

SANILAC COUNTY GREAT START STRATEGIC PLAN 2023-2026



Vision

A Great Start to ensure every child in Sanilac County is safe, healthy and ready to succeed in school and life to become a productive members of society.

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Introduction

September 15, 2022

Dear Community Members:

The members of the Great Start Collaborative in Sanilac County present to the greater community, a call to action on behalf of our youngest citizens, children birth to age eight. The Sanilac County Great Start Collaborative's intent is to promote an understanding of the importance of the first eight years in a child's life and to work together to build a network of public and private programs, services and support for young children and families. Through this systematic approach, our focus is to encourage system changes that provide community-based strategies enabling all of Sanilac County's children to achieve success in school, as well as success as citizens later in life.



This report and strategic plan were created to inform the public about the Great Start Initiative. It contains the goals and strategies that will guide our efforts from 2023-2027. Our efforts have been focused on four early childhood outcomes set in place by the Michigan Department of Education, Office of Great Start:

1. Children are born healthy.
2. Children are healthy, thriving and developmentally on track from birth through third grade.
3. Children are developmentally on track and ready to succeed in school at the time of school entry.
4. Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.

Strengthening Families™ is a research-informed approach to increase family strengths, enhance child development and reduce the likelihood of child abuse and neglect while offering a framework for changes at the systems, policy and practice level. It is based on engaging families, programs and communities in building five key protective factors:

- Parental resilience
- Social Connections
- Concrete support in times of need
- Knowledge of parenting and child development
- Social and emotion competence of children

Utilizing the four outcomes as our north star, we have devised a strength-based action agenda to guide our efforts. The results will impact five key areas of support needed by young children and their families to build healthy, safe, and thriving lives in Sanilac County:

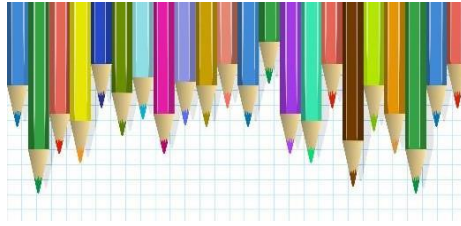
1. Pediatric and family health
2. Social and Emotional health
3. Childcare and Early Childhood Education
4. Parent Leadership
5. Family Wellbeing

Sanilac County Great Start Collaborative has collected and analyzed local data provided by health, education, and civic entities. We shared these findings with the community to gain feedback and to deepen our understanding of the experience of raising children in Sanilac County. Views from parents of young children, community leaders, early childhood education and care providers, stakeholders and local organizations understanding of our communities needs by identifying strengths in the early childhood system of services and prepared to succeed in school and life.

Sincerely,

Karolyn McEntee

Sanilac Great Start Collaborative Director



Executive Summary

Our Vision: A Great Start to ensure every child in Sanilac County is safe, healthy and ready to succeed in school and life to become a productive members of society.

Our Mission: The purpose of Sanilac County Great Start is to assure a coordinated system of community resources and supports to assist all Sanilac County families provide a great start for their children from ages zero through third grade.

Great Start Collaborative Sanilac is a joint effort by diverse community partners all working in concert to assure that every child in Sanilac is safe, healthy, and ready to succeed in school and life, and reading proficiently by the end of third grade. Our activities over the next four years will increase our effectiveness while aligning with the Michigan Department of Education, Office of Great Start:

1. Children are born healthy;
2. Children are healthy, thriving and developmentally on track from birth to third grade;
3. Children are developmentally ready to succeed in school at the time of school entry;
4. Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.

In order to achieve these lofty goals, we know that we must focus our collective energy to ensure a coordinated system of community supports which assists all Sanilac County families in providing a great start for their children from inception through third grade.

Since our Sanilac Great Start Collaborative began our efforts in 2009, we have accomplished many steps in better meeting the needs of our young families. By identifying gaps and overlaps in programs and supports through continuing dialogue around the system of supports, we have been able to reorganize many components of the local early childhood system to better serve our local families and their young children. The results have been received well by both those being served and those providing the services.

The primary reason our efforts have been so successful is because of the formidable energy that our Great Start Collaborative Parents have devoted to these efforts. They have been leaders at the Collaborative table during discovery and problem solving discussions. Often they have shared their personal experiences and offered suggestions for improvements to the services and programs being offered.

This unique and powerful relationship between the Parents and Great Start Collaborative partners is proving to be instrumental in our system transformation and we are eager to continue our journey as we travel towards

our combined vision for the children of our county.

How we have developed our Strategic Plan and Action Steps:

We began utilizing the ABLe Change Framework in 2019 to guide our strategic plan and action steps. The process began by conducting a system scan of our Early Childhood System. We asked diverse populations including users of the system components as well as those working parallel to and within the Early Childhood system to complete a system survey in 2019.

Through those responses, we identified strengths as well as needs within that system of supports. We then reviewed qualitative and quantitative data impacting the various members and services of our Early Childhood Community. The initial data was provided through a 2019 Parent Survey which offered valuable feedback from 348 parents within our communities. Since then we have collected specific pieces of data related to identified areas of concern in the first survey. Through this deeper dive, we have been monitoring progress and recording lessons learned while modifying our action steps immediately. Problems and solutions are the subject of intensive discussions at the GSC table and workgroups leading us to a shared understanding of the root causes and real-time methods of how we will shift our efforts to reach our goals.

The current goals and objectives our members are working towards to achieve our mission and vision in tandem with the outcomes are as follows:

<i>Outcome:</i>	<i>Goals:</i>	<i>Objectives:</i>
<i>1. Children are born healthy.</i>	<ul style="list-style-type: none"> Build community awareness of healthy perinatal and prenatal practices to increase the number of healthy births to Sanilac County families 	<ul style="list-style-type: none"> Maximize opportunities to connect with local perinatal and prenatal women to promote awareness, access and use of local pregnancy and family planning supports and information
<i>2. Children are healthy, thriving and developmentally on track from birth to third grade.</i>	<ul style="list-style-type: none"> Demystify family access to supports related to child health, development and nutrition Improve maternal and child health outcomes through an active collaboration with WIC, the GSC and GSC-PC 	<ul style="list-style-type: none"> Increase ease of access to supports related to family and child health, optimal development and nutrition Collaborate with WIC (Women, Infants & Children) nutrition program

<p><i>3. Children are developmentally ready to succeed in school at time of school entry.</i></p>	<ul style="list-style-type: none"> • Increase access to high quality early care and education services and supports 	<ul style="list-style-type: none"> • Review and make recommendations regarding the components of the Great Start Readiness Program • Increase families' knowledge, understanding and utilization of childcare subsidy, and high quality childcare options via Great Start to Quality • In collaboration with the region's Great Start to Quality Resource Center, link licensed and registered providers in the GSC/GSPC geographic area to Great Start to Quality for the purpose of achieving higher levels of quality
<p><i>4. Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.</i></p>	<ul style="list-style-type: none"> • More students are proficient readers, reading to learn at the end of third grade 	<ul style="list-style-type: none"> • Support businesses, professionals, families and parents in providing daily literacy opportunities to assure more children are attaining optimal reading fluency by the end of third grade.

The next steps will require working collaboratively with all of our partners to lift up the strategies detailed in the action agenda to optimize our efforts with small actions intended to change the system not by disrupting the current elements but by enhancing those already in place. To monitor progress, we have included methods to track the effects of our action steps and to measure success. Annually, we will review outcomes and use the data and lessons learned to respond to ongoing and emerging needs.



Great Start Collaborative Profile & History

Great Start

The Great Start System is a holistic approach that identifies the importance of early childhood experiences in five core areas: Physical Health, Social-Emotional Health, Early Education and Care, Parenting Education, and Family Support & Basic Needs. Great Start recognizes that education begins at birth and that it is important to build an early childhood system in the spirit of collaboration and with common goals.

Great Start Collaborative

In October 2008, the Early Childhood Investment Corporation partnered with the Sanilac Intermediate School District to form the Sanilac Great Start Collaborative. This group of partners was created based on common priorities and interests in the development of a comprehensive system of support for families in Sanilac County.

The Great Start Collaborative is a group of community members from all over the county and region representing the diverse lifestyles. According to the 2020 Census, 78.4% of Sanilac homes are owner occupied, whereas, the U.S. average is only 65.5%. A key indicator of desirability, growth and sustainability for a community is the permanence of its residents. Farming is the economic backbone of the county followed by industry, and tourism with all the essential services necessary to support a healthy and thriving community. All these services work in concert with individual residents to sustain a home town, family focused community.



The Great Start Collaborative and our partners have accomplished so much, yet we will not stop until ALL children in Sanilac are safe, healthy, happy and prepared to succeed in school and life. Even through a global pandemic, our membership continued to meet monthly, simply switching to virtual meetings. We understood that local families needed us even more as parents were losing their jobs, reconfiguring their lives to be the sole care provider to their children 24/7, without childcare, created classrooms and provide educational instruction at the dining room tables and offer loving assurance that the world just needed to take a few months to get healthy again.

Over the past three years, we have:

- Launched a county-wide universal access, virtual survey for early childhood supports and services. The Great Start Parents named it: S.T.A.R.S. (Survey to access resources and supports)
- Our home visiting focus team with guidance by the Great Start Collaborative director, Karolyn McEntee, obtained grant dollars to sustain Parents as Teachers home visiting program. Children Trust Michigan is providing \$200,000 to fund the PAT home visiting program and promote our communities transition towards becoming a trauma informed and responsive community and to decrease child abuse and neglect in Sanilac County.

- Began an in-home educational program focused on budgeting and Earned Income Tax Credit for our Parents as Teachers families through a grant for \$80,000 from University of Michigan.
- Great Start Parent Coalition with leadership from Parent Liaison, Kim Hurlburt, raised sufficient funds to maintain the Great Start Preschool Scholarship Program (PSSP) for the year. They raised \$3,213.75 in 2021 despite the pandemic. This supported 6 students who did not qualify for free or reduced programs to experience quality preschool. Since the inception of the PSSP in 2014, the Parent Coalition has supported 61 students attending quality preschools.
- The Parent Coalition also launched Talking is Teaching campaign with the intention of increasing the number of daily literacy rich moments and activities to prepare area infants, toddlers, and preschoolers for kindergarten readiness.
- Just this year, the Parent Coalition with assistance from community member, Kim Zander, obtained another \$25,000 grant to begin a Mentorship Program/Parent-to-Parent.
- Created virtual Service Expo with 14 partners providing videos detailing who they are, those they serve, what they do to support parents and children, and how to access their services. These videos are a valuable tool to partners during onboarding of staff.

To achieve many of our goals within the Great Start strategic plan, we have partnered with area agencies, organizations, and individuals over the past year in 10 community events.

1. Community Baby Shower – 49 attendees
2. Family Fun Day with Sandusky Chamber of Commerce – 300+ attendees
3. Tuesday Talks Coffee Hour x3 – 56 attendees & 6 presenters
4. Prevention Network Food Pantry with MCDC – 430+ attendees
5. Joint Preschool Recruitment with Head Start and Great Start Readiness Program – 22 attendees
6. Backpack Giveaway with DHHS & Countryside Free Methodist Church – 123 kids
7. ACEs Training (with Prevention Network) – 51 attendees
8. Virtual Service Expo – 33 attendees & 15 agencies presenting
9. Children's Champion Event – 27 in-person & 24 virtual attendees
10. Tuesday Talks Coffee Hour (9 events) – 170 participants

At each event, we provided attendees with our Family Resource Guide, safety equipment, child development materials, Talking is Teaching materials & infant/toddler books, Growing Great Kids Newsletters, human service agency flyers as well as future events flyers. Referrals were provided to families who were seeking assistance of any kind. Another goal is always to gain real-time feedback and perspective from families utilizing the system of services and supports as well as provide education around optimal child development and the benefits of daily literacy exposure. We focused our efforts on connecting with families who are not aware or utilizing resources available to assure their children are learning and thriving.

It is an outstanding accomplishment to have our community committed to a strong and common plan for our youngest children. We are proud of our partnerships, funders, and families who bring new perspectives and synergy to our work.

This partnership allows us to:

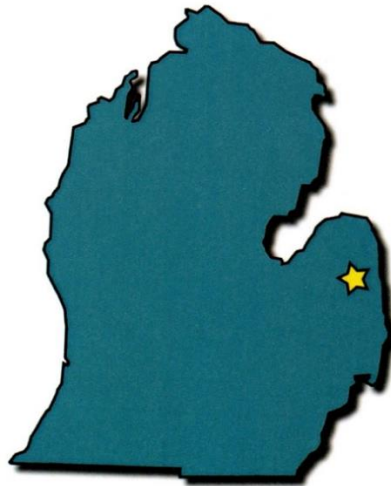
- Develop a coordinated system of services that are: voluntary, accessible, culturally competent, and universal and aware of our responsibility to reach those most at risk.
- To improve the quality of family life by providing integrated services which nurture the children of our community.

Great Start partnerships give members an opportunity to identify gaps and overlaps in services and resources. We have collected data related to families with young children and expecting mothers. This information has given us a clearer picture of the status of supports for young children and their families. Based on review of data and existing services, we identified priorities and developed goals that address local family's needs with a systematic approach.

Great Start partners include Health Care providers (Deckerville and McKenzie Hospitals, and Sanilac Health Department). Department of Health & Human Services, all seven school districts and the Sanilac Intermediate School District, faith based organizations, local businesses and over 20 non-profit organizations such as the Child Abuse Prevention Council and Child Advocacy Center, and most importantly, parents of young children.

Great Start Parent Coalition

Our Parent Coalition has gained attention and support for our mission through personal interactions, community event presence and media engagement. The residents of Sanilac County are close knit families. They are proud and supportive of their children and find great value in the mission of the Great Start Collaborative and Parent Coalition. Together, we are determined to create a system of supports for all children in our community that will ensure they are happy, safe, healthy and prepared for a successful school experience.





Community Needs and Strengths Assessment

The Sanilac County Strategic Plan is a continuum of efforts which began in 2009. This section is the map of our journey so far and our plans for the future to improve the system of Early Childhood services and support in Sanilac. Sanilac Great Start Collaborative (GSC) membership has remained dedicated to ensuring all children are safe, healthy and prepared to succeed in school and life. In 2017, we set aside our Action Agenda to dedicate the year to conducting a system scan similar to the one completed in 2009. We collected quantitative and qualitative data and parent feedback to deepen our understanding of the challenges families with young children were experiencing. Upon completion of the process, we observed that the goals and objectives of our original plan still rang true and that what we were doing was moving us towards our goals.

The greatest learning was that the group preferred to employ a continuum methodology to assure that the Strategic Plan and Action Agenda remained relevant and actionable. To do this, the group began to integrate a method of updating the document data, goals, objectives, strategies and action steps throughout the year. Time is dedicated on monthly GSC meeting agendas for members and partners to provide updates, request support, parent feedback and input, as well as, report current data. This methodology has allowed us to remain focused on a grand scale, flexible and open but most importantly, to value the voice of our parent voices and use them as our compass. This process involves addressing emergent concerns and opportunities to align our work with others and update the Action Agenda in real-time. Our members are intent on working smarter, not harder.

Indicated Needs	Strengths
Sanilac does not have any birthing hospitals or centers	Partnership with Prosperity Region 6 Perinatal Health Collaborative to assure parental voice in efforts to identify gaps in resources in Sanilac County.
Women, Infants & Children (WIC) is underutilized by qualifying families	GSC Parent Coalition is partnering with WIC to provide beneficiary voice and participation
The county has too few quality childcare options. Currently, there are a total of 1,108 childcare slots available for the 5,862 children under the age of 12	GSC has partnered with Great Start to Quality Resource Center, Eastern Region to increase childcare capacity and quality.
Less than 40% of children 3-4 years old are enrolled in quality preschool in this county	The GSC has a School Readiness advisory committee to address the needs of school readiness across the community
57.2% of M-Step tested 3 rd grade Sanilac County students in 2021 were partially or not proficient in English Language Arts.	GSC maintains active participation in the Literacy Hub Network to assure equitable distribution of literacy resources

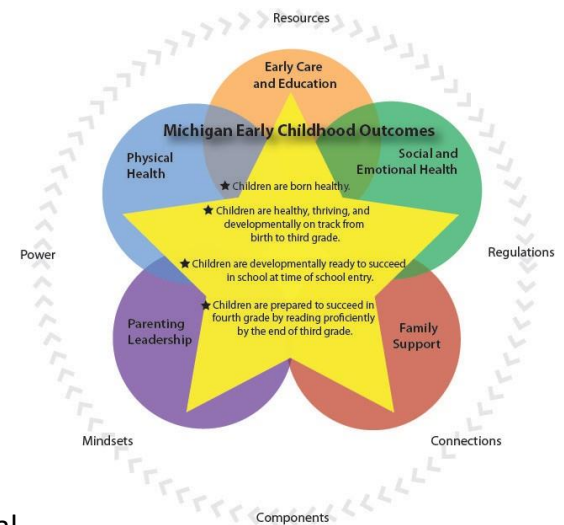
As ideas, opportunities and concerns emerge, we have made it standard practice to employ the principals of Strengthening Families Protective Factors Framework to examine them. The process requires the member to get curious and ask “why?” repeatedly until we are confident that we have identified root causes, who is effected if how it aligns with the four outcomes. From there, it is assigned to one of the workgroups for a deeper dive into understanding the why it is happening through data, who is impacted and who is missing from the discussion, finally, who has the power to change if change is deemed appropriate. Once a full study is completed, the results are brought to the Great Start Collaborative for a vote to amend the Action Agenda to reflect the workgroups recommendation. This process has resulted in continued investment and commitment by the membership and formidable progress in our efforts to assure all children in Sanilac are safe, healthy, happy and prepared to succeed in school and life.



Goals and Objectives Narrative

Sanilac Great Start Collaborative is committed to our vision that every child in Sanilac is safe, healthy, and ready to succeed in school and life through reading proficiently by the end of third grade. To achieve this, we have employed the principles and recommendations offered by the Great Start, Great Investment, Great Future report. This will ensure that the goals, objectives and strategies within the Action Agenda align with the Office of Great Start through the four Michigan Early Childhood Outcomes:

Michigan Department of Education's Office of Great Start released Michigan's Collective Early Childhood Action Plan in May 2022. This plan is the result of a two-year needs assessment and action planning process conducted across the State of Michigan. Sanilac Great Start Collaborative's Action Agenda is informed by those findings and strategies as well as locally identified needs and strengths. The State's Action Plan, and Sanilac's Action Plan contain aligned priorities, strategies, and actions that reflect current opportunities to expand and enhance programming, address challenges and support necessary infrastructure for a coordinated, sustainable network of services and support for families and children.



Each section begins by informing of the demonstrated need in the county related to one of the four outcomes. A prioritized goal and an objective is specified followed by strategies to effect change and move our community towards our mission, that all children are safe, healthy and prepared to be successful students and proficient readers. The strategies within the Action Agenda utilizes our communities' strength and coordinated efforts to build upon the current system, as well as address needs identified in the community wide system scan and parent input.

Prioritized Goals

The prioritized goals and associated strategies were based on the root causes identified for Outcome. These strategies, when implemented, will build a seamless system of support which empowers and enables children and their families, through access, to shared resources to achieve the desired outcomes. Other key considerations included:

1. Five Points of the Star – referred to as Early Childhood Components
 - Pediatric & Family Health
 - Social & Emotional Health
 - Family Support
 - Parent Leadership
 - Early Care & Education

2. Utilization of the Levers for Change evaluation findings report provided by Early Childhood Investment Corp/Michigan State University to Sanilac Great Start Collaborative.

- Strongest Areas:
 - Readiness for change
 - Active Constituents
 - Root Cause Focus
- Target for Improvement:
 - Intentional Systems Change Actions
 - Strong Relational Networks
 - Equity Orientation

Associated Strategies

The following strategies have been identified for implementation by the Sanilac GSC in 2023, 2024, and 2025 to achieve the four outcomes:

Children are born healthy;

- A. Increase parent knowledge of local perinatal and prenatal services available and increase the number of women accessing local peri-/pre-natal supports.
- B. Inform the community of local peri-/pre-natal supports.
- C. Increase pregnant families' knowledge of benefits of breastfeeding in the first year of the child's life.

Children are healthy, thriving, and developmentally on track from birth to third grade;

- A. Utilize trusted sources for distributing information about early childhood services and resources to families, professionals, and the community.
- B. Utilize the Great Start Collaborative Parent Coalition and Women, Infants, and Children (WIC) participants to provide beneficiary voice.
- C. Increase cross-sector relationships and internal agency information relay.

Children are developmentally ready to succeed in school at time of school entry;

- A. The School Readiness Advisory committee will address the needs of school readiness across the community.
- B. The GSC-PC and Great Start to Quality Eastern Region Resource Center will work in collaboration to engage the community to support and align plans to facilitate childcare availability in the wake of the influx of state and federal funds.
- C. Great Start Collaborative and Early Childhood Contact will serve as liaisons between childcare providers and Great Start to Quality Eastern Region Resource Center.
- D. Build early childhood personnel and parents knowledge of developmentally appropriate behaviors, skills, and expectations, especially related to kindergarten preparation.

Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade;

- A. Provide early literacy opportunities for families to engage in daily to increase children's literacy attainment.
- B. Help parents and businesses take meaningful action to improve reading confidence, increase communication skills, literacy exposure opportunities, health and well-being of children aged zero to five.

Parent Coalition – Strengthening Families Protective Factors;

- A. Build knowledge and capacity for employing the five protective factors through Parent Cafés.
- B. Parent Coalition members will be able to give an explanation to other parents about the purpose of the Parent Coalition.
- C. Parent Coalition members will be empowered to conduct outreach to other parents within their communities.
- D. Grow the Parent Coalition.

Active Strategies

In the Action Agenda, each of the above strategies are followed by detailed action steps or activities intended to exact change sufficient to increase the number of children in Sanilac living in safe, healthy homes, growing, learning and preparing for optimal school success.



Action Agenda

Early Childhood Action Agenda

Outcome #1

Goal: All children in Sanilac are born healthy

Addresses the following early childhood components:

- Physical Health

Demonstrated need:

According to Kids Count Data Set, in 2020 there were 407 live births to Sanilac County families. There are zero birthing hospitals or centers in the county.

Goal related to the targeted problem(s):

Build community awareness of healthy perinatal and prenatal practices to increase the number of healthy births to Sanilac County families.

Objective related to the goal:

Maximize opportunities to connect with local perinatal and prenatal women to promote awareness, access, and use of local pregnancy and family planning supports and information.

Strategy 1

Strategy 1:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 1)</i>
Increase community knowledge of local perinatal and prenatal services available and increase the number of women accessing local prenatal supports.	Connections to women of childbearing age are barred by the absence of dedicated gynecology/obstetric doctors within our county.	<ol style="list-style-type: none"> 1. Women will have increased opportunities to access perinatal & prenatal support information and resources. 2. The GSC members will have increased knowledge of local perinatal and prenatal services and how to connect women to those services.

Activities for Strategy 1

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Continue relationship with Northpointe & Lake Huron OB/GYN offices and build relationships with other doctors as they are identified. Provide postcard invites to the Sanilac Community Baby Shower for them to share with Sanilac patients.	GSC PL/ GSC Dir/ workgroup/ GSC	Annually - March	Mileage, packets, catalogs	Number of OB/GYN doctors sharing our information with Sanilac women increases by one each year
2. Maintain perinatal & prenatal workgroup – meet annually	Workgroup	Annually - January	Barrier supports	Group meets – develop catalog contents/ proposed packet content
3. Maintain prenatal packets – Annually review locations to disseminate packets	GSC PL/ GSC	Annually - September	Graphics, printing supports, packet supplies, technology consult	Packets completed and distributed at Baby Pantry

4. Continue outreach with high school counselors	GSC Dir/ workgroup	Annually - November	Mileage, meeting resources	GSC Director makes presentation at high school counselor area meeting once per year and provides prenatal packets for them to share with students who disclose that they are pregnant or planning to become pregnant
5. Partner with Prosperity Region 6 Perinatal Health Collaborative to assure parental voice in their efforts to identify gaps in resources in Sanilac County.	Workgroup/ GSC Dir/ GSC PC/ GSC PL/ Sanilac County Health Dept/ Families receiving home visiting supports and those visiting the Baby Pantry	January, February, June & October - Annually	Parent mileage, childcare, postage, technology & internet availability	GSC has staff and parent representation at 75% of Prosperity Region 6 Perinatal Health Collaborative meetings
6. Partner with CAPC to host Community Baby Shower annually.	CAPC/GSC PC/ DHHS/WIC/MIHP	1 time/year	Party stuff	Data resulting from event reported annually to GSC (Facebook reaches & shares demonstrates GSC PC investment.)
7. GSC members will review known prenatal & perinatal services annually to develop a current list of local services and gaps in those services to address through the Prosperity Region 6 Perinatal Health Collaborative.	Workgroup/ GSC Dir/ GSC PC/ GSC PL/ Sanilac County Health Dept/ Families receiving home visiting supports and those visiting the Baby Pantry	January, February, June & October - Annually	Time on the GSC agenda, staff time	GSC January minutes will reflect perinatal & prenatal services review and provide a list of those currently available as well as gaps in services. List will be shared with Prosperity Region 6 Perinatal Health Collaborative.

8. GSC will encourage all perinatal and prenatal service providing agencies and organizations to provide data indicating the number of women accessing their services annually.	Workgroup/ GSC Dir/ GSC PC/ GSC PL/ Sanilac County Health Dept/ Families receiving home visiting supports and those visiting the Baby Pantry	January, February, June & October - Annually	Admin support	GSC January minutes will include a snapshot of the total number of women who accessed local perinatal & prenatal services in the previous year. The same collection will be conducted in January to determine effectiveness of efforts.
9. GSC will partner with area providers to assure families are provided opportunities to access health and wellness education offerings. <ul style="list-style-type: none"> McKenzie Hospital Healthy Lifestyles and Community Education programs 	GSC team/ GSC PC/ McKenzie Health System/ SCHD/ Deckerville Community Hospital	3 events annually	Staff, promotional and educational materials, knowledgeable speakers, mileage, participation barrier resources	GSC will be an active member of the Healthy Living Together in offering family friendly nutritional and wellness education opportunities each year and with Deckerville Community Hospital's family prevention event.

Strategy 2

Strategy 2:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 2)</i>
Inform community of local prenatal supports	Area health providers have little knowledge of available prenatal supports	Area front line service providers will have increased knowledge of prenatal supports available and how to connect young mothers with those resources

Activities for Strategy 2

Activities (Small wins promoting the strategy and <u>addresses root causes</u>) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Invite agencies with perinatal and prenatal supports to speak at GSC meetings annually	GSC Dir/ GSC	Annually	Staff, invitations	LICC hosted by at least 2 perinatal & prenatal agencies per year
2. Use community events to raise awareness of prenatal supports	GSC PL/ workgroup/ GSC staff/ Prenatal support providers/ GS2Q	Annually prior to event	Promo materials for all events	All prenatal supports are represented at each event

Strategy 3

Strategy 3:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 3)</i>
Increase pregnant families' knowledge of benefits of breastfeeding in the first year of life.	According to August 10, 2017 WIC Breastfeeding Data Local Agency report, of the 113 infants introduced to breastfeeding in Sanilac County, 16 were breastfed through their 6 th month of life.	Breastfeeding supports are identified, listed, and will be included in prenatal packets.

Activities for Strategy 3

Activities (Small wins promoting the strategy and <u>addresses root causes</u>) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Prenatal workgroup will generate list of breastfeeding resources	GSC Dir/ workgroup/ Public Health directors/ GSC	Annually - September	GSC staff, meeting resources, mileage, data support	Group meets and creates list of breastfeeding resources.
2. Prenatal workgroup will partner with Breastfeeding support staff at SCHD to promote use of new Breastfeeding tent resource	GSC Dir/ workgroup/ SCHD staff/ GSC	Annually – February and October	Social media access and support, promo materials, staff time	GSC/PC Facebook pages will share breastfeeding support info throughout the year

3. Prenatal workgroup explores possibility of launching breastfeeding support group, potentially with a virtual attendance option	GSC Dir/ workgroup/ SCHD staff/ GSC	Annually 2023-2025	Meeting space, staff time, parent gas cards, honorariums	Workgroup notes will reflect discussion of Breastfeeding Support group launch and maintenance
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Early Childhood Action Agenda

Outcome #2

Goal: Children are healthy, thriving, and developmentally on track from birth to third grade.

Addresses the following early childhood components:

- Physical Health
- Social-Emotional Health
- Family Supports, Basic Needs, and Economic Self-Sufficiency
- Early Education, including Foundational Literacy Skills, and Care

Demonstrated need:

Only 30% of children 0-5 are enrolled in WIC (726 of 2,477) and 2022 Kids Count data demonstrate 56% live in poverty and qualify for WIC. 26 children ages 0-2 were enrolled in Early On in the fall of 2021, which is 2.1% of that population. We know that at the same time, the number of students 0-26 enrolled in special education programs was 1,007 or 14.4% of the total enrolled students.

Goal related to the targeted problem(s):

- Identify and address barriers to optimum health and development for children and their care providers
- Improve maternal and child health outcomes through an active collaboration with WIC, the GSC and GSPC
- Demystify family access to supports related to child health, development, and nutrition

Objective related to the goal:

- Increase ease of access to supports related to family and child health, optimal development, and nutrition
- Collaborate with WIC (Women, Infants, and Children nutrition program)

Strategy 1

Strategy 1:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 1)</i>
Utilize trusted sources for distributing information about early childhood services and resources to families, professionals, and the community.	Many families use inaccurate internet sources for health, development and eligibility information. The pandemic resulted in decreased trust in the public health agency.	Community knowledge and access to available health and child development resources will increase.

Activities for Strategy 1

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Conduct community scan to determine barriers to optimal health outcomes and current knowledge of available family resources and services.	GSC PC/School Readiness Advisory Committee/ GSRP/WIC/ Thumb Community Health Partnership	2022	Survey Monkey, access, administrative time	Scan created, completed, and results analyzed by GSC and provided to Thumb Community Health Partnership to assist in identifying determinants of optimal health outcomes
2. Participate with Thumb Community Health Partnership to bring parent perspective to the decision making table regarding social determinants of health.	GSC PC/School Readiness Advisory Committee/ GSRP/WIC/ Thumb Community Health Partnership	2022	Survey Monkey, access, administrative time	Scan created, completed, and results analyzed by GSC and provided to Thumb Community Health Partnership to assist in identifying determinants of optimal health outcomes
3. Re-administer community scan (as outlined in #1)	GSC PC/SRAC/ GSRP/WIC	2024	Survey Monkey, access, administrative time	Scan created, completed, and results analyzed by GSC and passed on to Thumb Community Health Partnership

Activities (Small wins promoting the strategy and <u>addresses root causes</u>) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
4. Continue to generate and share videos on social media promoting GS Parent Coalition (GSC PC) and area services.	GSC PC/PL/ GSC Dir	Monthly	Committee time, video funding, partnerships with video locations, viewing equipment	Video script developed, filming complete, video playing in identified locations
5. Update Sanilac County Family Resource Guide (SCFRG), Continuum of Care and 211 Annually <ul style="list-style-type: none"> • Work with SCHD to distribute QR code to SCFRG 	GS Parents/GSC/GSC PC/GS Dir/ 211	Annually - December	Clerical Services, Staff time	Guide updated & GSC website hosts current information; 211 updates are completed
6. Support PC to assure Trusted Advisor Grant's – Mentor Program model is launched and data collected on effectiveness	GSC PC/ GSC staff/ Families participating in Mentor Program	Through August 2023 and into future, if available	Staff time, gas cards, meeting space, Talking is Teaching materials	Trusted Advisor grant reports indicate mentor program has been launched and data is collected to determine viability for the future
7. Continue to develop single access service	STARS workgroup/ GSC staff/ DHHS/ Parents/GSC Partners	Meet monthly	Virtual meeting support, staff time, printed materials, parent participation supports	Universal referral access to all early childhood and family supports is designed and launched and maintained
8. Continue to develop Survey to Access Resources & Services (STARS) single access to assure families gain knowledge and access to the full array of supports and services	STARS workgroup/ GSC staff/ DHHS/ Parents/GSC Partners	Meet monthly	Virtual meeting support, staff time, printed materials, parent participation supports	Universal referral access to all early childhood and family supports is designed and launched and maintained

Strategy 2

Strategy 2:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 2)</i>
Utilize the GSC PC and WIC participants to provide beneficiary voice	Providers goals do not align with family goals (Mindsets)	Parent survey will show 4% increase in service and communication satisfaction outcomes annually.

Activities for Strategy 2

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Super Hero/Parent University type event will be hosted by GSC/Parent Liaison/GSC PC and WIC every other year.	GSC/GSC PC/GSC PL/ EC community/GSC Dir/ WIC	Every other year	Event location, printing funds, graphic designer, speakers, catering, barrier supports, advertising	Training offered to parents and early childhood providers bi-annually
2. All early childhood agencies (especially WIC) will be requested to invite parents utilizing their services to Great Start meetings and provide methods of overcoming barriers to participation. (GSC will provide mileage, childcare, and honorariums when necessary.)	GSC partner agencies/Parents using system components/ GSC/WIC	Invitations extended prior to each GSC meeting	EC community active participation & funding for barrier removal	Notes/Minutes of focus group meetings will reflect participation of parents enrolled in partner agencies
3. GSC/ GSC PC and WIC will administer an every other year countywide survey to parents to determine levels of satisfaction regarding their level of participation in service delivery.	GSC/GSC PC/GSC partner agencies/ WIC	November 2024	Survey Monkey account and data collection staff	100+ parent surveys will be completed bi-annually

a. The survey results will be reviewed by GSC, shared with early childhood partners, and used to adjust the system of services	GSC/ GSC PC/ GSC partner agencies	February 2024 & 2026	Meeting attendance, barrier removal	The early childhood system will be adjusted bi-annually to reflect survey results
4. Parents will play key roles in planning all early childhood events such as Children's Champion, Community Baby Shower, Parent University, Kids Day Events annually	GSC Dir/EC Specialist/GSRP Dir/ GSC PL/ GSC PC/EC community	Annually - December	Event locations, social media, parent participation, barrier supports, satisfaction surveys	Family attendance and participation in regularly scheduled events will increase by 5% each year
5. Strengthening Families, Protective Factors trainings and ACEs with Hope trainings will be offered to parents and early childhood community partners annually	GSC Exec. Team/ GSC/ GSC PC/ EC Community/ Prevention Network	Annually	SF/PF training provided	Training offered to parents and early childhood providers each year
6. Resilience training messaging and supports will be promoted to parents and early childhood community partners	GSC PL/ GSC Dir/ early childhood partners	On-going during public crisis	Internet service/ technology equipment/ staff/ information from trainers	GGK newsletter will be disseminated to the GSC PL distribution list and GSC distribution list with resilience messaging links to the trainings offered
7. Parents will promote resilience messaging and trainings via social media, to neighbors, networks and during Parent Cafes	GSC PC/ Core PC/ GSC parents/ PAT parents	On-going during public crisis	Funds to boost Facebook posts/ Internet service/ technology equipment/ staff	Numbers of shares and re-tweets will demonstrate parent promotions

Strategy 3

Strategy 3:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 3)</i>
Increase cross sector relationships and internal agency information relay	Agency staff are stretched and not prioritizing collaboration and relationships with families nor other agencies and service providers	Early childhood service agency staff will have an increased understanding of the various services available to the families they serve and will assist the families in connecting with them

Activities for Strategy 3

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Continue to make time on the GSC agenda for agency highlights, take-aways, and whom they will share their learning with and how	GSC staff	Monthly at GSC meetings	GSC meeting time, staff time	GSC meeting attendees will leave with a deeper knowledge of system supports, increased relationships and a plan of what information to share with others
2. Participate in annual Service Expo and/or other resource sharing opportunities	Community Collaborative/ GSC/ Agency Administrators	Annually	Location, refreshments, presenter, meal, materials, invitations	At least 50% of GSC partners will participate in Service Expo and/or other resource sharing opportunities
3. Continue to partner with Sandusky Chamber of Commerce to participate in Thumb Festival Kids Day	Sandusky Chamber of Commerce/ GSC/ GSC Dir/ GSC PL	Annually	Tent, location, refreshments, presenter, banner, materials, invitations, activity supplies, staff	All early childhood service providers are represented at Thumb Festival Kids Day each year and assist in increasing public attendance

4. Create (update) a list of benefits to partnerships with the GSC early childhood community to use as a recruitment tool – Benefits include using GSC as advisory board, Family Resource Guide, and Continuum of Care	Administrators/ GSC Dir	Annually	Staff time, technical support to blend documents	List of referral benefits created
5. Participate in community events to increase awareness of the early childhood system of services (Children's Champion)	GSC PC/ GSC/ GSC Dir/ GSC PL	Annually	Refreshments and recognition take aways	Increased connections of early childhood supporters

Early Childhood Action Agenda

Outcome #3

Goal: Children are developmentally ready to succeed in school at time of school entry.

Addresses the following early childhood components:

- Parent Leadership and Family Engagement
- Early Education, including Foundational Literacy Skills, and Care

% and # of children not reading targeted outcome(s), broken down by demographics when possible (Targeted Problem(s)):

Data provided by Great Start to Quality Eastern Region Resource Center shows 38 childcare providers in Sanilac County with 71% receiving a star rating. Currently, there are only 1,108 slots for children of all ages in Sanilac County. According to Kids Count data set, in 2020, there were 5,862 children under the age of 12 residing in Sanilac County of which 2,477 were under 5. This potentially leaves parents of 4,754 children seeking childcare.

According to 2021 Kids Count Data Set, 61.4% of the 3 to 4-year-old population was not enrolled in a quality preschool. There are decades of research supporting benefits of quality preschool on education attainment.

Goal related to the targeted problem(s):

Increase access to high quality early care and education services and supports. *(Everything in blue is provided by OGS and cannot be changed.)

Objective related to the goal:

- Review and make recommendations regarding the components of the Great Start Readiness Program.
- Increase families' knowledge, understanding, and utilization of childcare subsidy, and high quality childcare options via Great Start to Quality.
- In collaboration with the region's Great Start to Quality Resource Center, link licensed and registered providers in the GSC/GSPC geographic area to Great Start to Quality for the purpose of achieving higher levels of quality.
- Increase number of 3-4 year olds experiencing quality preschool

Strategy 1

Strategy 1:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 1)</i>
The School readiness advisory committee will address the needs of school readiness across the community	Access to supports detailing developmental milestones and kindergarten readiness are not readily available to parents, childcare providers, and educators	Parents, early childhood care and education providers will be knowledgeable of appropriate developmental behaviors and when and how to seek help with potential delays and concerns.

Activities for Strategy 1

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. School readiness advisory committee meets with regularity and is comprised of the required and recommended members	GSRP teachers/ ECS/ Great Start to Quality/ ECC/ GSC/ GSC PC/ HS/ CBO admin and staff/ EC Program Directors	Annually – October and March	Gas cards, childcare, stipends, printed materials, meeting space, refreshments, staffing, agenda & minutes	Parents, providers, and community members who represent the diversity of the area and programs and services are represented with equal representation and engagement
2. Review Great Start Readiness Program data and make recommendations as outlined in Section 32d	GSRP teachers/ ECS/ Great Start to Quality/ ECC/ GSC/ GSC PC/ HS/ CBO admin and staff/ EC Program Directors	Annually – April	Technology support, meeting time, teacher incentives, mileage, paper, printing	Enhancements are made to GSRP based on input from the committee
3. Develop a plan to share preschool and school age care options to families as a part of the joint recruitment and enrollment process	GSC PC/ SRAC	Annually – April	Technology support, meeting time, teacher incentives, mileage, paper and printing	Plan for disseminating to families, school age childcare options is developed in 2023 and updated annually thereafter

Strategy 2

Strategy 2:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 2)</i>
The GSC, GSC PC, and RC will work in collaboration to engage the community to support and align plans to facilitate childcare availability in the wake of the influx of state and federal funds.	38 childcare providers in Sanilac County with 71% receiving a star rating. Currently, there are 1,108 childcare slots available in the county to serve 5,862 children.	<ol style="list-style-type: none"> 1. Increase spaces and/or organizations that can implement childcare, including school age children 2. Increased family utilization of greatstarttoquality.org to search for childcare and school aged care

Activities for Strategy 2

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Early Childhood Contact and Specialist will educate GSRP staff during professional development trainings on how to use the GS2Q website and the benefits of childcare subsidy and encourage them to inform all program applicants about the site & subsidy.	ECC/ECS/ GSRP staff & administrators	During enrollment & ongoing	Education materials, staff time, educational displays	GSRP staff will make a practice to inform parents of students about the childcare subsidy and use of the GS2Q website.
2. GSC & GS2Q will provide annual training for Home Visitors (Early On & WIC & Parents As Teachers) on childcare subsidy and GS2Q website so they can share this information with the families they serve	ECC/ECS/ Home Visitors	Ongoing	Education materials, staff time, educational displays	Annual family survey of WIC & PAT participants indicates that 75% of families served feel satisfied with connections to available resources (GS2Q & subsidy)
3. Sanilac Parent Coalition will invite GS2Q-EC to present benefits to participation at a regularly scheduled PC meeting annually	Parent Liaison/ GS2Q-ERC staff	Summer – 2023, 2024, & 2025	Time on the PC meeting agenda	The notes of PC meetings will reflect presentation from GS2Q-ERC

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
4. Support Preschool Scholarship (PSSP) <ul style="list-style-type: none"> Review qualifiers (Star rating is going away) and update application and supporting materials Host End of Year Celebration Facilitate Parent Coalition fundraising efforts 	GSC PC/ GSC PL/ GSC/ Preschool Scholarship recipients	Yearly	Advertising, staff time, meeting costs, printing, refreshments, gas cards	GSRP ad CBOs will be solicited to participate in the PSSP and parents will have access to the application vis the GSC website.

Strategy 3

Strategy 3:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 3)</i>
Great Start Collaborative & Early Childhood Contact will serve as liaisons between providers and Great Start to Quality	Currently, there are only 39 licensed and registered providers in all of Sanilac County to serve 2,692 children under the age of six.	The GSC & ECC will have an up-to-date, comprehensive distribution list of all childcare providers and educators

Activities for Strategy 3

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. ECC/ECS will forward notices of trainings offered by Great Start to Quality to area providers	ECC/ECS	Monthly	Staff	As ECC and GSC PC become aware of providers they will be added to provider monthly distribution list

2. At least one edition of Growing Great Kids Newsletter promoting GS2Q will be printed and distributed to all children, preschool through third grade, enrolled in all 7 districts and all childcare centers and tuition preschools.	GSC PL/ GS2Q-ERC	Each school year	Printing support, mileage, postage	At least one edition of Growing Great Kids promoting GS2Q will be printed and distributed to all children, preschool through third grade, enrolled in all 7 districts and all childcare centers and tuition preschools
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Strategy 4

Strategy 4:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 4)</i>
Build early childhood personnel and parents knowledge of developmentally appropriate behaviors, skills, and expectations, especially related to kindergarten preparation.	Written materials detailing developmental milestones and kindergarten readiness are not readily provided to parents, childcare providers, and educators.	The community will have access to information regarding optimal child development in preparation for school success.

Activities for Strategy 4

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Facilitate parent attendance (Sanilac GSC and Parent Coalition parents) at Parent Awareness Michigan (PAM) Conference. <ul style="list-style-type: none"> Maintain time of the GSC agenda for parents to report their learning after attendance at the PAM conference. 	GSC Dir/ GSC PL/ GSC PC/ GSC	Annually - December	Mileage, childcare, registration fees, meals	Parent's newly gained knowledge of appropriate child development is reported to GSC at meeting

2. Support child development trainings to parents and early childhood system providers in partnership with Great Start to Quality	Playgroup staff/ EC Special Education staff/ Early On Staff	Ongoing	Parent barriers elimination funds, presenters	5 parents and 5 childcare providers attend trainings annually
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Early Childhood Action Agenda

Outcome #4

Goal: Children are prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.

Addresses the following early childhood components:

- **Early Education, including Foundational Literacy Skills, and Care**

Demonstrated need:

57.2% of M-Step tested 3rd grade Sanilac County students in 2021 were partially or not proficient in English Language Arts.

Goal related to the targeted problem(s):

More students are reading to learn at the end of third grade.

Objective related to the goal:

Support businesses, professionals, families and parents in providing daily literacy opportunities to assure more children are attaining optimal reading fluency by the end of 3rd grade.

Strategy 1

Strategy 1:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 1)</i>
Provide early literacy opportunities for families to engage in daily to increase children's literacy attainment.	Some families are not preparing children for kindergarten by providing consistent exposure to books and songs in daily routines.	Local families will have increased daily literacy opportunities to engage their children and promote reading proficiency.

Activities for Strategy 1

Activities (Small wins promoting the strategy and <u>addresses root causes</u>) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Use social media, radio ads, and outreach events to increase awareness of the importance of daily literacy moments <ul style="list-style-type: none"> • Thumb Festival • CAPC Events • Prevention Program • Sanilac County Fair • Deckerville Family Days • Community Baby Shower 	GSC PL/ GSC Dir/ Technology support	Quarterly	Technology, parent support, printed materials, staffing	Links embedded on GSC website for apps that promote developmental appropriateness
2. Parent Coalition and GSC membership maintains free mini libraries <ul style="list-style-type: none"> • Develop list of sites and consider adding Snover Thrift Store/ All area laundry mats • Support existing mini libraries in locations throughout the county (Parks/McNabbs, Marlette) 	GSC PC/ GSC PL/ GSC	Ongoing	Collection and display supplies	A minimum of 1 business annually will provide library display area
3. Provide literacy trainings in partnership with the Early Childhood Specialist and Early Childhood Contact (Birth-5 Essentials) <ul style="list-style-type: none"> • Focus on Home Visitors and Trusted Advisors in the community 	GS2QRC-ER/ GSC PL/ GSC PC/ Childcare providers/ ECC/ ECS	Yearly	Building, advertising, parent barrier supports	10 parents and 4 childcare providers will attend literacy trainings per year

4. Partner with other community events and local libraries to promote literacy <ul style="list-style-type: none"> Post and provide attendees Talking is Teaching materials 	GSC PL/ GSC PC/ GSC	Ongoing	Parent barrier supports, Parent barrier elimination fund	Photos of all locations, and events with Talking is Teaching materials are posted on both the GSC & PC Facebook pages
5. Maintain active participation in the Literacy Hub Network to assure equitable distribution of literacy resources <ul style="list-style-type: none"> Inform local parents and partners when Literacy Hub provides presentations to support families in daily literacy rich engagement. Potential sites: All childcare providers, doctor's offices, Eva's Place, DHHS office, PAT homes, Early Head Start families, WIC & MIHP participants 	GSC Dir/ School Readiness Advisory Committee/ Area Childcare providers	Ongoing	Staff time, virtual meeting access, mileage	Sanilac families residing in underserved areas, and those vulnerable to abuse and neglect will be provided opportunities to access literacy resources as demonstrated by QR code survey data. Sanilac parents will be provided information and education around the benefits of reading with their children.
6. Area Reach Out and Read (ROAR) providers will be invited to report on their program outcomes to the GSC annually to demonstrate the medical communities' commitment to increased literacy attainment for area children	McKenzie and Deckerville Clinic staff	Annually at GSC meeting	GSC meeting time, staff time	McKenzie and Deckerville Clinics offering ROAR will report annually the number of books given away and the number of children being impacted.

Strategy 2

Strategy 2:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 2)</i>
Help parents and businesses take meaningful actions to improve the reading confidence, communication skills, literacy exposure opportunities, health & well-being of children aged zero to five.	Lack of Home Visiting supports especially for 3 year old population according to Home Visiting map created by focus group.	Community will have access to materials that promote the importance of everyday interactions, which lead to increased language skills and school readiness.

Activities for Strategy 2

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Maintain and increase Too Small to Fail/ Talking is Teaching in Sanilac County using methods determined by Parent Coalition	GSC PC/ GSC PL/ GSC Dir/ GSC	Ongoing	Internet, viewing device, visual aids, meeting space, graphics support, printed materials	Talking is Teaching materials will be made available in mini-libraries, doctor's offices, Parent University events, and families participating in home visiting programs.
2. Determine methods of increasing literacy exposure to underserved 3-year-old population <ul style="list-style-type: none"> Explore possibility of partnering to host playgroups designed specifically for this age group Work with area libraries and childcare providers to offer preschool readiness materials and education for providers (Birth to 3 Essentials) 	SRAC/ ECC/ ECS/ GSC staff/ Home Visiting programs/ Head Start	Meet quarterly as a workgroup of the GSC/SRAC	Talking is Teaching materials, books, staff time	Meeting minutes reflect organized efforts to increase literacy exposure to 3-year-old population

Early Childhood Action Agenda

Strengthening Families

** This section on hold due to reorganization of Parent Coalition and hiring of Parent Liaison. **

Goal: All children in Sanilac are born healthy

Addresses the following early childhood components:

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Demonstrated need:

Goal related to the targeted problem(s):

Objective related to the goal:

Strategy 1

Strategy 1:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 1)</i>
Build knowledge and capacity for employing the 5 Protective Factors through Parent Café to all Sanilac County families and caregivers.	Not all children are born healthy, thriving, and developmentally on track from birth to third grade.	Increase knowledge, capacity and awareness of the 5 Protective Factors.

Activities for Strategy 1

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Host 6 Parent Cafés using the Strengthening Families Framework and the 5 Protective Factors.	GSC PL/ GSC PC/ PAT staff/ GSC	Yearly	Gas cards, food/beverages, childcare, incentives, printed materials, café supplies	Parents demonstrate increased knowledge of the protective factors through Parent Café survey results.
2. Administer before and after surveys at each Parent Café to assure increased capacity	GSC PL/ PAT staff	Yearly	Printed materials	Parents demonstrate increased knowledge of the protective factors through Parent Café survey results.
3. Incentives for Parent Café participation and Parent Coalition expansion.	GSC PL/ PAT staff	Yearly	Gift cards	Parents are empowered to be leaders by doing outreach to other families.

Strategy 2

Strategy 2:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 2)</i>
Parent Coalition members will be able to give an explanation to other parents about the purpose of the Parent Coalition.	Not all children are born healthy, thriving, and developmentally on track from birth to third grade.	A Parent Coalition Mission Statement is created.

Activities for Strategy 2

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Pre-K Round-ups	GSC PC	Annually	Printing & giveaways	15 new families reached

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
2. Super Hero/Parent University Training	GSC PC/ EC Partners	Every other year	Childcare, giveaways, printing, food, speakers, gas cards	50 families trained
3. Thumb Festival Kids Day	GSC PC	Annually	Printing, supplies, giveaways	20 new families reached

Strategy 3

Strategy 3:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 3)</i>
Parent Coalition members will be empowered to conduct outreach to other parents within their communities.	Not all children are born healthy, thriving, and developmentally on track from birth to third grade.	Business cards will be created with the Parent Coalition Mission Statement, Facebook page information, Great Start web address and contact information for the Parent Liaison.

Activities for Strategy 3

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Pre-K Round-Ups	GSC PC	Annually	Business Cards	10 business cards handed out
2. Super Hero/Parent University training	GSC PC	Every other year	Business Cards	30 business cards handed out
3. Thumb Festival Kids Day	GSC PC	Annually	Business Cards	10 business cards handed out

Strategy 4

Strategy 4:	Root Cause Addressed: <i>(Prioritized root causes related to the objective and addressed by this strategy)</i>	Performance Measures: <i>(Outcomes of strategy 4)</i>
Grow the Parent Coalition	Not all children are born healthy, thriving, and developmentally on track from birth to third grade.	Current Parent Coalition members will receive recognition for bringing potential members to events.

Activities for Strategy 4

Activities (Small wins promoting the strategy and addresses root causes) <i>Develop common messaging regarding:</i>	Persons or Groups Responsible	Target Dates	Resources Needed	Progress Measures (outputs of activities):
1. Parent Meeting/Café	GSC PC	Weekly or Monthly	Gift card	Incentive to bring friends



Fund Development

The Sanilac County Great Start Collaborative has demonstrated a history of sharing resources to build and maintain an early childhood system. Partner agencies have provided multiple levels of meaningful support, some provide in-kind supports and others amend programs to focus on children of underserved ages and locations. Great Start partners frequently collaborate through assessing, planning, providing leadership, guidance, sharing space, seeking funding and developing new programs. We are collectively and continually in search of ways to increase efficiency by preventing duplication of services, growth of evidence-based home visiting programs and sustained funding. The collaboration extends to neighboring counties through shared services, events, professional development and parent education opportunities.

In 2019, our early childhood community initiated a focus team to support the home visiting programs designed for families with children under the age of eight available to our community. We completed a home visiting needs assessment. Through that we were able to:

- Engage key stakeholders
- Identify strengths and assets in place to support the evidence-based home visiting programs
- Compile a list of risk factors and population data
- Set goals for future supports
- Finally, seek funding to grow those programs that best meet the identified needs of our community with evidence-based home visiting programs so that more children are fully prepared to succeed when entering the kindergarten door.

The team went through the strategic planning process which included an assessment of funding needs. A plan to strengthen fund development activities was created based on the fund assessment, review of budget resources, and analysis of changes in the fluctuation in MDE Section 32p grants. All components of our plan have been written to allow the Great Start Collaborative members to respond to funding changes, emerging needs, and new opportunities.

Priorities of donations and grants will be applied as follows:

- Great Start Collaborative Preschool Scholarship Program
- Parents as Teachers Evidence-Based Home Visiting Program
- Parent driven early literacy supports
- Great Start/Parents as Teachers Playgroups

2017-2022 Funding Sources:

2017

- * \$200,000 from Children's Trust Fund for Parents as Teachers
- * \$4,150 from Community Mental Health Prevention Grant
- * 16 cases of diapers from Young Adult Steering Initiative

2018

- * \$1,000 from United Way for Preschool Scholarship Program

2020

- * \$5,000 from Sanilac County Community Foundation for Emergency Assistance Grant

2021

- * \$25,000 from Michigan Department of Education, Office of Great Start – Preschool Development Grant, Birth to Five for Mentorship Program

Michigan Department of Education, Office of Great Start provides basic sustaining funds for the Great Start Collaborative staff and programming. Grants and donations sustain ongoing efforts and are used to launch specific projects as determined appropriate by the GSC membership. Private and group donations are directed to the Preschool Scholarship Fund unless otherwise requested.

Sanilac Great Start Collaborative will continue ongoing development of financial resources that promote our vision that all children are safe, healthy and ready to succeed in school and life by reading proficiently by the end of third grade. All possible funding options that allow this to become our community's reality will be explored and sought after. Finances will be handled in alignment with Sanilac County Health Department financial protocols, efficiently and with consideration of effectiveness and used to support our most at-risk families first.

These materials were developed under a grant awarded by the Michigan Department of Education.



Appendices

2.1.1

211 Northeast Michigan

www.211nemichigan.org

Sanilac County 211 Activity Report for 2021 923 Connections (Calls, texts, emails, chats) 643 Web Searches

10% Receiving SNAP 10% Over 60 8% Receiving Disability
1% Veteran 15% COVID-19 Related

Referrals:

25.894%	Utilities
18.852%	Housing/Shelter
8.017%	Health Supportive Services
3.467%	Legal Services
3.25%	Food
2.817%	Health Screening/Diagnostic Services
2.384%	Information Services
1.95%	Material Goods
1.517%	Public Assistance Programs
1.517%	Specialized Treatment and Prevention
1.408%	Transportation
0.867%	Tax Organizations and Services
0.65%	Mental Health Assessment and Treatment
0.65%	Temporary Financial Assistance

Unmet Needs:

3.467%	Housing/Shelter
2.384%	Utilities
1.733%	Tax Organizations and Services
1.625%	Temporary Financial Assistance
1.517%	Transportation
0.975%	Individual and Family Support Services
0.758%	Material Goods
0.433%	Food
0.325%	Community Planning and Public Works
0.325%	Legal Services
0.217%	Health Supportive Services
0.108%	Consumer Assistance and Protection

DON'T STRUGGLE ALONE! DIAL 211!

211 Marketing materials [HERE](#)211 Awareness Project Commercials to [share](#)

No matter what. No matter when. 211 is there!



General Business

Thumb Community Health Partnership - Dashboard

System Metrics ^{xiii}	Base Year 6/30/21	6/30/22	Target 2023
Meeting productivity (5 highest)	4.22	4.33	4.5
Number of Members	16	20	20
Dollar Amount of New Resources	0	\$166,585	\$400,000
Cumulative Value to members	In development		
Member using Data TA Services	0	17	20
# of Projects Implemented-12 months ^{xiv}	1	6	5
Network Growth-(3 high)	1.53		2



Dashboard

The REGION	Michigan	Region												
Unemployment 2021	5.9%	6.0%												
Median Household Income 2020	\$61,400	\$56,425												
<table> <tr> <th></th><th>2018</th><th>2020</th></tr> <tr> <td>Population</td><td>214,568</td><td>213,960</td></tr> <tr> <td>Below 18</td><td>21.0%</td><td>20.1%</td></tr> <tr> <td>Over 65</td><td>19.4%</td><td>22.6%</td></tr> </table>				2018	2020	Population	214,568	213,960	Below 18	21.0%	20.1%	Over 65	19.4%	22.6%
	2018	2020												
Population	214,568	213,960												
Below 18	21.0%	20.1%												
Over 65	19.4%	22.6%												

HEALTH TRENDS and OUTCOMES									
	Base Rank/Rate		Target	Most Recent Rank/Rate		% Change			
	Michigan	Region		Data Yr.	Michigan	Region	Data Yr.	Worse	Better
Long Term Health Status									
County Health Rank ⁱ	NA	31.75	2020	30	NA	38.5	2022		
Years of Potential Life Lost Rate ⁱⁱ	7600	7625	2016-18 avg	7400	7900	7600	2018--2020 avg	21%	.3%
Behavioral Health									
Death from Suicide Rates ⁱⁱⁱ	13.4	17.05	2013-17 avg	16	14.0	17.4	2016-20	2%	15%
Ever been told they have depression % ^{iv}	21.7	18.3	2015-17 avg	22	21.0	21.0	2018-20		12%
Mental Health Provider Rate ^v	370	632.5	2018	600	330	555	2021		
Middle & High School reporting depression % ^{vi}	NA	37.43%	2018	27	NA	39-46%	2022	5%	
Obesity Related Chronic Disease									
Diabetes Mortality Rate ^{vii}	22	21	2015-17 avg	19	24	23	2018-20	14%	
BMI Rates over 85th percentile- Youth ^{viii}	NA	37.0	2018	35	NA	38.5	2021-22	4%	
Adequate Physical Activity- Youth ^{ix}	NA	60.4	2018	63	NA	63.5	2021-22	5%	
Healthy BMI Rates- Adults ^x	31.3	29.3	2015-17 avg	31	29.0	22.1	2018-20	25%	
No leisure time Physical Activity- Adults ^{xi}	25.5 ^{xii}	26.6	2015-17 avg	25	23.3	29.7	2018-20	4%	

Updated 7-23-2022

MAN THERAPY OUTCOMES								
	Base Rank/Rate		Target	Most Recent Rank/Rate				
	Michigan	Region		Data Yr.	Michigan	Region	Data Yr.	% Change
Reduction of Suicide/Self-Harm Events for Men								
Death from Suicide Rates/Males ⁱⁱⁱ	22.6	27.4	2016-2020	23	Project Started February 2021- Will be measured with 2021 Suicide data is available.			
Impact of Outreach ^{xv}								
Unique Site Users- Monthly Average	212.7	60.3	Jan-Mar 2021	70	2231	220	Jan-March 2021	265%
Sessions-Monthly Average	298.7	73.3	Jan-Mar 2021	85	2609	251	Jan-March 2021	244%
Head Inspections Completed- Monthly Average	35.3	8.0	Jan-Mar 2021	10	682.33	45	Jan-March 2021	463%
% who have used the site and find it useful	NA	75% (6/8)	March 2021	80%	Not Available until repeat BH Assessment			
Number of users who have accessed a Thumb Area Resource Card (Total for three months)	NA	1	Jan-Mar 2021	15	NA	44	Jan-March 2021	4300%
Reduced Stigma to Use of Mental Health Services ^{xvi}								
Disagree that it is embarrassing or scary to ask for help for a mental health condition	NA	23% (of 143 men)	March 2021	33%	Not Available until repeat BH Assessment			
Agree that if I was concerned about a mental health issue for myself or family, I would know how to get help.	NA	62%	March 2021	67%				
Women to Women Program								
	Pre		Post	% Change (22 women)		% Change (9 women)		
	Average			3 Month Follow up	Average			
Changes in Behaviors								
Participants self report physical activity a regular part of daily routine	1.88	2.91	52%	2.67	73%			
Participants make eating a variety of healthy foods a priority	3.96	4.95	26%	5.00	45%			
Participants use information learned about stress to manage health	1.65	4.14	151%	4.89	196%			
Changes in Ability to Manage Chronic Condition								
Participants reporting ability to communicate health needs	1.71	2.82	38%	2.44	39%			
Participants report exploring community resources	1.67	2.36	43%	2.22	11%			
Participants indicating that they have increased confidence related to managing their condition	2.38	3.14	35%	3.22	42%			
Participants create a weekly action plan to set and accomplish health goals	1.67	3.32	136%	3.00	134%			
Program Satisfaction								
Ranking program at a 3 or 4- average rating for satisfaction	3.63	This started out (for me) a "just see what it's about." It ended up with me marking my book, and setting goals and incorporating my year old granddaughter into my exercise (we March in place, stretch, and dance)! So many things I learned! Thank you!						
Ranking program at a 3 or 4- average rating for learning	3.88							
% indicating they would recommend program to others	100%							

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Youth Workforce Outreach Programs						
	Baseline			Target	Participant Post Data	
	#	%	Data Yr.		#	Data Yr.
Career Goal Setting						
In development						
Connection to Thumb Providers						
In development						
Program Satisfaction						
In development						
This is a new pilot project that will be initiated in September 2022.						
Health Insurance Navigator						
	Baseline			Target	Participant Post Data	
	#	%	Data Yr.		#	Data Yr.
Navigators Available for Providing Assistance						
Medicaid						
Marketplace						
Medicare						
Insurance Enrollment & Coverage						
% of people uninsured						
Number of Navigator Enrollments						
This is a new pilot project that will be initiated in September 2022.						

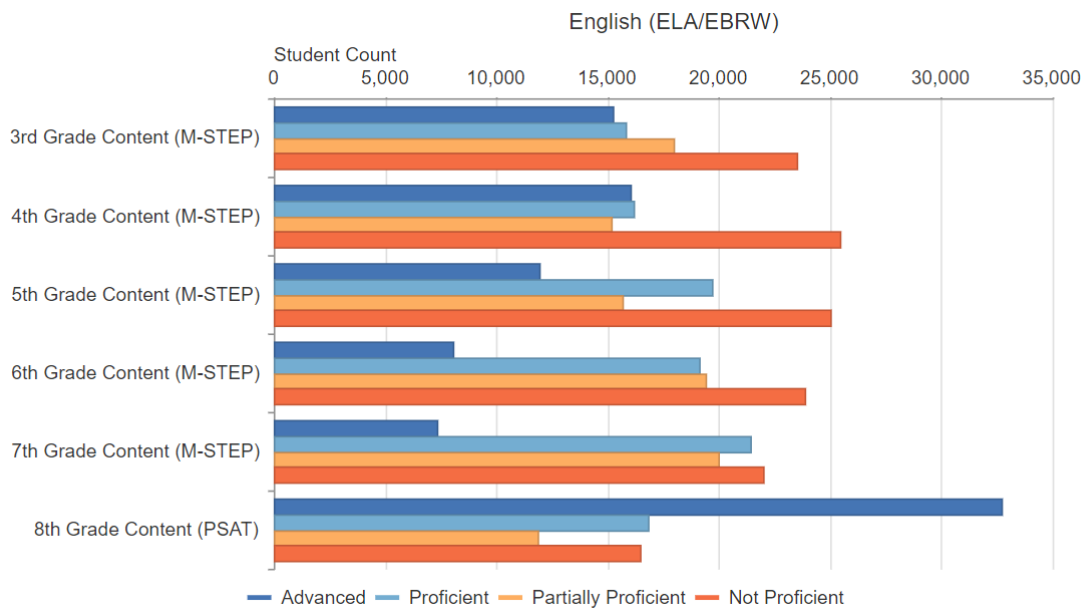
Sources/Info:

- i County Health Rank (www.countyhealthrankings.org) - Health outcome rank among 84 Michigan counties with #1 having the best outcomes.
- ii Years of Potential Life Lost (Michigan Department of Health and Human Services; www.countyhealthrankings.org) - Age Adjusted Rate/100,000- Years of life lost based on deaths among residents under age 75.
- iii Death from Suicide Rates (Michigan Department of Health and Human Services) - Suicide Mortality Trends, Age Adjusted Rate/100,00
- iv Ever been told they have depression (Michigan Behavioral Risk Factor Survey) - Percent of residents self reporting that they have ever been told they had depression.
- v Mental Health Provider Rate (www.countyhealthrankings.org) - The rate of people for each mental health provider. Higher indicates less access to providers
- vi 7th, 9th, 11th grade youth that felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities (past 12 months)-Michigan Profile for Healthy Youth (MIPHY) Not available for Michigan or Lapeer. Pandemic disrupted 2020 data collection. 2022 data only available for Huron and Tuscola. <https://mdoes.state.mi.us/schoolhealthsurveys/ExternalReports/CountyReportGeneration.aspx>
- vii Diabetes prevalence (Michigan Department of Health and Human Services) - Diabetes Mortality Trends, Age Adjusted Rate/100,000y
- viii BMI Rates- Youth (Michigan Profile for Healthy Youth) - % of 7th, 9th, 11th grade students over 85% of weight (overweight or obese).
- ix Physical Activity- youth (MIPHY) - % of students physically active for at least 60 minutes per day on five or more of the past seven days.
- x BMI Rates- Adults (Michigan Behavioral Risk Factor Survey) - Percentage of residents with a healthy weight
- xi Physical Activity- adults (Michigan Behavioral Risk Factor Survey) - Percentage of residents that report no leisure time activity
- xii Thumb Community Health Partnership Meeting Evaluations, Network Member Assessment, Partner Profile Spreadsheet
- xiv 6/30/2021 Program: Man Therapy; 6/30/2022 Programs: Man Therapy, Women to Women, Listen to Your Body Awareness Campaign, Health Insurance Navigator Program, Job Bulletin, Partner Recruitment Videos.
- xv www.mantherapy.org analytics
- xvi Regional Behavioral Health Survey Report – Surveys conducted with three target groups in March 2021. Three target groups were medical providers, behavioral health providers, and community members

Updated 7-23-2022

M-STEP Data from July 2022

Assessment Name	Assessment Subject	Grade Level Content	Percent Students Advanced or Proficient	Percent Advanced	Percent Proficient	Percent Partially Proficient	Percent Not Proficient	Percent Partially or Not Proficient	Number of Students
M-STEP	English Language Arts	3rd Grade Content	42.8%	21.0%	21.8%	24.8%	32.4%	57.2%	1,512
M-STEP	English Language Arts	4th Grade Content	44.2%	22.0%	22.2%	20.8%	34.9%	55.8%	1,488
M-STEP	English Language Arts	5th Grade Content	43.7%	16.5%	27.2%	21.7%	34.6%	56.3%	1,488
M-STEP	English Language Arts	6th Grade Content	38.6%	11.4%	27.2%	27.6%	33.9%	61.4%	1,488
M-STEP	English Language Arts	7th Grade Content	40.7%	10.4%	30.3%	28.2%	31.1%	59.3%	1,488
PSAT	Evidenced-Based Reading and Writing	8th Grade Content	63.6%	42.0%	21.6%	15.3%	21.1%	36.4%	1,488



Snapshot of Sanilac County

Data Source	Data Points
US Census Bureau	Population: 40,829
Censusreporter.org	11% or 4,491 of those are under 11 years of age
Censusreporter.org	Sanilac County encompasses 962.6 square miles
US Census Bureau	Household income for the State of Michigan is \$61,440
US Census Bureau	Household income for Sanilac County is \$56,425
US Census Bureau	14.5% of Sanilac residents live in poverty
US Census Bureau	Unemployment rates for Michigan 5.9%; for the Thumb Region it is slightly higher at 6%
Kids Count Data Center	In 2021, 929 or 45.4% of children ages birth to 4 received Women, Infants, and Children (WIC) program benefits in Sanilac
Censusreporter.org	Education attainment in Sanilac is lower than the national or state average. 10% have a Bachelor's degree in Sanilac, the state average is 21%.
Censusreporter.org	15% of residents of Michigan have Post Graduate degrees, Sanilac is significantly lower at 5%.
Censusreporter.org	95% of households speak only English and 93% are white.
Kids Count Data Center	4.3% of Sanilac students experienced homelessness in 2021 which is much higher than our neighboring counties and the state's 1.9%.
211 Sanilac Activity Report	Of the 923 contacts to 211 in 2021, the vast majority (25.89%) asked for assistance with utilities and 18.85% were seeking Housing/Shelter.
Census and MISchool Data	31.5% confirmed childhood abuse and neglect cases
Kids Count Data Center	382 or 61.5% of toddlers, ages 19-35 months, were fully immunized (2021)
Kids Count Data Center	28.6% of families are single parent households
Kids Count Data Center	79.3% of children have internet at home, ages 0-17
GSC – Home Visiting Focus Group	52% or 306 families who want Home Visiting services are enrolled (Sept. 2021)
GSC – Home Visiting Focus Group	Adults with no health insurance: Sanilac 7.5% of adults are uninsured/State rate is 6.4%
Great Start to Quality Demographic Report	37 licensed providers – 16 home based, 21 center based, licensed capacity 1,027
Great Start to Quality Demographic Report	The number of childcare providers in the county has decreased by 19% since the pandemic
Great Start to Quality Demographic Report	The number of slots in childcare programs for all Sanilac County children is 1,076 (36 providers with only 20 of those caring for infants and toddlers)
Kids Count Data Center	407 births to women who reside in Sanilac in 2021 occurred in neighboring counties with birthing facilities (Sanilac has none)
Visit Tracker	2021-2022 Parents as Teachers home visiting program delivered 567 home visits, 44 were for prenatal services and 220 group connections

Outcome #1 Children are born healthy.

Supports Available	Data
Baby Pantry (CAPC)	Used by 60 participants in August (4 new/10 pregnant)
Parents as Teachers Home Visiting	Serving 19 families in August (2 pregnant)
Maternal Infant Health Program	TBD (Katie O'Mara)
Early Head Start Home Visiting	TBD (Nicole Brabant)
McKenzie Health System	TBD (Dr. Gormley)
Community Mental Health	TBD (Jeff Thompson)
DHHS	TBD (Misty Wojnarowicz)
S.T.A.R.S.	Incoming referrals are trickling in/ 2 per week

52% or 306 families in need of Home Visiting receive services

Identified barriers to children being born healthy:

1. Substance use by mom (includes cigarettes)
 - Treatment access
 - Educating moms on the negative impacts on unborn fetuses
2. Access to prenatal health care
 - Local access to OB doctors
 - No health insurance (Sanilac 7.5% of adults uninsured/State rate is 6.4%)
3. Lack of birthing facility
4. Birthing classes?
5. Homelessness (Eva's Place for a short period, then what?)

Gaps in Services and Supports we need to address in 2022:

(From September GSC meeting)

- Education on effects of substance use prenatally – specifically marijuana
- Pregnancy tracker apps for expecting moms
- Having OB doctors a few days a week in either Sandusky, Deckerville, or Marlette hospital
- Lack of compassion
- Transportation to get to medical help
- Lack of birthing class in Sanilac County
- NICU High Risk babies and moms
- Family Shelter
- Poverty guidelines need to be raised
- Foster care services
- Counseling
- WIC services
- Education on prenatal care and birthing
- Smoking Susie at more events and classes
- Make a partnership with other doctors (out of county)
- Work on transportation for parents

Outcome #2 Children are healthy, thriving and developmentally on target from birth to third grade.

Supports Available	Data
Baby Pantry (CAPC)	Used by 60 participants in August
Parents as Teachers Home Visiting	Serving 19 families in August
Maternal Infant Health Program	TBD (Katie O'Mara)
Early Head Start Home Visiting	TBD (Nicole Brabant)
Head Start	TBD (Bev Sleda)
Great Start Readiness Program	TBD (Belinda Hill)
McKenzie Health System	TBD (Dr. Gormley)
Community Mental Health	TBD (Jeff Thompson)
DHHS	TBD (Misty Wojnarowicz)
WIC	TBD (Katie O'Mara)
211	TBD (Patty McGhee)
Thumb Community Health Partnership	TBD (Kari White)
Deckerville Hospital	TBD (Cheryl Hieber)
Professional Counseling Center	TBD (Whitney Ostrom)
MSU-E	TBD (Erica Krawczyk & Kylie Rymanowicz)

Identified barriers to children being healthy, thriving, and developmentally on target:

1. Substance use by mom (includes legal substances: cigarette and marijuana)
 - Treatment and cessation supports access
 - Educating moms on the child exposure
2. Parents access to developmental screening tools
3. Homelessness (Eva's Place for a short period, then what?)
4. Low income (especially families in the gap income area)
5. Affordable access to mental health services
6. Local and affordable speech services

Gaps in Services and Supports we need to address in 2022:

(From September GSC meeting)

- Telehealth for mental health
- Grief and regular counseling for parents
- Paid preschools & Preschool Scholarship Program
- Counseling services with family court assigning counseling
- Free tutoring needed
- Education re: healthy sleep, routines
- Marlette Hospital connection
- My Community Dental and any Dentist
- Schools or group chat through an App with tips, chats, tools...expand parent access to Facebook group
- Pe-Nut (kindergarten and 2nd grade in Tuscola ISD)
- Michigan Model for Health Pre-K

Outcome #3 Children are developmentally ready to succeed in school at time of school entry – kindergarten ready.

Supports Available	Data
Baby Pantry (CAPC)	Used by 60 participants in August
Parents as Teachers Home Visiting	Serving 19 families in August
Maternal Infant Health Program	TBD (Katie O'Mara)
Early Head Start Home Visiting	TBD (Nicole Brabant)
Head Start	TBD (Bev Sleda)
Great Start Readiness Program	TBD (Belinda Hill)
McKenzie Health System	TBD (Dr. Gormley)
Community Mental Health	TBD (Jeff Thompson)
DHHS	TBD (Misty Wojnarowicz)
WIC	TBD (Katie O'Mara)
211	TBD (Patty McGhee)
Thumb Community Health Partnership	TBD (Kari White)
Deckerville Hospital	TBD (Cheryl Hieber)
Professional Counseling Center	TBD (Whitney Ostrom)
MSU-E	TBD (Erica Krawczyk & Kylie Rymanowicz)
Great Start to Quality	37 licensed providers – 16 home based, 21 center based, licensed capacity 1,027

Identified barriers to children being healthy, thriving, and developmentally on target:

1. Substance use by mom (includes legal substances: cigarette and marijuana)
 - Treatment and cessation supports access
 - Educating moms on the child exposure
2. Parents access to developmental screening tools
3. Homelessness (Eva's Place for a short period, then what?)
4. Low income (especially families in the gap income area)
5. Affordable access to mental health services
6. Local and affordable speech services
7. Shortage of qualified childcare & preschool staff
8. Childcare and Preschool staff are not provided a living wage

Gaps in Services and Supports we need to address in 2022:

(From September GSC meeting)

- More Young 5s, especially for late birthdays
- Transportation
- CDC Milestone app at doctor's offices, baby pantry, and community baby shower
- The Well weekly meetings
- Torque meeting May 5th
- Supports: Michigan Model for Health, Pre-K module (social-emotional health, nutrition and physical activity, safety, and personal health & wellness)
- Parents being afraid to discipline their children
- Support: Nutrition education to parents
- Support group for parents
- Barriers: too much screen time = antsy kids and lack of focus, lack of routine/structure in the home

Outcome #4 Children are prepared to succeed in fourth grade and beyond, reading proficiently by the end of third grade.

Supports Available	Data
Head Start	TBD (Bev Sleda)
Great Start Readiness Program	TBD (Belinda Hill)
McKenzie Health System	TBD (Dr. Gormley)
Community Mental Health	TBD (Jeff Thompson)
DHHS	TBD (Misty Wojnarowicz)
WIC	TBD (Katie O'Mara)
211	TBD (Patty McGhee)
Thumb Community Health Partnership	TBD (Kari White)
Deckerville Hospital	TBD (Cheryl Hieber)
Professional Counseling Center	TBD (Whitney Ostrom)
MSU-E	TBD (Erica Krawczyk & Kylie Rymanowicz)
Great Start to Quality	37 licensed providers – 16 home based, 21 center based, licensed capacity 1,027
Talking is Teaching	Campaign launched in 2019/ Used in all outreach by GSC & PAT at home visits. Central to playgroups
Preschool Scholarship Program	Sufficient funding to serve up to 8 students this year

Identified barriers to children being healthy, thriving, and developmentally on target:

1. Parents access to literacy rich environments and materials
2. Homelessness (Eva's Place for a short period, then what?)
3. Low income (especially families in the gap income area)
4. Local and affordable speech services
5. Lack of Home Visiting program availability and funding

Gaps in Services and Supports we need to address in 2022:

(From September GSC meeting)

- Gaps in supports/services: speech therapy, if need support but don't qualify by state standards then what?
- Gap from 0-3 year olds to 3-5 year olds
- Conversation with Special Education director
- Have a tier qualification for services like speech?
- More reading specialists in schools
- Support: Diamond Trail story book walk (Sandusky by Maple Valley)
- Connect with libraries; volunteer to show them about books...reading groups (potential support)
- Reach Out and Read in other clinics (support)
- Need more services for speech or a group or a class for parents
- Jane White in Croswell – talking services
- Denise Henderson in Sandusky
- Provide brochure to teachers and Early On
- Tutoring program needed perhaps through library
- Barriers: COVID; Internet online, iPad reads to them; transportation to obtain services; parental illiteracy; focus up to 3rd grade, kids beyond who struggle with reading have no services; not enough reading specialists

Community Needs Assessment (CNA) Narrative Draft 2022

According to Human Development Commission's Community Needs Assessment presented to the GSC:

Housing:

Safe, decent, and affordable housing is important for maintaining family stability. Of the respondents, 61.9% own homes, while 34.8% rent. Only a small percentage of respondents were homeless (3.4%) at the time of the Community Assessment. Both homeowner and renter respondents overwhelmingly (94.0%, combined average) believed their home was safe and decent; likewise, 78.9% believed their home was affordable. Similarly, less than 10% of respondents believed their home was not safe/decent while just over 16% believed their house was not affordable.

Food Insecurities:

Top Community Barriers – Inadequate income to purchase food and lack of meal preparation skills; 36.4% of responses indicate lack of meal preparation skills and 35.0% of responses indicate not enough income to purchase food.