



FIRST THINGS FIRST

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Chair Lynn and Members of the First Things First Board:

The Cochise Regional Partnership Council is pleased to present to the First Things First Board two strategies for consideration of approval. The first strategy is related to coordination and collaboration. After engaging the community, working very closely with a consultant and laborious hours on the project, the Cochise Regional Partnership Council is proposing a long-term regional strategy that focuses on addressing coordination of services and collaboration of grantees and key stakeholders throughout the entire Cochise County.

The Cochise Regional Council is respectfully requesting the Board to approve this strategy and implementation to begin in Fiscal Year 2011. On June 24, 2010 the Regional Council motioned to approve this strategy, using \$100,000 from the Coordination strategy within the Cochise FY2011 Funding Plan which is currently *on hold* by the board.

The second strategy for the Board's consideration of approval derives from a lack of response to the Pre-K Expansion and Capacity RFGA that was released in April. Representatives from the Regional Council, in partnership with the community, collectively discussed and identified barriers to the RFGA process. From this conversation, the need for additional scholarships for 3 to 5 year olds not already in kindergarten emerged. This strategy will allow the Cochise Region to expand the current Childcare Scholarship Strategy to serve an additional 25-28 children.

On June 24, 2010 the Cochise Regional Partnership Council motioned to move \$100,000 from the current Pre-K Expansion and Capacity strategy to the current Childcare Scholarship Strategy. The Cochise Regional Council is respectfully requesting the Board to approve the revision and implementation to begin in Fiscal Year 2011.

Thank you for your consideration.

Sincerely,

Jane Strain, Chair Cochise Regional Partnership Council



FIRST THINGS FIRST

The right system for bright futures

COCHISE REGIONAL PARTNERSHIP COUNCIL 2011 FUNDING PLAN SUMMARY—REVISED

Regional Allocation 2011: \$2,678,130

Carry Forward from 2010: \$268,552

Funding Available for Allocation in 2011: \$2,946,682

Prioritized Needs	Goal Area	Proposed Strategies	Portion of Regional Allocation	Recommendation to the Board
Coordinated efforts and expanded resources to provide for enhanced, effective and collaborative family support services and limited access that support children's early developmental milestones surrounding early literacy.	Family Support	Strategy 1 Home Visitation Programs	\$1,119,289	Approved January 26, 2010
Educated, bilingual, skilled workforce for speech/language, OT, and PT therapies.	Health	Strategy 2 Speech/PT/OT Therapists	\$350,000	Approved January 26, 2010
Increased quality early care and education options for families.	Quality, Access, & Affordability	Strategy 3 Quality First	\$586,050	Approved January 26, 2010
Expanded high quality and highly skilled early child care workforce.	Professional Development	Strategy 4 T.E.A.C.H.	\$62,385	Approved January 26, 2010
Outreach, education and guidance on nutrition cooking demonstrations and prevention of childhood obesity and limited knowledge and resources surrounding oral health education.	Health	Strategy 5 Health & Nutrition	\$168,552	Approved March 23, 2010
Limited number of certified infant and toddler mental health specialists.	Health	Strategy 6 Mental Health Credentials	\$49,999	Approved January 26, 2010
Limited knowledge and information about the importance of early childhood development and health.	Communication	Strategy 7 Communications	\$60,000	Approved
Alignment of standards and resources that impact practices and programs.	Coordination	Strategy 8 Coordination	\$100,000	Recommend Approval
Limited access to, and low utilization of, preventive health care.	Health	Strategy 9 Oral Health	\$200,000	Recommend Approval
Limited access to affordable early care and education	Access & Affordability	Strategy 10 Partial Child Care Scholarships	\$200,000	Recommend Approval

Expand Early Education and classroom experience for four and five year old children by increasing the number of children that receive comprehensive early childhood education programs, through a 9 or 12 month pre-kindergarten program.	Access & Affordability	Strategy 11 Pre-K Expansion/Capacity	\$0	
		Evaluation	\$50,000	Recommend HOLD
		Subtotal of Expenditures	\$2,946,275	
		Fund Balance	\$407	
		Grand Total	\$2,946,682	

Summary Financial Table

	SFY 2010	SFY 2011	SFY 2012 ESTIMATED	Total
Revenue				
FTF Total Allcoction for the SFY	\$3,025,096	\$2,678,130	\$2,678,130	\$8,381,356
Fund Balance (carry forward from previous SFY)		\$268,552	\$407	
Total Available Funds	\$3,025,096	\$2,946,682	\$2,678,537	
	SFY 2010 OBLIGATED	SFY 2011 PROPOSED	SFY 2012 ESTIMATED	Total
Strategies				
1. Home Visitation Programs	\$1,119,289	\$1,119,289	\$1,119,289	\$3,357,867
2. Speech/PT/OT Therapists	\$350,000	\$350,000	\$350,000	\$1,050,000
3. Quality First	\$330,000	\$586,050	\$586,050	\$1,502,100
4. T.E.A.C.H.	\$135,000	\$62,385	\$62,385	\$259,770
5. Health & Nutrition (adding)	\$39,090	\$168,552	\$168,552	\$376,194
6. Mental Health Credentials	\$49,999	\$49,999	\$49,999	\$149,997
8. Coordination	\$10,000	\$100,000	\$100,000	\$210,000
9. Oral Health	\$0	\$200,000	\$200,000	\$400,000
10. Partial Scholarships (New)	\$0	\$200,000	\$100,000	\$300,000
11. Pre-K Expansion/Capacity (New)	\$0	\$0	\$100,000	\$100,000
Emergency Food Boxes	\$62,784	\$0	\$0	\$62,784
Emergency Scholarships	\$600,382	\$0	\$0	\$600,382
Communication (Strategy 7)	\$60,000	\$60,000	\$60,000	\$180,000
Needs and Assets	\$0	\$0	\$10,000	\$10,000
Evaluation	\$0	\$50,000	\$50,000	\$100,000
Subtotal Expenditures	\$2,756,544	\$2,946,275	\$2,956,275	\$8,659,094
Fund Balance (carry forward)	\$268,552	\$407	-\$277,738	-\$277,738
Total	\$3,025,096	\$2,946,682	\$2,678,537	

Strategy 8: Coordination: Develop a service mechanism to address program and service coordination among state and other local agencies in the Cochise Region to improve the quality of early childhood programs through system change by working together for a seamless service delivery.

From the 2008 Needs and Assets Report, it became apparent that the geographic barriers and a lack of experience in the practical and contractual aspects of systems coordination often hamper efforts to build an effective system within Cochise County. There is a need to foster program coordination efforts and to expand or enhance the coordination and integration of regional data, programs, services and resources for young children and their families. The absence of such mechanisms have been absent within Cochise County for some time. In community discussions stemming from 2008 funding plan development, the participants, including the Regional Council and key stakeholders identified many programs and resources within the County as community strength; however the lack of partnerships among programs for children and families was identified as a growing concern and weakness in the Region.

Research demonstrates that early childhood coalitions linking local, federal and state partners have made great impacts on policy and funding for early care and health issues. This is best demonstrated by the work of our Consultant, University of Arizona (see attached). The formations of coalitions increased the opportunity for all partners to network and reap the benefits of technical assistance, advocacy, professional development, and program and fund development. It is the intent of the Cochise Regional Partnership Council to mirror the success of such a campaign to benefit the children of the Cochise Region.

This strategy will allow a seamless coordination and collaboration system among the various programs and agencies within the entire County that supports the safe and healthy development of children birth through age five. Key Stakeholders from all agencies will meet to develop a system and service coordination alliance, which will ensure appropriate service delivery across early childhood systems in Cochise County.

The First Things First Cochise Regional Partnership Council contracted with the University of Arizona Mel and Enid Zuckerman College of Public Health (MEZCOPH) to work with the Council on its Coordination Strategy. The contract period extended from September 2009 through June 2010. Throughout the contract, a mini-study on Coordination and Collaboration was presented at 6 Cochise Regional Council meetings, with the final goal of presenting final outcomes of such study as well as a Coordination plan to the Council that could be implemented in SFY 2011.

Summary of Study:

- One individual or organization cannot coordinate/collaborate alone.
- Coordination may take place *within* one FTF grantee organization. Coordination may take place *between* FTF grantees. But for *sustainable systems change* coordination and collaboration must take place across agencies (FTF grantees and others), through collaborative work.
- Coordination/collaboration requires *planning*.
- Coordination/collaboration requires *resources*.
- Coordination/collaboration requires *leadership*.

- Coordination/collaboration takes *time*.

Based on the findings of the Coordination/Collaboration Study and discussions with Council members, the following are recommendations to further the goals of the First Things First Cochise Regional Partnership Council.

Develop a Cochise County Early Childhood Network of Stakeholders. Whether called a “network,” “alliance,” “action group,” or “coalition,” the goal of this entity is to utilize collaborative strategies such as networking, coordination, cooperation and collaboration to build a sustainable network of partners both within the FTF grantee system and outside of the grant system. Collaboration is a process that takes time and trust, and SFY11 should be seen as a continuation of groundwork laid by the School Readiness Board and the first years of First Things First in Cochise County, as well as a planning and development year for long term impact on improved coordination within early childhood systems. In the first year, initial steps should include:

Networking:

- Identify community stakeholders, existing networks, and partners in Cochise County.
- Develop materials for families and agencies that raise awareness of early childhood resources in Cochise County.
- Maintain updated information of community services on FTF Cochise website.
- Identify and participate in community events and activities in Cochise County where family and children’s services can be promoted.

Coordination:

- Work with Cochise County FTF grantees to reduce duplication of services and reach community more effectively.
- Assist Cochise County FTF grantees to coordinate internal services more effectively.
- Invite non-Cochise County FTF grantees to participate in a formal alliance (coalition, network...).
- Conduct community forums or events to address priorities around coordination/collaboration.
- Establish regular meetings and activities (quarterly, monthly...).

Future Steps and Activities Toward Sustainability. As the network becomes formalized, more collaborative efforts should take place. In future years partners may take on efforts to target “systems” or environmental/policy issues at the local community level.

Collaborative Leadership:

- Share needs/assets and identify data sources.
- Provide training, as needed, on data interpretation, needs, gaps, and collaboration.
- Assess stakeholder agreements, definitions, and common goals.
- Identify gaps in services and coordination.
- Define and prioritize “systems” to target.
- Collaboratively develop plan to address gaps.
- Identify roles in efforts and establish MOUs if applicable.

Data Collection:

- Guide Needs and Assets report process to specifically address coordination and/or invest extra evaluation monies for local data collection.
- Data collection should address: 1) Families' awareness of and satisfaction of early childhood services 2) Cochise County interagency awareness and cross referral systems 3) Partner satisfaction with communication, coordination, and collaboration.

To aid in this effort, the Council will utilize a full time staff position to support the goals and deliverables of all components of this strategy. Duties for this position will include:

- The organization and announcement of coordination meetings to include FTF grantees;
- Preparation of meeting materials;
- Production, development and distribution of a Community Resource Guide;
- Production of minutes for alliance meetings;
- Develop and maintain an early childhood resource data base;
- Serve as support staff to all individuals of the Alliance;
- Other duties as needed to complete FTF goals.

The Cochise Regional Partnership Council intends for this strategy to be a three year project. In years two and three, this collaborative will develop and maintain a coordination alliance for the purpose of continuing the service coordination and goals for this project. The alliance will meet every month and will be charged with making a report to the Cochise Regional Partnership Council every quarter.

Recourses are attached.

Lead Goal: FTF will lead cross-system coordination efforts among state, federal and tribal organizations to improve the coordination and integration of Arizona programs, services, and resources for young children and their families.

Key Measures:

1. Total number and percentage of public and private partners who report that FTF planning process and activities use family centered practices. (e.g. builds on family strengths, connects families with community resources, facilitates family interaction with early care and education professionals, offers the possibility of family and community input at all levels of decision-making)
2. Percentage of families with children birth through age five who report they are satisfied with the accessibility of information and resources on child development and health

Target Population:

This strategy will target all of Cochise County

	SFY2010 July 1, 2009 - June 30, 2010	SFY2011 July 1, 2010 – June 30, 2011	SFY2012 July 1, 2011 - June 30, 2012
Proposed Service Numbers	N/A	At least 20-25 participating organizations - countywide Develop resource guide	All applicable local organizations participating Maintain and update resource guide
Performance Measures SFY 2010-2012:			
<ol style="list-style-type: none"> 1. The number of service partners who join coordinated efforts 2. Number of partners who report improved communications among local agencies 3. Number of partners able to appropriately refer families to services 4. Monthly meetings 5. Community Resource Guide produced and distributed 6. Percent of families reporting an increase in knowledge and satisfaction with the level of coordination 			
<ul style="list-style-type: none"> • How is this strategy building on the service network that currently exists: <p>Currently most family support programs in the region operate independently and in silos. While there are many excellent programs, there is no true coordinated service network. This strategy will develop a service network where one currently does not exist. Families and service providers lack easy access to information about these programs and services that are offered in the Region. This strategy will support the existing service network by providing the community with accurate information about their programs. This will also be an asset to service providers who need access to information about available services. The strategy will continue to build on efforts already in the region to improve information and referral systems already in place.</p>			
<ul style="list-style-type: none"> • What are the opportunities for collaboration and alignment: <p>By providing consistently scheduled and facilitated Alliance meetings, this strategy will create numerous opportunities for participants to collaborate. The meetings will provide the forum for service providers to share information, reduce duplication, maximize resources, and address service gaps. All FTF funded programs and agencies are required to participate in the Alliance. This strategy also allows for the collaboration of local agencies not already involved in FTF programs.</p>			

SFY2010 Expenditure Plan for Proposed Strategy	
Population-based Allocation for proposed strategy	\$100,000.00
<p>Budget Justification:</p> <p>Children and families are served through a wide variety of health and early care and education programs and projects within Cochise County. When the Cochise Regional Partnership Council makes decisions about how to best support children and families in the region, it is essential that the regional service system is coordinated and integrated to ensure positive outcomes for children.</p> <p>The first year allocation will be used to bring agencies together to design the pilot program. The allocated amount will provide for 1 Full Time FTF Staff member; estimated salary, ERE's, and travel: \$75,000.</p> <p>\$20,000 will be used to develop, create and print a Community resource guide for the entire County.</p> <p>\$5,000 will be set aside for an outside facilitator for a neutral unbiased discussion.</p> <p>Total = \$100,000</p>	

Cochise First Things First Regional Partnership Council: Coordination Strategy

University of Arizona Zuckerman College of Public Health Page 1

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Building community capacity around chronic disease services through a collaborative interorganizational network --

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Downey, L. M., Ireson, C. L., Slavova, S., & McKee, G. (2008). Defining elements of success: A critical pathway of coalition development *Health Promotion Practice*, 9(2), 130-139.

In recent decades, coalitions have been established to address many public health problems, including injury prevention. A partnership among the Kentucky Injury Prevention and Research Center and four injury prevention coalitions has documented the developmental stages of successful coalitions. This developmental process was constructed through the analysis of participating coalition documents, such as each coalition's mission statement, bylaws or rules of operation, the use of committees within the organization, frequency of meetings, and additional historical documents. Themes from this analysis guided researchers in designing a critical pathway model that describes milestones in coalition formation. Critical components in coalition formation include a clear definition of the coalition structure, coalition enhancement, funding, community support, leadership, education and outreach to the community, membership, partnerships, data and evaluation, and publicity. These findings are applicable to public health professionals who work with community-based coalitions and citizens who participate in local coalitions.

Hasnain-Wynia, R. (2003). Overview of the community care network demonstration program and its evaluation. *Medical Care Research and Review*, 60(4 suppl), 5S.

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This article provides an overview of the evaluation of the National Community Care Network Demonstration Program, which began with 25 public-private partnerships selected from a diverse range of communities across the United States to address problems of lack of insurance, limited access to health care, and the health status of their most disadvantaged residents. The 25 public-private partnerships included an array of individual organizations representing health care providers, public health and human service agencies, local governments, community-based organizations, and religious and educational institutions. The specific findings of the evaluation are the focus of the articles in this issue. This overview article supplies the underpinnings of the evaluation, including the conceptual framework, methodological challenges, and a brief discussion of each of the papers and how they are linked.

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community health partnerships: Research, education, and action volume 2, issue 3, fall 2008 building a successful community Coalition–University partnership at the Arizona–Sonora border. *Progress in Community Health Partnerships: Research, Education, and Action*, 2(3)

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Shortell, S. M., Zukoski, A. P., Alexander, J. A., Bazzoli, G. J., Conrad, D. A., Hasnain-Wynia, R., et al. (2002). Evaluating partnerships for community health improvement: Tracking the footprints. *Journal of Health Politics, Policy and Law*, 27(1), 49.

Shortell, S. M. (2002). Evaluating partnerships for community health improvement: Tracking the footprints *Journal of Health Politics, Policy and Law*, 27(1), 49 <last_page> 92.

Tsasis, P., & Owen, S. M. (2009). Using the balanced scorecard in the development of community partnerships *Health Services Management Research : An Official Journal of the Association of University Programs in Health Administration / HSMC, AUPHA*, 22(1), 33-38.

The benefits of community partnerships have been well established in the health service literature.

However, measuring these benefits and associated outcomes is relatively new. This paper presents an innovative initiative in the application of a balanced scorecard framework for measuring and monitoring partnership activity at the community level, while adopting principles of evidence-based practice to the partnership process. In addition, it serves as an excellent example of how organizations can apply scorecard methodology to move away from relationship-based partnerships and into new collaborations of which they can select - using a formal skill and competency assessment for partnership success.

What coalition factors foster community capacity? lessons learned from the fighting back initiative -- zakocs and guckenbug 34 (2): 354 -- health education & behavior Retrieved

4/8/2010, 2010, from <http://heb.sagepub.com/cgi/content/abstract/34/2/354>

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