great Future Report Summary

Executive Summary



Early childhood matters, and Michigan isn't doing enough to support young children.

Early childhood matters. Experts are able to quantify what parents and families already know. Children are learning from the moment they are born. Children's brains develop very quickly in their early years, and this development is not hardwired. It is dramatically affected by children's environment.

Michigan has numerous programs and services designed to set our youngest Michiganders on a path to success. Unfortunately, these programs and services are often uncoordinated, difficult to find, and all too frequently, they fail to serve children and families well.

In 2011, Governor Rick Snyder took bold steps by calling for an integrated, coordinated system of early learning and development in Michigan, and creating the Office of Great Start (OGS), located in the Michigan Department of Education (MDE). The creation of this office included a charge to lead efforts to coordinate and integrate Michigan's investments in children from before birth through age 8.

There are sound policy reasons for focusing public resources on Michigan's youngest children. Too many children arrive at kindergarten inadequately prepared, leading to greater future expenses in areas such as special education and grade repetition. Increasing public investment in younger children, particularly children whose families are unable to provide for some needs, offers an opportunity to leverage scarce public resources for great public good.

In order to realize Governor Snyder's vision of being one of the best states in the country to raise a child, OGS and its partners must implement a coordinated system and track progress toward the following 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.

This report reflects the voices of nearly 1,400 Michiganders.

In 2012, the Michigan Legislature required the Office of Great Start to create a comprehensive state plan for early learning and development. To meet this requirement, OGS has spent the past year engaging stakeholders across the state about ways to improve Michigan's early childhood system. Outreach included 48 interviews with policymakers, service providers, and advocates at the state and local levels; three focus groups with parents of young children; and nearly 1,300 online survey responses from early childhood educators, administrators, service providers, and parents and grandparents of young children.

What did Michiganders say? Some parts of the system are working well. There is an increasing awareness of the importance of early childhood. There are more efforts to coordinate, collaborate, and ensure program quality. And many participants mentioned specific programs that are working well for children and families. But there is work to be done. Parents need more information on early learning and development and more support in their role as their children's first teachers. And access to high-quality programs must be expanded. Certainly there are bright spots, but coordination, collaboration, and quality need to improve across the entire system.

Participants also offered advice on how to improve the system, and their ideas are woven throughout the vision and recommendations in this report. For example, many participants stressed the importance of parent voice in this effort, and the need for improved coordination among state, regional, and local service providers. They also urged the system to be keenly aware of local needs and allow for local flexibility in meeting outcomes when possible.

There are common principles that must guide every early childhood effort in Michigan.

In every conversation with stakeholders about early childhood, the values that people hold dear were evident. For

• The Plan for Early Learning and Development in Michigan •

Michigan's system-building effort to succeed, all partners must incorporate these principles into their work:

- Children and families are the highest priority.
- Parents and communities must have a voice in building and operating the system.
- The children with the greatest need must be served first.
- Invest early.
- Quality matters.
- Efficiencies must be identified and implemented.
- Opportunities to coordinate and collaborate must be identified and implemented.

OGS and its partners must focus on six high-leverage areas to improve opportunities and outcomes for Michigan's young children.

Redesigning a system that serves over one million children a year, invests \$9.4 billion annually, and includes 89 programs and services is a multi-year, multi-pronged effort. These recommendations outline a plan for achieving the four early childhood outcomes through a persistent focus on six high-leverage areas. By focusing on these high-impact areas, OGS and its partners will leverage resources for change in the most efficient manner possible.

1. Build Leadership within the System

- Ensure high-level administration commitment and accountability.
- Clarify the role of the Office of Great Start.
- Formalize early childhood leadership and collaboration among MDE, DCH, and DHS.
- Create an advisory body for OGS to ensure more meaningful state, local, and parent input.
- Identify and share best practices in local early childhood leadership, including exemplary Great Start Collaboratives (GSCs) and Parent Coalitions (GSPCs).

2. Support Parents' Critical Role in Their Children's Early Learning and Development

- Seek input from parents regarding their needs for information and parenting education, and strategies to increase parent involvement in their children's early learning and development.
- Strengthen a network for disseminating information to parents and families of young children.
- Expand and coordinate strategies to reach and connect with eligible families and children.

- Provide training and technical assistance on effective approaches for parenting education and strategies to increase parent involvement.

3. Assure Quality and Accountability

- Develop measures of system and program effectiveness tied to the four early childhood outcomes.
- Develop a coordinated early childhood data system.
- Support continuous quality improvement through training and technical assistance.
- Enforce program effectiveness measures.
- Require transparency.
- Disseminate information to parents and families.
- Use data to direct investments.
- Ensure early childhood service provider quality.

4. Ensure Coordination and Collaboration

- Foster system coordination and collaboration.
- Demonstrate collaboration by example.
- Promote local collaboration.
- Promote local flexibility.

5. Use Funding Efficiently to Maximize Impact

- Fund quality.
- Focus first on children with highest needs.
- Support common priorities through collaborative funding strategies.
- Blend and braid funding.
- Engage philanthropic partners.

6. Expand Access to Quality Programs

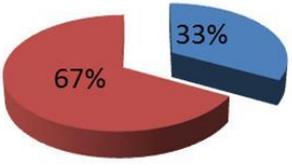
- Expand and enhance GSRP.
- Improve coordination between GSRP and Head Start.
- Increase access to developmental screening and early intervention.
- Increase access to and capacity of Early On[®].
- Increase access to evidence-based mental health promotion, prevention, and intervention services.
- Redesign the child care subsidy to ensure access to high-quality providers.
- Increase access to home visiting programs.
- Expand evidence-based medical home initiatives.
- Expand access to Pathways to Potential.
- Improve access to transportation.

Appendix G: EUP Great Start, Great Investment, Great Future Report- Summary



Eastern Upper Peninsula 2014 Family Survey Results

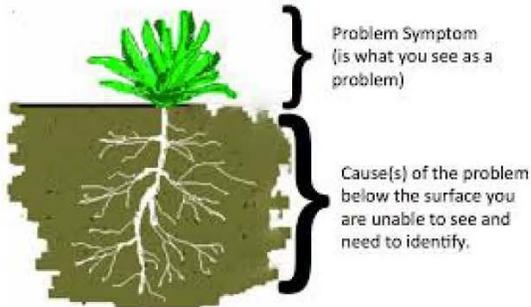
Total Respondents: 12 Eastern Upper Peninsula Residents from Early Intervention Services

Safety	Nutrition	Transportation				
<p>How do respondents feel in their neighborhoods?</p> <ul style="list-style-type: none"> 50% Very Safe 25% Safe 17% Somewhat or not safe at all 8% did not answer 	 <p>50%</p> <p>Of respondents eat fruits or veggies 2-4 times per week.</p> 	 <p>25%</p> <p>Of respondents can <i>not</i> get where they need due to unavailable transportation</p>				
<p>★ Child Care</p>  <p>Only 33%</p> <p>★</p> <p>Feel their child care needs are <i>not</i> met</p> <p><u>Identified Barrier:</u> High cost for families with multiple children</p>	<p>Pregnant Mothers</p> <p>88%</p>  <p>Utilized prenatal care</p>	<p>Services & Supports</p> <p>42%</p> <p>Have had something get in the way of getting services or supports they need</p>				
<p>Survey Demographics</p> <table border="0"> <tr> <td> <p>Annual Income:</p> <ul style="list-style-type: none"> Less than 10,000 – 16% 10,000-24,999 – 33% 25,000-39,999- 16% 80,000 or more – 16% Did not respond- 16% </td> <td> <p>Race:</p> <ul style="list-style-type: none"> White 64% Native American 43% Married 58% </td> </tr> </table>			<p>Annual Income:</p> <ul style="list-style-type: none"> Less than 10,000 – 16% 10,000-24,999 – 33% 25,000-39,999- 16% 80,000 or more – 16% Did not respond- 16% 	<p>Race:</p> <ul style="list-style-type: none"> White 64% Native American 43% Married 58% 		
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<p>School Readiness</p> <table border="0"> <tr> <td>  <p>100%</p> <p>Believe that children need to go to preschool to be ready for kindergarten</p> </td> <td> <p>92%</p> <p>Believe that parents play an important role in getting their kids ready for school</p> </td> <td> <p>14%</p> <p>Read to their child ages 2-5 years old every day.</p> </td> <td>  </td> </tr> </table>			 <p>100%</p> <p>Believe that children need to go to preschool to be ready for kindergarten</p>	<p>92%</p> <p>Believe that parents play an important role in getting their kids ready for school</p>	<p>14%</p> <p>Read to their child ages 2-5 years old every day.</p>	
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Information contained in this survey is based on responses received from parents receiving home-based early intervention services through the Early On program. Parents responding to this survey were not a part of Root Cause or System Scan Meetings conducted by the EUP Great Start Collaborative.

Appendix H: EUP Root Cause Summary

2014 Root Cause Data



We will create system change that supports:

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

The EUP Great Start Collaborative (EUPGSC) analyzed the programs and services that support young children and families in the region, otherwise known as, the early childhood system.

The EUPGSC prioritized several identified gaps in the local early childhood system that impact the four outcomes determined by the Office of Great Start.

These prioritized gaps were then analyzed by the GSC board members through an approach called Root Cause Analysis.

Root Cause Analysis analyzes why, deep down, these gaps exist. We know from research if we dig deep enough and correct the problem at its root cause we will be more likely to create system improvement.

The following are identified and prioritized gaps that were found.

- Parenting education, services, and resources are not utilized by all families
- Limited resources and supports for families and providers leave them with the inability to support children's well-being with a specific emphasis on social/emotional development
- Lack of coordination efforts between parents, Pre-K, K-12 schools, medical, and community organizations resulting in confusion and unaligned expectations
- Literacy intervention programs and supports are not accessible in all schools and communities within the region

The root causes impacting the prioritized needs are listed below.

Prioritized Needs	Associated Root Cause
<p>Parenting education, services, and resources are not utilized by <i>all</i> families</p>	<ul style="list-style-type: none"> • Some parents that experience parenting education services do not feel their parenting skills need improvement and often chose not to consistently implement the learned techniques • All programing is not inclusive of fathers and mothers equally, creating a participation barrier • Many community agencies, including medical providers, find it hard to keep up with the availability or eligibility requirements of programs and therefore do not make needed referrals • A lack of awareness or understanding of resources by families and community members, results in limited participation in some programs.
<p>Limited resources and supports for families and providers leave them with the inability to support children's well-being with a specific emphasis on social/emotional development</p>	<ul style="list-style-type: none"> • Some parents do not have the resources or knowledge to support their child's behavioral needs • Child well-being information is not provided to pregnant mothers when they are initially pregnant, leaving a lapse in time without proper prenatal education for expectant parents • There is not a common process for sharing and updating available resources or information among agencies • Child care providers and foster parents lack resources to support children's social/emotional development • Some parents don't understand or prioritize the value of supporting their own or their child's social/emotional health • Eligibility requirements are restrictive for certain programs, leaving ineligible families with limited alternatives

<p>Early childhood program and services are not accessible to all families in the EUP region</p>	<ul style="list-style-type: none"> • Eligibility guidelines prevents some children from attending preschool • High quality private preschool opportunities are not available throughout the tri-county region and are not always offered at times and locations that work for families • Some parents that reside in remote areas are choosing not to participate in early childhood services because of the travel distance and transportation costs
<p>Lack of coordination efforts between parents, Pre-K, K-12 schools, medical, and community organizations resulting in confusion and unaligned expectations</p>	<ul style="list-style-type: none"> • Parents, schools, and communities have unaligned definitions and expectations of school readiness, resulting in children not being prepared and ready to succeed at the time of school entry. • Parent leadership is not always promoted in the education setting after Pre-K • Preschool curriculum and standards are unaligned • Preschool transition processes are unaligned and are not inclusive of children in child care and not in a Pre-K program • Many Pre-K and kindergarten programs do not coordinate services or communicate children/family needs with community agencies or medical providers • Communication between educators and parents is lacking regarding ways to support children’s learning outside of school
<p>Literacy intervention programs and supports are not accessible in all schools and communities within the region</p>	<ul style="list-style-type: none"> • Some parents have a lack of understanding of how to promote literacy skills and learning with young children. • Decreased funding to schools impacts the ability to provide intervention programs and services, such as Reading Recovery • When Dolly Parton Imagination Library ends at age 5, there is a lack of understanding of how to access literacy programs or supports for older children