

Bernalillo County South Valley Early Childhood System of Systems (SOS) Developmental Alignment Plan

**Submitted to: New Mexico Children, Youth and Families Department
by
First Choice Community Healthcare
in partnership with South Valley Early Childhood Group**

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- Christopher Sanchez, Principal: Kit Carson Elementary School
- Anthony Rodriguez, Principal: Atrisco Elementary School
- Shawna Stewart, Principal & David Bunch, Assistant Principal: Armijo Elementary School
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- Ruth Juarez, Mission: Graduate
- Deborah Good, Mission: Graduate
- Analee Maestas, La Promesa Charter Academy and APS Board of Directors

Executive Summary:

Background:

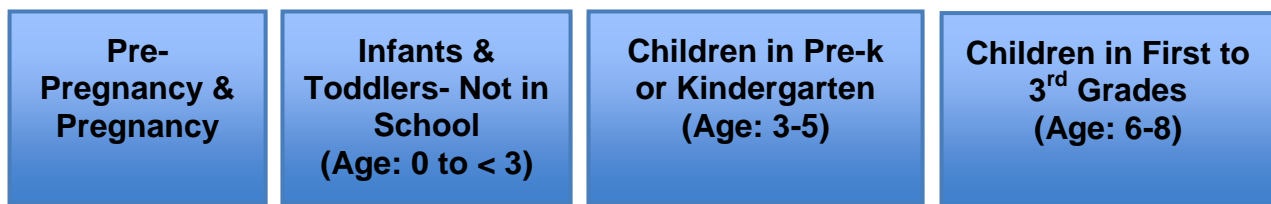
The South Valley Early Childhood System of Systems Developmental Alignment Plan was developed over a 6-week period under a contract with NM Children, Youth and Families Department and First Choice Community Healthcare (FCCH) in partnership with the South Valley Early Childhood Group (SVECG).¹

The title “Developmental Alignment Plan” reflects the developmental and evolving nature of the early childhood system of systems work that has taken place in the South Valley since 2013 and that will continue to grow and evolve over time. The plan reflected in this document is preliminary in nature and will serve as a beginning guide for planning efforts over the next two years.

The plan reflects a commitment to ensure that South Valley young children and their families have knowledge of and access to all the supports and opportunities they need to thrive. This encompasses the goals articulated by the Early Childhood Accountability Partnership (ECAP), to ensure “ready children, ready families, ready schools, and ready communities.” Families and young children are the center around which this system of systems is developed and which meets the child, their family and other caregivers where they are on a continuum from prenatal to third grade.

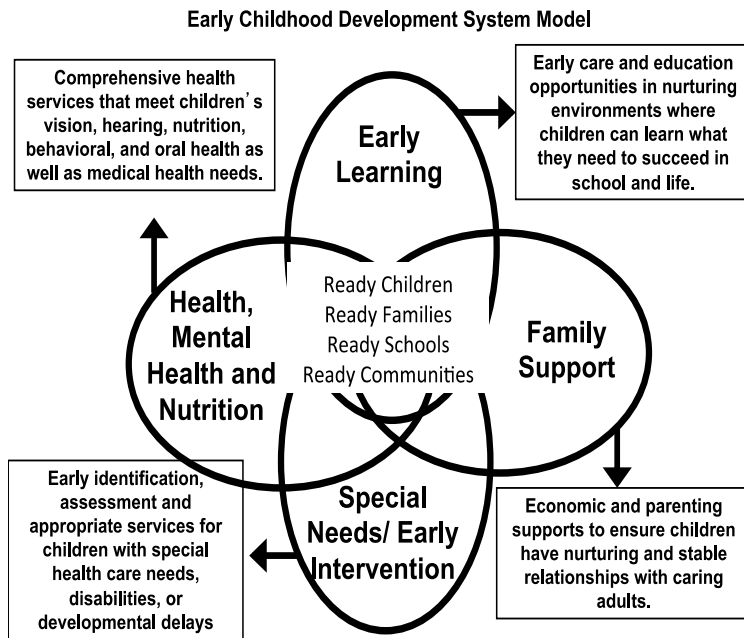
Selected Definitions, Core Values and Key Approaches:

- **Early Childhood:** In New Mexico, early childhood has been defined as including the prenatal period through age 8. For children and their families, the time prenatally to age 8 is marked by profound growth and development. The needs of pregnant families, and young families with infants are distinctly different from families with young children who are of pre-school age or who are enrolled in the first through third grades. The boxes below outline four distinct target populations within the Prenatal to 8 continuum that are recommended as the focus of effort for the SV Early Childhood System of Systems plan:



¹ Children Youth and Families Department: CONTRACT # 15-690-18367 RFP # 15-690-40-12058

- **Early Childhood System of Systems** - An early childhood system of systems is usually defined as having 4 interlocking components: health, early learning, family support and special needs/early intervention. Each of these service categories is its own system. A “system of systems” is one in which all of these system components are connected to work towards common goals, uses common measures to determine its effectiveness, adopts common strategies, and ensures effective communication.^{2, 3}



- **Guiding Principles for the Full Participation of Young Children, Birth Through Age Eight, in New Mexico’s Early Learning System⁴** - Although these Guiding Principles were developed for the early learning system of New Mexico, they seem equally relevant to the early childhood system of systems that include health, nutrition, maternal and child mental health, family support, as well as the early learning system. This plan builds upon the core principle that “Every child in New Mexico has diverse strengths rooted in his or her family’s unique culture, heritage, language, beliefs and circumstances. All programs, initiatives and collaborative efforts aimed at improving the lives of pregnant families and families with young children birth to eight should build on these strengths by promoting a sense of belonging, supporting positive social relationships, and enabling families and professionals to gain advocacy skills that positively impact the life of all children.” The South Valley Early Childhood System of Systems plan is built upon the principles outlined in the “Guiding Principles” and is also founded on the ideals of social justice and equity as well as

² <http://buildinitiative.org/OurWork/EarlyChildhoodSystemsWorkingGroup.aspx>

³ Charles Bruner: A Framework of State Leadership and Action in Building The Components of an Early Childhood System. Build Initiative (2006)

⁴ Guiding Principles for the Full Participation of Young Children, Birth through age Eight in New Mexico’s Early Learning System. NM CYFD. *Guiding Principles* were developed at the New Mexico Summit on Early Childhood Inclusion on March 30-31, 2010.

“suspending biases to build trust and establish collaborative partnerships that benefit children, families and the professionals who work with them.”

- **Two Core Approaches Reflected in the Plan:**

I. Two-Generation Approach of the SOS Plan: The long-term educational and health outcomes of children are directly linked to the socio-economic and educational status of their caregivers. Multi-generational approaches to policy, program design and implementation offer new ways of doing business that simultaneously address the needs of caregivers, young children, and the family system.⁵ Program evaluation and research data demonstrate that multi-generational approaches lead to improved health outcomes for caregivers and children in the short- and long-term.⁶

II. Approach to Language and Culture in South Valley: The goal of language renewal and proficiency proposed in this plan is to develop a system of dual language and academic and learning support for linguistically diverse learners starting in early childhood so that children demonstrate academic proficiency in both their home (first) and second language. Forty years of research has made the case that dual language learning is the most effective approach to achieving school readiness and academic success.

Dual language program characteristics include content instruction that is provided in two languages, as is a second language development component. Some programs only serve ELLs, while others serve a blended population of ELLs and English-proficient students. The primary goals of dual language programs differ significantly from bi-lingual programs, with the former having two goals: 1) Academic proficiency in students’ first and second languages (including English); 2) Grade level proficiency in all academic content areas. The goal for the latter is English proficiency with some support for academic content achievement in students’ native languages

Plan Methodology:

- **A Community-Based Participatory Planning (CBPP)** approach was used to develop the plan to ensure that everyone who has a stake in the planning initiative had the opportunity to give voice to his or her insights and views, either in person or by representation.
- **Results Based Accountability (RBA)**⁷ approach was used to develop this strategic plan. It provides a framework that starts by determining the results to be achieved, data that measures if the group’s efforts are making a difference, partners with a role to play, an analysis of current status, strategies and action steps.

⁵ Lombardi, J., Mosle, A., Patel, N., Shumacher, R. & Stedron, J. (2014), “Gateways to two generations: The potential for early childhood programs and partnerships to support children and parents together.” Ascend at the Aspen Institute. Retrieved from <http://ascend.aspeninstitute.org/pages/gateways-to-two-generations>.

⁶ The Annie E. Casey Foundation (2014). “Creating opportunity for families: a two-generation approach.” Retrieved from <http://www.aecf.org/resources/creating-opportunity-for-families/>.

⁷ Adapted from: Friedman, Mark (2005) Trying Hard is Not Good Enough: How to Produce Measurable Improvements For Customers and Communities; Trafford Publishing, Victoria, BC

South Valley Early Childhood System of System Developmental Alignment Plan

PHASES OF SVEC SOS Plan:

The SVECG Data Committee met to discuss the boundaries of the current project. The group felt it would be beneficial to think of the SVECSOS project in phases, with the first phase encompassing a smaller geographic focus area. Because of the generally low level of alignment among service providers currently happening in Bernalillo County, it was felt that it would be easier to initiate an alignment project in a smaller area to start.

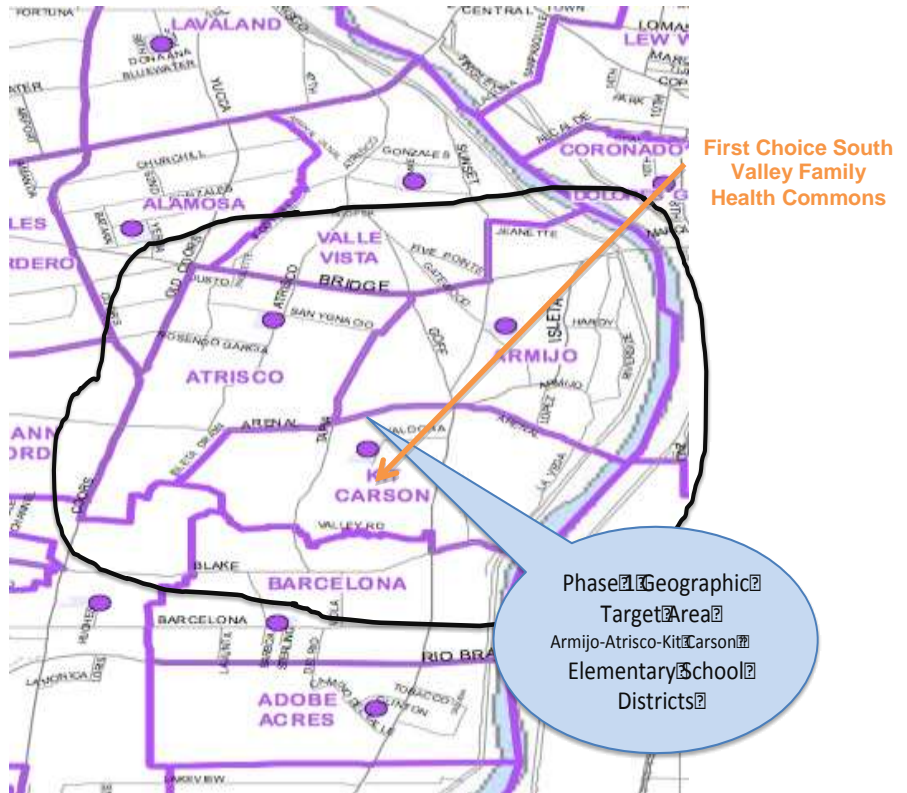
Phase One Geographic Boundaries:

Timeframe for Project:
2015 – 2017

The proposed area for Phase One of the SVECSOS project encompasses the following school districts:

- **Armijo**
- **Atrisco**
- **Kit Carson**

The target area incorporates the following census tracts:
-4300
-4401
-4501
-4502



During Phase One, when feasible, plan implementation can be extended to include all of the areas within Small Area 14-Arenal Tapia. This would add one more census tract (4200) as well as Barcelona Elementary School.

A Snapshot of Early Childhood System of System Capacity Indicators:

Based on preliminary assets mapping and capacity assessment contained in Appendix 2, the following strengths and gaps are highlighted:

1. **Health, Mental Health and Nutrition Assets and Gaps in South Valley Small Area 14 -** The target area and Small Area 14-Arenal Tapia has strong health services assets. With FCCH,

NM DOH and WIC all located within the boundaries of the target area, all families can have access to primary and limited specialty care. The First Choice South Valley Medical currently serves 11,243 individual medical patients, 15% of whom are children under age 9; 91% of whom are Hispanic; 20% of whom are uninsured; and 38% of whom are Spanish monolingual. Overall, 430 pregnant women received prenatal care from First Choice in 2014. First Choice South Valley Dental currently serves 6,556 dental patients, including 508 children under the age of 9. First Choice South Valley WIC currently serves 1,635 clients, 909 of whom are children and 369 of whom are women, of which 149 are pregnant. There are only two WIC food vendors in the area. The South Valley Public Health Office located within the South Valley Health Commons provided in 2013: CMS (Children's Medical Services) 1824 units of service; Immunizations to 862 children and 744 adults; 1,706 Family Planning visits; 1075 STD clinic visits. 51 visits for tuberculosis; and 19 Harm Reduction visits.

**First Choice Services Provided to Children 0-5
for South Valley Zip Code 87105: 2014**

Age Group	Total Served	Service Area Population	PCT Population Served
Age <1	208	848	24.5%
Age 1	210	921	22.8%
Age 2	196	932	21.0%
Age 3	161	923	17.4%
Age 4	225	869	25.9%
Age 5	204	911	22.4%
Age 0-5	1,204	5,404	22.3%

*Sources: FCCH UDS Database 2014. US Census 2010

While FCCH serves about 20-25 % of children residing in 87105, it is not known what percentage of children are being served in the target area. FCCH health providers indicated that they had more capacity to serve additional pregnant women and young children.

Mental Health Services: There are three behavioral health providers in target area with waiting lists. They are: FCCH, YDI and Centro Savila. School personnel and physicians at FCCH indicate that they need to send families out of the South Valley to be seen for family therapy and counseling. There are neither maternal depression services nor infant mental health services within the target area.

2. Early Learning Assets and Gaps in South Valley Small Area 14:

Child Care: There are 12 licensed childcare facilities and 56 registered home care providers in the target area for a total of 1,199 childcare slots available for children under age of 6. Of these 14% are 4 Star and above. Sixty- seven (67%) percent of children can be served with this capacity. There are many unregistered family care homes in the area, but currently there are no estimates as to how many. Family members care for a high percentage of area children.

Child Care Capacity for Children Under 6

-- Tapia-Arenal Small Area - 2014

Description	Licensed Providers	Registered Providers	Small Area Total	PCT of Population Under 6
Sites	12	56	68	
Total Spaces	863	336	1,199	67.6%
Subsidized Spaces	388	50	438	24.7%
Four or Five Star Spaces	248	NA	248	14.0%

*Source: NMCDC Early Childhood Services data set

Pre-K: There are five New Mexico Pre-K sites in the target area and six in Arenal-Tapia. YDI Pedro Baca has two sites: one on the South Valley Health Commons Campus and the other at Westside Community Center. These two sites combined serve approximately ninety-four (94) 3- and 4-year-old children per year. There are two Even Start Programs in the target area at Atrisco and Kit Carson Elementary Schools with 50 total slots. The Even Start Program serves 3-4 year-olds. All of the Pre-K programs are half day, posing transportation and after school care challenges for working families. Only YDI Head Start is full day (up to 3 PM).

If all of the programs serving four year olds are totaled (Pre-K public and private, Head Start⁸ and Even Start), it is estimated that 97% of 4 year olds could have some access to pre-school learning opportunities in the target area.

Pre-K Capacity for 4 Year Olds

Target area & NMDOH Small Area Arenal Tapia-2015

Description	Target	Tapia-Arenal Small Area
PED Funded Pre-K		
Armijo	40	40
Kit Carson	38	38
Barcelona		40
CYFD Funded Pre-K		
Building Bridges	40	40
Magic Moments	20	20
PB&J	20	20
Total Pre-K Slots	158	198

⁸ This estimate is based on taking ½ enrollment of Head Start and Even Start to estimate the number of 4 year olds enrolled in both those programs

Population 4 year olds	236	284
PCT Population Served	68%	70%

*Source NMCDC Early Childhood Services data set

3. **Family Support Assets and Gaps in South Valley Small Area 14:**

Home Visitation: Five home visitation programs in the South Valley are serving 374 families. Currently 18% of families living in the South Valley are being served. It is not known how many families are being served in the target area or Arenal-Tapia small area. Given that home visitation programs are the best way to reach families prenatal to age 3, the home visitation capacity in this high need area is very low.

Services and Supports for Families with Challenges: **All Faiths** serves approximately 514 clients in the South Valley. It wasn't possible to identify which of the four major services that All Faith's provides are being received by South Valley families. **EleValle Pathways** has served approximately 19% of families in the South Valley. Both of these programs are targeted to high need families and need to be expanded as well.

4. **Early Intervention, Special Needs in South Valley Small Area 14:**

Early Intervention Services: The only early intervention provider located in the target area is PB&J. Family Infant Toddler Program in the target area is serving 67 children and in Arenal-Tapia: 75 children.

FIT Program Capacity for Children 0-3		
NM DOH: Small Area Arenal –Tapia		
2011		
Description	Target Area	Tapia-Arenal Small Area
FIT Participants	67	75
Population 0-3	967	1,166
PCT Population Served	6.9%	6.4%

* Source NMCDC Early Childhood Services data set

**% of Special Education Students
Enrolled in Target Area Schools-- -
2015**

	Target Area
Armijo	13%
Atrisco	14.8%
Kit Carson	13.3%

**Source: School Principal Interviews,
2015**

There is more than twice the percentage of children enrolled in special education programs at the schools than are enrolled in FIT. It is not clear how to interpret this difference, but there may be a gap in children who are being identified with developmental delays age 0-3.

Summary of Assets: Assets within target area include: ample and expandable health, public health, and nutrition services. There is also a growing number of Pre-K slots with 70% of children being served with Pre-K as compared to 31% within Bernalillo County.

Summary of Gaps: Gaps are pronounced in the following areas: Lack of sufficient behavioral health services, especially targeted to maternal and early childhood mental health; insufficient home visitation capacity; lack of high quality early care and education programs both home-based and center-based; lack of early intervention services within SV.

Community Listening: Family and Community Voice Input

Community listening to obtain input into the development of this plan was highly compressed. It took place between April 11 and May 6, 2015. Strategies for gaining community input into the plan were multiple. Partnership For Community Action held seven focus groups with families and childcare providers from April 15- April 22, 2015. A particular focus included reaching out to grandparents caring for their grandchildren. The Plan Development Team partnered with South Valley Early Childhood Group (SVECG) Planning Team to create opportunities for the SVECG members to contribute to the plan. A specific plan development session was held on April 14, 2015, after which notes were sent out to the SVECG members for input. Key individual members unable to attend April 14, 2015 planning session were interviewed so that they had a chance to add their ideas and insights to the plan. Three additional SVECG meetings were held to add to the plan-the SVECG Data Action Group met twice to contribute to the plan as well as a Ready Schools ad hoc group to develop the goals as well as strategies.

Tracy Herrera, retired principal from Navajo Elementary school, was engaged to reach out the to the three principals of schools within the Phase One Target Area: Armijo, Atrisco and Kit Carson. Because of Tracy's former relationship with the area principals, she was able to conduct her interviews between April 15 and April 20. She obtained the principals permission to solicit input

from school Pre-K, K, First and Second Grade teachers at their respective schools. A survey monkey questionnaire was forwarded via the principals to their staff at Atrisco, Armijo, Kit Carson and La Promesa Charter School. Edward Tabet-Cubero also interviewed two charter school principals and staff at Health Leadership High School and La Promesa Charter School. He held a focus group with the students at Health Leadership High School. Appendix 3 contains the dates and community listening sessions held.

Additionally, 17 formal interviews were conducted with key stakeholders. Other stakeholders were reached via phone and electronic communications to provide input to the plan. Results of community listening have been woven throughout the plan.

Four Core Outcomes of Planning Process

The four core outcomes of the South Valley Early Childhood Developmental Alignment plan are:

Outcome 1- School Readiness: There is no current school readiness assessment data available. The Race to the Top initiative is developing a Kindergarten Observation Tool that will be piloted in certain school districts in the upcoming school year 2015-2016. (Data Development Measure)

Outcome 2-Third Grade Literacy: % of children proficient or advanced in 3rd Grade reading (NM Standards Based Assessment)

Third Grade % Reading Proficient or Above-All Students		
	2012-2013	2013-2014
Armijo	33%	22%
Atrisco	63%	33%
Kit Carson	33%	31%
APS-All Schools	52%	48%
New Mexico	51%	49%

*Source: SV Early Childhood Data Profile 2015

Outcome 3-Regular School Attendance: (Pre-K, K, First and Second Grade attendance rates)

Habitual Truancy Rates ⁹		
	2010-2011	2011-2012
Armijo	14%	9%
Atrisco	20%	26%
Kit Carson	14%	15%
APS-All Schools	8%	8%

*Source: SV Early Childhood Data Profile 2015

⁹ Habitual Truancy is defined as “accumulating the equivalent of 10 or more unexcused absences within a school year”

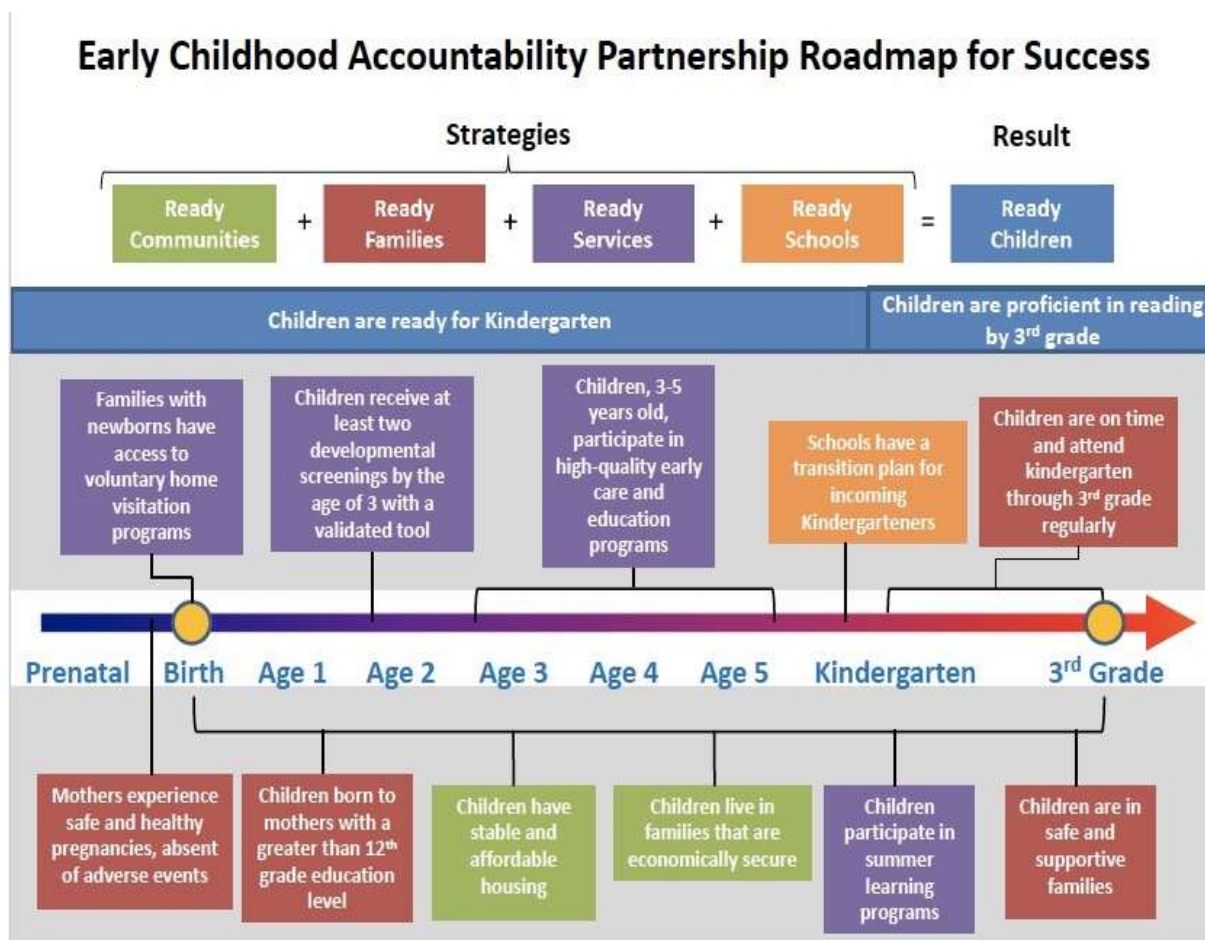
Outcome 4- Child Abuse and Neglect Rate / 1000 Children by Age-2007-2011:

Indicator	Phase 1 Target Area	Arenal-Tapia Small Area	Bernalillo County	New Mexico
Children <1	26.05	24.34	16.56	25.52
Children 1-4	10.3	9.73	7.95	12.29
Children 5-14	8.85	8.06	6.65	9.65
Children 15-17	4.06	4.11	2.90	5.16
Children 0-17	9.27	8.57	6.81	10.25

*Source: New Mexico Community Data Collaborative

Roadmap for Success:

The Early Childhood Accountability Partnership Roadmap for Success uses the school readiness framework to define strategies towards the goal that all children will be ready for and succeed in school. The South Valley Developmental Alignment Plan is based on this framework and adapted to the unique conditions, strengths and circumstances of the area's collective impact work.

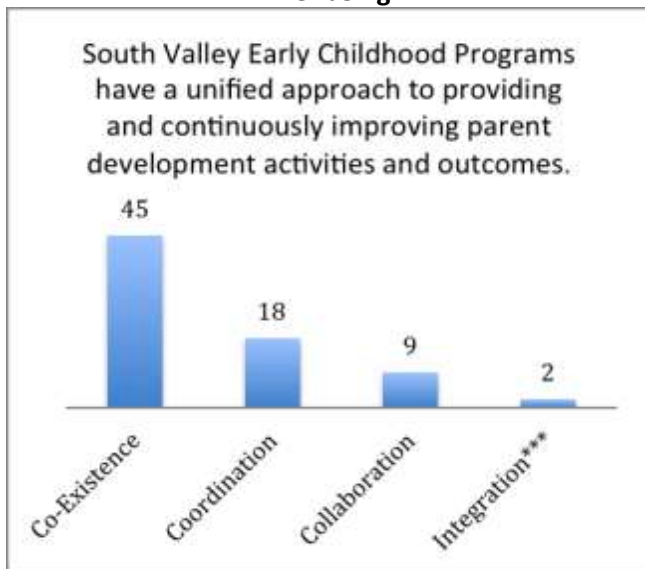


The following plan connects the Results, Indicators, Strategies and action plans to the four domains of readiness: “Ready Families, Ready Services, Ready Schools and Ready Communities. “The plan sections are color coded to link back to the Roadmap

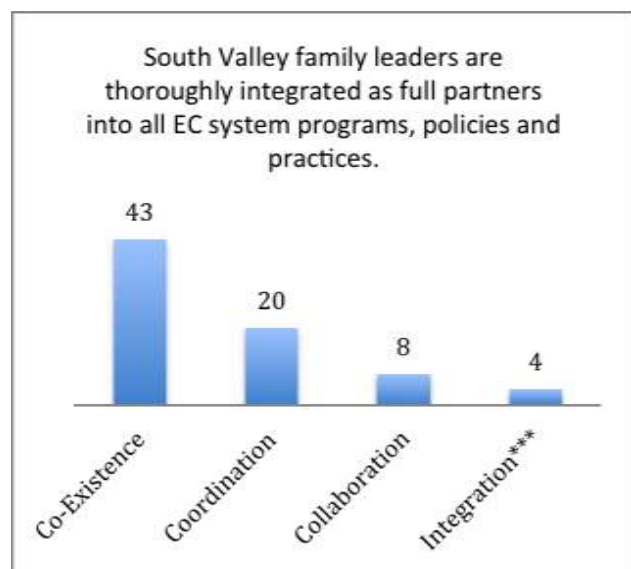
1. Ready Families: All SV families have the support, knowledge and skills they need to raise healthy, safe, resilient children who reach their full potential.

Ready Family Performance Measures:

Parenting Development in Support of Child Wellbeing



Family Leadership and Advocacy



*** Target for this measure set at Integration level

Data Development Needed:

- % of families who express confidence that they know how to help their young children grow and develop
- % of parents who report daily practices that promote early language development and literacy with their young children
- % of families who feel confident that they can advocate for the needs of their children with EC service providers

Partners with a Role to Play:

South Valley Early Childhood Group: Family Engagement and Professional Development Action Group, Partnership for Community Action, Korimi Parent Coop, First Choice Community Health, Peanut, Butter and Jelly, WIC, YDI Pedro Baca Head Start, UNM Family Development, All Faiths, La Plazita, Health Leadership High School, School Family Liaisons,

ECAP Family Literacy Strategy Group, APS Parent University, WIC, ACCESS, NM DOH/Public Health, CYFD,

Current Status:

Strengths:

- Early Learning Guidelines and Parent Engagement Materials
- Increased parenting education and family leadership opportunities in South Valley: La Cosecha cooking classes, Nurtured Heart, Mind in The Making, ACCESS, Early Childhood Collaborative Leadership Institute, Abriendo Puertas, Partnership for Community Action

Barriers:

- Periodic classes due to episodic funding
- Child development learning opportunities not targeted to those who need it most: young mothers and families; grandparents and extended family members
- Need for more focus on multi- generation approaches to language development
- Lack of public awareness of important role of parents as first teachers
- Lack of knowledge about where to access parenting and child development classes

Strategy 1.1: Strengthen parenting skills and knowledge of early childhood development within entire family and SV community

1.1: Action Steps:

- 1.1 (A) Parenting Education Alignment Plan
- 1.1 (B) Expand Child Abuse Prevention Parenting Education
- 1.1 (C) Promote Early Literacy to 16 to 25 Year Olds

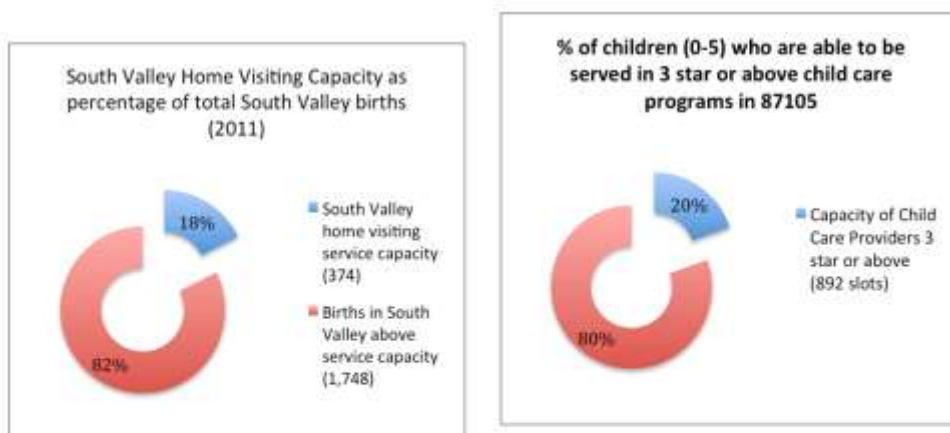
Strategy 1.2: Mobilize parents to be family leaders to advocate effectively for the needs of their children and to actively participate in the design of EC services and supports meant to benefit them.

1.2: Action Steps:

- 1.2. (A) Joint Family Leadership Development Plan

2. Ready Services: All SV families are aware of and have access to a sufficient number of comprehensive high quality, early childhood care and education services in accessible locations organized so that families can easily use them.

Ready Services Performance Measure:

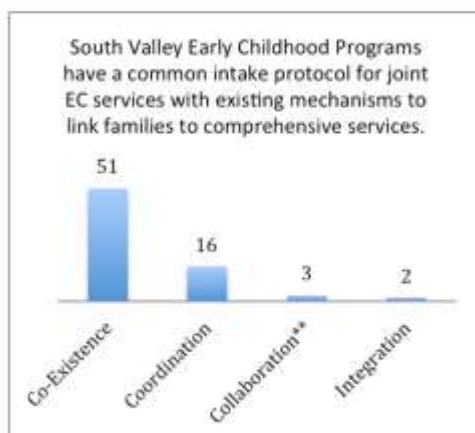


Note: There were 2,122 total South Valley births in 2011.

Source: <http://ibis.health.statet.nm.us>

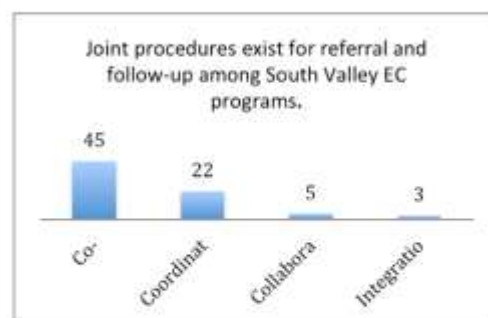
South Valley, Bernalillo County Data Profile 2015

Intake and Enrollment in EC programs



**Target set at Collaboration Level

Referral/Follow-Up



Data Development Needed:

- % of new mothers screened for maternal depression with validated screening tool in health clinics and related EC settings
- % of children screened with Ages and Stages SE in various EC settings

Partners With A Role to Play:

First Choice Community Healthcare; SV Early Childhood Group-Community Family Hub Action Group; Bernalillo County Home Visitation Work Group; EleValle; PB&J; Pathways Navigators; Early Childhood Accountability Partnership Family Supports Strategy Group; ABC Community Schools; Agri-Cultura Network; Albuquerque Interfaith; Abriendo Puertas; Partnership for Community Action; Bernalillo County Early Childhood Accountability Partnership, CYFD South Valley Investment Zone; NM Kids are Counting on Us; NM/South Valley Early Childhood Alliance; Rio Grande Community Development Corporation; South Valley Community Partnership; family liaisons and other staff from APS schools in target area; area libraries; Community Centers; Neighborhood Associations; churches in target area; business leaders; Bernalillo County leaders and staff.

Current Status:**Strengths:**

- The South Valley Early Childhood Group –Community Family Hub Action Group working to plan for hub development
- The South Valley Family Health Commons (SVFHC) & Expansion is already evolving hub activities
- Strong and aligned professional development activities under way through South Valley Early Childhood Alliance, South Valley CNM, Partnership for Community Action, South Valley Early Childhood Group,
- All Faiths and PB&J provide high quality services to families with high needs

Barriers:

- Lack of systematic outreach to pregnant families and families with infants and toddlers
- Under-Utilization of Services at FCCH including health services, public health services and WIC
- Difficulties for Spanish speaking families including grandparents to access Services
- Family-based child care providers don't see themselves as early childhood educators
- Need for increased formal and informal professional development and child development education in Spanish tailored to un-registered family-based childcare providers
- Differing goals & approaches related to language development and proficiency for English Language Learners (ELL)
- Difficulties identifying at-risk families

- Lack of systematic screening for risk
- Lack of access to maternal and early childhood mental health & trauma-informed services

Strategy 2.1: Create a network of neighborhood early childhood hubs in SV that provide people, services and resources for families and their young children with safe and trustworthy early care and education that effectively meets their needs

2.1 Action Steps:

2.1 (A) Expand Use of Share NM in Target Area:

2.1. (B) Coordinate call-in and hot-line programs serving the South Valley

2.1. (C) Outreach to Pregnant Families and Families with Newborns

2.1 (D) Extend Pathways Navigator Program into Target Area

2.1 (E) Improve Referrals to Home Visitation Programs in South Valley

2.1 (F) Organize SVECG Participation in Community Events in Target Area to Promote Community Knowledge of ECE Services:

2.1 (G) Develop Plans for Family Support & ECE Hub at First Choice:

2.1 (H) Convene Pathways Navigators, care coordinators, CHR's, home visitors to provide input into Hub development

Strategy 2.2: Align professional development activities and implement new opportunities for early care and education providers to improve quality of care to young children and their families.

2.2 Action Steps:

2.2 (A) Plan to Support Family Care Givers to Promote Child Development

2.2 (B): Dual Language Learning Community

2.2 (C): Support Development of Professional Development Hubs

Strategy 2.3: Provide response and support for families undergoing stress and in crisis

2.3 Action Steps:

2.3 (A) Educate FCCH Staff and Health Commons Stakeholders on early Childhood Issues

2.3 (B) Strengthen Capacity to Provide Trauma-Informed Care at FCCH

2.3 (C): Organize Behavioral Health Learning Community in Target Area to Strengthen Maternal and Early Childhood Mental Health Services

3. Ready Schools: SV schools have strong partnerships with families, the community and early childhood services to ensure smooth transitions of young children from early care and education programs into Pre-K and kindergarten.

Ready Schools Performance Measures:

Data Development Needed:

- Number of early learning provider-school staff joint transition activities developed in 3 target schools
- A measure of effective implementation of APS Family Engagement Policy in 3 target schools
- A measure of school staff knowledge of early childhood services (use of Share NM or 211)
- # of community events at the school promoting early childhood development targeted to families with young children BEFORE they enter school.

Partners With A Role to Play

SVECG, SVECA, APS Early Childhood, APS Parent University, Early Care and Education Providers in Target Area, Private and public Pre-K Programs, YDI Pedro Baca Head Start, City of Albuquerque Early Head Start, Elementary school staff and Principals from Armijo, Atrisco, Kit Carson and Barcelona, Teaching Solutions, Korimi, Partnership for Community Action, Westside Community Center.

Current Status:

Strengths:

- Partnerships happening with some schools in target area
- Barcelona and Kit Carson have Family Centers and parent liaisons
- ABC Community Schools models for reaching out to families with young children not yet in school
- **New Mexico SPARK** and ***Joining Hands: A New Mexico Framework for Transition*** and ***New Mexico Early Learning Guidelines*** provide strong framework for developing transition strategies

Barriers:

- School staff unfamiliar with early childhood and family resources in their neighborhood and community
- Lack of formal transition procedures and practices

Strategy 3.1: *Increase awareness and connection of school staff to early childhood services for young children and their families*

3.1 Action Steps:

3.1 (A): SHARE NM orientation for school staff in target area

3.1 (B): Provide Information to school staff about available ECE Resources

Strategy 3.2: *Schools partner with early childhood providers to reach out to and engage young children and their families 0-5 in early childhood development activities before they enter school.*

3.2 Action Steps:

3.2 (A) Partner with schools to develop school strategies for engaging children and their families not yet in school

Strategy 3.3: *Early childhood providers and schools partner to develop transition activities for young children and their families.*

3.3 Action Steps:

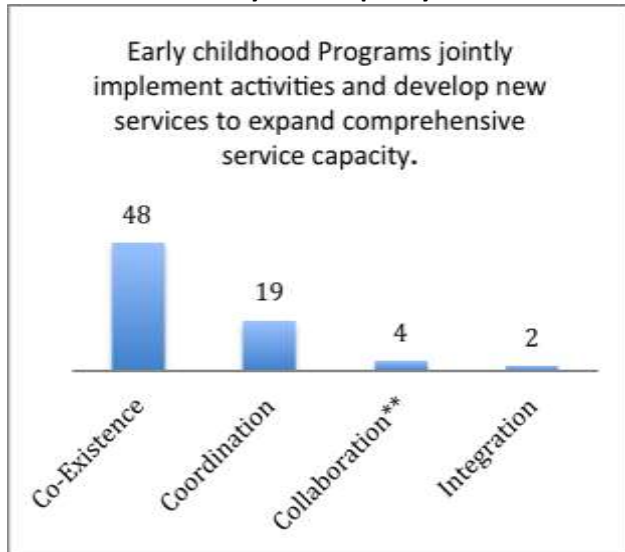
3.3 (A) Expand School Partnership Activities to Barcelona Elementary:

3.3 (B) Share Information with ECE providers and School Staff on Transition Best Practices

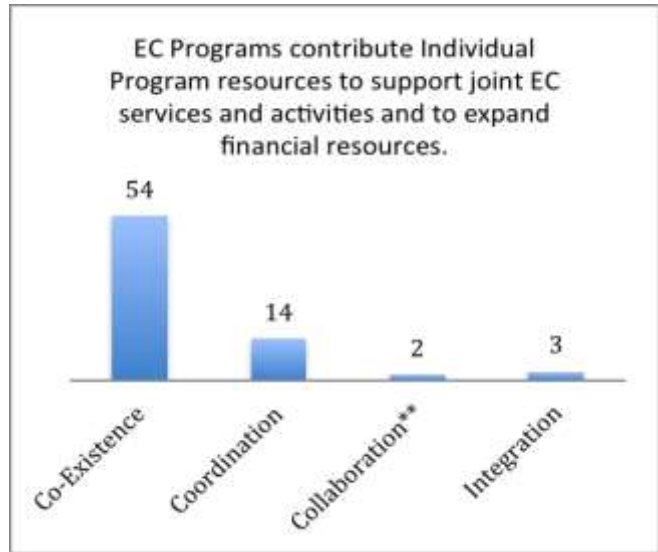
4. Ready Community: The SV community brings together key community sectors to leverage community strengths, resources and align efforts for collective impact to improve the quality of life for families with young children.

Ready Community Performance Measures:

EC System Capacity

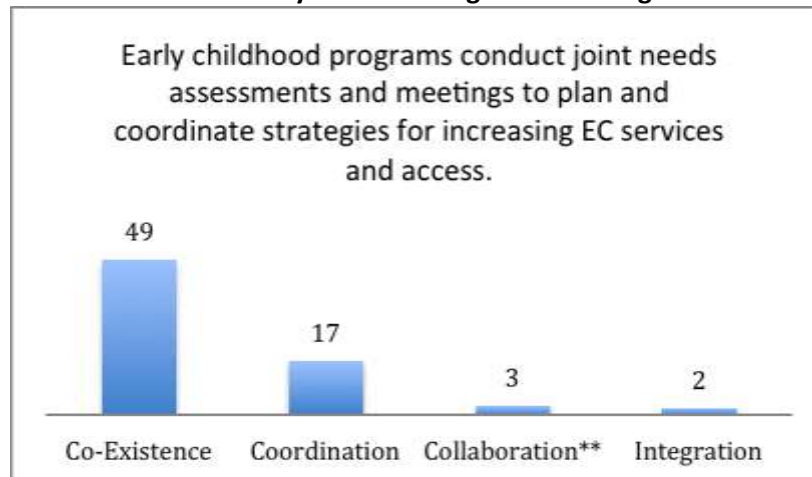


Allocation of Financial Resources



** Target set at Collaboration level

Service System Planning & Monitoring



Data Development Needed:

- Strength of networks and connections among early childhood service providers
- The % of community actions taken by SVECG that are highly aligned and highly effective

Partners With A Role to Play:

First Choice Community Healthcare, NM VOICES, HELP, PB&J, YDI, SVECG , CYFD, DOH, Centro Savila, La Plazita, EleValle, UNM HSC, RGCDC, Partnership for Community Action, Bernalillo County, APS, ECAP, Kellogg

Current Status:

Strengths:

- South Valley Early Childhood Group (SVECG) is gaining members and organizing action groups to move forward on their goals
- Many resources to build upon to create public awareness of importance of early childhood: Race to the Top Communication Campaign, ECAP Communication Strategy Group, Strong Starts Community Conversation

Barriers:

- Currently, the SVECG is an all volunteer-effort
- Need for structure and more capacity

Strategy 4.1: Create a strong early childhood governance structure in the SV to achieve integration across the early childhood system of systems.

4.1 Action Steps:

4.1 (A) Develop a Governance Structure for SV Early Childhood Group

4.1 (B): Develop a Resource Plan and Formal Relationship With Fiscal Sponsor

4.1 (C) Develop an internal communication plan

Strategy 4.2: Increase public awareness of the importance of early childhood development in order to actively engage SV community members in supporting policies and programs that help children and families thrive

4.2 Action Steps:

4.2 (A): Develop an public awareness, outreach and external communication plan

4.2 (B): Host community Conversations about Early Childhood: