



Southwest Maricopa Regional Partnership Council

Allocations and Funding Sources	2013	Recommendations to Board FY13 Strategies and Allotments
FY Allocation	\$3,256,250	
Population Based Allocation	\$2,201,782	
Discretionary Allocation	\$556,877	
Other (FTF Fund balance addition)	\$497,591	
Carry Forward From Previous Year	\$1,790,647	
Total Regional Council Funds Available	\$5,046,897	
Strategies	Proposed Allotment	
Family Resource Centers	\$600,000	Recommend approval
Home Visitation	\$300,000	Recommend approval
Parent Education Community-Based Training	\$375,000	Recommend approval
Food Security	\$50,000	Recommend approval
Quality First (<i>statewide</i>)	\$361,276	Recommend approval
Quality First Child Care Scholarships (<i>statewide</i>)	\$762,873	Recommend approval
Child Care Health Consultation (<i>statewide</i>)	\$52,920	Recommend approval
Scholarships TEACH (<i>statewide</i>)	\$99,000	Recommend approval
Scholarships non-TEACH	\$76,500	Recommend approval
Pre-Kindergarten Scholarships	\$335,234	Recommend approval
Family, Friends & Neighbors	\$250,000	Recommend approval
Oral Health	\$175,000	Recommend approval
Nutrition/Obesity/Physical Activity	\$200,000	Recommend approval
Service Coordination	\$50,000	Not being submitted for approval
Community Awareness (<i>FTF Directed</i>)	\$15,000	Recommend approval with the line item budget submitted to the CEO for approval
Community Outreach (<i>FTF Directed</i>)	\$45,000	Recommend approval
Media (<i>statewide</i>)	\$10,000	Recommend approval
Statewide Evaluation (<i>statewide</i>)	\$109,988	Recommend approval
Proposed Allotment Total:	\$3,867,791	
Total Unallotted:	\$1,179,106	

SOUTHWEST MARICOPA REGIONAL PARTNERSHIP COUNCIL

**Regional Funding Plan
Three Year Strategic Direction
SFY 2013-2015**

- I. Regional Allocation Summary**
Funds Available State Fiscal Years (SFY) 2012- 2015

- II. Review of SFY 2012 Funding Plan**
 - A. Review of SFY 2012 Priorities
 - B. Strategies and Units of Service Review
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- III. Three Year Strategic Direction: SFY 2013-2015 Regional Funding Plan**
 - A. Overview: Setting the Strategic Direction
 - B. Regional Priorities, Selected FTF Indicators and Priority Roles, and Strategies to Achieve Outcomes
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SFY 2013 -2015 Regional Partnership Council Budget

Section I.**Regional Allocation Summary**

Funds Available State Fiscal Years (SFY) 2012- 2015

Southwest Maricopa Regional Partnership Council

Allocations and Funding Sources	2012	2013	2014	2015
FY Allocation	\$2,395,623	\$3,256,250	\$3,262,763	\$3,274,998
Population Based Allocation	\$1,652,879	\$2,201,782	<i>(fy14 and fy15 allocations are estimates only, for purposes of planning)</i>	
Discretionary Allocation	\$448,085	\$556,877		
Other (FTF Fund balance addition)	\$294,659	\$497,591	\$3,262,763	\$3,274,998
Carry Forward From Previous	\$1,907,694	\$1,790,647	\$1,179,106	\$559,078
Total Regional Council Funds	\$4,303,317	\$5,046,897	\$4,441,869	\$3,834,076

Section II. Review of SFY 2012 Funding Plan

II A. SFY 2012 Regional Partnership Council Priorities

The Southwest Maricopa Region is the geographically largest area within Maricopa County; the majority of residents reside in a string of suburban communities, while some live in remote communities, i.e. Gila Bend, Palo Verde, and Tonopah. Some areas are historically small farming communities with close-knit families and migrant communities. Some rural farming communities of the 1970's have become suburban bedroom communities of Phoenix.

The Southwest Maricopa Regional Partnership Council set its SFY 2010-SFY 2012 Funding Plan based upon the 2008 Regional Needs and Assets Report, balancing the unique characteristics of both its urban and rural areas, as well as the expertise of community stakeholders and Regional Council members.

As a result of delayed implementation of two of the main strategies, Family Resource Centers and Oral Health, due to capacity issues within the region, the Regional Council had substantial carry forward dollars from SFY 2010 to SFY 2011. Due to the extensive community development work that was required for both the Family Resource Center and Oral Health strategies, this same trend of delayed implementation continued into SFY 2011. In SFY 2012, the Family Resource Centers have made great gains. Through public-private partnerships, a new Family Resource Center opened in Gila Bend and the Avondale Resource Center expanded services.

The Regional Council did not make any major changes to the original three-year funding plan in order to allow the Family Resource Center and Oral Health programs as well as the home visitation program to become fully implemented. Also, the summary conclusion from the 2010 Regional Needs and Assets Report recommended that the continuation of Family Resource Centers and other family support strategies were still viable in the region.

The Regional Council identified the importance of continuing its original strategies to start addressing the critical factors in building the infrastructure while impacting immediate needs of families in the region. Most strategies continue to be designed to provide universal services and support for all children and families in the region as well as incorporating strategies that build infrastructure. The Regional Council's priorities that are being addressed include:

Access to family support services:

Funding was provided for the establishment or enhancement of Family Resource Centers helping children and their families access a variety of services on-site as well as referral information for additional services. The increased funding for SFY 2012 provided for additional centers to create a system of hubs throughout the region. Continuing along the lines of enhancing family support, the Regional Council continued funding Home Visitation and Parent Education Community Based Training which address various areas of need among identified target populations.

Access to affordable, quality early care and education:

The Regional Council continued to support Quality First. The Council decided to fund Child Care Scholarships for the last six months of SFY 2011; this was mainly due to the continued economic recession as well as the availability of carry forward funds from SFY 2010. The Council also addressed the need to support home care providers (Family, Friends and Neighbors) which is where most of the children in the region receive child care.

Highly skilled and well prepared early childhood development and health workforce:

While supporting an increase in child care quality and accessibility, the Regional Council also addressed the support needed by child care staff and directors with TEACH Scholarships, Non-TEACH Scholarships (Professional Career Pathways Project) and Director/Mentoring Training.

Access to quality health care coverage and services:

Funding was continued to provide oral health screenings, fluoride varnish, and referrals for follow up dental treatment as well as prevention information for parents and child care staff.

II B. SFY 2012 Strategies and Units of Service Review

Southwest Maricopa Units of Service by Strategy		
Strategy Description	Fiscal Year 2012	
	Targeted Units	Contracted Units
Family Resource Centers Strategy		
Number of families served	2,750	5,495
Home Visitation Strategy		
Number of families served	126	125
Parent Education Community-Based Training Strategy		
Number of participating adults	300	300
Quality First Strategy		
Number of center based providers served	12	24
Number of home based providers served	5	10
Family, Friends & Neighbors Strategy		
Number of home based providers served	75	75
Scholarships TEACH Strategy		
Number of professionals receiving scholarships	15	41
Child Care Health Consultation Strategy		
Number of center based providers served	12	12
Number of home based providers served	5	5
Scholarships non-TEACH Strategy		
Number of professionals receiving scholarships	30	30
Director Mentoring/Training Strategy		
Number of participating professionals	12	12
Child Care Health Consultation Strategy		
Number of center based providers served	12	12
Number of home based providers served	5	5
Oral Health Strategy		
Number of children receiving oral health screenings	1,293	2,667
Number of fluoride varnishes applied	1,293	2,667
Number of participating adults	0	0
Number of participating professionals	0	0
Number of prenatal women receiving oral health screenings	500	499
Service Coordination Strategy		
	no service units	
Community Awareness		
	no service units	

Community Outreach		
	no service units	
Media		
	no service units	
Evaluation		
	no service units	
Needs and Assets		
	no service units	
Statewide Evaluation		
	no service units	

II C. SFY 2012 Funding Summary Review

**FY 2012
Southwest Maricopa
Funding Plan Summary**

Allocations and Funding Sources	2012	
FY Allocation		\$2,395,623
Population Based Allocation		\$1,652,879
Discretionary Allocation		\$448,085
Other (FTF Fund balance addition)		\$294,659
Carry Forward From Previous Year		\$1,907,694
Total Regional Council Funds Available		\$4,303,317
Strategies	Allotted	Awarded
Family Resource Centers	\$860,000	\$750,000
Home Visitation	\$300,000	\$300,000
Parent Education Community-Based Training	\$240,000	\$239,997
Quality First	\$346,250	\$334,017
Scholarships TEACH	\$99,100	\$99,100
Child Care Health Consultation	\$68,000	\$68,000
Scholarships non-TEACH	\$76,500	\$76,500
Director Mentoring/Training	\$54,000	\$54,000
Family, Friends & Neighbors	\$175,000	\$175,000
Oral Health	\$200,000	\$168,832
Child Care Study		\$13,582
Service Coordination	\$55,000	
Community Awareness	\$15,000	\$15,000
Community Outreach	\$25,000	\$25,000
Media	\$10,000	
Needs and Assets	\$20,000	
Statewide Evaluation	\$109,988	\$109,988
Total Allotted/Awarded:	\$2,653,838	\$2,429,016
Total Unallotted/Unawarded:	\$1,649,479	\$224,822

II D. Review of Progress SFY 2012

In SFY 2012 Funding Plan development, the Southwest Maricopa Regional Partnership Council identified four prioritized needs including access to family support services; affordable quality child care; highly skilled early childhood workforce; and access to quality health care coverage and services.

Priority Need #1: Access to Family Support Services

To address the first priority, funding was provided for the establishment or enhancement of Family Resource Centers. These centers are designed to help children and their families access a variety of services on-site as well as referral information for additional services. The increased funding for SFY 2012 provided for additional centers to create a system of hubs throughout the region. These centers are located in Avondale, Gila Bend and Buckeye. The centers are now fully operational. Within this strategy, the Regional Council also combined Health Insurance Enrollment Assistance as part of the standard package of services included at the Family Resource Centers. The Avondale center took longer than expected due to the city's decision to award the health insurance enrollment subcontract utilizing its procurement process causing delay in its award.

The Family Resource Centers continue to be one of the most successful and effective strategies in the region. Data reports show a good percentage of families being served through this strategy; approximately 24,000 families in fiscal year SFY 2011. Although this is a duplicated number of families, this demonstrates the broad impact of this strategy. The family resource centers have laid the groundwork for strengthening partnerships with city or town governments which provide space as well as community programs on-site such as the Community Action Program services (i.e. utility assistance and job referrals). Furthermore, the Family Resource Centers house up to 20 programs as is the case in Avondale. This strategy has also resulted in a public-private partnership with Care1st Health Plan which has been strategically beneficial not only for their funding of the establishment of the Family Resource Centers, but also for funding of additional family support services offered at the centers. To further enhance the centers, relationships with community stakeholders across the region who now provide services at the centers have also been established.

The establishment of the Gila Bend Resource Center was a major accomplishment by the Regional Council in addressing barriers to accessing services by families in remote areas in the region. The Regional Council will continue to refine the strategy to maximize its effectiveness as an integral part of building the early childhood service delivery network.

Continuing along the lines of addressing the prioritized need of accessing family support services, the Regional Council continued funding Home Visitation. The grantee reached 66% of its 125 families to be served in SFY 2011, and is showing continuing growth in SFY 2012. The families being served have reported satisfaction with services. Along with other strategies in the region, while achieving a certain level of success, the home visitation program has struggled to reach families in the rural areas. The main barrier is the ability to gain access to families in their homes, however, by utilizing providers at the Family Resource Centers this has become an effective vehicle to obtain referrals. This strategy also addresses the issue of lack of public transportation in the region as the services are provided in the families' homes. The Home Visitation program also functions as a mobile resource center to inform families of other services available in the community.

To further address the Regional Council's first priority of access to family support services, the Developmental and Sensory Screening Education and Training for parents was developed. The most successful story from this program is the establishment of a well utilized parent blog created for the ongoing sharing of information and referrals with families. This Facebook interaction blog for parents has become a successful tool for parents to communicate, at times producing up to 560 hits in a day during the month of September. The strategy has also produced large classes of parents, in some cases up to 30 parents attending a specific session in the region. The strategy has been able to be implemented throughout the entire region including the rural areas of Gila Bend and Tonopah. Other early childhood service providers have incorporated this program into their curriculum. The grantee utilizes the Family Resource Centers as a source of referrals to the program as well as offers classes at the centers thus furthering the comprehensive service delivery network in the region.

Priority #2: Access to Affordable Quality Early Care and Education

The Southwest Maricopa Regional Council continued to support Quality First. In SFY 2012, the Council contracted to enroll 12 child care centers and 5 child care homes in Quality First. Since its beginning in SFY 2010, 11 child care centers have disenrolled from Quality First, primarily due to the economic downturn and the subsequent closing of child care centers.

The Child Care Study financed by the Regional Council reinforced the knowledge that the region is heavily populated with unregulated home child care providers. The Regional Council therefore addressed the need to support these providers by offering the Family, Friends and Neighbors strategy. The program model is delivered through a 14-week series of classes available throughout the region. While the strategy has been successfully implemented in the most urban areas of the region, it has struggled in the rural areas. The urban areas at times have had a waiting list, but, in the rural areas, the average number of participants throughout the duration of the series has been as low as 10 versus the targeted goal of 20. Providers living in the rural areas have had a lower completion rate than the urban providers.

Priority #3: Highly skilled and well prepared early childhood development and health workforce:

While supporting an increase in child care quality and accessibility, the Regional Council also addressed the support needed by child care staff and directors with TEACH Scholarships, Scholarships Non-TEACH (Professional Career Pathways Program-PCPP) and Director Mentoring/Training. The scholarships offered through TEACH and non-TEACH (PCPP) are being fully utilized in SFY 2012, with 30 participants each. To date, the Director Mentoring/Training program has enrolled only 3 of the 12 scholars in part due to issues regarding outreach among education professionals.

Priority #4: Access to quality health care coverage and services:

Funding was continued to provide oral health screenings, fluoride varnish, and referrals for follow up dental treatment as well as prevention information for parents and child care staff. The strategy continued in its developmental stage through all of SFY 2011 and for half of SFY 2012, thus delaying implementation. A major factor in the implementation delay was the actual infrastructure building phase required by the contracted provider, the Maricopa County Department of Public Health. This contract for services was developed in collaboration with the Northwest Maricopa Regional Partnership

Council. The North Phoenix and Northeast Maricopa Regional Partnership Councils have also contracted with this provider to expand oral health services in a coordinated manner across these regions. This Oral Health program will be offered at child care centers, WIC offices and Health Clinics throughout the region. An initial session of screenings and varnish applications is scheduled for the first week of December.

Coordination and Collaboration

While a more comprehensive county-wide coordination strategy continues to be developed by the Regional Partnership Councils, the Southwest Maricopa Regional Council has continued its commitment to seek coordinating and collaborating opportunities with the Northwest Maricopa Region. As a result of this ongoing collaboration, both regions have shown a high percentage of similar strategies and the ability to join in contracting of services as shown in the Oral Health, Needs and Assets, and Community Awareness and Outreach Strategies. The Southwest Maricopa Regional Partnership Council developed its SFY 2012 Funding Plan with a sharp focus on continuing to build an infrastructure of services and resources that are applicable within the region as well as cross-regionally. The Council continues to work closely with the strategies proposed that aligned at minimum with those of the Northwest Maricopa Regional Partnership Council. This provides opportunities for joint collaboration in strategic planning for implementation and leveraging of resources between the regions. The two regions continue to engage in a coordination/collaboration subcommittee.

Lessons Learned

The Regional Council has continued to balance the need to develop an early childhood system in the region, while addressing some of the immediate needs of children ages 0-5 and their families. Strategies will continue to be practical in terms of dealing with cultural differences between rural and urban populations, as well as economic characteristics. The Family Resource Centers, in collaboration with other partners such as child care and health care providers, will continue to be strengthened to further enhance the service delivery network for children and families. There also continues to be a great need for community awareness of resources and the importance of early childhood. These factors will continue to be a source of reference as to how the Regional Council plans to implement effective strategies in the region in SFY 2013.

Section III.

Three Year Strategic Direction: SFY 2013-2015 Regional Funding Plan

III A. Overview

Throughout the last several months, the Regional Council has utilized a variety of sources to develop the SFY 2013-2015 Funding Plan. The 2010 Regional Needs and Assets Report, grantee program data and narrative reports as well as the expertise provided by Regional Council members and community stakeholders were considered. A small workgroup comprised of Council members and First Things First staff met to further review the data, discuss previously identified needs of the region, and formulate a recommendation to the Council of the prioritized needs and strategies. At their November Regional Council meeting, the Council met to finalize their prioritized needs and the strategies to address those needs. Following are the prioritized needs that were identified by the Regional Council for the 2013-2015 funding cycle:

Family Support:

According to the 2010 regional Needs and Assets Report, family stresses in the region are evident through data that indicates the large increase in very poor young children receiving Temporary Assistance for Needy Families (TANF) benefits. The report also indicated that the single most important barrier related to the area of family support is the lack of awareness of services and not having access to linkages and referrals to services. Budget cuts had the most substantial impact on social services in the following areas of family support:

- Parent coaching/education
- Support and education programs for parents and parenting teens
- Accessibility to resources that support families with young children including grandparents raising grandchildren.

Home visitation providers report that most families want support in the areas of child development in order to support their children, while at the same time having the need for basic services as a result of their economic circumstances. Priorities of the Regional Council include:

- Expand and enhance parent/caregiver support
- Increase parent/caregiver access to child development information and identification of early developmental delays

Health:

According to the most recent regional Needs and Assets Report, the features of the early childhood health system in the Southwest Maricopa Region are similar to those countywide. Federal and state data indicate there is a measurable lack of access to primary healthcare in much of the region as well as a shortage of health professionals. Families in the region could benefit from strategies to link them with existing health services. A recent report from St. Luke's Initiatives has the following recommendations:

- Increase efforts to ensure all children have health insurance coverage, with a particular focus upon AHCCCS and Kids Care enrollment through outreach activities to specific populations, streamlined enrollment and re-enrollment, and expanded coverage options for children.

- Develop public and community education campaigns that emphasize healthy eating and exercise among young children and their families to address child obesity and promote child health.
- Support both formal child care (through reimbursement and regulation) and informal child care (through information and community support) in promoting healthy child development.

Access to dental care is also limited for young children in both the state and the region. Oral health needs vary in the Southwest Maricopa region. For example, recent data indicated untreated tooth decay among 6 to 8 year olds ranging from a low of 14% in Goodyear to a high of 49% in Tolleson.

Priorities of the Regional Council include:

- Increase access to early preventive dental care
- Increase family and child care provider access to comprehensive health systems and prevention training

Early Learning:

The percentage of early care and education providers in the region with a national accreditation remains very low and the number of home-based child care providers certified by the Arizona Department of Economic Security dropped significantly between 2008 and 2010. As a result, more children are now cared for in informal, non-regulated settings called Family, Friend, and Neighbor care.

Preschool enrollment varies widely in the region. Attendance rates are particularly low in Buckeye and the Littleton and Avondale Elementary School Districts, where the supply of early care and education programs is low. Preliminary findings from the Child Care Study points out that parents prefer family, friend and neighbor care. The cost of child care emerged as a barrier to accessing quality early childhood services in the Child Care Study online survey.

Priorities of the Regional Council include:

- Increase support to Family, Friend and Neighbor care providers
- Increase access to high quality early care and education with a focus in the rural areas
- Increase professional development of early care and education providers

All of these priorities were identified in the previous funding cycle with the addition of the second need identified in the area of health. These priorities provide a platform covering all areas of First Things First's focus on Early Learning, Family Support and Health.

Setting the Strategic Direction

The Regional Council approached its funding plan development with three main goals in mind:

a) continue to build the infrastructure of an early childhood development system; b) ensure that strategies address the needs of both urban and rural areas of the region; and c) continue to develop collaborations with local governments and organizations as well as neighboring Regional Partnership Councils to maximize resources for families.

The Regional Council discussed each of the First Things First School Readiness Indicators in relation to the identified needs and the ability of the region to demonstrate an impact. The following indicators were identified as those most closely aligned with the identified priority needs as well as the strategic direction the Region Council is taking:

Family Support

1. #/% of families who report they are competent and confident about their ability to support their child's safety, health and well-being

- Family Resource Centers
- Home Visitation
- Parent Education Community- Based Training
- Food Security
- Service Coordination
- Community Awareness and Outreach

Health

2. #/% of children age 5 with untreated tooth decay

- Oral Health

Early Learning

3. #/% of children demonstrating school readiness at kindergarten entry in the development domains of social-emotional, language and literacy, cognitive, and motor and physical

- Family, Friends & Neighbors
- Quality First
- Quality First Child Care Scholarships
- Pre-Kindergarten Scholarships
- Scholarships TEACH
- Scholarships non-TEACH

The strategies proposed by the Southwest Maricopa Regional Council continue to maintain an approach from universal, with services directed at all children and families, to targeted strategies which are developed in response to children and families with identified risk factors.

- **Universal Services:** Family Resource Centers, Oral Health, Parent Education Community Based Training, and Professional Development Scholarships.
- **Targeted:** Home Visitation, Family Friends & Neighbors, Quality First Program, Pre-Kindergarten Scholarships, Food Security and Nutrition/Obesity/Physical Activity.

While the Regional Council continued its commitment to support Quality First, the Council also continued to address the ongoing issue of the prevalent use of Family, Friends and Neighbors as a child care preference as evidenced on the most recent Child Care Study conducted by Arizona State

University. Pre-Kindergarten Scholarships has been added in SFY 2013 to complement Quality First in the rural areas where there is a need to expand the school district preschool because there are no other formal child care settings available.

The Regional Council also added Food Security in SFY 2013 as a way of addressing the increasing need in the region for food among families with children zero to five and lack of food providers in the rural area. Most residents in Gila Bend travel to Buckeye for their food needs.

As a result of the success of the Family Resource Centers, the Regional Council changed the funding formula to be used in Family Resource Centers to only fund resource and referral and Health Insurance Enrollment Assistance. Additional activities provided at the centers will be strategically implemented utilizing RFGA's and Government to Government Agreements as funding mechanisms. This will streamline the awards and monitoring of contracts for better implementation and outcomes and increase the collaboration and coordination of services by providers utilizing the Family Resource Centers.

Family Resource Centers are one of the strategies that facilitate the partnership development process. In a cross-regional effort, the Regional Council has also produced a strategic plan that complements many of the Northwest Regional Council's plan which will result in better outcomes for families and children in most of the west side of the county.

While there is strong recognition of the many programs and service providers who have come together in their efforts to serve young children, a need exists for even greater coordination and collaboration among public and private agencies. Several key informant interviews conducted among the Maricopa County regions in both 2008 and 2010 revealed that service providers felt that the lack of services in the region and the lack of coordination of services are preventing the development of a support system for children and families that is so desperately needed. In addition, the surveys revealed that the Maricopa County Region as a whole lacks a well-identified point of entry or coordination of services that can support parents in obtaining the information and services they need to ensure children have the greatest chance of success in school.

To address coordination in Western Maricopa County, the Northwest and Southwest Maricopa Regions have come together to establish a Cross-Regional Coordination Subcommittee. According to the 2010 Needs and Assets Reports for both the Northwest and Southwest Maricopa Regions, there is strong need for collaboration, communication, and resource sharing among service providers. The Regions have a number of effective programs that serve as assets; however, the reports reveal that these services are not coordinated in a manner that results in optimal benefit to the children and families. Many of the organizations in the region are working in proverbial silos and are unable to provide families with a holistic approach due to lack of agency policies or procedures that foster communication and coordination. To address the need for coordination, the Northwest and Southwest Maricopa Regional Partnership Councils will collaborate to fund the implementation of activities to achieve this coordination strategy. It is anticipated that implementation of the activities will: ensure the needs of the most at-risk families are addressed; coordinate outreach activities to encompass both regions; coordinate delivery of services; identify the communities and target populations that lack access to effective home visitation, child care, parenting, or medical services; and, gather and review data about existing services to identify gaps and meet the needs of the young children and their families across the regions. It is expected that these activities will result in improved coordination of programs currently operating in the regions.

To address coordination across all of Maricopa County, the Maricopa and Phoenix Regional Partnership Councils will continue to work together to develop a strategy that addresses cross-regional coordination and system building. With this strategy, the Regional Councils will work together to decrease duplication of services; allow communities to build on and enhance existing, high-quality services; improve data collection and information sharing; create planning and problem solving opportunities; increase early childhood champion efforts; and leverage dollars for the highest return on the state's early childhood investment. To date, collaborative efforts have included multi-region grantee meetings, media saturation, Needs and Assets, and discussion relating to collective investment in the development and implementation of a county-wide Service Coordination strategy.

As the Southwest Maricopa Regional Council sets the strategic direction for the next three years, there is the developing sense that the collective work of the Regional Partnership Council, community partners and families is beginning to take root and thoughtful, responsible decision-making will lead this region to a place where all children birth through five will receive the support they deserve that will allow them to succeed in school and life.

Section III B. Strategic Plan for SFY 2013 – 2015: Regional Priorities, Selected FTF Indicators and Priority Roles, and Strategies to Achieve Outcomes

Regional Priority to be addressed	School Readiness Indicators	FTF Priority Roles in the Early Childhood System	SFY 2013-2015 Strategies
<p>Family Support: Expand and enhance parent/caregiver support</p> <p>Increase parent/caregiver access to child development information and identification of early developmental delays</p> <p>Early Learning: Increase support to Family, Friends and Neighbors care providers</p> <p>Increase access to high quality early care and education with a focus in the rural areas</p> <p>Increase professional development of early care and education providers.</p> <p>Health: Increase access to early preventive dental care</p> <p>Increase family and child care provider access to comprehensive health systems and prevention training</p>	<p>Family Support #% of families who report they are competent and confident about their ability to support their child’s safety, health and well-being.</p> <p>Early Learning #/% of children demonstrating school readiness at kindergarten entry in the development domains of social-emotional, language and literacy, cognitive, and motor and physical</p> <p>Health #/% of children age 5 with untreated tooth decay.</p>	<p>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.</p> <p>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.</p> <p>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 children and their families.</p> <p>Access to Quality Health Care Coverage and Services- Collaborate with partners to support improved nutrition and increased age/developmentally appropriate physical activity levels among children.</p>	<ul style="list-style-type: none"> -Family Resource Centers -Home Visitation -Parent Education Community- Based Training -Food Security -Quality First -Quality First Child Care Scholarships -Child Care Health Consultation -Scholarships TEACH -Scholarships non-TEACH -Pre-Kindergarten Scholarships -Family, Friends & Neighbors -Oral Health -Nutrition/Obesity/Physical Activity -Service Coordination -Community Awareness -Community Outreach -Media

Section III C.

Strategy Descriptions including Target Populations and Funding Levels

Strategy: Family Resource Centers			
Strategy Description Provides local resource centers that offer training and educational opportunities, resources, and links to other services for healthy child development.			
Strategy Narrative As a main finding from the Region’s 2010 Needs and Assets Report, the family resource center strategy can help to strengthen families. Family Resource Centers provide resource and referral information to identify supports and services available to families with young children and provide each family with access to information and support on topics such as parenting skills and early childhood development and health. Community based parent education sessions may also be housed and offered at resource center locations. The Family Resource Centers continue to be one of the most successful and effective strategies in the region. Data reports show a good percentage of families being served through this strategy. The activities funded in this strategy include resource and referral, Health Insurance Enrollment Assistance, and Infant/Toddler food boxes. The family resource centers have laid the groundwork for strengthening partnerships with city or town governments which provide space as well as community programs on-site such as the Community Action Program services (i.e. utility assistance and job referrals). Furthermore, Family Resource Centers have up to 20 programs as in the case in Avondale. This strategy has also resulted in a public-private partnership with Care1st Health Plan which has been strategically beneficial not only for their funding of the establishment of the Family Resource Centers, but also for funding of additional family support services offered at the centers. This strategy addresses the Regional Council’s following priority: Expand and enhance parent/caregiver support.			
Target Population Description This is a universal strategy designed to outreach to all children in the region ages 0-5 and their families. There are 12,000 children ages 0-5 in the region. This strategy targets approximately 30% children in the region, main local points in the region will be used as hubs for service delivery to families. The Regional Council has established points in the following cities of the region: Avondale, Gila Bend and Buckeye to be used as regional hubs. The funding level and target number service units were established based on the last two years’ experience in the region with the addition of the new Gila Bend center. The region could consider focusing some of the family resource center outreach to families headed by grandparents.			
Target Service Units	FY 13	FY 14	FY 15
Number of families served	3,000	3,000	3,000
Funding Level	FY 13	FY 14	FY 15
Family Resource Centers	\$600,000	\$600,000	\$600,000

Strategy: Home Visitation			
Strategy Description Provides voluntary in-home services for infants, children and their families, focusing on parenting skills, early physical and social development, literacy, health and nutrition. Connects families to resources to support their child’s health and early learning.			
Strategy Narrative Comprehensive Home Visitation programs provide participating families of young children with information and education on parenting, child development and health topics while assisting with connections to other resources or programs as needed. A variety of models exist to address the spectrum of universal needs to targeted or specialized needs of particular populations such as first time parents, teen parents, families at-risk for abuse-neglect or low income families. This strategy is an integral part of the family support service delivery system impacting higher risk families. The Home Visitation program also functions as a mobile resource center to inform families of other services available in the community. This strategy addresses the Regional Council’s following priority: Expand and enhance parent/caregiver support.			
Target Population Description The Regional Council is proposing to change its original intended target population of this funding opportunity to families with children birth through three years who are at risk and vulnerable, including low-income families, pregnant and parenting teens, un/underserved populations, families living in isolated geographic areas, and families with children with special needs. The budget is developed based on a national average and experience so far in the region as the strategy is on its second year of implementation.			
Target Service Units	FY 13	FY 14	FY 15
Number of families served	125	125	125
Funding Level	FY 13	FY 14	FY 15
Home Visitation	\$300,000	\$300,000	\$300,000

Strategy: Parent Education Community Based Training			
Strategy Description Provides classes on parenting, child development and problem-solving skills.			
Strategy Narrative: Provides classes on parenting and child development with an emphasis on developmental stages and early intervention. Increases children’s access to community resources, including preventive health care. This strategy is an integral part of the family support service delivery system impacting all families. The strategy also provides a linkage to other services available in the community. The funding was increased from the previous funding plan to reflect moving parent education community based training funding from the Family Resource Center strategy. This strategy addresses the Regional Council’s following priority: Expand and enhance parent/caregiver support.			
Target Population Description This strategy will target the following segments of the regional population: <ul style="list-style-type: none"> • Teen parents • Parents or grandparents of children 0-5 The \$750 cost per participant is a typical cost for this service. Based upon experience in the region and the available funding, the Regional Council chose this target service unit number.			
Target Service Units	FY 13	FY 14	FY 15
Number of participating adults	500	500	500
Funding Level	FY 13	FY 14	FY 15
Parent Education Community Based Training	\$375,000	\$375,000	\$375,000

Strategy: Food Security			
Strategy Description Distribute food boxes and basic necessity items to families in need of assistance who have children birth through 5 years of age.			
Strategy Narrative Through this strategy, First Things First funding can be used to support the distribution of food boxes with a focus on including items and nutritional resources for families with young children. Each box provides a three-day supply of food and serves a family until more permanent assistance is found. This strategy will complement other services funded through Family Resource Centers as well other service organizations in the region that use nutrition as part of their activities. Families are also provided with information about other community resources.			

Family stresses in the region are evident through data that indicates the large increase in very poor young children receiving Temporary Assistance for Needy Families (TANF) benefits. Recent feedback from a local summer food program reported a large number of children in the 0-5 yrs. of age receiving food, and an overall increase in the percentage of families qualifying for free and reduced lunches among local elementary school districts.

This strategy addresses the Regional Council’s following priority: Expand and enhance parent/caregiver support.

Target Population Description

Families in need of food assistance who have children birth to 5 years old.

Target Service Units	FY 13	FY 14	FY 15
Number of food boxes distributed	2000	2000	2000
Funding Level	FY 13	FY 14	FY 15
Food Security	\$50,000	\$50,000	\$50,000

Strategy: Quality First

Strategy Description:

Support provided to child care centers and homes to improve the quality of programs, including: on-site coaching and program assessment; financial resources; professional education scholarships; and consultants specializing in health and safety practices.

Strategy Narrative

Expands the number of children who have access to high quality care and education, including learning materials that are developmentally appropriate, a curriculum focused on early literacy, and teachers trained to work with infants, toddlers and preschoolers in the Southwest Regional Partnership Council Region.

Quality First is Arizona’s voluntary quality improvement and rating system. It does not duplicate or replace, but builds upon state licensing regulations, addressing multiple aspects of early care and education through research-based indicators of quality.

Quality First provides supports through nine program components including: coaching, financial incentives, licensure fee assistance, child care scholarships, T.E.A.C.H. Arizona scholarships, Child Care Health Consultation, program assessment, assignment of star rating and specialized technical assistance. The addition of child care scholarships to this strategy in SFY 2013 will help more low-income families receive quality child care.

This strategy addresses the Regional Council’s following priority: Increase access to high quality early care and education with a focus in the rural areas.

Target Population Description

The funding provided is to continue to support the current level of enrollment in the program in the region of both regionally and state funded centers and homes, approximately 23% of providers in the region.

Target Service Units - Quality First	FY 13	FY 14	FY 15
Number of center based providers served	17	17	17
Number of home based providers served	4	4	4
Funding Levels	FY 13	FY 14	FY 15
Quality First	\$361,276	\$361,276	\$361,276
Child Care Health Consultation	\$52,920	\$52,920	\$52,920
Scholarships TEACH	\$99,000	\$99,000	\$99,000
QF Child Care Scholarships	\$762,873	\$762,873	\$762,873
Target Service Units - Child Care Health Consultation	FY 13	FY 14	FY 15
Number of center based providers served	17	17	17
Number of home based providers served	4	4	4
Target Service Units - Scholarships TEACH			
Number of professionals receiving scholarships	30	30	30
Target Service Units - QF Child Care Scholarships			
Number of children receiving scholarships	121	121	121

Strategy: Scholarships TEACH (addition to QF package)
<p>Strategy Narrative</p> <p>This strategy was slow in implementation the first year; however, at the end of SFY 2011, all available slots have been filled and it should continue to be fully utilized by scholars. T.E.A.C.H. Arizona is a statewide scholarship program for the early care and education teachers, directors and family child care providers working in licensed or regulated programs. The scholarship requires the employer and the scholarship recipient to each pay 10% of the tuition and coursework related fees, and the program, through state or regional funding, to pay 80% of the tuition costs. The T.E.A.C.H. Early Childhood® Scholarship:</p> <ul style="list-style-type: none"> • funds coursework leading to a degree, certificate of completion or national CDA credential; • supports release time, books, tuition, and a bonus for successful fulfillment of the annual T.E.A.C.H. contract • supports employers (sponsors) with staff retention by obtaining a commitment from scholarship recipients (scholars) to remain with the sponsoring employer for a specified period of time (for successfully attaining the CDA, a scholar must commit to remaining with the employer for 6 months; for coursework leading to/and attainment of the Certificate of Completion and the AA degree, a scholar must commit to remaining with the employer for 1 year) • promotes cooperative partnerships among individuals, employers, other Quality First centers, and higher education institutions. <p>This strategy addresses the Regional Council’s following priority: Increase professional development of early care and education providers.</p> <p>Target Population Description</p> <ul style="list-style-type: none"> • 30 Early Care and Education Teachers/Professionals

Strategy: Scholarships Non-TEACH			
Strategy Description Provides scholarships for higher education and credentialing to early care and education teachers.			
Strategy Narrative Provides Professional Career Pathways Project - This strategy focuses on providing scholarships for college-credit coursework as a method for the early care and education workforce to gain access to higher education. The goal of the scholarships is to enable individuals to take coursework leading to credentials and degrees by making it possible for them to afford the expense of going to school. The strategy was slow to implement. Recent data indicates that the project is running at full capacity. This strategy addresses the Regional Council’s following priority: Increase professional development of early care and education providers.			
Target Population Description The target population is professionals working in child care settings that are not participating in Quality First programs. Since the regional allocation for Quality First is for 21 programs, the Regional Council wants to offer Professional Development opportunities to non-Quality First participants.			
Target Service Units	FY 13	FY 14	FY 15
Number of professionals receiving scholarships	30	30	30
Funding Level	FY 13	FY 14	FY 15
Scholarships Non-TEACH	\$76,500	\$76,500	\$76,500

Strategy: Pre-Kindergarten Scholarships			
Strategy Description: Provides scholarships to quality preschool programs in a variety of settings to allow programs to serve more children.			
Strategy Narrative Stakeholders have consistently identified quality preschool programs as the single most important service that is missing in the region, and available data indicates quality preschool programs are lacking or insufficient in the region, especially in the more remote and rural communities. Through partnerships with local school districts, this strategy expands access to high quality preschool programs in communities where known shortages exist. The Pre-Kindergarten strategy in the region addresses the prioritized need to increase access to high quality early care and education with a focus in the rural areas.			

Target Population Description			
<p>This strategy increases the number of three and four-year-olds from low-income families enrolled in high-quality preschool programs. In determining which public school districts to partner with, the Regional Council prioritized communities with known shortages, such as those with no Head Start, no regulated child care, and those with the most families waiting to receive child care subsidies.</p> <p>The Regional Council is targeting rural areas of the region, i.e. Gila Bend, Tonopah and surrounding communities where there are no child care settings other than unregulated home care. The Council is acting on requests from rural elementary school districts in the area for assistance in this matter. The funding will provide for two preschool rooms if needed or to add slots to existing preschools as long as quality is appropriate.</p>			
Target Service Units	FY 13	FY 14	FY 15
Number of FTF-funded pre-K children	40	40	40
Number of private/public partner pre-K sites receiving support	2	2	2
Number of public school pre-k sites receiving support	2	2	2
Funding Level	FY 13	FY 14	FY 15
Pre-Kindergarten Scholarships	\$335,234	\$335,234	\$335,234

Strategy: Family, Friends and Neighbors
Strategy Description
Improves the quality of care and education that children receive in unregulated child care homes. Support provided to family, friend and neighbor caregivers include training and financial resources.
Strategy Narrative
<p>While regulated care and education is a First Things First prioritized role, national estimates suggest that as many as 60 percent of all children need child care due to parent’s employment and of these, as many as 50 percent of children ages 5 and under are cared for in home-based settings. Some First Things First strategies address improving the quality of these settings through education and support groups. This strategy has been implemented in the region for 2 years. While the strategy has been successful in most of the urban areas of the region, it has been difficult to implement in the rural areas. The Regional Council will be considering other models in order to increase its effectiveness and successes in the rural areas.</p> <p>Evidence suggests that training provided to home-based family, friend, and neighbor caregivers can result in positive outcomes for children. In a study including Arizona home-based providers, impact was noted in the following areas: 1) Safety in the home environment, particularly fire safety; 2) Establishing and maintaining a daily schedule for the children; 3) Encouraging providers to utilize the resources of their local library; 4) Developing a written formalized child care services agreement with parents, and 5) Increased knowledge regarding the Child and Adult Food Program.</p> <p>This strategy addresses the Regional Council’s following priority: Increase support to Family, Friends and Neighbors care providers.</p>

Target Population Description: The target population is 110 unregulated home child care providers in the region.			
Target Service Units	FY 13	FY 14	FY 15
Number of participating providers	110	110	110
Funding Level	FY 13	FY 14	FY 15
Family Friends and Neighbors	\$250,000	\$250,000	\$250,000

Strategy: Oral Health			
Strategy Description Provides oral health screenings and fluoride varnish in a variety of community-based settings; provides training to families on the importance of oral health care for their children; and provides outreach to dentists to encourage service to children for a first dental visit by age one.			
Strategy Narrative The Southwest Maricopa Regional Partnership Council has chosen to invest funding to support an Oral Health strategy to address the identified need of limited access to adequate health and dental care services, including preventive services, screening services, and follow-up services. Fluoride varnish application, when properly applied to young, high-risk children, is a proven intervention to reduce the incidence of dental caries (tooth decay). Determination of high-risk for a population is low-income; for an individual child it is determined by a dental risk assessment. This strategy is being implemented through a Government to Government Agreement with the Maricopa County Department of Public Health in partnership with the Northwest Maricopa Region. This strategy addresses the Regional Council’s following priority: Increase access to early preventive dental care.			
Target Population Description This strategy will target 2,667 children and 500 pregnant women participating in local WIC programs and local county health clinics. Once the strategy is implemented and running, it will then start approaching children and families attending child care centers.			
Target Service Units	FY 13	FY 14	FY 15
Number of children receiving oral health screenings	2,667	2,667	2,667
Number of children receiving screenings	2,667	2,667	2,667
Number of participating adults	0	0	0

Number of participating professionals	0	0	0
Number of prenatal women receiving oral health screenings	500	500	500
Funding Level	FY 13	FY 14	FY 15
Oral Health	\$175,000	\$175,000	\$175,000

Strategy: Nutrition/Obesity/Physical Activity	
Strategy Description Provides health education focused on obesity prevention to children, families and early care and education professionals.	
Strategy Narrative <p>In order to address the Southwest Maricopa Regional Partnership Council’s identified need to increase family and child care provider access to comprehensive health systems and prevention training, the Council has chosen to invest funding to support a Nutrition/Obesity/Physical Activity Strategy. The Regional Council proposes to implement S.N.A.C.K. – a Health promotion program that works in the community to make kids safer, healthier and happier. A team of Health Educators, Dietitians, Car Seat Specialists and a Resource Coordinator work together to provide nutrition education to parents and child care providers, physical activity promotion, injury prevention, access to health care, resource and referral assistance, and other services. The program uses best practices and evidence based resources.</p> <p>The program works through a train the trainer model. The train the trainer model targets those in the community working with young children and their families – including child care providers and health and human service providers. Trainings provided include instruction to child care staff on how to implement the Color Me Healthy Obesity Prevention Curriculum in the classroom and instruction on becoming certified as a National Child Passenger Safety Technician for those service providers who interact with families.</p> <p>Color Me Healthy is an award winning, evidence based, developmentally appropriate, curriculum that targets young children and their parents. The S.N.A.C.K. program provides child care centers and homes copies of the Color Me Healthy curriculum, program materials necessary for implementation, and training and support on implementation. S.N.A.C.K. works with child care providers to ensure that Color Me Healthy is implemented correctly, to ensure that parents are engaged, and to ensure that the meals that the center/home provides supports the message of healthy eating.</p> <p>National Child Passenger Safety Technician Certification courses are designed to teach individuals the technical and educational skills needed to serve as child passenger safety resources for their organization, community or state. The S.N.A.C.K. program provides certification classes, free of charge, to all interested individuals. Once certified, the technicians put their knowledge to work through a variety of activities from individual client installation and education to large scale child safety seat check events.</p> <p>The S.N.A.C.K. program will build capacity in the community around health and safety which in turn will compound the reach of the program. The program is anticipated to provide education and training to 200 participating adults who will potentially impact the lives of more than 2000 young children living in the region.</p>	

This strategy has been successfully implemented in the Northwest Maricopa Region for the past three years. The strategy will be implemented by joining the Northwest Maricopa Regional Council in a Government to Government Agreement with the Maricopa County Department of Public Health.

Target Population Description:

The S.N.A.C.K. program is an infrastructure development program that targets child care providers, early educators, home visitors, parent educators, and health educators. Efforts will be made to engage all current and new grantees. The S.N.A.C.K. program is anticipated to provide education and training to 200 participating adults.

Target Service Units	FY 13	FY 14	FY 15
Number of Participating Adults	200	200	200
Funding Level	FY 13	FY 14	FY 15
Nutrition/Obesity/Physical Activity	\$200,000	\$200,000	\$200,000

Strategy: Service Coordination

Strategy Description

Through coordination and collaboration efforts, improves and streamlines processes including applications, service qualifications, service delivery and follow-up for families with young children. Reduces confusion and duplication for service providers and families.

Strategy Narrative

While there is strong recognition of the many programs and service providers who have come together in their efforts to serve young children, a need exists for even greater coordination and collaboration among public and private agencies. Several key informant interviews conducted among the Maricopa County regions in both 2008 and 2010 revealed that service providers felt that the lack of services in the region and the lack of coordination of services are preventing the development of a support system for children and families that is so desperately needed. In addition, the surveys revealed that the Maricopa County Region as a whole lacks a well-identified point of entry or coordination of services that can support parents in obtaining the information and services they need to ensure children have the greatest chance of success in school. Currently, there is no effective mechanism to coordinate services, identify and address gaps in service, reduce duplication, or ensure that families are referred to the services that best fit their needs.

Coordinated services will be easier to access and can be implemented in a manner that is more responsive to the needs of the families. Better coordination will also result in fewer gaps in service as the needs of children and their families are more thoroughly identified and addressed. Coordination will foster access to services and coordination among service providers; assures high quality service availability throughout and across regions; and supports the development of an early childhood system of care.

To address the need for facilitated coordination in the Southwest Maricopa Region, the Regional Partnership Council will partner with the Northwest Maricopa Regional Partnership Council to implement a facilitated cross regional coordination and collaboration strategy. This strategy will include the development and implementation of a facilitated model to integrate educational and health care resources

and information systems to expand families’ access to high quality services. An important step in this process is the networking among First Things First, state and private agency partners and community stakeholders. Collectively, these organizations must work to identify the components, assets, gaps and necessary pieces to build a sustainable Arizona Early Childhood Development and Health System.

Target Population Description
The target population is providers serving children birth through five years of age and their families who reside in the region.

Target Service Units	FY 13	FY 14	FY 15
No Service Units	NA	NA	NA
Funding Level	FY 13	FY 14	FY 15
Service Coordination	\$50,000	\$50,000	\$50,000

Strategy: Community Awareness

Strategy Description
Uses a variety of community-based activities and materials to increase public awareness of the critical importance of early childhood development and health so that all Arizonans are actively engaged in supporting young kids in their communities.

Strategy Narrative:
In order to address the Southwest Maricopa Regional Partnership Council’s identified need of limited knowledge and information about the importance of early childhood development and health, the Council has chosen to invest funding to support Community Awareness.

Approaches that will be used to increase Community Awareness include: distribution of First Things First leave behinds and branded collateral materials, sponsorships, parent education and awareness, community presentation, speakers bureau training, and participation in community events that align and support the mission of First Things First. The intent is that all Arizonans will be actively engaged in supporting young kids in their communities.

Target Population Description

- Business Community
- Elected Officials
- Parents
- **Community Stakeholders**

Target Service Units	FY 13	FY 14	FY 15
No Service Units	NA	NA	NA
Funding Level	FY 13	FY 14	FY 15
Community Awareness	\$15,000	\$15,000	\$15,000

Strategy: Community Outreach			
Strategy Description Provides grassroots support and engagement to increase parent and community awareness of the importance of early childhood development and health.			
Strategy Narrative This strategy is First Things First directed. It addresses the prioritized need to raise awareness of the importance of early childhood development and health in the region. A Community Outreach Coordinator implements various tactics as part of a statewide, cross-regional communications campaign. Using First Things First’s identified target audiences as a guide, Community Outreach staff identify the individuals or organizations within a target audience that are considered influential , credible, and able to effectively move a message within a target audience (often referred to as mavens and connectors). Outreach staff then work through those individuals to identify, motivate and equip Champions to act on behalf of young children. The activities involved in Community Outreach include: individual or small group presentations; registering of Champions; follow up with Champions to provide any training, tools or support that are needed to complete actions; and, tracking of community outreach outcomes. The Southwest Maricopa Regional Partnership Council selected to fund a model in which FTEs are shared with the Northwest Maricopa Regional Partnership Council. In SFY 2011, 89 Champions were recruited, 18 presentations were given and 59 networking events were attended within the Southwest Maricopa Region. The Regional Council is increasing the funding level to add a part-time community outreach consultant to be shared with the Northwest Maricopa Regional Partnership Council.			
Target Population Description The target populations for this strategy are Public Officials and Candidates, Elders/ Seniors, Medical Community, and Business Leaders. These audiences were identified because they encompass many of the key partners in a successful early childhood system. In order to ensure a consistent, comprehensive effort statewide, it is imperative to educate early childhood stakeholders on appropriate messaging and how to communicate with a consistent voice. In addition, these audiences represent the individuals and organizations in the community who have a vested interest in getting children ready for school and set for life.			
Target Service Units	FY 13	FY 14	FY 15
No Service Units	NA	NA	NA
Funding Level	FY 13	FY 14	FY 15
Community Outreach	\$45,000	\$45,000	\$45,000

Strategy: Media			
Strategy Description Increases public awareness of the importance of early childhood development and health via a media campaign that draws viewers/listeners to the ReadyAZKids.com website.			
Strategy Narrative: <i>Paid Media Advertising to Build Public Support for Young Children Statewide:</i> In order to address the Southwest Maricopa Regional Partnership Council’s identified needs of limited knowledge and information about the importance of early childhood development and health, the Council has chosen to invest funding to support Media. The Regional Partnership Council has agreed to partner with those Regional Partnership Councils serving Maricopa County to invest in a countywide media campaign.			
Target Population Description This is a universal strategy that targets the citizens of the entire region.			
Target Service Units	FY 13	FY 14	FY 15
No Service Units	NA	NA	NA
Funding Level	FY 13	FY 14	FY 15
Media	\$10,000	\$10,000	\$10,000

Strategy: Statewide Evaluation			
Strategy Description Statewide evaluation includes the studies and evaluation work which inform the FTF Board and the 31 Regional Partnership Councils. Examples are baseline Needs and Assets reports, specific focused studies, and statewide research and evaluation on the developing early childhood system.			
Strategy Narrative: First Things First has and is growing a multi-level system of research and evaluation strategies designed to be responsive to the information needs of varied stakeholder groups, including the First Things First Board, Regional Partnership Council directors and members, and Arizona citizens. The system provides a framework for conducting statewide and regional studies centered on identifying current and changing needs of families and children birth to five, and the impact of programs and strategies across all First Things First priority areas. The First Things First research and evaluation system is a knowledge building system, designed to be a cumulative process of developing and advancing collective understandings and meaning-making around living questions such as “what is needed”, “ what can be done”, “what are we doing”, “is it working, and “if so, in what ways and to what effect?” Individually and collectively, research and evaluation strategies generate a wealth of data and cumulative findings that can be used to document trends and changes in school readiness indicators as well as support Council learning, strategic planning and decision-making to promote well-being in Arizona’s youngest citizens.			

Target Service Units	FY 13	FY 14	FY 15
Not applicable			
Funding Level	FY 13	FY 14	FY 15
Statewide Evaluation	\$109,988	\$109,988	\$109,988

Section III D. Proposed Funding Summary

SFY 2013 - 2015 Regional Partnership Council Budget

**FY 2013 - 2015****Southwest
Funding Plan**

Allocations and Funding Sources	2013	2014	2015
FY Allocation	\$3,256,250	\$3,262,763	\$3,274,998
Population Based Allocation	\$2,201,782		
Discretionary Allocation	\$556,877		
Other (FTF Fund balance addition)	\$497,591	\$3,262,763	\$3,274,998
Carry Forward From Previous Year	\$1,790,647	\$1,179,106	\$559,078
Total Regional Council Funds Available	\$5,046,897	\$4,441,869	\$3,834,076
Strategies	Proposed Allotment	Proposed Allotment	Proposed Allotment
Family Resource Centers	\$600,000	\$600,000	\$600,000
Home Visitation	\$300,000	\$300,000	\$300,000
Parent Education Community-Based Training	\$375,000	\$375,000	\$375,000
Food Security	\$50,000	\$50,000	\$50,000
Quality First	\$361,276	\$361,276	\$361,276
Quality First Child Care Scholarships	\$762,873	\$762,873	\$762,873
Child Care Health Consultation	\$52,920	\$52,920	\$52,920
Scholarships TEACH	\$99,000	\$99,000	\$99,000
Scholarships non-TEACH	\$76,500	\$76,500	\$76,500
Pre-Kindergarten Scholarships	\$335,234	\$335,234	\$335,234
Family, Friends & Neighbors	\$250,000	\$250,000	\$250,000
Oral Health	\$175,000	\$175,000	\$175,000
Nutrition/Obesity/Physical Activity	\$200,000	\$200,000	\$200,000
Service Coordination	\$50,000	\$50,000	\$50,000
Community Awareness	\$15,000	\$15,000	\$15,000
Community Outreach	\$45,000	\$45,000	\$45,000
Media	\$10,000	\$10,000	\$10,000
Needs and Assets		\$15,000	
Statewide Evaluation	\$109,988	\$109,988	\$109,988
Proposed Allotment Total:	\$3,867,791	\$3,882,791	\$3,867,791
Total Unallotted	\$1,179,106	\$559,078	(\$33,715)