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06-19-2014 CCHS Attachment 1

AGENDA ITEM: Meeting Minutes

BACKGROUND: Meeting minutes of the April 17, 2014 Regular Meeting are included for review and possible approval.

RECOMMENDATION: The Regional Director recommends review and approval of the April 17, 2014 Regular Meeting Minutes.

DRAFT



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06-19-2014 CCHS Attachment 1

Arizona Early Childhood Development & Health Board Cochise Regional Partnership Council

Meeting Minutes April 17, 2014

Call to Order/Pledge of Allegiance/Introductions

The Regular Meeting of the First Things First Cochise Regional Partnership Council was held on Thursday, April 17, 2014, at the Clyde's Room Murr Community Center, Building 51301 Cushing Street, Fort Huachuca, Arizona, 85613.

Council Members Present:

Danielle Brownrigg, Marge Dailey, Chuck Hoyack, Dr. Stephen Poling, Melanie Rottweiler, Pastor Tommy Simpson, Jane Strain, and Kathleen Vedock (arrived at 1:18p.m.)

Council Members Absent: Rev. Shawn Buckhanan, Nancy-Jean Welker and Michael Vetter

Chair Rottweiler welcomed everyone, and called the meeting to order at approximately 1:10 p.m. Chair Rottweiler did not lead the Regional Council Members and those present in the Pledge of Allegiance because no flag was present.

Chair Rottweiler introduced members of the public.

Declarations of Conflicts of Interest

Chair Rottweiler explained to the Regional Council Members that they could declare their Conflicts of Interests at this time or wait until the specified agenda item. No conflicts were declared.

Call to the Public

Chair Rottweiler made a Call to the Public. There were no Calls to Public at this time.

Discussion and Possible Approval of Minutes

Chair Rottweiler asked the Regional Council Members for a discussion and possible approval of the February 20, 2014 Regular Meeting minutes.

A motion was made by Member Simpson to approve the February 20, 2014 Regular Meeting Minutes; seconded by Member Hoyack. Motion carried (7-0-0).

Discussion and Possible Approval of Communications Budget

Community Awareness Line Items for SFY 2015

Chair Rottweiler recognized Melissa Avant, Regional Director who gave a brief overview of the Community Awareness Budget information provided in the Regional Council members packets.

Vice Chair Poling arrived in person and ceases phone attendance at 1:17p.m.



FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 1

Member Vedock arrived at 1:18p.m.

A brief discussion between Ms. Avant and the Regional Council Members regarding the ordering of children's reading books and the First Things First Resource Guide occurred.

Chair Rottweiler asked the Regional Council members for a discussion and possible approval of the communications budget as presented.

A motion was made by Member Dailey to approve the communications budget as presented; seconded by Member Simpson. Motion carried (8-0-0).

Discussion and Possible Approval of Grantee

Renewal Home Visitation for SFY 2015

Chair Rottweiler recognized Ms. Avant who introduced Marjorie Bennett, Fiscal Specialist First Things First. Ms. Avant gave a brief overview of the Home Visitation grantee data reports and asked Ms. Bennett to speak briefly about the clarifications. A discussion between the Regional Council members and the Grantee, Charlotte Taylor, Easter Seals Blake Foundation representative regarding the grant renewal occurred.

Chair Rottweiler asked the Regional Council Members for a discussion and possible approval of the Grantee Renewal #GRA-RC002-13-0385-03-Y2 to Easter Seals Blake Foundation in the amount of \$600,000 for SFY2015.

A motion was made by Member Hoyack to approve the Grantee Renewal #GRA-RC002-13-0385-03-Y2 to Easter Seals Blake Foundation in the amount of \$600,000 for SFY2015; seconded by Member Dailey. Motion carried (8-0-0).

Discussion and Possible Approval of Grantee

Renewal Oral Health for SFY 2015

Chair Rottweiler recognized Ms. Avant who gave an overview of the Oral Health grantee data reports. A discussion facilitated by Ms. Avant with the Regional Council members regarding a ten percent increase in funding for Oral Health occurred. Ms. Avant read the Oral Health Clarification questions aloud to the Regional Council Members.

Chair Rottweiler asked the Regional Council Members for a discussion and possible approval of the Grantee Renewal #GRA-RC002-14-0619-01-Y1 to U of A Cooperative Extension in the amount of \$209,000 for SFY2015.

A motion was made by Member Hoyack to approve the Grantee Renewal #GRA-RC002-14-0619-01-Y1 to U of A Cooperative Extension in the amount of \$209,000 for SFY2015; seconded by Member Dailey. Motion carried (6-2-0).



FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 1

Discussion and Approval of Public Vetted Benchmarks

Chair Rottweiler recognized Ms. Avant who gave a brief overview the public vetted benchmarks. A brief discussion facilitated by Ms. Avant with the Regional Council members regarding the process of public vetting occurred.

Chair Rottweiler asked the Regional Council Members for a discussion and possible approval of the regional benchmarks set for Indicators 2, 3 and 4 for State Board Consideration.

A motion was made by Vice Chair Poling to approve the regional benchmarks set for Indicators 2, 3 and 4 for State Board Consideration; seconded by Member Vedock. Motion carried (8-0-0).

Discussion and Presentation of Military Programs

Chair Rottweiler recognized Audrey Peterson-Hosto, Army Community Services, Fort Huachuca and Lois R. Sagmoe, Army Community Services, Fort Huachuca who gave a presentation about the Fort Huachuca Army Exceptional Family Member Program. Chair Rottweiler recognized public member Tom Reardon, Sierra Vista City Council Member who had a question regarding the presentation. A discussion between Ms. Peterson-Hosto, Ms. Sagmoe, Mr. Reardon and the Regional Council members regarding possible ways to partner or work together occurred.

Discussion and Presentation of the Online Developmental Screening Tool

Chair Rottweiler recognized Hazel Chandler, Gila Regional Director, First Things First and Aimee Kempton, Pinal Regional Director, First Things First who gave a presentation on the Online Developmental Screening Tool to the Regional Council members. A brief discussion occurred between Ms. Chandler, Ms. Kempton, and the Regional Council members.

Regional Director's Report

Chair Rottweiler recognized Ms. Avant who gave a brief overview on the following topics: The Regional Expenditure Report, the Finance Committee Update regarding the Sustaining Arizona's Commitment to Young Kids handout. Ms. Avant recognized Cindi Alva, Senior Director who provided information about the sustainability plan for First Things First.

Ms. Avant informed the Regional Council members the First Things First 2014 Summit will take place on August 18 and 19, 2014 at the Phoenix Convention Center.

Ms. Avant provided an update on the Regional Council Recruitment for the region. Ms. Avant reminded the Regional Council members the Regional Presentations to the State Board will be held on April 22, 2014 in Safford, Arizona.

Ms. Avant thanked Member Strain, Mr. Joel Spurlock, and Sarah Furnas, Cochise Regional Council Administrative Assistant II for working at the Month of the Military Child Booth and the Easter Eggstravaganza Booth. Ms. Avant presented a painting that was made for the First Things First Regional



FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 1

Council Members by the Easter Seals Blake Foundation for sponsoring the Committee for the Prevention of Child Abuse conference.

General Discussion

Member Simpson – mentioned that he hopes everyone has a wonderful resurrection weekend.

Member Strain – mentioned that she is a member of the Communications and Government Advocacy Committee and that she will be attending a meeting Thursday April 24, 2014. Member Strain mentioned that she will be asking about the Kindergarten Developmental Inventory at the meeting.

Member Hoyack – mentioned that the Developmental Screening Tool presentation was important, that he wishes something like it was in place when his son was younger and that he hopes it becomes a First Things First priority. Member Hoyack congratulated Vice Chair Poling for his goal to run in the Boston Marathon.

Vice Chair Poling – mentioned that he would be leaving on Monday April 21, 2014 to run in the Boston Marathon and that he was excited. Vice Chair Poling shared that he attended the Easter Eggstravaganza, that it was a very well ran event, that he thought it was a good investment for the First Things First council to sponsor and that the First Things First booth was very popular.

Chair Rottweiler – informed the Regional Council that the Chair and Vice Chair meeting is being held on May 1, 2014 and that neither Chair nor Vice Chair will be able to attend. Chair Rottweiler asked the Regional Council Members if any of them would like to go in there places and if so to let Ms. Avant know. Chair Rottweiler mentioned an email from Ms. Avant which included a link to a wonderful digital library and that everyone should check it out.

Announcements

Chair Rottweiler announced cancellation of the May 15, 2014 meeting. The next Regular Meeting will be held June 19, 2014, in Bisbee, Arizona. The Regional Presentation to State Board will be held April 22, 2014, in Safford, Arizona from 11am to 1pm.

Adjournment

With no further business before the Regional Council, Chair Rottweiler adjourned the meeting at 3:14 p.m.

Dated this _____ day of _____, 20_____.

Submitted By: Sarah Furnas
Administrative Assistant II

Approved By: _____
Chair, Melanie Rottweiler



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Ready for School. Set for Life.

06-19-2014 CCHS Attachment 2

AGENDA ITEM: Sponsorships

BACKGROUND: Within the Communication budget the Regional Council has allocated \$41,000 dollars for Community Awareness. The purpose of this budget is to set aside small funding allocations for educational reinforcement materials, scholastic books, event participation and event sponsorships. The Cochise Budget for SFY2015 is yet to be approved by the CEO.

RECOMMENDATION: The Regional Director recommends approval of the requested sponsorship in the amount of \$1,600 for the Sierra Vista Back To School Fair in July 2014.



FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 2



May 5, 2014

Melissa Avant, MPA
First Things First
Cochise Regional Partnership Council

Ms. Avant,

Thank you for previously supporting the Sierra Vista community Back To School Fair (BTSF), I would like to request the support of the Council and "First Things First" as the presenting sponsor again for this year's 2014 event to be held Saturday, July 12 from 10 a.m. – 12 Noon at the Mall at Sierra Vista.

The Sponsorship request is for \$1,600. Radio advertising through Cherry Creek Radio (CCR) leading up to the event would recognize First Things First (FTF) support and a representative would also have opportunity to share your message and invite families down to the event via the "Community Connections" live radio show preceding the event. FTF would also be recognized on event flyers and other promotional opportunities as well.

2014 will mark the 18th year for the Back To School Fair. The event is organized by the City of Sierra Vista Leisure & Library Services, the Committee for the Prevention of Child Abuse and the University of Arizona Sierra Vista/University South Foundation. It serves as a community resource fair for "Learners of All Ages" for education opportunities, family services and community outreach programs. Since its inception, the BTSF has grown from a small specialty event into a full-blown community happening. Last year's event attracted an estimated crowd of 5,000 people! Families participating fit largely into the FTF demographic with children 0-5 years, their siblings, and extend families in attendance. With your support, we can make sure this extensive community out-reach continues.

Staff from First Things First have attended and experienced first-hand the extensive community-wide exposure the BTSF brings and how well it serves the community. I look forward to working with you again in a sponsorship role to make this year's event the most successful ever!

Sincerely,

Ken James, CPRP
Recreation Supervisor
2014 BTSF Event Coordinator
City of Sierra Vista Recreation Supervisor



Leisure & Library Services



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06-19-2014 CCHS Attachment 4

AGENDA ITEM: Early Learning Update

BACKGROUND: The Program staff periodically present information about strategies, including updates about strategy changes. The Senior Director for Early Learning will provide information about Quality First Scholarships, Teacher Scholarships, and the Professional Development System.

RECOMMENDATION: The Regional Director provides this as informational purposes only.



FIRST THINGS FIRST

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06-19-2014 CCHS Attachment 4

First Things First Quality First Child Care Scholarships Waiver Procedure

A waiver to the Standards of Practice or Scope of Work for Quality First Child Care Scholarships may be considered and granted for awarding Quality First Child Care scholarships to 1 star programs in FY15 and/or 1-2 star programs in FY16 and future Fiscal Years. A Regional Council must demonstrate the financial ability to support the waiver (additional scholarship funding must be allocated). Waivers are valid for one (1) fiscal year. A new Waiver Request must be submitted for each year should the Regional Council determine that a waiver is necessary in subsequent years.

Regional Council Considerations for funding the waiver:

A strong rationale exists for continuing to fund scholarships for families in 1 star programs in FY15 and/or 1-2 star programs in FY16 and beyond. For example a reduction of scholarships to programs falling in this level of quality means no access to regulated child care in a region because there are no 2 star or higher programs in FY15 or 3 – 5 star providers in FY16.

Procedures:

- The Regional Council identifies a need for additional scholarships and directs the Regional Director to proceed with gathering additional data to determine if a waiver is needed. A waiver may only be requested and approved during funding plan development. The following questions will assist in determining if a waiver is needed. Your council may collect data and have discussion that includes other questions that are important to understand in determining if a waiver is necessary.
 - How many children would you like to serve with scholarships in your region?
 - What is the percentage of 3-5 star providers in your region compared to the total number of providers in your region?
 - Where are the 3-5 star providers located in your region? Are they all in one area or spread around to provide access to scholarships in many areas of the region?
 - What is the capacity of the 3-5 star providers in your region (are they mostly homes or large centers)? How many children can the 3-5 star providers serve? Do they have the capacity to take on more scholarships? What is the current scholarship usage of 3-5 star providers in your region? If 3-5 star providers are not currently using the available scholarships, why are they not using the scholarships (i.e. Head Start programs, program is at capacity, etc...)?
- Regional Director analyzes the need of scholarships in the region and looks at the current data for scholarship use in the region. The Regional Director provides the rationale for funding a



FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 4

waiver based on the considerations above. The Regional Director will want to connect with program and finance staff as necessary to gather the information needed for their rationale

- The Regional Director discusses the waiver request rationale with their Senior Director.
- If the Senior Director agrees with the rationale the Senior Director will discuss the waiver request with the Chief Regional Officer. All discussions should take place before October 1st to align with funding planning.
- If the Chief Regional Officer agrees with the rationale for the waiver request the Regional Director may take the waiver request rationale to their regional council for approval. Should the Chief Regional Officer not agree or have questions regarding the waiver further discussion will occur with the regional staff.
- Once the regional council has approved the waiver request, the rationale must be included in the region's operational notes and attached to the region's funding plan.
- All waiver requests should be approved by the regional council as part of the funding plan for each Fiscal Year.

Resources:

- The Quality First Public Rating report indicates the programs that have a public star rating by region. This report can be used to understand data related to the option above.
- The Quality First Enrolled report indicates the program size. In conjunction with the Quality First Public Rating report, the base number of Quality First Child Care Scholarships can be determined to understand what the base scholarship number would be for providers. This information is important to understand if a waiver is necessary for the option above.
- The regional Needs and Assets Report provides demographic information related to number of children and demand and capacity for childcare. This report can be useful in determining if there is an unmet need for early care and education.



FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 4

AGENDA ITEM: Grantee Year End Reports

BACKGROUND: This is an opportunity for the Council to hear directly from the grantees on FTF funded programs within Cochise County.

RECOMMENDATION: The Regional Director provides this as informational purposes only.



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06-19-2014 CCHS Attachment 4









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06-19-2014 CCHS Attachment 4

GROWTH AND CHANGE THROUGH SELF REFLECTION



"I've learned about myself as a Director that I need to know what best practice (in ECE) is and...that I can do it!" - Vickie Mendoza

GROWTH AND CHANGE THROUGH CHALLENGES



GROWTH AND CHANGE THROUGH PARTNERSHIPS

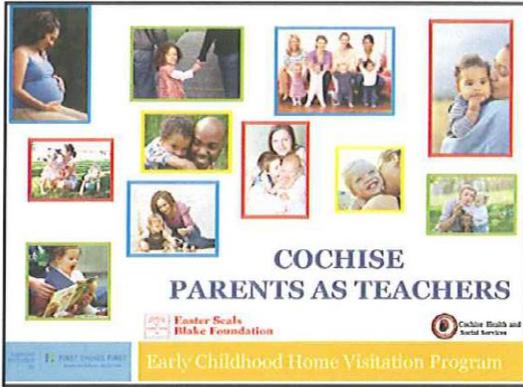




FIRST THINGS FIRST

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06-19-2014 CCHS Attachment 4




Parents as Teachers
Advancing

VISION

- All children will learn, grow, and develop to realize their full potential.

MISSION

- To provide the information, support, and encouragement parents need to help their children develop optimally during the crucial early years of life.

Core Values

- Parents are their children's first and most influential teachers.
- The early years of a child's life are critical for optimal development and provide the foundation for success in school and life.
- Established and emerging research should be the foundation of parent education and family support curricula, training, materials, and services.
- All young children and their families deserve the same opportunities to succeed, regardless of any demographic, geographic, or economic considerations.
- An understanding and appreciation of the history and traditions of diverse cultures is essential in servicing families.

PAT Outcomes

- **Short-Term**
 - Increase in healthy pregnancies and improved birth outcomes (when services are delivered prenatally)
 - Increase in parents' knowledge of their child's emerging development and age-appropriate child development
 - Improved parenting capacity, parenting practices, and parent-child relationships
 - Improved family health and functioning
- **Intermediate:**
 - Improved child health and development
 - Prevention of child abuse and neglect
 - Increased school readiness
 - Increased parent involvement in children's care and education
- **Long-Term:**
 - Strong communities, thriving families, and children who are healthy, safe, and ready to learn.



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06-19-2014 CCHS Attachment 4

Program Approach

Certified Parent Educators :

- Share research based information and utilize evidence-based practices
- Partner, facilitate, and reflect with families
- Use the curriculum in a culturally sensitive manner

Program Component #1

Personal Home Visits

- Focus on parent-child interactions, development-centered parenting, and family well-being.
- Parent Educators use foundational visit plans and planning guide from the curriculum to design and deliver personal visits to families.
- PAT Curriculum:
 - Born to Learn Birth-3
 - Born to Learn 3-Kindergarten
 - Teen Parents
 - Children with Special Needs
- Families with one or fewer high-needs characteristics receive at least 12 personal visits annually.
- Families with two or more high-needs characteristics receive at least 24 personal visits annually.



Personal Visit Planning Guide



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06-19-2014 CCHS Attachment 4

Health Record

HEALTH HISTORY

Health history (cont.)

Has your child had the emergency room? If yes, please explain. Please give number of
visits (date)

Initial: _____
 Second: _____
 Third: _____

Does your child have medication regularly? If yes, what medication? Initial: _____

Initial: _____
 Second: _____
 Third: _____

Is your child covered by a health insurance plan? If yes, please describe. Initial: _____

Initial: _____
 Second: _____
 Third: _____

Does your child go to see a doctor for regular medical check-ups and sick visits? If yes, when? Initial: _____

Initial: _____
 Second: _____
 Third: _____

What was the last time your child received tetanus shot? Initial: _____

Initial: _____
 Second: _____
 Third: _____

As your child's immunization records up to date? Initial: Y/N Second: Y/N Third: Y/N

Has your child had a health care provider within opening hours? Initial: _____

Initial: Y/N Second: Y/N Third: Y/N

According to your health care provider, are your child's teeth at a target CDT? If there has been sudden jumps or drops, please explain. Initial: _____

Initial: _____
 Second: _____
 Third: _____

Has your child been screened for asthma? If yes, please describe the results. Initial: _____

Initial: Y/N Second: Y/N Third: Y/N

Health Record

HEALTH HISTORY

Safety review

Has your child been screened for lead levels? If yes, please describe the results. Please give number of
visits (date)

Initial: _____
 Second: Y/N
 Third: Y/N

Does your child sit in a car seat or stroller according to the seat label? Initial: Y/N Second: Y/N Third: Y/N

Has your child ever had a fall? If yes, please describe. Initial: Y/N Second: Y/N Third: Y/N

Does your child have a helmet or safety seat? Initial: Y/N Second: Y/N Third: Y/N

Initial: Y/N Second: Y/N Third: Y/N

Is your child covered by a second hand smoke ban? If yes, please describe. Initial: Y/N Second: Y/N Third: Y/N

Initial: Y/N Second: Y/N Third: Y/N

Is your child exposed to second hand smoke sometimes? If yes, please describe. Initial: Y/N Second: Y/N Third: Y/N

Initial: Y/N Second: Y/N Third: Y/N

Has your child been screened for exposure to second hand smoke? Initial: Y/N Second: Y/N Third: Y/N

Initial: Y/N Second: Y/N Third: Y/N

Dental review

Has your child been screened for dental issues? Initial: Y/N Second: Y/N Third: Y/N

Initial: Y/N Second: Y/N Third: Y/N

Does your child have a dental sealant? Initial: Y/N Second: Y/N Third: Y/N

Initial: Y/N Second: Y/N Third: Y/N

Has your child been screened for dental issues? Initial: Y/N Second: Y/N Third: Y/N

Initial: Y/N Second: Y/N Third: Y/N

Does your child have a dental sealant? Initial: Y/N Second: Y/N Third: Y/N

Initial: Y/N Second: Y/N Third: Y/N

Health Record

HEALTH HISTORY

Heating review

Has your child been screened for hearing? Please give number of
visits (date)

Initial: _____
 Second: _____
 Third: _____

Does your child have a hearing screening? If yes, when were the results? Initial: _____

Initial: Y/N Second: Y/N Third: Y/N

Has your child had an infection? If yes, how many times per year and what was the treatment? Initial: _____

Initial: Y/N Second: Y/N Third: Y/N

Has your child's hearing been screened by a healthcare provider? What were the results? Initial: _____

Initial: Y/N Second: Y/N Third: Y/N

Has your child had an audiology exam? Initial: _____

Initial: Y/N Second: Y/N Third: Y/N

Has your child had an audiology exam? Initial: _____

Initial: Y/N Second: Y/N Third: Y/N

Has your child had an audiology exam? Initial: _____

Initial: Y/N Second: Y/N Third: Y/N

Has your child had an audiology exam? Initial: _____

Initial: Y/N Second: Y/N Third: Y/N



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06-19-2014 CCHS Attachment 4

Group Connection Planning

Parents Involved in Children's Education (P.I.C.E.)

GROUP CONNECTION
planning guide and record

1. Parent(s) Name(s) _____
 2. Family Address _____
 3. Group(s) _____
 4. Parent(s) Title(s) _____
 5. Parent(s) Phone Number(s) _____
 6. Parent(s) Email Address(es) _____
 7. Parent(s) Occupation(s) _____
 8. Parent(s) Education Level _____
 9. Parent(s) Ethnicity _____
 10. Parent(s) Religion _____
 11. Parent(s) Other Information _____

Activities, presentations, discussions or events

Areas of emphasis (check all that apply):
 Parent-child interaction De-stigmatized parenting Family well-being
 State: What are we focus on in this group connection?

Topics and key points from parent educator resources and other sources:

Purpose(s) and questions for sharing observations, questions, or reactions:

Learning activities (check additional sheets as needed):

Group Connection Planning

Parents Involved in Children's Education (P.I.C.E.)

GROUP CONNECTION
planning guide and record

Facilitator strategies (check additional staffing needs):

Materials and supplies:

Parent feedback:

Documentation and evaluation:

Number of families attending: _____
 * Total # of staff: _____ * Parent(s) involvement: _____ * Community resource: _____
 * Number of parents: _____ * Number of children: _____

Budget estimate or source (where required):

Opportunities for feedback from participants and processes, including surveys:

Notes for follow-up:

Other program considerations:

List of Recent Group Connection Topics

- Emergent Literacy
- Car Seat Safety
- Sensory Exploration
- Parenting Challenges in Early Childhood
- Infant Massage
- Health and Safety Fair
- Summer Safety
- Library Exploration/Book Character Parade
- Nutrition
- Holiday Celebration/Traditions
- Dental Health



FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 4

Group Connection Planning Record

GROUP CONNECTION
planning guide and record

Activities, presentations, discussions, or events

Area of emphasis (check all that apply)
 Parent and educator Educator content partner Family well-being

Intent: What will we focus on in this group connection?

Topics and key points from parent educator resources and other sources

Principles and questions for sharing observations, questions, or reactions

Learning activities (attach additional sheets as needed)

Group Connection Planning Record

Facilitation strategies (note additional staffing needs)

Materials and supplies

Parent handbook

Documentation and evaluation

Number of families attending

Number of groups (if applicable)

Budget (attach if applicable please explain)

Opportunities for feedback (from participants and observers, including surveys)

Notes for follow-up

Other program considerations

Program Component #4

Resource Network

- › Parent Educators develop effective collaborations with community agencies.
- › Family needs are assessed using a variety of methods.
- › Referrals and connections are made to offer concrete support in times of need.





FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 4

Connections and Recommendations Tracking Tool

Family name	Day of week	Estimated date	Day of week				
<input type="checkbox"/> Basic assessment <input type="checkbox"/> Education and employment <input type="checkbox"/> Physical health <input type="checkbox"/> Mental health and substance <input type="checkbox"/> Child care <input type="checkbox"/> Other							Participation needs assessed <input type="checkbox"/> Yes <input type="checkbox"/> No Notes:
<input type="checkbox"/> Basic assessment <input type="checkbox"/> Education and employment <input type="checkbox"/> Physical health <input type="checkbox"/> Mental health and substance <input type="checkbox"/> Child care <input type="checkbox"/> Other							Participation needs assessed <input type="checkbox"/> Yes <input type="checkbox"/> No Notes:
<input type="checkbox"/> Basic assessment <input type="checkbox"/> Education and employment <input type="checkbox"/> Physical health <input type="checkbox"/> Mental health and substance <input type="checkbox"/> Child care <input type="checkbox"/> Other							Participation needs assessed <input type="checkbox"/> Yes <input type="checkbox"/> No Notes:

Additional Assessments and Data Collection Reports

- » High Needs Indicator Report
- » Exit Summary/Retention Rate
 - High number of Unable to Locate/Contact due in part to activating families too quickly and transitioning families when workers leave the program
- » Screening Log
- » Protective Factors Survey and Report
- » KIPS and Report
- » Parent Satisfaction Survey Results

Challenges

- » Distance between communities
- » Diverse communities
- » Access to families in smaller communities
- » Stigma around home visitation and distrust of service providers in some areas
- » Large number of referrals in some areas of Cochise County and limited referrals in other areas
- » Transient population in some communities



FIRST THINGS FIRST

Ready for School. Set for Life.

06-19-2014 CCHS Attachment 4

Accomplishments

- › Partnering with libraries to host story hours
- › Incentives for recruitment and retention (Refer-a-friend and door prizes at Group Connections)
- › Facebook Page
- › Partnering with other home visitation programs to receive referrals for families that do not meet their eligibility requirements
- › Increased training opportunities through our involvement with local home visitation collaboration
- › Positive feedback from families
- › Strong collaboration with many other service providers to send and receive referrals

Parent Feedback

- › I look forward to her visits and the activities she brings. I have used several of her tips and activities with my child. She's a wonderful Parent Educator!
- › She is awesome! Always shows up on time and has a very fun and happy personality. I feel like I can ask her anything and she always gives me helpful tips.
- › Being new to the area was stressful and I felt I did not have much support. My Parent Educator has been a lifesaver! I feel more confident as a parent and less alone. Thank you!!!!
- › I was struggling to understand my son's behaviors. My Parent Educator really listened and helped me through some difficult times by providing information and activities I could do at home. I was also able to get additional services with her assistance. I will always be grateful.
- › My Parent Educator helped to involve my husband more. We are both able to help our kids reach their full potential. Everyday objects and moments have become opportunities to play and learn. I love my Parent Educator!
- › I hope CPAT stays around a long time because I plan to have more children!

Community Feedback

- › I want to share information about CPAT with everyone I know because it is so useful and beneficial.
- › I like making referrals to CPAT because the response to families is so fast.
- › We really enjoyed the last program presentation and want you to come back to present again in the very near future.
- › I love that you are able to have shared visits with other professionals when necessary.
- › CPAT provides an essential, much needed service in our community.
- › I had no idea there was a program that covered so many different areas for children and families...CPAT does it all!
- › The CPAT staff are so enthusiastic and engaged!



FIRST THINGS FIRST

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06-19-2014 CCHS Attachment 4

University of Arizona Cooperative Extension

Link to presentation:

<http://youtu.be/GOLB57zWDZU>

First Smiles

Expand the Reach of Early Childhood Tooth Decay Prevention

For more information on this program contact the First Smiles Team

Joyce Flieger
jflieger@email.arizona.edu

Wendy West
wwest@email.arizona.edu

Or call
520-458-8278
Ext. 2211

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Cochise Regional Partnership Council

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First Things First (FTF), approved by Arizona voters, exists to ensure that our youngest children have access to quality childcare experiences so they will enter school healthy and ready to succeed. About First Things First: A state's most important developmental years are those leading up to kindergarten. First Things First partners with Arizona parents and communities to help kids live and prosper: receive the very education, quality healthcare and family support they need to start school healthy and ready to succeed.

For more information, visit www.ftf1st.org

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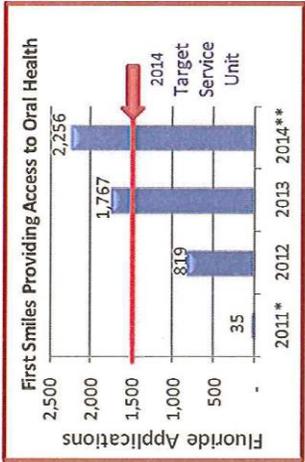
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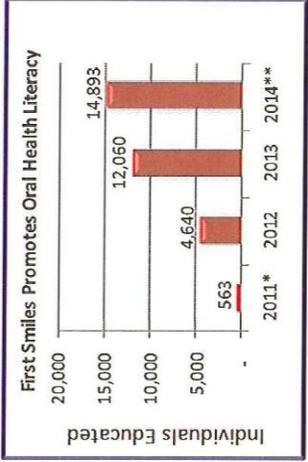
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A lifetime of good oral health leads to a lifetime of good overall health.

First Things First has invested \$190,000 in First Smiles each year.



In 3 years fluoride applications increased **275%** with no additional funding.



In 3 years individuals educated has increased by **321%** with no additional funding.

The Solution:
 In 2014 First Smiles provided access to dental services for over 2000 children.

The Problem:
Cochise County...
 Is a dental health professional shortage area.
 Has low dental health literacy.
 Has 29% of children living in poverty.
Families...
 Continue to struggle with cost of dental services.
 Have fear of dental visits.
 Struggle with lack of dentists seeing children under three years of age.

The Result:
 Tooth decay reduction and prevention.
 Increased access to dental care.
 Increased dental literacy.
 A lifetime of good oral health leads to a lifetime of good overall health.
First Smiles is Working!

In three years, the Cochise County First Smiles Program has conducted over 5,300 screenings, and has seen a 6.5% reduction in tooth decay.

* 4 months of operation ** Data through end of May 2014



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June 4, 2014

Melissa Avant, MPA
First Things First Regional Director
Cochise Regional Partnership Council

Dear Ms. Avant:

This letter is to clarify, as you specified, certain data that will be presented to the Cochise Regional Partnership Council during our report to the council. The three clarifications requested are included in my responses below.

1. How was the 6.5% reduction in tooth decay calculated for years 2012, 2013, 2014? The University of Arizona submitted paperwork to Human Subjects Protection Program (HSPP) in 2011. Our application was approved to proceed with the following categories: The project is not considered research; Institutional Review Board (IRB) review is not required. This was approved because we are using aggregate data with no individual identifiers of the child. The data collected was approved for internal monitoring of the improvement of the project and internal goal monitoring. The data collected was the Basic Screening Survey (BSS) tool developed by Center for Disease Control (CDC) and Association of State and Territory Dental Directors. This data has been instrumental in improving our program and adapting the existing program to better meet the needs of the program, families and professionals in the community. Since this is not a research approved program the data is not collected utilizing stringent research protocol. BSS data for 2012 was compared to data from 2013 and 2014. The trend of a 6.5% reduction in tooth decay from 2012-13 (24 months) to 2014 (10 months) was calculated using traditional math percentage equations.
2. What does oral health literacy mean? The Affordable Care Act of 2010, Title V, defines health literacy as the degree to which an individual has the capacity to obtain, communicate, process, and understand basic health information and services to make appropriate health decisions. This definition is almost identical to Healthy People. The only difference is the addition of 'communicate' to the legislative definition. "[The health literacy of America's adults: Results from the 2003 National Assessment of Adult Literacy \(NCES 2006-483\)](#)" states that nearly 9 out of 10 adults have difficulty using the everyday health information that is routinely available in our healthcare facilities, retail outlets, media and communities. CDC recommends that to improve health literacy we need to do much better in designing and presenting health information and services that people can use effectively. We can build our own health literacy



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skills and help others—community members, health professionals, and anyone else who communicates about health—build their skills too. Every organization involved in health information and services needs its own health literacy plan to improve its organizational practices. First Smiles works to meet this challenge by delivering oral health information with appropriate messages at designated reading levels and learning styles.

3. The 14,893 individuals that received oral health information to improve oral health literacy for 10 months in 2014 is an aggregate number of individuals from PGM data that includes: children, providers, health care professionals, pregnant women, parents, grandparents, legal guardians, foster parents and also includes community events noted in narrative reports.
4. The question regarding duplicated numbers on the fluoride varnish application data from PGM data is clarified in the enclosure on how to determine and interpret target service numbers. <https://secure.azftf.gov/extranet/apps/pgms/pages/default.aspx> (Data Template Folder)

Thank you for the opportunity to present our success story to the Cochise Regional Partnership Council and we look forward to continue working with you to make Cochise County First Smiles a quality program.

Sincerely yours,

Joyce Flieger RDH, MPH
First Smiles Coordinator
University of Arizona
College of Agriculture and Life Sciences
Cooperative Extension

Enclosure: 1

Cc: Cindi Alva



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Oral Health

Unit of Service and related Target Service Number

A Unit of Service is a FTF designated indicator of performance specific to each FTF strategy. It is composed of a unit of measure and a number (Target Service Number).

A Unit of Measure/Service can be a target population and/or a service/product that a grantee is expected to serve as part of an agreement. Target Service Number represents the number of units (e.g. target population) proposed to be served or number of products/services proposed to be delivered during the contract year.

For example, for the FTF strategy Home Visitation the FTF Unit of Service is “number of families served” and a Target Service Number of 50 represents the number of families the program proposes to serve during the contract period. All FTF applicants must clearly state in the proposal a target service number for each strategy specific Unit of Service.

For **Oral Health**, the Units of Service are:

- Number of children ages 0-5 yrs receiving oral health screenings**
- Number of expectant mothers receiving oral health screenings**
- Number of participating adults**
- Number of participating professionals**
- Number of fluoride varnishes applied**

Determining and Interpreting Target Service Numbers

Number of children ages 0-5 years receiving oral health screenings should reflect the total number of children ages 0-5 years proposed to receive oral health screenings for one grant contract period (in most cases, one year). This number should reflect a total headcount of all children ages 0-5 years to receive oral health screenings, and this number may be a **duplicated** count since one child may receive multiple oral health screenings within a contract period.

Number of expectant mothers receiving oral health screenings should reflect the total number of expectant mothers proposed to receive oral health screenings for one grant contract period (in most cases, one year). This number should reflect a total headcount of all expectant mothers to receive oral health screenings.

Number of participating adults should reflect the total number of adult participants proposed to be trained for the grant contract period (in most cases, one year). This should be a total count (aggregate) of all adults who are proposed to participate in all training sessions. Please note this may be a **duplicated** count since it is possible for the same participant to attend multiple trainings during the same grant contract period. For example, if the program proposes to train 20 participants in a series of five sessions, the total target service number should be 100 participants, rather than 20 (as FTF does not collect series specific information). If the program does not provide a series of sessions (for instance a program may provide walk-in training sessions), the total target service number should reflect all participants proposed to attend all trainings targeted for the contract period. This may be a **duplicated** count since one participant may attend multiple walk-in training sessions.

Number of participating professionals should reflect the total number of professionals proposed to be trained for the grant contract period (in most cases, one year). This should be a total count (aggregate) of all professionals who are proposed to be participating in all training sessions. Please note this may be a **duplicated** count since it is possible for the same professional to attend multiple trainings during the same grant contract period. For example, a program (contract) could propose a series of trainings that



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target 20 professionals to attend 1 training session each quarter of the fiscal year (4 times per year), making the Target Service Number 80 (20 professionals attending 4 sessions). If the program does not provide a series of sessions (for instance a program may provide walk-in training sessions), the total target service unit should reflect all professionals proposed to attend all trainings proposed for the contract period. This is still a **duplicated** count since one participant may attend multiple walk-in training sessions.

Number of fluoride varnishes applied should reflect the total number of fluoride varnishes proposed to be applied for the grant contract period (in most cases, one year). This should be a total count (aggregate) of all varnish applications proposed to be applied, or in other words a ticker count of proposed number of fluoride varnishes to be applied in the contract period.

Performance Measures

Performance Measures measure (1) key indicators of performance (i.e. Unit of Service); (2) basic implementation of strategy; (3) alignment of program activities to strategy specific standards of practice, (4) performance or progress toward pre-established strategic goals. Performance measures may include the level or type of program activities conducted (e.g. serving families/children through home visits) and/or the direct services and products delivered by a program (e.g. providing scholarships).

For **Oral Health**, the performance measures are:

Number of children ages 0-5 yrs receiving oral health screenings/ proposed service number

Number of expectant mothers receiving oral health screenings/ proposed service number

Number of participating adults/ proposed service number

Number of participating professionals/ proposed service number

Number of fluoride varnishes applied/ proposed service number

Number of oral health kits distributed

Number of complete fluoride varnishes series applied

Number of expectant mothers and children receiving referrals for treatment

Number of oral health trainings conducted

Number of children participating in oral health trainings



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AzEIP

Arizona Early Intervention Program

Where Every Child has a Team

History

- Individuals with Disabilities Education Act (IDEA) -1975
 - Guarantees educational rights of all people, especially those with disabilities
- Early Intervention-1998
- Part C - 2011
 - shapes Early Intervention as we know it today

-http://itishcy.org/faq/5593

Who is Eligible?

- Children birth-3 years:
 - 50% delay in one or more of the 5 areas of development
 - or
 - Established condition that has high probability of delay

-determined by informed clinical opinion



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Areas of Development

- 1 physical
 - fine motor
 - gross motor
 - sensory (including vision and hearing)
- 2 cognitive
3. language/communication
4. social-emotional
5. adaptive (self-help)

<http://www.azdhs.gov/AZEP/Policy/2014>

Established Conditions

- chromosomal abnormalities
- metabolic disorders
- hydrocephalus
- neural tube defects (e.g., spinal bifida)
- intraventricular hemorrhage (grade 3 or 4)
- periventricular leukomalacia
- cerebral palsy
- auditory impairment- (significant)
- visual impairment- (significant)
- failure to thrive
- severe attachment disorders
- sensory impairments
- inborn errors of metabolism
- disorders reflecting disturbance of the development of the nervous system
- congenital infections
- disorders secondary to exposure to toxic substances- (including fetal alcohol syndrome)

<http://www.azdhs.gov/AZEP/Policy/2014>

Mission of Early Intervention

- Build upon and provide supports and resources to assist family members and caregivers to enhance children's learning and development through everyday learning opportunities in their natural environments.

<http://www.azdhs.gov/AZEP/Policy/Principles/>



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How Do We Do That?

- Team Based Model
- Coaching Interaction Style

Team Based Model

- **Primary provider**- represents and receives team and community support to address families' priorities, needs, and interests
- **Other team members**- accompany primary provider on visits and/or are available as needed

-Services are also individualized to reflect the child's and family members' preferences, learning styles and cultural beliefs.

<https://www.azdhs.gov/AzEIP/KeyPrinciples/>

Who is part of the AzEIP Team?

- Service Coordinator
- Developmental Specialist
- Occupational Therapist
- Physical Therapist
- Speech-Language Pathologist
- Nurse
- Hearing Specialist (ASDB)
- Vision Specialist (ASDB)
- DDD Staff members
- Members of community agencies and programs, etc.



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Coaching Interaction Style

- An adult learning strategy that supports caregivers in identifying, obtaining, and mobilizing the knowledge and skills necessary to achieve an intended outcome.

-Builds caregivers' capacity

-Teaches parents to fish instead of just giving them a fish.

Rush & Stalder, *The Early Childhood Coaching Handbook*, 2011

Successes

- Implemented and embraced team-based model
- Received initial training on Coaching Interaction Style and working to improve
- Helped many children with developmental delays to improve in their growth and development
- Helped many toddlers be more ready for and transition to preschool

Challenges

- Fully Implementing Team-Based Model
 - complete team
 - full-time therapists
 - team based vs. clinical model
 - insurance/medical billing
 - medically fragile children



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Challenges (continued)

- Unleashing the full potential of Coaching Interaction Style
 - training
 - coaching relationship

FTF Therapist Incentive Program

- great incentives
- attracts needed therapists to rural areas
- large demand
- more time to bare fruits
- modifications

"Keep a good thing going."

AGENDA ITEM: Regional Director's Report

BACKGROUND: Monthly Directors Report provides the Regional Director an opportunity to inform the Regional Council on current and upcoming activities happening within the region and throughout the State.

RECOMMENDATION: The Regional Director provides this as informational purposes only.



June 2014 Director's Report Cochise Regional Partnership Council

General Updates

2014 Needs & Assets Report

- Donelson Consulting, LLC has submitted the first final draft of the Cochise Regional Needs and Assets Report. Regional & Evaluation Staff will work with the Donelson team to make final revisions and then the final document will be submitted to the Regional Council for approval at the July meeting.

Central East Regional Forum with State Board

- Held on April 22, 2014 in Safford – the Cochise Regional Partnership Council was represented by Pastor Simpson – thank you! There was attendance from the Gila, Graham/Greenlee, San Carlos and Pinal Regions, as well as State Board Members and FTF leadership. This event allowed all Regional Council Members to have an opportunity to share insight within their Regions with State Board Members.

First Things First 2014 Summit



Regional Council Recruitment

- Council recruitment has been happening over the last few months. The Cochise Regional Partnership Council interviews were held on April 15, 2014 and a total of seven applicants were interviewed. Special thanks to Chair Rottweiler Member Pastor Buck, and Community Member Alisha Ash, for helping with the interview panel. The panel's recommendation will be presented to the State Board for final approval in June. New and reappointed Council Members will begin their terms in July.

Cochise System Building

Cochise County Literacy Guide now available! (Here is the direct link to the [guide](#).)

In The News

*-
Parting is
such sweet
sorrow.*

...

*Thank You Melanie,
Dr. Poling, Pastor
Simpson and
Michael – this will
be their last council
meeting with us
and we would like
to take this
opportunity to let
them know how
much we have
appreciated their
service, dedication
and leadership on
our council and to
the young children
in our region. You
will be greatly
missed!*

FY 2014 Cochise Contract Detail



	Grantee Name	Contract Number	Contract Period	Allotment			Expense Variance	Award % of Award Expended	Allotment % of Allotment	Reimbursement Activity	
				Total Allotment	Awarded	YTD Expense				Pending	Paid (Last 30 Days)
Community	Community Awareness Strategy			Strategy Subtotal:	\$31,000	\$31,000	\$27,184	\$3,816	87.7%	87.7%	
	First Things First (FTF-Directed)	PSC-STATE-14-0651-01	07/01/2013-06/30/2014		\$31,000	\$27,184	\$3,816	87.7%			
	Media Strategy			Strategy Subtotal:	\$57,212	\$57,212	\$24,806	\$32,406	43.4%	43.4%	
	First Things First (FTF-Directed)	PSC-STATE-14-0660-01	07/01/2013-06/30/2014		\$57,212	\$24,806	\$32,406	43.4%			
	Goal Area Subtotal:			\$88,212	\$88,212	\$51,990	\$36,222	58.9%	58.9%		
Evaluation	Regional Family Support Strategies Strategy			Strategy Subtotal:	\$45,000	\$45,000	\$45,000	-	100.0%	100.0%	
	First Things First (FTF-Directed)	PSC-STATE-14-0670-01	07/01/2013-06/30/2014		\$45,000	\$45,000	-	100.0%			
	Statewide Evaluation Strategy			Strategy Subtotal:	\$136,996	\$136,996	\$136,996	-	100.0%	100.0%	
	First Things First (FTF-Directed)	PSC-STATE-14-0669-01	07/01/2013-06/30/2014		\$136,996	\$136,996	-	100.0%			
	Goal Area Subtotal:			\$181,996	\$181,996	\$181,996	-	100.0%	100.0%		
Family Support	Home Visitation Strategy			Strategy Subtotal:	\$600,000	\$600,000	\$364,012	\$235,988	60.7%	60.7%	\$41,488
	Easter Seals Blake Foundation	FTF-RC002-13-0385-03-Y2	07/01/2013-06/30/2014		\$600,000	\$364,012	\$235,988	60.7%		\$41,488	
	Goal Area Subtotal:			\$600,000	\$600,000	\$364,012	\$235,988	60.7%	60.7%	\$41,488	
Health	Child Care Health Consultation Strategy			Strategy Subtotal:	\$106,113	\$106,113	\$74,132	\$31,980	69.9%	69.9%	\$19,989
	First Things First (FTF-Directed)	PSC-STATE-14-0649-01	07/01/2013-06/30/2014		\$6,825	\$6,825	-	100.0%			
	Maricopa County Department of Public Health	GRA-STATE-14-0631-01	07/01/2013-06/30/2014		\$2,340	\$431	\$1,910	18.4%			
	Pima County Health Department	GRA-STATE-13-0525-01-Y2	07/01/2013-06/30/2014		\$4,255	\$3,029	\$1,226	71.2%			
	University of Arizona Cooperative Extension	GRA-STATE-13-0500-01-Y2	07/01/2013-06/30/2014		\$92,693	\$63,848	\$28,845	68.9%		\$19,989	
	Oral Health Strategy			Strategy Subtotal:	\$190,000	\$190,000	\$134,523	\$55,477	70.8%	70.8%	\$46,855
	University of Arizona Cooperative Extension	GRA-RC002-14-0619-01	07/01/2013-06/30/2014		\$190,000	\$134,523	\$55,477	70.8%		\$46,855	
	Recruitment – Stipends/Loan Forgiveness Strategy			Strategy Subtotal:	\$27,060	\$27,060	\$12,959	\$14,101	47.9%	47.9%	
	Arizona Department of Health Services	FTF-MULTI-10-0205-01-Y2	To Be Determined		-	(\$8,851)	\$8,851	0.0%			
		FTF-MULTI-10-0205-01-Y3	To Be Determined		-	(\$5,250)	\$5,250	0.0%			
		GRA-MULTI-13-0518-01-Y2	07/01/2013-06/30/2014		\$27,060	\$27,060	-	100.0%			
	Goal Area Subtotal:			\$323,173	\$323,173	\$221,614	\$101,559	68.6%	68.6%	\$66,844	
Professional	Scholarships TEACH Strategy			Strategy Subtotal:	\$0	-	-	-	0.0%	0.0%	
	Goal Area Subtotal:			\$0	-	-	-	0.0%	0.0%		
Quality and Access	Quality First Strategy			Strategy Subtotal:	\$0	-	-	-	0.0%	0.0%	
	Quality First Academy Strategy			Strategy Subtotal:	\$37,663	\$31,289	\$16,899	\$14,390	54.0%	44.9%	\$1,774
	Southwest Human Development	FTF-STATE-14-0431-03	07/01/2013-06/30/2014		\$31,289	\$16,899	\$14,390	54.0%		\$1,774	
	Quality First Child Care Health Consultation Warmline Strategy			Strategy Subtotal:	\$2,127	\$2,127	\$1,024	\$1,104	48.1%	48.1%	
	University of Arizona Cooperative Extension	GRA-STATE-14-0629-01	07/01/2013-06/30/2014		\$2,127	\$1,024	\$1,104	48.1%			
	Quality First Coaching & Incentives Strategy			Strategy Subtotal:	\$562,919	\$562,919	\$422,329	\$140,590	75.0%	75.0%	
	Valley of the Sun United Way	FTF-STATE-14-0427-02	07/01/2013-06/30/2014		\$562,919	\$422,329	\$140,590	75.0%			
	Quality First Inclusion Warmline Strategy			Strategy Subtotal:	\$8,376	\$8,376	\$4,347	\$4,029	51.9%	51.9%	\$493
	Southwest Human Development	FTF-STATE-13-0426-01-Y2	07/01/2013-06/30/2014		\$8,376	\$4,347	\$4,029	51.9%		\$493	
	Quality First Mental Health Consultation Warmline Strategy			Strategy Subtotal:	\$8,615	\$8,615	\$6,329	\$2,286	73.5%	73.5%	\$672
	Southwest Human Development	FTF-STATE-13-0344-02-Y2	07/01/2013-06/30/2014		\$8,615	\$6,329	\$2,286	73.5%		\$672	
	Quality First Scholarships Strategy			Strategy Subtotal:	\$1,590,996	\$1,590,996	\$1,192,842	\$398,154	75.0%	75.0%	-
	Valley of the Sun United Way	FTF-STATE-14-0440-01	07/01/2013-06/30/2014		\$1,590,996	\$1,192,842	\$398,154	75.0%		-	
Quality First Warmline Triage Strategy			Strategy Subtotal:	\$3,350	\$3,350	\$2,521	\$829	75.2%	75.2%	\$278	
Southwest Human Development	FTF-STATE-13-0351-02-Y2	07/01/2013-06/30/2014		\$3,350	\$2,521	\$829	75.2%		\$278		
	Goal Area Subtotal:			\$2,214,046	\$2,207,673	\$1,646,290	\$561,383	74.6%	74.4%	-	
	Overall Total:			\$3,407,427	\$3,401,053	\$2,465,901	\$935,152	72.5%	72.4%	\$111,549	

Strategic Planning Framework



- Needs & Assets Reports
- SFY13-15 Strategic Direction & Implementation
- Data & Discussion from Benchmarking
- Reports/Data from partners
- Visioning/Big Picture
- System building levers: quality, partnerships, infrastructure & capacity, scope & scale
- Engagement of partners

- Define areas of need
- Prioritize— where should we focus our efforts

- Alignment of needs with SRI and benchmarks
- Alignment of needs to FTF priority roles

- Determine approaches to take (funded/unfunded) to address the prioritized needs and advance the early childhood system in the region

- Set three year budget based on approaches
- Implementation plans for unfunded approaches— system building efforts



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PUBLIC-PRIVATE PARTNERSHIPS PLAN

All Arizona's children are ready to succeed in school and in life.

I. INTRODUCTION AND BACKGROUND

A strategic approach to public-private partnerships and seeking and leveraging various types of funds is essential to building a sustainable high-impact early childhood system. From the development and passage of the First Things First initiative in 2006, there was recognition that tobacco tax revenues alone are insufficient to realize the vision that all Arizona's children are ready to succeed in school and in life. What is required to achieve this vision is the involvement and investment of public and private partners that collectively engage in building and investing in a quality early childhood system.

As First Things First develops in communities across Arizona and as a statewide organization, the timing is right to explore how First Things First can strategically leverage local, state, and national resources – public and private – to advance Arizona's early childhood system. As business leaders, nonprofit executives, public sector representatives, educators, health and other practitioners grow increasingly aware of the benefits of investments in early childhood, First Things First is well-positioned to expand these systems-building efforts.

In October 2012, the FTF Board addressed the need for a more intentional approach by accepting the "Report on Public Private Partnerships"¹ that FTF's Strategic Initiatives staff developed. The report outlined the rationale and readiness for moving forward with a plan to build public-private partnerships. Recommended actions in this report included:

- A. Convene a Public-Private Partnership Committee (Committee) of the Board's Executive Committee, with the Board delegating to the Board Chair the authority to seat a committee comprised of Board and regional council members, and private sector partners to provide input and take appropriate action on:
 - 1. A conceptual framework for establishing public-private partnerships;
 - 2. Target goals, strategies, and tactics;
 - 3. Standard(s) of practice for partnership development;
 - 4. Exploration and possible development of a First Things First endowment.

- B. Develop Public-Private Partnership FY2014-2016 Plan (Plan) to include:
 - 1. Finalized conceptual framework;
 - 2. Mechanism to track inventory of ongoing efforts.
 - 3. Target goals and objectives (for example, number of grants written and secured, number of foundation relationships developed, number of regional projects advanced);
 - 4. Methods to evaluate effectiveness;

¹ Report on Building Public Private Partnerships, <http://www.azftf.gov/PublicNoticeAttachmentCenter/10-01-2012%20BOARD%20Meeting-Attachment%2014-Public%20Private%20Partnership%20Report.pdf>

5. A description of the infrastructure needed, and plan to develop and implement needed infrastructure;
 6. A description of the technical assistance needed to develop statewide and regional capacity to build public-private partnerships, and to secure and manage external funding;
 7. Standard(s) of Practice
- C. Develop a regular update report for the Board on the cross-sector early learning opportunities and activities with private sector philanthropies in Arizona.
- D. Develop and disseminate interim guidance to regions to apply for and manage grants and partnerships.

The Board's Executive Committee, under the leadership of the Board Chair, provided oversight of the development of the public-private partnerships plan. Two of FTF's Strategic Priorities are assigned to the Board and relate to this topic: Building Public Awareness and Support and Early Childhood System Funding. (See Attachment 2, Conceptual Framework.) A subcommittee to provide consultation and plan development convened for the first time on January 4, 2013. The subcommittee included representatives from Arizona philanthropies, regional partnership council members, tribes and community members with expertise in partnership development (see attachment 1). The subcommittee was chaired by FTF Board member Nadine Mathis Basha.

As the subcommittee began its work, members first considered the rationale and need for First Things First to seek partnerships and investments in addition to tobacco-tax revenue. They considered federal, state and private revenue sources needed to achieve First Things First's nine strategic priorities and six early childhood outcomes. A proposed conceptual framework was created that identified possible approaches that, when implemented, increase and enhance current investments from public and private sources, leverage current FTF funds, advance FTF strategic priorities. A basic concept prevailed – how to leverage additional partnerships and funds using resources currently generated by FTF. (Attachment 2 depicts this conceptual framework).

The subcommittee provided excellent ideas, feedback, and counsel to the Plan's development and agreed on recommendations to advance to the Board. In total, Committee members reviewed and discussed the following six approaches and agreed that five of the six provided an appropriate and potentially effective framework. The subcommittee hopes this plan will strategically guide the expansion of new opportunities and resources for building Arizona's early childhood system.

II. FROM CONCEPTUAL FRAMEWORK TO GOALS, RESULTS AND STRATEGIES

The Public Private Partnerships subcommittee recommends the following plan and priorities for expanding public-private partnerships and generating various types of support. This section includes target goals, desired results, and strategies.

Federal Grant Funds

Goal 1: Leverage FTF resources to secure federal grants to build and sustain the early childhood system.

- A. *Desired Result:* This goal will be satisfactorily achieved when over five (5) years \$25 million in Federal Grants is secured for the early childhood system.

Strategies:

1. Identify, consider, and prioritize opportunities that are available through list serves, partner organizations, websites such as grants.gov, and/or third party professional services/vendors to identify opportunities.
2. Create an internal response system that can react and respond quickly to grant opportunities.
3. Devise an internal mechanism by which FTF may apply for a grant exclusively, apply in collaboration with other organizations, decide not to apply, or forward the information to another entity in the ECE system.
4. Devise a clearinghouse-type mechanism by which FTF can determine if staff, regional council members, or partners have a relationship with a prospective grantor.

- B. *Desired Result:* This goal will be satisfactorily achieved when five (5) sustainable partnerships with federal agencies are developed over five years.

Strategies:

1. Raise the profile of FTF with Federal agencies by attending federal program meetings, corresponding with grants managers and agency leadership, responding to calls for comment and feedback.
2. Partner with Arizona and other state's universities, community colleges, and state agencies for research and program grants.
3. Seek national grant opportunities that are outside of traditional early childhood sources (unlikely places), such as the National Endowment of the Arts.
4. Build relationships with the Department of Defense in support of early childhood, especially for family support programs.

Resources Needed for **Goal 1:**

- Assessment of skills and resources needed within FTF to prepare and successfully receive federal grants.
- Clear, articulate case for support for FTF relative to federal grants.
- Models from universities and university foundations to inform operational approaches.
- Templates for the most common elements of grant applications.

National Foundation Funding

Goal 2: Develop partnerships with national foundations to build and sustain the early childhood system.

- A. *Desired Result:* This goal will be satisfactorily met when 5 grants are secured over five (5) years from national foundations for Arizona's early childhood system.

Strategies:

1. Prepare a case statement to garner interest, create awareness, agree internally on the approach, and explain the rationale of FTF's mission and priorities. Clearly articulate how a foundation's resources will make a difference in ways FTF is not currently engaged and the impact FTF could achieve.
2. Prioritize opportunities and seek those that will be most impactful to the School Readiness Indicators.
3. Have a plan and be prepared to explain how FTF will sustain the foundation's financial investment.

- B. *Desired Result:* This goal will be satisfactorily achieved when ten (10) sustainable partnerships with national foundations are developed over five (5) years.

Strategies:

1. Raise the profile of FTF with national philanthropies by attending national meetings and conferences and engaging in formal and informal networking and conversations.
2. Advance and market the FTF brand to a national audience through FTF's research and policy briefs.
3. Utilize affinity networks (such as Grant Makers for Women and Children) of the Council on Foundations to make connections.
4. Present at national meetings and conferences to raise FTF's profile across the United States.
5. Offer assets developed by FTF that are or could be useful and valuable to foundations.
6. Partner with Arizona and other state's universities, community colleges, and state agencies for research and program grants.
7. Do prospect research to determine on which foundations to focus.

Resources Needed for **Goal 2:**

- Prospect researchers to identify current foundation priorities.
- Assessment of skill sets and resources needed within FTF to partner with or apply to grant-making foundations
- Contacts at Council of Foundations as a source of connections and potential partners.
- Protocols for who in the organization approaches national funders.
- Clear, articulate case for support for FTF relative to national philanthropies.

Tribes and Tribal Corporations

Goal 3: Strengthen relationships and foster long-term partnerships between tribes/tribal corporations and regional partnership councils to advance the early childhood system.

- A. *Desired Result:* This goal will be satisfactorily achieved when we create and agree upon a written set of culturally appropriate best-practice models for public-private partnerships with tribes and FTF that leverage a variety of partners.

Strategies:

1. Include public-private partnerships as a focus area for a future tribal consultation.

2. Convene an ongoing tribal public-private partnership discussion comprised of tribal leaders, Indian organizations and other experts in the field to explore partnerships and expand early childhood initiatives in tribal communities.
 3. Conduct research and explore other public-private partnership initiatives and plans that are tribal specific and/or include tribal initiatives to inform the public-private partnership tribal model discussion.
 4. Help tribes leverage their relationship with FTF to enhance partnerships with other entities, such as with state government departments and statewide education partners.
- B. *Desired Result:* This goal will be satisfactorily achieved by 2017 when 3 of the 22 federally recognized Tribes include early childhood strategies, program, and services in their tribal funding priorities.

Strategies:

1. Include public-private partnerships as a focus area for a future tribal consultation.
 2. FTF will work with state partners to develop quarterly policy/knowledge/white papers targeted at tribal leaders on early childhood development and health topics.
 3. Connect at least 3 Tribes/nations annually with technical assistance and capacity building efforts that will help expand early childhood systems into the tribal
- C. *Desired Result:* This goal will be satisfactorily achieved when tribal-specific federal, private, and/or philanthropic funding is leveraged to expand and improve tribal/FTF's success with tribal initiatives.

Strategies:

1. Seek out and monitor federal grant opportunities focused on tribal-specific early childhood initiatives.
 2. Seek out funding opportunities that are outside of traditional early childhood sources (unlikely places), such as the Arizona Indian gaming operations, National Indian Education Association, and the National Indian Health Board.
 3. Search out grant opportunities with foundations or other entities that may have an interest in exploring Indian education endeavors.
- D. *Desired Result:* This goal will be satisfactorily achieved when (5) sustainable partnerships with tribal partners such as tribal-specific federal agencies, local, state-wide and national tribal organizations are developed over five (5) years.

Strategies:

1. Raise the profile of FTF with Tribes and Indian education partners by attending meetings and conferences and engaging in formal and informal networking and conversations.
2. Partner with tribal colleges for research and program grants.
3. Offer semi-annual early childhood briefing sessions to external partners such as the Indian Health Service and Tribal Education systems the via the Inter-Tribal Council of Arizona Early Childhoods Working Group.

Resources Needed for **Goal 3:**

- Representatives from tribal specific federal agencies, state tribal liaisons, tribal enterprises and private tribal philanthropy to assist with identification of resources and mechanisms to implement best practices in tribal public/private partnership models.
- Tribal internship and/or other staffing resource to regularly research tribal specific funding opportunities and public/private partnership ventures.
- Clear protocols for who in the organization may approach tribal funders.
- Tribal support organizations, such as the Inter-Tribal Council of Arizona and/or the First Nations Institute for technical assistance.

Arizona Businesses, Individuals, and Private Sector Philanthropy

Goal 4: Develop relationships with Arizona businesses, individuals, and private sector foundations to secure philanthropic investments and partnerships to enhance and sustain the early childhood system.

- A. *Desired Result:* This goal will be satisfactorily achieved when 10 Arizona businesses, four (4) Arizona foundations, and 25 individuals bring \$1 million to the early childhood system.

Strategies:

1. Build relationships with key prospects by inviting them to participate in FTF advisory committees, by participating in their events, and inviting their attendance at the FTF Summit.
2. Match FTF's mission, vision, and indicators with the priorities of select foundations.
3. Prepare a case statement that explains FTF's mission and priorities for private sector grants and partnership projects.
4. Use the "Needs and Assets" process to identify local funders and partner opportunities.
5. Position FTF as the Early Childhood Development and Health System expert.
6. Promote the School Readiness Indicators within a collective impact model that aligns with the partnership approach of various philanthropies.
7. Leverage the BUILD process to secure funds from businesses, private corporations, and business-related foundations to support early childhood system building.
8. Organize former and current council and board members to assist in building partnerships, relationships, and fund development.
9. Set up the appropriate mechanisms for seeking, booking, acknowledging and tracking unrestricted funds.
10. Set up the appropriate mechanisms for seeking, booking, acknowledging and tracking restricted gifts.

Resources Needed for **Goal 4:**

- Foundation annual reports and publications for information on their priorities
- Participation in Arizona Grantmakers Forum
- Gift and relationship management tracking system for contacts, solicitation approach, cultivation progress, etc. with individuals and private and corporate foundations.

Early Childhood Endowment

Goal 5: Establish an endowment for FTF to permanently ensure that all Arizona’s children succeed in school and in life.

- A. *Desired Result:* This goal will be satisfactorily achieved when a fund is established at a 501(c)3 or community foundation.

Strategies:

1. Determine best structure for an endowment: separate 501(c)3 that supports FTF goals, FTF operated fund or some other model.
2. Review options for a home for the fund at existing partner organizations.

- B. *Desired Result:* This goal will be satisfactorily achieved when internal capacity at FTF is established that engages strong volunteer and professional leadership (including professional advisors), to undertake planned giving in partnership with fund management.

Strategies:

1. Join philanthropy affinity groups that support education, children and youth, health.
2. Consider naming the endowment for a highly-respected and high profile supporter of early childhood health and education.
3. Establish a legal and financial advisors committee.

- C. *Desired Result:* This goal will be satisfactorily achieved when a defined and adopted financial goal and the % increase expected in each of the subsequent five (5) years are set (includes current gifts and future commitments).

Strategies:

1. Create a plan for development of an endowment for FTF, including:
 - a. An endowment strategy that will capitalize on the desire of individuals to give.
 - b. An endowment campaign led by a high profile spokesperson or chair.
 - c. A compelling message that identifies the priorities and gaps to be filled through an endowment and explains the justification for giving even though FTF’s business model requires carrying a significant fund balance.
2. Do an organizational assessment of FTF’s capacity to implement an endowment strategy.
3. Create a clear, compelling case of support for endowment giving to FTF.
4. Garner endowment support through external affairs strategies that “tell the story”.

Resources Needed for **Goal 5:**

- Representatives from private philanthropy and regional council members who represent philanthropy to assist with identification of resources and mechanisms to implement an endowment strategy.
- Private sector firms and organizations that specialize in endowment strategies.
- Feasibility study for an endowment/legacy giving campaign to support the FTF School Readiness Indicators.

- Foundation and philanthropy support organizations, such as the Council on Foundations for technical assistance.

Earned Income

Goal 6: *The Committee does not consider an earned income goal to be a viable approach in the near term. However, an earned income approach may merit future consideration.*

III. FTF INTERNAL STRUCTURES, CAPACITY AND IMPLEMENTATION OF PLAN

All of the First Things First strategic priorities require convening and collaborating with partners, providing leadership, and investing FTF resources and other resources in these processes. In order to successfully seek and win public and private grants and foster national, state and tribal partnerships – internal policies, protocols, and a commitment of staff resources are required. The Strategic Initiatives unit of the External Affairs Division will be responsible for leading, coordinating, and updating the plan.

Internal Tools, Structures and Capacity

There are certain elements an organization must have as it transitions into more focused partnerships and fund development approaches for long-term sustainability. The following internal supports are needed by FTF to achieve the goals and successful implementation of this Plan:

Regional Partnership Councils

- Regions have the guidance, resources, training, and systems they need to seek, apply for, and manage the external grants process.
- Regional council members have the capacity, interest and readiness to assist in building partnerships at the local, regional and tribal levels and acquiring funds from sources targeted in this plan.
- The description of duties for regional council members is modified to include community partnership building and fund development activities and support.
- The role of regional council members encompasses identification, cultivation and participation in engaging community leaders, potential and current partners, and other allies in implementing this partnership plan.
- Designated philanthropy members on regional councils work together across the state to identify viable strategies and roles they will play to implement the public-private partnership plan.

Internal Documents and Systems

- Availability of a regional tool kit structure populated with resources by March 2014.
- Design and implementation of an “External Grants Approval Log” to coordinate the state and regional grants application and approval process by March 2014.
- FTF has an electronic donor and partnership management (contact) system by December 2014.
- Written finance and accounting policies and protocols for accepting and reporting external grant funds and gifts are created by January 2014.
- Written fund development policies, including existing state government gift acceptance and other policies are identified or created by January 2014.
- Written policies and procedures exist that protect unrestricted gifts/funds by March 2014.

- A Standard(s) of Practice document to clearly identify and define levels of partnership development involvement for FTF regional council members, regional and statewide leadership, and FTF Board members is approved by March 2014.

Personnel Capacity and Readiness

- The capacity and readiness of regional and statewide staff to successfully apply for public and private grant opportunities and develop public-private partnerships is evaluated and confirmed.
- A professional development plan to build the competency and capacity of FTF regional and statewide staff for identifying opportunities for public-private partnerships, developing relationships that result in partnerships, and sustaining the early childhood system with additional funds and resources is implemented.
- A staffing plan within the External Affairs Division to carry out the Public Private Partnerships Plan.
- Talented, experienced staff and volunteers are needed to follow-up, manage contacts, and establish and sustain relationships with individuals, businesses/corporations, and private philanthropies.

Critical Success Factors

At the final meeting of the sub-committee, the members were asked to step back from the detailed planning that occupied most of the committees' attention and look at the public private partnership initiative as a whole. They were asked, "What is essential for FTF to do to be successful in this initiative?" The seasoned committee offered these nuggets of wisdom:

- Do not assume you have the internal mechanisms and capacity to do this big agenda – the human resources capacity as well as the emotional, financial, psychological, spiritual and physical readiness, fortitude and investment. Plan for them carefully.
- Public-private partnerships must be a fundamental element of who FTF is and instilled into the FTF culture. Make partnerships and building relationships a way of life at FTF, and as much a part of FTF as any other component.
- A viable, thoughtful communication plan – content, rollout and timing.
- Successful engagement of the regional partnership councils – how they are approached, trained and engaged over time will be important. (You can't mandate culture.)
- Think about and plan for who might oppose this initiative.
- Tout and articulate FTF's achievement of benchmarks and positive results for children and families. Explain what FTF has accomplished. This gives credibility.
- Think beyond the obvious. Look in unusual places for friends, funds and partners.
- Roll out this initiative across the State with the approach, "we are giving Arizonans the opportunity to help, to feel good, to invest in something very important."
- Ensure various constituencies have input into and are included into this work.
- Arizona needs a positive story – let's give it to them!

IV. STANDARD(S) OF PRACTICE

Standard(s) of Practice are developed for every First Things First strategy and provide the guiding principles to ensure universal understanding of strategies and to support consistency in implementation. A standard of practice for Public Private-Partnerships will be developed to guide all levels of FTF staff and volunteers with responsibilities for partnerships development.

V. EVALUATION PLAN

The evaluation of First Things First's implementation of public-private partnerships will be the achievement of the desired results as identified by the public-private partnerships subcommittee. Ultimately, the number of relationships established, grants received, and partnerships established that support, strengthen and sustain the early childhood system are the measures of success.

A plan for evaluation of public-private partnerships also includes periodic assessments (through surveys and interviews) of Tribes and tribal corporations, individual donors, business and corporate funders, and national and state private philanthropies to stay connected and informed about important external partners.

VI. CONCLUSION

The National Governor's Association produced a publication in 2008, *Partnering with the Private and Philanthropic Sectors: A Governor's Guide to Investing in Early Childhood*.² That report concluded with what the leadership of FTF and partners in Arizona know about the need to leverage all resources to build a stronger early childhood system.

"Supporting the readiness of young children at risk for school failure is critical to the nation's future. Although private resources are not intended to supplant public investment in the healthy development and school readiness of young children, they can be used to spur action and seed innovation across the state. Partnerships can support a cohesive early childhood system at the state and local levels, improve the quality and availability of programs and services, and cultivate a new cadre of champions to support early childhood initiatives... Public-private partnerships are not a silver bullet, but they are an important strategy for building a strong foundation of services and supports for young children to help ensure their healthy development and school readiness".

This plan presents a pathway for systemic change through the articulated five goals, desired results and consideration what strategies and resources are needed. Not a silver bullet – rather the plan outlines a plan for success by acknowledging that it takes relationship building, assessment and infrastructure support. FTF's plan embraces the need for collective action in Arizona to create long lasting and sustainable change through partnership.

² <http://www.nga.org/cms/home/nga-center-for-best-practices/center-publications/page-edu-publications/col2-content/main-content-list/partnering-with-the-private-and.html>



FIRST THINGS FIRST

Ready for School. Set for Life.

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Proposed Public Private Partnership Conceptual Framework

Early Childhood System Outcomes

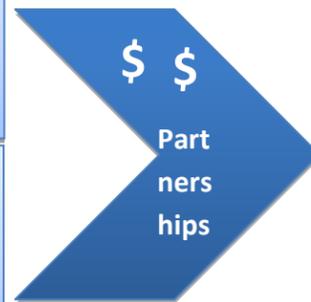
- All children have access to high quality, culturally responsive early care and education that promotes their optimal development.
- All children have access to high quality preventive and continuous health care, including physical, mental, oral, and nutritional health.
- All families have the information, services, and support they need to help their children achieve their fullest potential.
- All early childhood education and health professionals are well prepared, highly skilled, and compensated commensurate with their education and experience.
- The early childhood system is high quality, child and family centered, coordinated, integrated, and comprehensive
- All Arizonans understand the importance of the early years and the impact of early childhood development, health, and education on Arizona’s economy and quality of life and, as a result, substantially support early childhood development, health, and education both politically and financially.

First Things First Strategic Priorities

1. Early Care and Education System Development and Implementation—Convene partners and provide leadership in the development and implementation of a comprehensive early care and education system that is aligned both across the spectrum of settings and with the full continuum of the education system.
2. Quality Early Care and Education Standards, Curriculum, and Assessment - Convene partners, provide leadership, and provide funding for the development and implementation of quality standards for early childhood care and education programs and related curricula and assessments.
3. Quality, Access, and Affordability of Regulated Early Care and Education Settings - Convene partners, provide leadership, and provide funding for increased availability of and access to high quality, regulated, culturally responsive, and affordable early care and education programs.
4. Access to Quality Health Care Coverage and Services - Collaborate with partners to increase access to high quality health care services (including oral health and mental health) and affordable health care coverage for young children and their families.
5. Nutrition and Physical Activity-Collaborate with partners to support improved nutrition and increased age/developmentally appropriate physical activity levels among young children.
6. Supports and Services for Families—Convene partners, provide leadership, provide funding, and advocate for development, enhancement, and sustainability of a variety of high quality, culturally responsive, and affordable services, supports, and community resources for young children and their families.
7. Professional Development System - Convene partners, provide leadership, and provide funding for the development and enhancement of an early childhood professional development system that addresses availability, accessibility, affordability, quality, and articulation.
- 8. Building Public Awareness and Support - Convene partners, provide leadership, and provide funding for efforts to increase public awareness of and support for early childhood development, health, and early education among partners, public officials, policy makers, and the public.**
- 9. Early Childhood System Funding – Secure, coordinate, and advocate for resources required to develop and sustain the early childhood system**

Public Private Partnerships

Identify and leverage additional federal resources.	Build Relationships with Tribes , tribal corporations nationally and statewide.	Research and determine approaches for earned income.
Partner with Arizona private sector philanthropies in cross-sector systems approaches to early	Build relationships with national philanthropies to identify opportunities for collaborative initiatives	Explore Early Childhood Endowment



 Tobacco Tax Revenues
State and Federal Funding Supporting Early childhood System Child Care Block Grant, IDEA part B, Maternal and Infant Early Childhood Home visiting Program, Title 1
Private Philanthropy, Corporate and Business Community Grants

