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# SFY 2012 Regional Funding Plan

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Central Phoenix  
Regional Partnership Council

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Submitted to the  
First Things First State Board  
for January 24-25, 2011

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**FIRST THINGS FIRST**

**CENTRAL PHOENIX  
REGIONAL PARTNERSHIP COUNCIL  
FUNDING PLAN SFY 2012  
July 1, 2011 – June 30, 2012**

- I. Regional Allocation Summary (Funds Available)**
  
- II. Prior Years' Review, and Planning for SFY 2012**
  - A. Progress with SFY 2010 and SFY 2011 Funding Plans; And SFY 2012 Planning
  - B. Budget: Regional Council Strategy Allotments
  - C. Changes in funding levels for strategies from SFY 2011 to SFY 2012
  
- III. System Building Impact**

**Section I**

**Regional Allocation Summary**

The following chart shows the total available funds to the Regional Council, by funding sources.

<b>Central Phoenix Allocations and Funding Sources</b>	<b>SFY 2010</b>	<b>SFY 2011</b>	<b>SFY 2012</b>
Population Based Allocation	\$11,172,677.00	\$10,502,474.00	\$10,490,810.00
Discretionary Allocation	\$2,886,855.00	\$2,602,110.00	\$3,516,188.00
Other (FTF fund balance addition)		\$2,301,510.00	\$1,820,867.00
Additional Income (other than FTF tobacco tax)	\$0.00	\$0.00	\$0.00
<b>Carry Forward from Previous Year</b>		\$4,707,985.00	\$4,451,843.00
<b>Total Regional Council Funds Available</b>	\$14,059,532.00	\$20,114,079.00	\$20,279,708.00

## **Section II Prior Years' Review, and Planning for SFY 2012**

For 2012 planning, Regional Councils are asked to review the strategies from years prior while they consider direction for SFY 2012. At their September 2010 meeting, the First Things First Board adopted priorities as were recommended by the Arizona Early Childhood Task Force. Following is the list of five priorities for First Things First action within the next one to three years. These are the roles for which FTF will establish measurable benchmarks and devote resources in order to achieve results for Arizona's young children and their families. These priorities are services which could be funded at both state and regional levels. Throughout this 2012 Regional Funding Plan, there are references to these new priorities. They are:

**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.

**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.

**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.

**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.

**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.

In addition, the Task Force recommended that FTF take a leadership role in three priorities that focus on program and process development at the state level. These are:

**Early Childhood System Funding** – Secure, coordinate, and advocate for resources required to develop and sustain the early childhood system. [This does not mean that FTF would be the sole funder of the early childhood system, but would take an active role in helping to increase and coordinate available resources.]

**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 educational system.

**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. [This is integral to improving the quality of early care and education settings.]

**Section II A**

The table below provides a summary of the Central Phoenix Regional Partnership Council’s prioritized needs and strategies for SFY 2012, as well as information on progress in SFY 2010 and SFY 2011.

<b>PRIORITY NEED: Limited Access to Quality Care and Education</b>						
<b>Description:</b>						
<p>There is a need to improve quality child care throughout the region by implementing strategies that focus on improving the quality of licensed and regulated centers and homes by 1) Increasing the educational level and wage compensation of child care teachers 2) Improving child care teacher retention in centers and homes by offering coaching and incentives and 3) Improving access to quality child care by providing child care scholarships to families. The 2010 Needs and Assets Report reflects the following:</p> <ul style="list-style-type: none"> <li>• Department of Economic Security certified homes greatly decreased by 110 during the past two years</li> <li>• High percentages of children in preschool were from poor families</li> <li>• 71% of families report cost as the single most important barrier to child care</li> <li>• 59% of families indicate the need for high, quality child care</li> <li>• 54% of families indicate the need for child care subsidies</li> </ul>						
<b>Strategy: Quality First</b>						
<b>Regional Title and/or short description:</b> Quality First will improve access to quality early care and education settings by providing program assessment, individualized coaching and quality improvement planning, financial incentives, T.E.A.C.H. scholarships and Child Care Health Consultation.						
<b>Service Units</b>						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of Center-based Providers Enrolled	17	17	14	30	30	34
Number of Home-based Providers Enrolled	4	4	1	4	4	4
TEACH (QF) Scholars	36	36	28	62	62	72
CCHC (QF) Centers	17	17	14	29	30	34
CCHC QF (Homes)	4	4	1	4	4	4
<b>Strategy: Child Care Scholarships</b>						
<b>Regional Title and/or short description:</b> Child Care Scholarships assist low income families’ access to quality child care by supplementing the cost of care. Scholarships provide continuity of care for families who might otherwise be unable to pay for quality care so that child-caregiver relationships are not disrupted.						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of Children Supported by a Scholarship	1,131	1,131	1,358	429*	429*	460*
* These represent the number of child care scholarships available in FY 2011 and FY 2012, not the number of children who received assistance.						

**Strategy: Mental Health Consultation**

**Regional Title and/or short description:** Mental Health Consultants provide assistance and support to early childhood providers and build staff capacity in caring for children with challenging behaviors. Consultants provide the following supports:

- Consulting with child care staff to build competence in forming responsive relationships while working with families in collaborative partnerships.
- Training activities for staff that enhances their abilities to the emotional well-being of children.
- Screening and assessments
- Family consultation
- Referrals to clinical and assessment services to children and families

Research findings indicate that prevention and intervention efforts to address mental health problems in early childhood may reduce significant personal and social difficulties in later childhood, adolescence, and adulthood. The earlier the intervention begins, the better the prognosis.

**Service Units**

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
<b>Number of Center-based Providers Served</b>	25	60 centers and homes (not broken out)	15*	25	25	25
<b>Number of Home-based providers served</b>	25			10	10	10

\* Asterisk marks any unverified numbers provided on this chart, but are considered viable

**1. Strategy Success**

- Quality First: A total of 14 centers and 1 home have enrolled and participated in quality improvement through Quality First. It is important to note that the majority of providers in the region are licensed centers, with Department of Economic Security certified homes greatly decreased by 110 during the past two years. In 2010, the region had 31 certified homes. Ten percent of the Central Phoenix Regional Quality First programs are participating in the Rating Pilot. The Council will maintain their commitment to high quality early care and education, and will increase the number of centers funded to participate by five in 2012.
- Mental Health Consultants in the Central Phoenix Region are part of a pilot project to coordinate services between other quality improvement programs, many of which are involved in the centers they serve. Consultants from each of these programs meet monthly to discuss progress and challenges. Consultants and other Quality First program participants coordinate and plan together to reduce the stress of directors and staff of having several programs with no coordinated approach. A total of 15 centers have received services from the Mental Health Consultants, impacting more than 500 children.
- Child Care Scholarships have been provided to 1,358 children at a cost of more than three million dollars in SFY10. An additional 77 scholarships were awarded in September, 2010, representing a steady commitment of the Council to support this strategy based on the current economic climate. The Central Phoenix Regional Council is heavily vested in funding scholarships in 2012, knowing that the cost of child care greatly impacts the ability for parents to work. It is important to note that according to the 2010 Needs and Assets Report, nearly two-thirds of the households with children under 18 had all parents working and 51 percent of single mothers were in the workforce in the City of Phoenix.

**2. Strategy Challenges**

- Mental Health Consultation Strategy- This strategy has experienced issues related to adequate capacity of professionals in the region. The funded target number of mental health consultants is five. To date, 1.5 mental health consultants provide services in the Central Phoenix Region. An average case load for each consultant is 5 centers/2 homes. In addition, coordinating services in Central Phoenix is particularly challenging because of the variety of programs within the region. These challenges are being addressed through a newly created collaboration pilot project.

**3. Strategy Changes for 2012**

- Participation in Quality First has increased by five child care centers.

**4. First Things First Priorities**

- All of the Quality, Access and Affordability strategies by the Central Phoenix Regional Partnership support providing high quality environments for young children. Scholarships for families with low incomes will ensure that children are cared for and supported in high quality settings while parents are working or looking for work.

**PRIORITY NEED: Need for More Training and Professional Development Opportunities for Early Childhood Care Providers**

**Description:**

Research on caregiver training has found a relationship between the quality of child care provided and child development outcomes. Professional training and credentialing of professionals appears to be lacking in the region. To date, seventeen of the 132 Department of Health Services licensed centers in Central Phoenix have an accreditation status, which indicates some modicum of professional training for staff. Providing families with high quality child care is an important goal for promoting child development. Research has shown that having child care providers who are more qualified and who maintain employee retention is associated with more positive outcomes for children. More specifically, research has shown that child care providers with more job stability are more attentive to children and promote more child engagement in activities.

**Strategy: T.E.A.C.H.**

**Regional Title and/or short description:** T.E.A.C.H. will expand the availability of scholarships for providers in addition to those provided through participation in Quality First T.E.A.C.H. funds coursework leading to a degree, certificate of completion or national CDA accreditation.

**Service Units**

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
<b>Number of Professionals Receiving Scholarships</b>	70	70	33	80	80	72

**Strategy: REWARD\$**

**Regional Title and/or short description:** REWARD\$ is a wage enhancement program that addresses two key issues affecting quality and access in early care and education settings: 1) retention of teachers and staff; and 2) qualifications of teachers and staff. The high turnover of early childhood staff directly impacts the quality of experience for children.

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Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of Incentive Awards Distributed	214	N/A	53*See Notes in the Strategy Challenges Section	225	169	112
<b>Strategy: Community-Based ECE Training</b>						
<b>Regional Title and/or short description:</b> Community-Based ECE Training strategy provides a variety of options for engaging the early care and education workforce in high quality professional development, including 1) college coursework 2) single day and multiple day seminars, workshops or trainings. This is a new strategy and will not be presented to the Board at this time.						
Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of Early Care and Education Professionals receiving professional development training.	Strategy was not implemented			Strategy was not implemented		TBD
<b>Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction</b>						
<b>1. Strategy Success</b>						
<ul style="list-style-type: none"> <li>While T.E.A.C.H. has not met target numbers, the impetus for continuing funding is in the hope that accommodations, such as program waivers will support the centers and scholars who are vested in continued professional growth. The Council recognizes the link between quality early care and education and provider education.</li> </ul>						
<b>2. Strategy Challenges</b>						
<ul style="list-style-type: none"> <li>Barriers for T.E.A.C.H. include the provision of successful outreach in the community; economic conditions resulting in centers and staff not able to afford their portion of the scholarships as well as a reduction of staff for many centers.</li> <li>FTF Professional REWARD\$ did not meet its target service number. The strategy was not implemented until late in the spring of 2010 and community outreach was limited.</li> </ul>						
<b>3. Strategy Changes for 2012</b>						
<ul style="list-style-type: none"> <li>Targeted service numbers for T.E.A.C.H. were reduced for 2012 from 80 to 72. To maintain the current funding level, a reduction of target service numbers is reflected due to the overall cost of scholarships.</li> <li>Targeted service numbers for REWARD\$ were reduced for 2012 from 225 to 112. The funding amount has been decreased by half.</li> <li>The Community-Based ECE Training Strategy is under development for 2012. The strategy will not be presented to the Board for approval in the 2012 Funding Plan, but will remain as a placeholder in the amount of \$100,000.00.</li> </ul>						

**4. First Things First Priorities**

The Central Phoenix Regional Partnership remains committed to addressing the need for highly qualified early care and education professionals. The professional development strategies identified by the Council align with the First Things First Priority of Professional Development System. Specifically, these strategies insure:

- More early care and education professionals have access to ongoing education and training to meet their professional development requirements and goals across Arizona.
- More early childhood care and education professionals across Arizona have degrees and/or credentials in early care and education.

**PRIORITY NEED: Uninsured Children and Access to Preventative Health Care**

**Description:**

Children without medical insurance have a difficult time obtaining primary and specialty care. They are more likely to be sick as newborns, less likely to be immunized as preschoolers, and less likely to receive medical treatment for injuries. Undiagnosed and untreated medical conditions can result in long-term health and learning problems. The Needs and Assets Report reflects the following:

- More than one in three children in the City of Phoenix have public health coverage.
- 43% of families cite lack of access to free or low cost health services.
- 33% of families cite the need for health promotion and disease prevention education.

**Strategy: Health Insurance Enrollment**

**Regional Title and/or short description:** Health Insurance Enrollment provides assistance to families to maintain and expand health insurance coverage. Assistance to families may include:

- Explaining options available
- Completing and submitting the application
- Completing the reapplication

Enrollment assistance is a proven practice for improving and increasing health coverage in public programs. Today, community application assistance occurs nationally in a wide variety of settings, including health clinics, Head Start programs, recreation centers, and homeless shelters. Reports indicate that such assistance can make a difference in assuring that children are covered.

Successful efforts include public awareness campaigns, outreach and enrollment assistance by trusted, health or social service oriented community-based organizations. Application assistance and follow up are integral parts of such efforts.

**Service Units**

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
<b>Number of Families Receiving Enrollment Assistance for Health Insurance</b>	Strategy was not implemented			1000	540	1000

**Strategy: Developmental and Health Screening**

**Regional Title and/or short description:** Vision and Hearing Screening involves two approaches to an integrative screening system:

- Development of a team of screeners that will provide mass screenings at various community sites in collaboration with community partners that are not currently providing screenings.

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- Partnering with existing programs to include sensory screenings in their current provision of services by providing them access to equipment, training and collaboration to evolve to a sustainable system change.

If not detected and treated early, vision and hearing problems in children can lead to a variety of long-term consequences. Children are often unaware that they are seeing or hearing “less” than they should, and they often do not complain of visual or auditory difficulties. An understanding of the importance of vision and hearing screening by child care programs, teachers, school nurses, and parents is critical to the outcome of a student’s academic success.

**Service Units**

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of Children Receiving Screenings	Strategy was not implemented			TBD	Finalizing RFGA	TBD

**Strategy: Health Coordination/Medical Home**

**Regional Title and/or short description** Through Health Coordination the Central Phoenix Regional Council plans to provide Health Care Access Coordination services, based on successful models in other states, to assist high-risk families in the region access basic health services for their young children. The goal would be to increase the number of children with health coverage by providing insurance enrollment assistance as well as follow-up “care coordination” assistance to families to ensure that each child utilizes their medical home and maintains their health coverage.

The Central Phoenix Regional Partnership Council recognizes the importance and challenges of connecting children to the health care services they need. A child's good health is the foundation for a lifetime of opportunity and success. Unfortunately, Arizona children often do not get connected to the health coverage, health care, and support services they require to maintain good health.

There are a number of barriers that families in the region face in accessing health care and maintaining the continuity of care that young children require. Such barriers are most profound among families in crisis situations, such as those experiencing homelessness, domestic violence or with chronic health care needs.

Families and care providers often face challenges accessing or coordinating needed care. Families in crisis (e.g. those in domestic violence situations) may not be able to get needed documentation to enroll their children in public health coverage. Those same families may also need multiple family support and health services. Referrals to such services are often quite haphazard, and families and service providers often struggle to figure out how to “piece together” a disconnected array of health resources. Families and service providers often need advice and assistance in obtaining available services, navigating complex systems and bureaucracies, and coordinating care.

**Service Units**

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of Children Receiving Services	22	97 children and families (not broken out)*	14	1,028**	878	1,028
Number of Families Receiving Services	22		N/A		478	1,028

\* The FY10 contracted numbers were based on two-month contracts.

\*\* The FY11 target numbers were combined projections of both children and families/not broken out.

**Strategy: Health Professionals Education and Outreach**

**Regional Title and/or short description:** The Health Professionals Education and Outreach Strategy expands and enhances existing, evidence-based programs aimed at training resident physicians in a hospital. The potential to improve developmental outcomes in children through planned interventions is now well established. Because nearly all children under 5 years-of-age participate in well-child care, the healthcare setting is an ideal place for assuring optimal development of children. However, the practice of developmental screening and promotion of optimal development in primary pediatric care practice varies tremendously and is less than optimal in most places.

Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of Professionals Receiving Trainings	701	130	461	701	684	701

**Strategy: Allied Health Training**

**Regional Title and/or short description:** Throughout Arizona, there is a critical shortage of qualified professionals in areas of Speech, Physical Therapy and Behavioral Health and Special Education with the necessary education, training and/or experience to appropriately address the needs of young children from birth through age five; a time when intervention can have the greatest impact.

This Strategy will seek to increase the number of health and mental health specialists with expertise in the 0-5 population by providing training opportunities to new professionals in the field and supporting continuing education for existing health and mental health professionals.

Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
N/A	Strategy was not implemented			Strategy was not implemented		TBD

**Summary of Progress and Challenges  
Rationale for Changes to SFY12  
Alignment with Strategic Direction**

- 1. Strategy Success**
- The Health Insurance Enrollment strategy seeks to reduce barriers to access for services by providing refugees with poor or no English skills with enrollment assistance. Numerous languages are represented. The Health-E Arizona user guides are created in various languages to increase usage of the site. This strategy is in the beginning phases of development.
  - An enhancement component of the Health Insurance Enrollment strategy involves an interagency collaboration. Coordination has taken place, with staff from three agencies meeting at least weekly to develop detailed requirements for the “Choose a Health Care Screen”. To date, Phase One of the process has been activated; Phase Two is pending.
  - Health Coordination has experienced a strong momentum for success, with just two months of start up in 2010.
  - Health Professionals Education and Outreach strategy continues to strengthen pediatric and specialty care to unique patients between the ages of zero and five. An excess of 16,000 children have been seen by sixty-

one residents who have received training in developmental issues during the continuity clinic experience. The pediatric residents' enthusiasm for the trainings and workshops supported by this strategy denotes success, as does the number of children served.

**2. Strategy Challenges**

- Allied Health Strategy- The development of this strategy has been problematic. An RFGA was drafted in 2009 for 2010 implementation. No applications were received. Staff began drafting a new Scope of Work in preparation for the release of an RFGA in December, 2010. Allocation for this strategy is \$500,000.00. During the course of a newly developed Scope of Work for the RFGA, questions arose about best practice as it relates to 1) providing one-time training and conferences, 2) measurable outcomes. The research conducted for this strategy points to a need to develop a *professional development series* for each specialty, with a clearly developed set of best practices for each. The original Scope of Work no longer reflects the Council's intent. In October, the Council voted to remove the strategy in 2011, and recraft the strategy to meet the expectations of the Council in 2012.
- Developmental and Health Screening- A Vision and Hearing RFGA was drafted in 2009 for a 2010 implementation. No applications were received. Staff met with Council members to assure that the original intent of the Strategy was maintained.

**3. Strategy Changes for 2012**

- Health Insurance Enrollment- The Council decreased this strategy allowing for the changes in the health care system in FY 2012, and current usage.
- Allied Health Strategy- Work continues with the Council to assure the intent of the strategy is maintained. *The Allied Health Strategy is under development and will not be presented to the Board for approval in the 2012 Funding Plan, but will remain as a placeholder in the amount of \$500,000.00.*

**4. First Things First Priorities**

- The Central Phoenix Preventative Health Care Strategies align with the First Things First Priorities, which includes 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.

**PRIORITY NEED: Limited Services and Support for Family, Friend and Neighbor Caregivers**

**Description :**

There are more than 53,000 children 0-5 living in the Central Phoenix Region in 2010. The number of children being cared for in homes is unknown. However, national estimates suggest that as many as 60 percent of children need child care due to parent's employment. Of these, as many as 50 percent of children aged 5 and under are cared for in home-based settings. Child care provided by family, friend and neighbor. Nationally this is the most common type of child care for children under age 5 whose parents work and nearly half of all children spend their days – and sometimes their nights – in these types of settings.

**Strategy: Family, Friend and Neighbor**

**Regional Title and/or short description:** Family Friend and Neighbor care is a strategy to provide support, training, resources and referral for unregulated providers caring for children in their homes in order to increase quality of care provided. Delivery of service includes:

- Group meetings and trainings delivered in a series of sessions bring home-based providers together with qualified and experienced staff to learn elements of quality care and safety.
- Financial incentives to help purchase safety and quality improvement equipment and materials.

Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of Home-based Providers Served	285	285	306	255	255	255
<b>Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction</b>						
<b>1. Strategy Success</b> <ul style="list-style-type: none"> <li>Family, Friend and Neighbor has been successful in the Central Phoenix Region. Training and support group sessions have been well attended, and providers are enthusiastic attendees. The group sessions provide training, support and materials to 306 family, friend and neighbor providers. This number reflects an average just slightly higher than is typical in other regional training-support groups. In Central Phoenix, multiple collaborative partnerships have been formed, allowing for multiple training-support groups throughout the community.</li> </ul>						
<b>2. Strategy Challenges</b> <ul style="list-style-type: none"> <li>None Noted</li> </ul>						
<b>3. Strategy Changes for 2012</b> <ul style="list-style-type: none"> <li>Target service numbers reflect a shift to a realistic trainer to provider ratio.</li> </ul>						
<b>4. First Things First Priorities</b> <ul style="list-style-type: none"> <li>While this strategy is not a First Things First priority due to its support of unregulated child care, the Council views it as an important component on the continuum of services for families and children in Central Phoenix. According to the Needs and Assets Report, in the Central Phoenix Region, the most common child care provider is a grandparent or relative (45%). Additional statistics indicate that one out of 10 children younger than six lives in a household headed by their grandparents. In the Phoenix Elementary District it is one out of five young children. These findings frame the rationale the Central Phoenix Regional Partnership Council adopted when opting to refund the Family, Friend and Neighbor Strategy for 2012.</li> </ul>						
<b>PRIORITY NEED: Lack of Access or Prenatal/Postnatal Services and Support</b>						
<b>Description:</b> Adequate prenatal care is vital in ensuring the best pregnancy outcome. A healthy pregnancy leading to a healthy birth sets the stage for a healthy infancy during which time a baby develops physically, mentally, and emotionally into a curious and energetic child. Yet in many communities, prenatal care is far below what it could be to ensure this healthy beginning. Some barriers to prenatal care in communities and neighborhoods include the large number of pregnant adolescents, the high number of non-English speaking residents, and the prevalence of inadequate literacy skills. In addition, cultural ideas about health care practices may be contradictory and difficult to overcome, so that even when health care is available, pregnant women may not understand the need for early and regular prenatal care.						
<b>Strategy: Prenatal Outreach</b>						
<b>Regional Title and/or short description:</b> Prenatal Outreach will establish or expand a comprehensive prenatal/post natal outreach, support, and information program for parents in the Central Phoenix Region.						

Service Units						
Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of adults receiving community-based training	595	310 pre and post natal women (not broken out)	1,640* Duplicated numbers of women trained	700	700	700
Number of adults receiving home visitation services	154	310 pre and post natal women (not broken out)	154	250	250	250
<b>Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction</b>						
<b>1. Strategy Success</b> <ul style="list-style-type: none"> <li>• <b>The Pre/Post Natal</b> strategy has experienced success as evidenced by the number of women who have attended trainings and who have been enrolled in home visitation services. Retention rates of women who have stayed in home visitation remain high. Another measure of success is in the number of pregnant women who self-refer, implying that the reputation of programming in the community has been positive, and women are open to participation.</li> <li>• Collaboration between community agencies will increase refugee access to prenatal care.</li> <li>• The strategy reflects innovative clinical programs linking pre and post natal care with women between pregnancies, providing them with health care information and assistance. Women are presented with an individually tailored program provided to help reduce chronic health conditions before their next pregnancy.</li> </ul>						
<b>2. Strategy Challenges</b> <ul style="list-style-type: none"> <li>• None Noted</li> </ul>						
<b>3. Strategy Changes for 2012</b> <ul style="list-style-type: none"> <li>• None Noted</li> </ul>						
<b>4. First Things First Priorities</b> <ul style="list-style-type: none"> <li>• The Central Phoenix Regional Partnership remains committed to addressing the need for accessibility to Quality Health Care Coverage and Services. Specifically, these strategies insure collaboration with partners to increase access to high quality health care services.</li> </ul>						
<b>PRIORITY NEED: Lack of Parent Education and Support</b>						
<b>Description:</b> Parents in the Central Phoenix Region appear to need support and parenting information. Educational attainment among parents in the region is low, suggesting the need for more information and support for families who may be at-risk. According to the 2010 Needs and Assets Report, more than 60% of the babies born in the City of Phoenix had mothers with a high school diploma or less. One out of three families are single parent families, indicating a significant need for supplemental support and education. In addition, parents responding to surveys indicate that accessibility to resources that support them in their parenting ranks as a high need in the Region.						

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<b>Strategy: Home Visitation</b>						
<b>Regional Title and/or short description:</b> Home Visitation will serve to expand the capacity of home visiting programs increasing families' access to high quality, diverse and relevant information and resources to support their child's optimal development.						
<b>Service Units</b>						
<b>Service Units</b>	<b>FY 10 Target</b>	<b>FY 10 Contracted</b>	<b>FY 10 Actual</b>	<b>FY 11 Target</b>	<b>FY 11 Contracted</b>	<b>FY 12 Target</b>
<b>Number of Families receiving Home Visitation Services</b>	340	340	263	238	*238 See Notes in Strategy Challenges section	238
<b>Strategy: Family Support Coordination</b>						
<b>Regional Title and/or short description:</b> Family Support Coordination is a newly created strategy spearheaded by the Central Phoenix Regional Partnership Council. Outcomes to be achieved include the guiding principle that all families have the information, services and support they need to help their children achieve their fullest potential. The Strategy is under development at the Council level and will not be presented to the Board for approval in the 2012 Funding Plan, but will remain as a placeholder in the amount of \$1,000,000.00.						
<b>Strategy: Community-Based Literacy</b>						
<b>Regional Title and/or short description:</b> Community-based literacy seeks to expand the capacity of early language and literacy programs to provide supports and services to young children and their families. One component of children's readiness for school consists of their language and literacy development. Learning to read and write starts long before first grade and has long-lasting effects.						
Children's early experiences with books and print greatly influence their ability to comprehend what they read. Alphabet knowledge, phonological awareness, vocabulary development, and awareness that words have meaning in print are all pieces of children's knowledge related to language and literacy.						
Many children in the Central Phoenix region are at risk for low literacy attainment. Low educational attainment among parents and low income status are risk factors for literacy development. In the Central Phoenix Region, many children live below the Federal Poverty Level in some areas. Twenty six percent of Phoenix's children live at or below the poverty level.						
<b>Service Units</b>						
<b>Service Units</b>	<b>FY 10 Target</b>	<b>FY 10 Contracted</b>	<b>FY 10 Actual</b>	<b>FY 11 Target</b>	<b>FY 11 Contracted</b>	<b>FY 12 Target</b>
<b>Number of Participating Adults</b>	NA*	NA*	2,311 adults and 1,793 children	1,698	1,698	1,698
<b>Number of books distributed</b>	19,334	18,464	14,544	37,046	37,046	37,046
<b>* Target and contracted service units not identified in sfy 2010.</b>						

**Strategy: Crisis Intervention**

**Regional Title and/or short description:** Crisis Intervention provides additional family support to families with young children to avoid abuse and neglect, avert Child Protective Services involvement and keep families intact. Unfortunately, many children in Arizona are at risk for abuse and neglect in our state. According to the Child Welfare League, Arizona ranks fifth nationally in substantiated reports of child abuse and neglect.

Child abuse and neglect can result in both short-term and long-term negative outcomes for children. A wide variety of difficulties have been documented for victims of abuse and neglect, including mental health difficulties such as depression, aggression, and stress. Furthermore, child abuse and neglect have a direct relationship to physical outcomes such as ill health, injuries, failure to thrive, and somatic (physical illness) complaints. All children deserve to grow up in a safe environment.

National data suggests that the incidence of child abuse and neglect is far greater for children under 5 than older children. In Arizona, over half (57 percent) of all reports of child maltreatment in the state were in Maricopa County. Over one-third of the children removed from a home because of maltreatment were under the age of six in Maricopa County. In 2009, 625 children were removed from their home; 415 children were not placed with relatives.

**Service Units**

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
<b>Number of Families Receiving Services</b>	333	250	43* See Notes Below in Strategy Challenges Section	333	210	333

**Strategy: Food Insecurity**

**Regional Title and/or short description** The Food Insecurity Strategy will increase access to food and nutrition programs and emergency food boxes for low income families with children ages 0-5 in the Central Phoenix Region.

Research has shown that even moderate under-nutrition, the type seen most frequently in the United States, can have lasting effects on the brain development of children. According to the Center on Hunger and Poverty, inadequate nutrition is a major cause of impaired cognitive development, and is associated with increased educational failure among impoverished children.

Children in Central Phoenix are at risk for hunger. The majority of children in the Central Phoenix Region are members of low income families, living at or below 200 percent of the Federal Poverty Level (\$42,400 for a family of four). In Phoenix, twenty-six percent of children live in poverty.

**Service Units**

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
<b>Number of Food Boxes Distributed</b>	89,823	89,823	*89,823	80,000	80,000	80,000

**\* Note: In 2010 the data was aggregated for Maricopa County.**

**Summary of Progress and Challenges**  
**Rationale for Changes to SFY12**  
**Alignment with Strategic Direction**

**1. Strategy Success**

- **Home Visitation** services funded through this strategy have made significant strides including networking with other community agencies and providers. Memorandums of agreements have been tendered with ten hospitals throughout the county.
- **Community Based Literacy** Programs have been successful, exceeding targeted service numbers, thus increasing the 2011 target numbers for the distribution of books. Through the community-based literacy programs, a significant number of families representing more than one primary language have been trained.
- **Crisis Intervention** services responds to the critical needs of families with young children in crisis in the Central Phoenix Region. Outreach efforts are ongoing and inform potential referral services and parents about the availability of services. Services are available 24/7 for families in need of crisis intervention and potential referral sources. The scope of services is broad, beginning with immediate attention to the nutritional and health needs of the child, including a thorough developmental and medical screening for children using the residence for three to five days.
- **Food Insecurity** programs coordinate, collaborate and communicate with community partners such as universities, local farmers, schools and other critical agencies ensuring that families have information about available food assistance providers in the area. Inherent in the success of the strategy is the provision of positive, family centered and evidence-based financial literacy curriculum.

**2. Strategy Challenges**

- **Home Visitation Strategy:** Given the changes in the target population's needs (more serious needs and longer retention), caseloads have had limited openings and less turnover. In addition, Family Support Specialists, in order to reflect best practices, have been directed to minimize their caseloads to ensure accreditation, which accounts for the lower target numbers for 2012.
- **Crisis Intervention:** Target service numbers have been adjusted to reflect a trend noted in FY 2010 of families experiencing respite stays that are more than double of those in the past. This trend exemplifies the steady decline in the economic climate and the stress that families are experiencing. Additional variance in target service numbers includes an evaluation reporting adjustment to be implemented in FY2011.

**3. Strategy Changes for 2012**

- Family Support Coordination Strategy is underdevelopment at the Council level and will not be presented to the Board for approval in the 2012 Funding Plan, but will remain as a placeholder in the amount of \$100,000.00.

**4. First Things First Priorities**

- The strategies chosen by the Central Phoenix Regional Partnership Council provide a variety of high quality, culturally responsive, and affordable services, supports, and community resources for young children and their families. The strategies address the First Things First priorities through a continuum of services and supports for families with young children, from universal to targeted. Community-based Literacy programs are available to all families in the region. Home Visitation provides a more targeted service to families in need.

**PRIORITY NEED: Limited Capacity in Existing Early Education for Children with Special Needs**

**Description:** According to the U. S. Department of Health and Human Services, child care policies and practices for young children with special needs should reflect the values and goals of quality care in inclusive settings. The research literature suggests that including children with special needs with typically developing classmates supports the individual abilities, interests, temperaments, developmental rates, and learning styles of young children with disabilities. The foundation for such support is a quality early childhood program that ensures the participation of all children.

From 2006-07 to 2008-09, the number of children served by the Arizona Early Intervention Program (AZEIP) increased from 113 to 313, more than triple the increase statewide. While inclusive early care and education settings benefit young children, it is not clear that young children in the region have access to such opportunities.

**Strategy: Inclusion of Children With Special Needs**

**Regional Title and/or short description:** The Central Phoenix Regional Partnership Council wishes to foster inclusionary early child care and education opportunities for children ages 0-5. To do so, it plans to 1) Increase the number of quality early childhood education environments or classrooms in the region and 2) Increase opportunities for children with special needs to attend quality early childhood education in an inclusionary environment by providing early care and education with technical assistance, training, or special equipment needed to foster an inclusionary environment.

**Service Units**

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
Number of center based providers receiving support	12	12	18	25	25	25

**Summary of Progress and Challenges  
Rationale for Changes to SFY12  
Alignment with Strategic Direction**

**1. Strategy Success**

- This strategy has increased in scope over the last year. Through training, hands-on coaching and coordination with other providers, there have been improvements in the quality of education and inclusion opportunities for children with disabilities in early care and education settings in the region. As a result of this strategy, professional interventions and staff support has included a basic understanding of child development and the tools to perform developmental screenings.

**2. Strategy Challenges**

- None Noted

**3. Strategy Changes for 2012**

- The Council lowered the allocation for Inclusion for Children with Special Needs based on trends and expenditures.

**4. First Things First Priorities**

- 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.

**PRIORITY NEED: Need for Better Injury Prevention Efforts**

**Description:** According to a recent child fatality review process, conducted by the Arizona Department of Health Services, in 2009, 33% of child deaths could have been prevented. A total of 947 children younger than 18 years of age died in Arizona. Drowning deaths increased in 2009, and 100% of these deaths were considered preventable. In 28 drowning deaths, lack of supervision of a child around water was a contributing factor. Fifty-eight percent of all deaths occurred in the first year of life. Ninety-one sudden unexpected infant deaths occurred in unsafe sleep environments. Although the number of deaths due to prematurity declined in 2009, they still represented 25% of all child deaths. Deaths were disproportionately high among Hispanic, African American, and American Indian children, emphasizing the need to target these populations when implementing prevention strategies.

**Strategy: Injury Prevention**

**Regional Title and/or short description** Expand or enhance injury prevention efforts aimed at parents and providers caring for young children in the Central Phoenix Region. The strategy will focus on the provision of safety devices or equipment, such as car seats, tap water monitors to families, cribs and programs that focus on preventative safety measures, including burns and scalds. Provision of such items and devices would be accompanied by concrete instructions for parents and active parent involvement – practices that improves effectiveness of such distribution efforts.

- Home visitations and “safety inspections” to ensure safe home environment for at-risk families.
- Public information campaigns promoting safe practices, such as car seat use.

Service Units

Service Units	FY 10 Target	FY 10 Contracted	FY 10 Actual	FY 11 Target	FY 11 Contracted	FY 12 Target
<b>Number of participating adults</b>	9,230 (educators, service providers, and families with children)	9,230 (educators, service providers, and families with children)	2,215	1,208	1,208	1,208

\* In 2010, providers, families and children were counted. In 2011-2012 participating adults will be counted.

**Summary of Progress and Challenges  
Rationale for Changes to SFY12  
Alignment with Strategic Direction**

**1. Strategy Success**

- Great strides in providing injury prevention education and services to the children and families in the Central Phoenix Region have been noted. Collaboration efforts have provided consistent, quality programming to the community. Success stories include a myriad of ways in which children are protected as a result of the funding of this strategy. Included are; safety car seats that are properly installed for thousands of children; window locks and door guards assuring that children do not fall out of windows or leave their homes unattended; pool fencing; safe sleeping arrangements; gun locks and programs that prevent burns and scalds in young children.

<b>2. Strategy Challenges:</b> <ul style="list-style-type: none"> <li>• None Noted</li> </ul>
<b>3. Strategy Changes for 2012</b> <ul style="list-style-type: none"> <li>• The Council lowered the allocation for Injury Prevention based on trends and expenditures.</li> </ul>
<b>4. First Things First Priorities</b> <ul style="list-style-type: none"> <li>• The Central Phoenix Regional Partnership is committed to assuring access to quality preventative health care, encouraging collaboration among community partnerships.</li> </ul>
<b>PRIORITY NEED: Limited Public Knowledge and Information About the Importance of Early Childhood Development and Health</b>
<b>Description:</b> The Central Phoenix Regional Council recognizes the importance and effectiveness of working in partnership with the other Regional Councils and the FTF Board, speaking with one unified voice for young children to mobilize the community around a call to action. The need to collaborate across regions is clear, and the need to have coordinated messaging and communications efforts is self-evident.
<b>Strategy: Media</b>
<b>Regional Title and/or short description:</b> Media Buys including TV, radio, newspaper, grocery carts, floor mats and cooler decals, billboards, theater ads.
<b>Strategy: Community Outreach</b>
<ul style="list-style-type: none"> <li>• <b>Regional Title and/or short description:</b> Community Outreach Liaison – Community Outreach Liaison to recruit and retain early childhood champions in the region. In addition, develops local community outreach plan in partnership with local council and coordinator. The target audiences of the plan are those identified in the FTF Strategic Communications Plan.</li> </ul>
<b>Strategy: Community Awareness</b>
<b>Regional Title and/or short description:</b> Working in partnership with the Regional Partnership Councils and the FTF Board, implement a community awareness and mobilization campaign to build the public and political will necessary to make early childhood development and health one of Arizona’s top priorities.
<p style="text-align: center;"><b>Summary of Progress and Challenges Rationale for Changes to SFY12 Alignment with Strategic Direction</b></p>
<b>1. Strategy Success</b> <ul style="list-style-type: none"> <li>• Community Outreach Liaison has been hired and trained.</li> <li>• Thirty-two “Children’s Champions” have been recruited.</li> <li>• Two Speaker’s Bureau’s were held on November 16, 2010 with a total of 19 participants.</li> </ul>
<b>2. Strategy Challenges</b> <ul style="list-style-type: none"> <li>• No challenges have been noted.</li> </ul>
<b>3. Strategy Changes for 2012</b> <ul style="list-style-type: none"> <li>• Media funding has been increased based upon the recommendations from the First Things First Communications director. Funding will be combined with the other regions to ensure media saturation of the area.</li> </ul>

- Community Awareness funds will also be increased to allow for purchasing of materials and provide sponsorship and/or participation in community events.
- The Council has allowed for a potential strategy increase up to 10%, based on an assessment of programming during contract renewals in the spring.

#### **4. First Things First Priorities: Building Public Awareness and Support**

The Central Phoenix Regional Council's communications strategies will build public awareness and support by implementing the recommendations from the Statewide Communication Plan's objectives which include:

**Objective One:** Ensure consistent messaging about FTF internally and externally.

**Objective Two:** Position FTF as a leader in efforts to fulfill Arizona's commitment to our youngest kids

- Media Buys including TV, radio, newspaper, grocery carts, floor mats and cooler decals, billboards, theater ads.

**Objective Three:** Build and drive support from the general public, elected officials and additional target audiences for investment in programs and services for Arizona children five years old and younger.

- Community outreach to recruit and retain early childhood champions in the region.

**Objective Four:** Inform Arizona caregivers of children five years and younger about early childhood program and services, in particular FTF statewide initiatives and regionally supported strategies.

- Distribution of collateral materials as part of local parent education and awareness strategies.
- Inform the community through various outreach efforts including newsletters, submissions to partner newsletters, sponsor and/or participate in community events.
- Conduct media and community outreach on grant awards and success of programs and services.

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**Section II B**

**Budget: Regional Council Strategy Allotments (Date: 1/11/11)**

Central Phoenix Regional Partnership Council Operational Plan					2012 Proposed Allotments
	2010		2011		2012
<b>FY Allocation</b>	<b>\$14,059,532.00</b>		<b>\$15,406,094.00</b>		<b>\$15,827,865.00</b>
<b>Carry Forward From Previous Year</b>	<b>na</b>		<b>\$4,707,985.00</b>		<b>\$4,451,843.00</b>
<b>Total Funds Available</b>	<b>\$14,059,532.00</b>		<b>\$20,114,079.00</b>		<b>\$20,279,708.00</b>
Strategies	Allotted	Expended	Allotted	Awarded	Proposed
Quality First (statewide)	\$444,630.00	\$255,628.31	\$838,700.00	\$780,129.00	\$826,000
Child Care Health Consultation (statewide)	\$70,000.00	\$49,987.99	\$110,000.00	\$110,000.00	\$152,000
Child Care Scholarships	\$4,864,986.00	\$4,692,819.32	\$3,686,119.00	\$3,686,119.00	\$4,129,400
Mental Health Consultation	\$290,000.00	\$98,481.20	\$600,000.00	\$547,734.00	\$600,000
Scholarships TEACH (statewide/regional)	\$337,080.00	\$47,422.87	\$427,160.00	\$426,514.00	\$357,800
FTF Professional REWARD\$ (statewide/regional)	\$450,000.00	\$30,900.00	\$450,000.00	\$450,000.00	\$247,500
Community Based ECE Training	\$0.00	\$0.00	\$0.00	\$0.00	\$100,000
Health Insurance Enrollment	\$250,000.00	\$14,791.09	\$500,000.00	\$222,992.00	\$222,992
Developmental & Health Screening	\$0.00	\$0.00	\$500,000.00	\$190,137.00	\$500,000
Health Professionals Education and Outreach					
a) Resident Training	\$351,446.00	\$178,852.50	\$500,000.00	\$477,421.00	\$477,421
b) Allied Health Training	\$0.00	\$0.00	\$0.00	\$0.00	\$500,000
Family, Friends & Neighbors	\$500,000.00	\$305,825.71	\$500,000.00	\$500,000.00	\$500,000
Crisis Intervention	\$500,000.00	\$345,463.37	\$600,000.00	\$319,826.00	\$600,000
Health Coordination/Medical Home	\$250,000.00	\$111,759.98	\$1,000,000.00	\$904,458.00	\$1,000,000
Food Insecurity	\$771,870.00	\$537,909.31	\$400,000.00	\$400,000.00	\$400,000
Prenatal Outreach	\$500,000.00	\$391,396.41	\$600,000.00	\$592,381.00	\$592,381
Home Visitation	\$1,213,567.00	\$1,110,541.80	\$1,200,000.00	\$1,200,000.00	\$1,167,375
Family Support Coordination	\$15,000.00	\$0.00	\$15,000.00	\$8,938.00	\$1,000,000
Community-Based Literacy	\$500,000.00	\$397,846.76	\$600,000.00	\$498,405.00	\$600,000
Inclusion of Children with Special Needs	\$1,000,000.00	\$292,450.19	\$1,000,000.00	\$734,680.00	\$734,680
Injury Prevention	\$500,000.00	\$463,144.82	\$600,000.00	\$500,000.00	\$500,000
Media (FTF Directed)	\$0.00	\$0.00	\$364,134.00	\$362,972.00	\$364,134
Community Outreach (FTF Directed)	\$16,000.00	\$15,925.00	\$105,000.00	\$96,200.00	\$105,000
Community Awareness (FTF Directed)	\$0.00	\$0.00	\$0.00	\$0.00	\$11,645
Evaluation (FTF Directed)	\$0.00	\$0.00	\$769,042.00	\$769,042.00	\$669,613
Arizona Health Survey (FTF Directed)	\$0.00	\$0.00	\$30,278.00	\$30,278.00	\$0
Child Care Study (FTF Directed)	\$0.00	\$0.00	\$197,201.00	\$197,201.00	\$0
Children's Budget (FTF Directed)	\$0.00	\$0.00	\$7,253.00	\$7,253.00	\$0
Needs and Assets (FTF Directed)	\$16,000.00	\$10,400.00	\$25,102.00	\$25,102.00	\$0
Parent Kits - Study (FTF Directed)	\$0.00	\$0.00	\$37,247.00	\$0.00	\$0
<b>Total</b>	<b>\$12,840,579.00</b>	<b>\$9,351,546.63</b>	<b>\$15,662,236.00</b>	<b>\$14,037,782.00</b>	<b>\$16,357,941</b>
<b>Carry Forward to Following Year</b>		<b>\$4,707,985.37</b>	<b>\$4,451,843.00</b>		<b>\$3,921,767</b>

**Section II C Information about changes in funding level for strategies from 2011 to 2012**

<b>Strategy Name</b>	<b>Previous Funding Amount (SFY 2011)</b>	<b>New Funding Amount (SFY 2012)</b>	<b>Rationale for Change in Funding</b>
Quality First	\$838,700.00	\$826,000.00	The allocation in 2012 is intended to fund 5 additional programs. In 2011, \$1,000,000.00 was allocated for Quality First, which included CCHC and T.E.A.C.H. Since then, the full amount has been broken out by line item. The funding amount of \$1,000,000.00 includes roll-over from 2010. The Regional Council intends to sustain support for each enrolled center or home for a three year period.
Child Care Health Consultation	\$110,000.00	152,000.00	There is an increase in funding annually in order to increase the service numbers in subsequent years.
Child Care Scholarships	\$3,686,119.00	\$3,754,000.00	Continuing support for families using scholarships from FY 2011.
Mental Health Consultation	\$600,000.00	\$600,000.00	Continuing to support enrolled centers and homes at same level.
Scholarships TEACH	\$427,160.00	\$357,800.00	Funding change reflects a decrease in service numbers, with an increase in the per unit cost.
FTF Professional Rewards	\$450,000.00	\$247,500.00	Decreased the funding from FY2011 from \$450,000 to \$225,000, a decrease that reflects a slower growth trend.
Community Based ECE Training (New for 2012)	\$0.00	\$100,000.00	Under development- Placeholder for future strategy funded at \$100,000.
Health Insurance Enrollment	\$500,000.00	\$222,992.00	The Council decreased this strategy allowing for the changes in the health care system in FY 2012, and current usage.
Developmental and Health Screening	\$500,000.00	\$500,000.00	Continuing to support the strategy of Vision and Hearing Screenings.
Health Professionals Education and Outreach	\$500,000.00	\$477,421.00	The Council adjusted allocation based on trends and expenditures.
Allied Health Training (New for 2012)	\$0.00	\$500,000.00	Under development- Placeholder for future strategy funded at \$500,000.
Family, Friends and Neighbors	\$500,000.00	\$500,000.00	Continuing to support the strategy due to high number of children cared for by relatives.
Crisis Intervention	\$600,000.00	\$600,000.00	Continuing to support the strategy of services for children and families at risk.
Health Coordination/Medical Home	\$1,000,000.00	\$1,000,000.00	Continuing to support the strategy, linking families to care and health services.
Food Insecurity	\$400,000.00	\$400,000.00	Continuing to offer support in the form of food boxes to families in need.
Prenatal Outreach	\$600,000.00	\$592,381.00	The Council adjusted allocation based on trends and expenditures.
Home Visitation	\$1,200,000.00	\$1,167,375.00	The Council adjusted allocation based on trends and expenditures.
Family Support Coordination	\$15,000.00	\$1,000,000.00	Under development- Placeholder for future

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			strategy funded at \$1,000,000.
Community-Based Literacy	\$600,000.00	\$600,000.00	Continuing to offer support for families served by literacy programs.
Inclusion of Children with Special Needs	\$1,000,000.00	\$734,680.00	The Council adjusted allocation based on trends and expenditures.
Injury Prevention	\$600,000.00	\$500,000.00	The Council adjusted allocation based on trends and expenditures.
Media	\$364,134.00	\$364,134.00	Continuing to support media efforts to inform parents about the critical nature of preparing children for kindergarten.
Community Outreach	\$105,000.00	\$105,000.00	Continuing to support all efforts to reach out to individuals and community agencies in Central Phoenix.
Community Awareness	\$0.00	\$11,645.00	Continuing to support all efforts to reach out to individuals and community agencies in Central Phoenix.
Carry Forward:		\$3,921,767.00	The Council realized a large amount of carry forward from 2011. The Council has planned for implementation of 3 new strategies, each under development to date. It is anticipated that these may require additional funding to expand the scope and reach of the strategy. The Council may determine additional funding for current strategies.

### **Section III**

#### **System Building Impact**

As the Central Phoenix Regional Partnership Council made decisions for the SFY2012 funding plan, they thoroughly considered the priorities in the region, how services (both in the identified goal area and across goal areas) can work together better, how the appropriate scope and reach within these identified strategies and goal areas can be achieved to make an impact, and how the Central Phoenix Council can create a foundation that develops a service delivery network that will ensure that all children enter school healthy and ready to succeed. Very intentional decisions were made regarding chosen strategies, funding levels, and expected impact.

The Central Phoenix Region stretches over 14 zip codes in the heart of the city of Phoenix. And while the Central Phoenix Region is headquarters for state, city, and county government, as well as the Headquarters for many human service organizations and businesses, the children in the region experience tremendous need. Over half (55 percent) of children living in Phoenix are low income. Twenty-six percent of children in Phoenix live in poverty. This is also a racially and ethnically diverse population that resides in homes that are often linguistically isolated. Forty percent of the children in the region live in a home where family members do not speak English well.

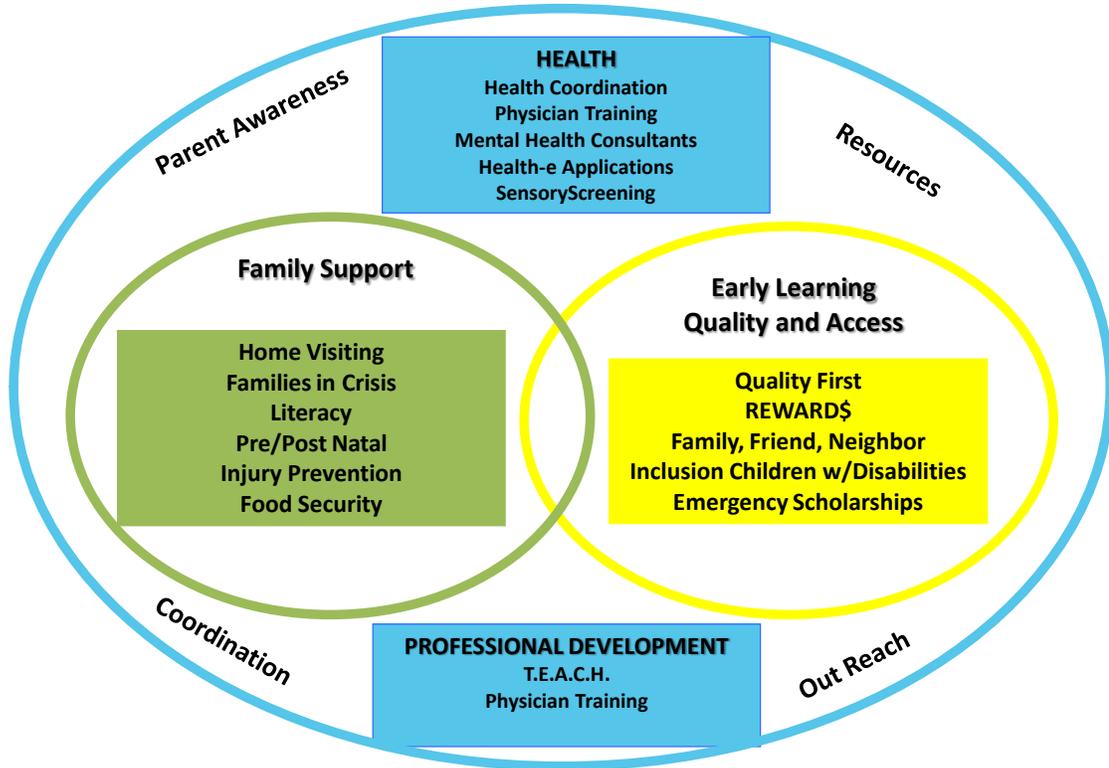
Additionally, the Central Phoenix Region is home to the vast majority of homeless shelters and crisis nurseries within Maricopa County. Forty-eight percent of the emergency shelters and sixty-four percent of the transitional shelters are located in the Central Region as well as ninety-four percent of permanent support housing. Homelessness and crisis breeds an environment of hopelessness in the region that contributes to safety and security. All of the zones labeled very high and most of the zones labeled high violent crime fall within the Central region. Phoenix Police Department reports that four zip codes in the Central region report the highest level of violent crimes. Safety and health is a tremendous issue to young children residing in the region. And although the Central Region is home to several large hospitals, access to health care and health coverage is a challenge for families with young children. Statistically, the current system is failing to protect young children.

Families in the heart of Phoenix are surrounded by organizations, and, yet, in the Central Phoenix Region, the highest risk children are being cared for by the least experienced care givers. Only fourteen percent of child care centers in the region meet minimal standards for high-quality care. In fact, results from a recent assessment of the child care centers in the region indicated that seventy-five percent of classrooms are barely meeting licensing standards.

While there is so much need in the region, there are also many organizations that are providing, or are able to provide relevant services. The missing piece is the coordination of services; a true service delivery network driven by collaboration and coordination. The Central Phoenix Regional Partnership Council has intentionally developed a network of service delivery strategies that start with a universal appeal and lays the foundation to a more targeted approach – both in service area and by intensity of service delivery. This network of evidence-based practices starts with the universal, family literacy services and injury prevention services and increases in intensity and focus to families in crisis. This network of services not only builds on organizations in the region, but also lays a solid foundation of support to all families with young children. There is not one single strategy that can sufficiently meet all

of the needs of this diverse community, but a network of coordinated services can make a difference in the numbers of families moving into levels of support that are foundational rather than interventional.

## Central Phoenix Service Delivery Network



The Central Phoenix Service Delivery Network provides a template for Coordination and collaborative efforts in the region that are critical to achieving successful outcomes for families with young children. Supporting families completely is accomplished by supporting them in different settings, in different ways, with different levels of intensity. These combined strategies have the potential to provide some type of service for nearly sixty percent of all children ages 0 through 5 and their families residing in the Central Phoenix Region.

The heart of the network of coordinated services lies within the Family Support and Early Learning framework, providing services across a continuum of service intensity which focuses on building capacity and enhancing the quality of the early childhood experience.

For example, the family literacy services offered in several pediatrician offices with the Reach Out and Read Program, through community settings that will distribute the School Readiness Kits to educate parents about early childhood, or the injury prevention outreach that keeps children safe will reach large numbers of children and families, while more intense programming around home visiting and crisis intervention will target those in most need, helping those families move away from crisis into stability. The latter intentionally target a smaller group of families in our region who are more at risk. Research has shown that this wrapping of comprehensive services will serve to have an impact on reducing risk factors and strengthening protective factors in these most vulnerable families. At every level of

intensity, staff and materials are available to work with families to help their children learn, to keep their children safe and to keep their children healthy.

Well coordinated family support also extends to care outside the home. If a child is not being cared for by his/her parents or extended family, the next most likely place for that child to receive care is in a regulated or unregulated child care facility or home. The Regional Council strongly believes in investing in the improvement of quality of care provided by those paid providers for our region's most precious resource. The Quality First Strategy, the T.E.A.C.H. Strategy, the Professional REWARD\$ Strategy, the Family, Friend and Neighbor Professional Support Strategy, the Child Care Health Consultants and Mental Health Consultants Strategies, and the Allied Health Professionals Training Strategy all work together to provide options for providers to receive additional training, improve quality, feel supported in their important work, and improve relationships with both the children they care for and their parents/families. These strategies aimed at the secondary caregiver complement and extend the impact of the vast array of family support strategies provided toward primary caregivers.

Information from the 2010 needs and Assets Report for the Central Phoenix region clearly identified a "lack of awareness" as one of the barriers to families accessing needed services and supports. A comprehensive, coordinated outreach effort can reduce the incidence of families not accessing services because they are either unaware that the service/support exists or go to the wrong place to get information and access.

The Council is examining a potential strategy, Family Support Coordination, to offset this dilemma. Included in the strategy is a two-prong outreach effort to: 1) provide broad public information about how to access services and supports and, 2) create an informed family support network with specific linkages and information about who in our community can best serve the family based on their needs.

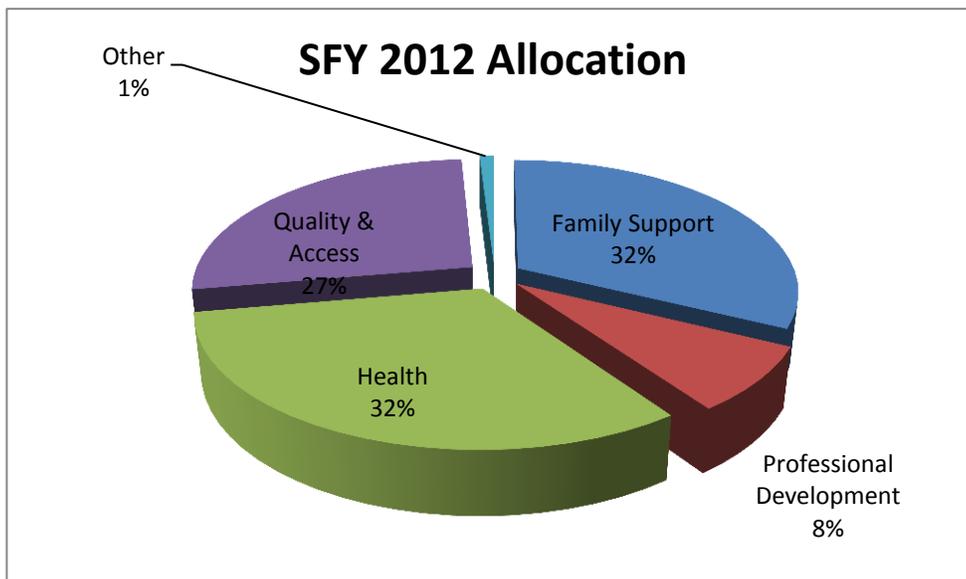
While organizations currently refer to other organizations based on the needs of the family, there is no systematic approach that would support informed, consistent and appropriate referrals across the family support network of providers. Outreach should include connecting families to the appropriate tier of service agencies based on the families' needs.

Family support is a continuum with multiple entry points. Families' best define the entry points based on their needs. A family in crisis will potentially seek support at a different entry point than a family needing information about early learning. However, in a systematic continuum, it will not matter where families enter, they will be referred/connected to the right place based on their needs.

A continuum of family support services cannot happen in a vacuum. It must include consistent engagement and assessment of the families' needs to: 1) determine the appropriate family support services and, 2) to ensure connection to that service. While a family may be provided with a food box without the appropriate engagement and assessment, the need for housing, domestic violence services, adult literacy or other needs will not be known.

The third impact area of the Central Phoenix Regional Partnership Council is to allocate funding to support an additional mixture of best-practice services to more directly impact the health needs of families with young children in the Central region, with a targeted focus on prevention and increased access. Screening services will work with families in community settings and help to support early identification of vision and hearing delays as well as improving parent/care giver knowledge regarding

positive health practices. Increased access to early screening should not only help to identify possible delays, but also help to prevent any further delays through referral to follow up services. The Regional Council intends to provide sufficient funding to support nearly 30 percent of children without health insurance to receive this service. Increased access to health insurance for at-risk families in the region is the focus of the Health-E Application Strategy. Assuring that the majority of the 9,000 children in the region who are eligible, but not enrolled, for public benefits in our region can successfully apply for them will be the focus of this strategy. This combination of services will again be integrated into “where families already are” by offering these services in child care centers and other easily accessible community settings. These services to increase access to preventative health screenings and health insurance will also complement those offered in the family support and early learning arena. Additionally, the Resident Physician Training strategy completes the network by including physicians in the support system. Working with Resident Physicians will increase the capacity of physicians in the Central region with their understanding the health and growth issues related to very young children.



This third impact area will be further enhanced by the addition of the Health Coordination strategy. The need for health coordination is a priority for the Central Phoenix Council. Coordinating health services removes the barriers that families face with the myriad of treatment and health facilities that may be available to families facing both common and chronic health issues. Again, the need for coordination crosses all the impact areas and while there have been barriers to identifying needed opportunities for coordination in these early stages of funding, it is encouraging to witness the collaboration between grantees especially between the Parent Support grantees.

To date the emphasis of coordination in the Central Phoenix Region has been on its grantees – specifically, to avoid duplication of services and to ensure there are linkages between providers. Currently, the existing Pre/post natal, injury prevention and home visiting grantees in the Central Phoenix Region are planning meetings with the purpose of developing the appropriate infrastructure for smooth referrals within home visitation services, health and safety, and other family support programs. These grantees are working together to share outreach efforts and referrals – assuring that a family

requesting services will be matched with the best fit. To further support these efforts, First Things First has developed a resource guide that outlines eligibility and referral processes for all home visitation programs funded by First Things First throughout the state.

The mix of strategies within the three focused areas of family support, professional development, and health are carefully aligned to achieve desired outcomes for this community by helping to build an effective early childhood development and health system. It will be the combined strength of the strategies funded through the Central Phoenix Regional Partnership Council and existing community resources that form a stronger, more capable community to meet the needs of young children and their families.