FY19 Early Childhood Action Agenda – Ingham Great Start Collaborative (Outcome 1)

This Goal, Objective and Strategy(ies) targets the fol	e following early childhood outcome(s): And addresses the following early childhood components:				childhood components:	
☑ Children are born healthy.			□ Physical Health □ Physical He			
☐ Children are healthy, thriving, and developmentally on track from birth to third grade.			∃ Social-Em	notional Health		
☐ Children are developmentally ready to succeed in	school at time of school e	ntry.	☑ Family Su	pports and Basic Need	ls	
☐ Children are prepared to succeed in fourth grade a	and beyond by reading pro	oficiently by	□ Parent Ed	lucation		
the end of third grade.						
Targeted Problem: Not all children are born healthy						
Key indicators:						
7.1 Per 1000 Infant Mortality Rate						
o 9.8 Per 1000 Infant Mortality Rate for African						
o 9.7 Per 1000 Infant Mortality Rate for Hispanio						
o 8.5 Per 1000 Infant Mortality Rate for families						
6.8% of live births to women with late or not prena						
• 34.9% of live births to women with less than adequ						
Goal related to the targeted problem: Prenata	I health care services are	easy for families	to access.			
Objective #1 of 2 related to the Goal: Barriers care services are identified and reduced.	(transportation, childcare,	parents' work so	chedules an	d doctors' office hours)	to accessing prenatal health	
Strategy 1: Understand family mindset about the	Prioritized Root Caus	ses related to	the	Performance Meas	sures (results from	
importance of prenatal health care and provider	Objective and address	ssed by this st	trategy:	Strategy 1):		
knowledge of barriers to access prenatal	There is a disconnect				care providers that offer a new	
healthcare.	perceptions of options	s that increase		option to reduce ba	•	
	accessibility. (Mindse			•	er of families missing pre-natal	
	Some families lack su				ments at Women's Health at	
	relationship) to be abl		natal	ICHD		
	health care services (Regulation)				
☐ Parent Led Strategy	System Characteristic(s) Addressed		S □ Components ☒ C	onnections ⊠ Regulations ⊠	
☐ Strategy came from Strengthening Families	Resources Power	` '		·	, and the second se	
Assessment						
Activities (small wins promoting the strategy	Persons or Groups	Target Dates		Resources	Progress Measures (outputs	
and addresses Root Causes)	Responsible				of Activities):	
ACTIVITY COMPLETE - Survey families about	Ingham County Health	Year 1		Survey, families to	Survey created	
prenatal health care preferences and services, including	Department, Ingham			survey, and people	Survey data collected	
centering pregnancy, with organizations such as Baby Cafe/Expectant Parents Organization, Shared	GSC Local Leadership			to administer the		
Pregnancy, Lansing School District, Willow Tree, Post-	Group			survey		
partum patients at Clinics/Prenatal office, Pregnancy						
Service						
- Create survey						
- Determine survey distribution method (who distributes						
and receives survey)						
- Collect survey data						

Analyze prenatal health care survey data to determine next steps. Review existing community organizations' prepregnancy and pre-natal education about the importance of OB appointments and care during pregnancy for mothers (first-time and non-first time)	Outcome 1 group Ingham County Health Department, Local Leadership Group	Year 2 Year 2/ongoing	Prenatal Health care survey data Outcome 1 Group Access to multiple pre-pregnancy and pre-natal community organizations.	Next steps in promoting the importance of prenatal health care determined Information on importance of pre-natal care included in community organizations pre-pregnancy and pre-natal
time.) Identify person with a connection to Women's Health and work towards tracking prenatal health care appointment data of women going to first prenatal appointment.	Ingham County Health Department	Year 2	ICHD staff time Women's Health	education. Women's Health staff person identified Data collection process identified
Strategy 2: Engage prenatal healthcare providers, funders, and other relevant decision-makers in shifting policies within their scope of work and daily procedures beyond traditional services to make prenatal health care services more assessable to families.	There is a disconnect be perceptions of options the (Mindset) Some families lack supplements of the second	ssed by this strategy: etween parents and Drs. nat increase accessibility.	Performance Meas Strategy 2): • # of prenatal health option to reduce bal	care providers that offer a new
□ Parent Led Strategy□ Strategy came from Strengthening FamiliesAssessment	System Characteristic(Resources □ Power	s) Addressed 🗵 Mindsets	s □ Components □ C	onnections ⊠ Regulations □
Activities (small wins promoting the strategy and addresses Root Causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of Activities):
Survey families regarding need for childcare and after- hours appointments. Upon analyzing survey data, work to provide supports to have childcare onsite to support parents' participation in prenatal services (i.e. Drs. Offices)	GSC Members, Great Start to Quality Central Resource Center	Year 2/ongoing	Prenatal Offices, Child care providers	One child care provider identified to provide child care
Objective #2 of 2 related to the Goal: Increase	knowledge and use of he	alth care benefits and other	supportive services for	prenatal care.
Strategy 1: Outreach to families about health care benefits in new and non-traditional ways.	The 211 dilemma – lack various resources - "gate (Connections) Many people don't know Health Department (Con There are negative perce resources at the Health Department of Reading and language presome parents to complete. There is a lack of knowless.	ssed by this strategy: of coordination amongst eway" to resources about resources at the nections) ptions about accessing Department (Mindset) roficiency makes it difficult for e applications (Component) dge and understanding of alth care insurance benefits.	care insurance ber# of people reques	knowledge and use of health

□ Parent Led Strategy□ Strategy came from Strengthening FamiliesAssessment	Resources - Power				
Activities (small wins promoting the strategy and addresses Root Causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of Activities):	
Communicate and share information about health care benefits in natural traffic areas, like grocery stores, mass media outlets (Facebook, advertisements) for families. • Craft "Questions to ask" about health insurance benefits in multiple languages that families can understand and resonate with	Local Leadership Group, Family Coalition, Ingham County Health Department, Pathways to Better Health	Year 2	Knowledge about health insurance benefits, Staff time, Health insurance navigators, Knowledge of predominant languages	"Questions to ask" sheet created "Questions to ask "sheets available at 5 natural traffic areas	
Develop of list of local "health fair" events (Cristo Rey, Juneteenth, Baby Fair, etc.) to distribute "Questions to Ask".	Ingham GSC Family Coalition	Year 2/Ongoing	"Questions to ask" Staff time	List of health fairs Created "Questions to ask" distributed	
Promote cultural competency/empathy in Ingham County Health Department providers and front line workers when sharing health insurance benefits information.	Ingham GSC and partners, Melea Bullock	Year 2	Cultural competency information/training	One cultural competency/empathy training offered locally	
Engage with one Medicaid Health insurance provider to share information about families' lack of knowledge of health insurance benefits and gain an understanding of the benefits offered. • Promote cultural competency so benefit information can be shared with families in ways that resonate with them	Ingham County Health Department, Ingham Department of Health Human Services Dana Watson	Year 2	Access to alternate modes of communication (interpreters, TDP) Blue Cross Complete	Primary health insurance provider contacted to see if there is staff who speaks languages other than English Connection with Medicaid health insurance provider occurs	

FY19 Early Childhood Action Agenda – Ingham Great Start Collaborative (Outcome 2)

This Goal, Objective and Strategy(ies) targets the followard Children are born healthy. □ Children are healthy, thriving, and developmentally on trautomic Children are developmentally ready to succeed in school Children are prepared to succeed in fourth grade and bey Targeted Problem: Not all children are health Key indicators: • 11.7 Per 1000 children 0-8 in foster care • 39.5 Per 1000 of children experiencing abuse and Children 42.7 Per 1000 of African American children viscon 17% (226) EO CAPTA referrals • 188.8 Per 1000 of children 0-8 living in families with	ne end of third grade. nentally on track gham in 2013	□ Physical Health □ Social-Emotional Hea □ Family Supports and B □ Parent Education □ Early Education and C from birth to third gr	Basic Needs Care		
Goal related to the targeted problem: Parenting supports and services are reaching families and are easy to access. Objective related to the Goal: Increase the supports and access to services to prevent child abuse and neglect in Ingham County.					
Strategy 1: Craft and share information about parenting supports that families can understand and resonate with.	Prioritized Root Causes related to the		Performance Measures (results from Strategy 1): • Families of different care designations have more information and access resources, programs and services.		
 □ Parent Led Strategy □ Strategy came from Strengthening Families Assessment 	System Characteristic(s) ⊠ Resources ⊠ Power	Addressed ⊠ Mi	ndsets ⊠ Components	□ Connections ⊠ Regulations	
Activities (small wins promoting the strategy and addresses Root Causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of Activities):	
Develop consistent messages around typical child development (i.e. phrases/website include on a Bridge Card or social security card or grocery bulletins).	Outcome 2 group & Year 2 School Readiness Advisory Committee		Expand on messages from Ingham Early Learning Calendar, Facebook posts, local mailer	3 priority messages identified	
Identify and access resources to distribute messages	South Lansing Ministries outreach to speak with Valu Land & to speak with PNC Bank about sponsoring ads	Year 2	Newsprint weekly ad packet to include our message Electronic message boards, Facebook	At least 3 priority messages will go out 3 times in Year 2	

Post information messages (signs) in public places (i.e. bathroom, laundry mat, grocery store, DHHS, Health Department, etc.).	GSC members and their staff	Year 2	Information to post, Duplication of Posters	Message posted in 20 locations (i.e. Courts, Churches, Meijer, Family Dollar, Aldi, Value Land-Logan Square, Turning Leaf, CSL Plasma-Jolly Cedar Square & 3800 W. Saginaw, Talecris Plasma-921 W. Holmes, etc.)
Identify geographic locations in need of this information.	Ingham Department of Health and Human Services (DHHS), Ingham County Health Department, Ingham ISD, CACS Head Start, and Outcome 2 Group	Year 2	Data on families, Retired Seniors Volunteer Program, TCOA,	Target zip codes identified Collect data annually and assess trends (48911, 48910, 48912)
Refer families to programs that connect them to community resources (i.e. 211 and MI Bridges). Develop a document that identifies services and caregiver eligibility.	Ingham DHHS, ICHD, Ingham ISD, CACS Head Start, GSC members, legal services, and foster care	Year 2 ongoing	Access to Programs and Contacts for Programs for (i.e. free legal advice, 211, MI Bridges)	Data from program regarding referrals made to their program if releases are in place.
Each GSC partner will update their info on 211 and MI Bridges.				
Refer families who cannot access preschool or other homevisiting programs due to age, income and other eligibility factors to Great Parents, Great Start (GPGS), Ingham ISD's PAT home visiting program.	Local Leadership Group, Ingham ISD, Ingham GSC staff	Year 2; ongoing	Access of hard copy and electronic copy of referral form to referral sources	Referrals to GPGS are made.
Expand Ingham Early Learning Calendar distribution (i.e. medical provider offices, faith based communities, babysitter etc.).	Outreach Group, School Readiness Advisory Committee	Ongoing	Funding for reproduction of calendar	5 new distribution sites Distribution lists shared across outcome groups using calendar
Strategy 2: Connect with partners who have potential for identifying adults that are parenting as a kinship care provider to share child development and parenting messages.	Prioritized Root Causes related to the Objective and addressed by this strategy: • There is not an understanding of caregiver needs in role of parent, aunt, grandparent, etc. (Resource) • State dollars are allocated for foster care, not kinship care • Guardians are not recognized as parents with needs/hidden community/ stigma of parent unable to care for child when child is left with relative (Mindset)		Performance Measu The partners will ide care relationship and resources.	ires (results from Strategy 2): ntify number of adults in a kinship d connect them to the supportive
☐ Parent Led Strategy		Addressed ⊠ Mi	ndsets ☐ Components	□ Connections ⊠ Regulations
☐ Strategy came from Strengthening Families Assessment	⊠ Resources □ Power			

Activities (small wins promoting the strategy and addresses Root Causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of Activities):
Provide partners with a list of agencies who have potential support services.	CACS Head Start, Kinship newsletter, Willow Tree Family Center, Families Forward, Ingham DHHS, Tri- County Office on Aging, Capital Area Response Effort (CARE), INS Court	Year 2	Contact with Kinship Care Advisory Committee, Retired Seniors Volunteer Program (RSVP), Tri County Office on Aging (TCOA), Survey or focus group questions for support	Providers in the 48911 zip code will be the target for identifying adults who are responsible for kinship care.
Identify groups that target support for kinship care providers to share child development and parenting messages.	CACS Head Start, Ingham DHHS, Tri- County Office on Aging, Capital Area Response Effort (CARE), INS Court	Year 2	Kinship Care Advisory Committee, RSVP, Capital Area Response Effort (CARE)	Groups identified
Become a more trauma-informed community/ agencies. Provide supports/information to schools. - Identify organizations who provide trauma training and provide trainings - Identify community resources to address and/or provide support with trauma (individual trauma; family trauma, generational trauma) - Link families to community resources	Law enforcement/ schools, Mid-MI Trauma Collaborative	Year 2 Year 2 Year 2	Training on Trauma Informed Practices and Trauma Sensitive Strategies, Handle with Care Model, ACES	 List of organizations Number of trauma trainings List of resources

FY19 Early Childhood Action Agenda – Ingham Great Start Collaborative (Outcome 3)

This Goal, Objective and Strategy(ies) targets the following	owing early childhood outcon		And addresses the following early childhood components:		
☐ Children are born healthy.			☑ Physical Health		
	g, and developmentally on track from birth to third grade.				
⊠ Children are developmentally ready to succeed in s	school at time of school entry	·. 📗 🗆	Family Supports and Basic	Needs	
☐ Children are prepared to succeed in fourth grade a	nd beyond by reading profici	ently by the ⊠	Parent Education		
end of third grade.			Early Education and Care		
Targeted Problem: Not all children are devel	ceed in school a	at time of school entry			
Key indicators:					
Two out of twelve IISD local school districts meeting			icy benchmark		
• 67% of K at meeting Phoneme Segmentation Fluer					
62% eligible 4 year olds in high-quality Early Learn	<u> </u>				
Goal related to the targeted problem: Promote a shared understanding of school readiness.					
Objective related to the Goal: Key information about school readiness reaches all families and early educators.					
Strategy 1: Use multiple mediums to promote	Prioritized Root Causes			res (results from Strategy 1):	
shared understanding of school readiness across	Objective and addresse	ed by this		of families and early educators	
stakeholders.	strategy:			ided with information about	
	Some families may not h Some families may not h		of knowledge that school readiness begins at birth. • Increase in percentage of Kindergarteners meeting fall		
	school readiness. (Reso • Some families don't valu		literacy benchmarks		
	importance on early edu				
	Some families don't thin		languages.		
	begins at birth. (Mindset				
	 If materials are only in E 	nglish, are we			
	actually increasing inequ	• • • • • • • • • • • • • • • • • • • •			
☑ Parent Led Strategy	System Characteristic(s)	Addressed ⊠ M	indsets ⊠ Components ⊠ (Connections ☐ Regulations ☒	
☐ Strategy came from Strengthening Families	Resources □ Power				
Assessment				,	
Activities (small wins promoting the strategy	Persons or Groups	Target Dates	Resources Needed	Progress Measures (outputs of	
and addresses Root Causes)	Responsible	V0	I/in days a whare	Activities):	
 -Identify funding sources for Early Learning Calendar and new and different locations for 	School Readiness Advisory Committee,	Year 2	Kindergarten Readiness Packet,	-List of identified grant opportunities for funding	
distribution	Capital Area District		Ingham Early	Calendar	
-Apply for funding and distribute calendars to	Library, GSC Partners,	Year 2	Learning Calendar	-List of locations where we can	
identified locations (per grant acceptance)	Trusted Advisors, GSQ	1 001 2	Learning Calerida.	connect with parents who don't	
Connect every family with a child to an Ingham	Central RC		Staff time	have Calendar, Successful grant	
Early Learning Calendar and /or a Kindergarten				award	
Readiness Packet that makes it easy to create a				-Number of calendars and	
positive school readiness environment.			Funding to purchase	Kindergarten Readiness Packets distributed	
			Calendars	distributed	

-Work on ways to connect families with electronic versions of Calendar - Trinket item with IELC web address that could be given to parents with newborns - Identify person who could develop an App of Calendar - Identify and meet with programs to discuss having link to Calendar in handbook/orientation/onboarding process		Year 2	Funding to purchase trinket	-Number of trinkets distributed
Identify locations with digital signage where we could include school readiness messages - Develop content of school readiness message for digital signage - Distribute school readiness messages to digital signage locations - Seek out sponsorships for digital signage - Work with GSC webmaster to have monthly Facebooks posts with messages from each month of Ingham Early Learning Calendar	GSC partners, School Readiness Advisory Message, Ingham ISD and Local School Districts GSC webmaster	Year 2	Staff time, Developed message	List of partner locations with digital signage, Digital slides with school readiness messages
Provide training for trainers (Quality Improvement Consultants/Specialists) for Central Resource Center related to Early Learning Calendar	Ingham ISD staff GSC Co-Coordinators Great Start To Quality Central Resource staff	Year 2	Early Learning Calendar, Training space, Training time, Training module	Number of Central Resource Center staff trained
Seek out new parent café sites (including refugee child care providers, SPOM, grandparents, foster care, licensed child care providers) to share school readiness information.	GSC partners Parent Liaison, Trusted Advisors	Year 2	Staff time, Parent Liaison time,	Minimum of 3 new café sites Identified, Number of families attending Parent Cafes
Identify possible television partnerships for Public Service Announcements (PSA's) on school readiness Development and dissemination of PSA's	GSC members	Year 2 Year 2	WKAR, Moms Everyday, Local television channels Trent Smiley- Capital Area District Library Mkt Dir, Staff time, IISD Outreach and Marketing	Identify minimum of three media outlets to distribute PSAs Number of times distributed/shown

ACTIVITY COMPLETED - Distribute Ingham Kindergarten Readiness Packet to licensed child care providers -Review Kindergarten Readiness Packet -Distribute Kindergarten Readiness Packet	Office of Young Children Central Resource Center, School Readiness Advisory Committee	Year 1	Kindergarten Readiness Packet	Updated Kindergarten Readiness Packet, List of licensed providers who received the Kindergarten Readiness Packet
Strategy 2: Educate and engage the early childhood community in Michigan's designated quality rating system. Parent Led Strategy		ed by this e access to high bol. (Component)	Increase in child car who increase their s Quality star rating sy	ires (results from Strategy 2): e providers who participate in or tar rating in the Great Start to ystem by 3 per quarter Connections □ Regulations □
☐ Strategy came from Strengthening Families Assessment	Resources Power			
Activities (small wins promoting the strategy and addresses Root Causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of Activities):
Develop and share information about the need for access to high quality affordable preschool and childcare - Develop talking points about benefits of high quality programs - Develop talking points about Great Start to Quality - Identify other groups that would benefit from this information for future dissemination (e.g. faith based communities, Interfaith Council, Action of Greater Lansing, Kinship care, DHHS – foster care services, Adelante Forward magazine, free women's magazine, CAMW, etc.) and share information	Great Start to Quality Central Resource Center, MSU Child Development Labs, Early Childhood Investment Corporation, and Office of Great Start for(state-wide messaging)	Year 2 Year 2 Year 2	NAEYC Brochures, "How to Choose a High Quality Preschool" brochure, Central Resource Center materials	Documents with talking points, List of identified organizations - 12 organization in Year Two

FY19 Early Childhood Action Agenda – Ingham Great Start Collaborative (Outcome 4)

This Goal, Objective and Strategy(ies) targets the fo	his Goal, Objective and Strategy(ies) targets the following early childhood outcome(s):			And addresses the following early childhood components:		
☐ Children are born healthy.			☐ Physical Health			
☐ Children are healthy, thriving, and developmentally on track from birth to third grade.			☐ Social-Emotional Health			
☐ Children are developmentally ready to succeed in	school at time of school en	try.	\sqsupset Family Supports and Basic N	eeds		
☑ Children are prepared to succeed in fourth grade	and beyond by reading prof	iciently by the	□ Parent Education			
end of third grade.			☑ Early Education and Care			
Targeted Problem: Not all children are prepa	ared to succeed in 4 th gr	ade and beyon	nd by reading proficiently b	by the end of 3 rd grade.		
Key indicators:	_	•				
• 51.6% of 3 rd graders w/partial or not proficient in M-STEP ELA assessment in 2016						
 75.2% of African America 3rd grader 						
o 63.5% Hispanic 3 rd graders w/partia				2040		
 68.6% of 3rd graders eligible for free 70.4% of 3rd who are English Langu 						
Goal related to the targeted problem: "Teachers" (including professionals who have contact with children birth to 3 rd grade) have an understanding of fundamental skills for early literacy that lead to 3 rd grade reading proficiency.						
Turndamental skills for sarry illerady that load to or grade reading prohobiney.						
Objective related to the Goal: "Teachers" have access to evidence based literacy practices and implement with fidelity.						
Strategy 1: Disseminate and track	Prioritized Root Cause	e rolated to	Porformanco Moasuros	(results from Strategy 1):		
implementation of evidence based literacy	the Objective and add			Performance Measures (results from Strategy 1): 95% of Birth-PRE-K grade "teachers" have received the		
practices.	strategy:	lessed by tills	Essential Instructional Practices for Early Literacy and 100%			
produced.	"Teachers" need to unders	stand foundational				
	skills for curriculum (Reso		Literacy Practices			
	 "Teachers" may need mor 	e PD and practice	% Birth-K "teachers" trained on implementing evidence			
	on how to deliver curriculu		n based instructional literacy practices			
	in helping struggling reade					
	 Current PD doesn't match (Connection/Power) 	needs/skills.				
☐ Parent Led Strategy	,		_	_		
☐ Strategy came from Strengthening Families Assessment	System Characteristic(s) Addres	ssed 🗵 Mindsets	□ Components □ Connections ⋈ R	egulations ⊠ Resources ⊠ Power		
Activities (small wins promoting the strategy	Persons or Groups	Target Dates	Resources Needed	Progress Measures (outputs		
and addresses Root Causes)	Responsible	ranger Bates	11030di 003 1100ded	of Activities):		
Disseminate Essential Instructional Practices of	Central Resource Center	Year 2	Essential Instructional	Identify who has received		
Early Literacy to "teachers" through Central	Ingham ISD Early		Practices of Early Literacy,	Essential Instructional Practices		
Resource Center, LARA, school district literacy	Childhood Staff, Ingham		Modules and supporting	for Early Literacy		
coaches.	English Language Arts		resources			
	(ELA) Steering					
Connect "teachers" with training on Essential	Committee					
	Ingham ISD Early	Voor 2	Trainers for Essential	CSPD Professional Learning		
	Ingham ISD Early	Year 2	Trainers for Essential	GSRP Professional Learning		
Instructional Practices of Early Literacy	Ingham ISD Early Childhood Staff,	Year 2	Trainers for Essential Instructional Practices for Early Literacy, Essentials	GSRP Professional Learning Communities are focused on		

ACTIVITY COMPLETE - Include preschool staff	Ingham English Language Arts (ELA) Steering Committee. Central Resource Center, MiAEYC. Ingham ISD Early Literacy Consultants, Early Childhood Specialists Ingham ISD Staff	Year 1	of Early Literacy Modules and supporting resources, www.literacyessentials.org, K-3 Essentials training	Essential Instructional Practices Early Literacy Coaches complete Project
and coaches in Project Practice job- imbedded professional development.			Professional Development	Practice training
Determine if Birth -3 rd grade evidence based literacy practices are being used with fidelity.	Ingham ISD Staff, PreK Fidelity Tool, K-3 Self Assessments	Ongoing	Mechanism to collect data on fidelity of implementation	Mechanism determined along with next steps
Collect Data from literacy screening tools that school districts are using in pre-K and K-3 classrooms and use to determine PD needs	Ingham ISD Instructional Administrators	Annually	Access to Screening Data	Data is collected and reviewed annually
Connect with local school districts through Ingham ELA Steering Committee on supporting students with IRIP by supporting Read at Home Plans through: • Work with ISD literacy staff, WKAR, and Capital Area District Library to develop and distribute Ingham Early Literacy Calendar as companion to Ingham Early Learning Calendar to support families with children with Individual Reading Improvement Plan • Parents Read at Home Plan for Student Success with Families booklet • Parents Read at Home Plan booklet	Ingham ELA Steering Committee, Ingham ISD staff, WKAR, Capital Area District Library	Year 3 Year 2	Plans and Resources that will be used for Read At Home Plans, Access to staff that will be responsible for the Plans	Read at Home Plans and resources collected and shared with the community Ingham Early Literacy Calendar developed, # of Calendars distributed to families
Strategy 2: Use an "Early Childhood/Birth-3rd grade in All Policies" framework for evidence based instructional literacy practices.	Prioritized Root Causes related to the Objective and addressed by this strategy: • Teachers with different delivery of curriculum and instruction for children Birth-3 rd grade (Regulation) • Coaches and administration are observing, but teachers are not getting actionable feedback. (Regulation) • Teachers' philosophies of curriculum and instruction may not match licensed care, program and/or district requirements. (Mindset)		Policies of local school distri	(results from Strategy 2): ct and community initiatives are nd inclusion of early childhood
□ Parent Led Strategy	System Characteristic(s) Resources ⊠ Power	Addressed 🗵 N	Mindsets □ Components □ C	Connections ⊠ Regulations ⊠

☐ Strategy came from Strengthening Families Assessment				
Activities (small wins promoting the strategy and addresses Root Causes)	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of Activities):
Identify what ISD departments and local districts have early childhood (Birth-age 5) representation on committees to align resources for early childhood in local districts (time, money, policies, knowledge, PD)	GSC Co-Coordinators, Operations Committee	Year 2	Access to Ingham ISD Department Directors and local district administrators	List of committees and early childhood representatives generated
GSC staff will go out to local school districts and meet with individual superintendents (6 new superintendents coming on board) and their early childhood representative	GSC Co-Coordinators	Year 2	Ingham ISD Superintendent support and introduction to new superintendents	Meetings held with new superintendents
Identify which Economic Development, Workforce Development groups: Teach, Talent, Thrive (T3), Capital Area Michigan Works, Chamber of Commerce, DHHS, other Collaboratives and Coalitions in the Community support P-20 initiatives and have early childhood representation (Birth-age 5) on their groups.	GSC Co-Coordinators and Members	Ongoing	Access to chair for each group, Access to Goals/targets for each group	Committee chair and Goals/targets for identified groups
GSC staff/members meet with community groups (named above) who do not have early childhood representation on how to include.	GSC Co-Coordinators and Members	Ongoing	Access to chair for each group, Access to Goals/targets for each group	Committee chair and Goals/targets for identified groups