## Priority Area: Family Involvement and Home Visitation

Goal: Systematically embed family engagement and parent leadership in the early care and education system.

Strategies	Activities/Actions	Deliverables/Accomplishments	Status
<ul> <li>Educate professionals on the importance of parents as partners.</li> <li>"Professionals" are identified as being among the following groups: <ul> <li>Early childhood field and kindergarten–first-grade teachers;</li> <li>School leadership/board of education;</li> <li>Health care professionals (mental and physical), pediatricians, nurses, mental health;</li> <li>Community leaders</li> <li>Community Based Organizations.</li> </ul> </li> </ul>	<ul> <li>Research and gather information:</li> <li>Conduct review of the current research on benefits of "Parents as Assets/Partners."</li> <li>Conduct scan of existing "parents as partners" training models and resources in Connecticut and nationally.</li> </ul>	<ul> <li>Training:</li> <li>Trainings provided for combinations of professionals: e.g., to early childhood/health care professionals and school leadership.</li> <li>Trainings provided to each category of professionals.</li> <li>Change the institutionalized culture to positive view of parents as partners and assets.</li> </ul>	Year 1 Review research and existing training models
	Garner input from identified "professional" groups on the challenges they face in partnering with parents.	Fact sheets developed for professionals.	Year 1 Q2: Convene individual groups and combination of groups to garner input and assess needs.
	Convene representatives from all groups to discuss common goals for parents as partners	Adoption of common messaging, using the resources we have ("walk the talk").	Year 1 Q3: Garner input from professional groups, convene individual groups and combination of groups.

	In partnership with the SAC Workforce Workgroup, develop and design training for each group/and for combination of groups.		Year 2 Q1, Q2, Q3,Q4: Based on research and findings, develop and deliver training and gather feedback. Year 3 Q2: Assessment of impact of training based on analysis of feedback
Provide a comprehensive system of parenting education.	Appoint a Steering Committee. Develop a matrix to identify approaches and models of education and training, including the following categories: who delivers the training, the manner of delivery, and the funding sources.	Matrix of models, programs and services. Identification of the gaps.	Year 1 Q1: Appoint Steering Committee. Q3: Develop matrix of models.
	Develop a communication campaign on the value of parenting education.	Increased awareness, access and parent participation in education.	Year 2 Q1: Communication campaign
	Social media – develop a universal message that will be widely spread.	Increased awareness, access and parent participation in education.	Year 2 Q1: Social media campaign. Q2: Develop common listing of training.
Promote parent leadership	<ul> <li>Research and gather information:</li> <li>Scan proven parent leadership initiatives in Connecticut.</li> <li>Identify and convene groups delivering parent leadership training such as PLTI, PEP, Aspira, Fatherhood Initiative, Lee Y Seras, Family Support Council, etc.</li> </ul>	Create a coherent integrated system of parent leadership. Parents in Connecticut have the civic skills to improve outcomes for children. Parents see themselves as valuable assets.	Year 1 Q1:Review research and existing training models.
		Fact sheets developed for effective parent leadership.	Year 1 Q2: (Garner input from parent groups , convene individual groups and combination of groups ).

			(Implement training).
			Year 3 Q1: Assessment of impact of training based on analysis of feedback.
	Leverage funding dollars for existing parent leadership training to bring to scale.	Develop a standard for parent engagement and leadership in early care and education.	Year 2 Q2: Make recommendations on funding and standards for parent leadership in early care and education.
	Establish system of early contact with expectant and new parents with ongoing follow-up outreach efforts to connect with parents when they are available and interested.	Deliver a continuum of parent leadership training that is flexible based on parent availability and interest.	Year 3 Implement recommendations
Create a system/continuum of home visitation services.	<ul> <li>Work in coordination and partnership with the Home Visitation Group at DPH working on federal opportunities and plan</li> <li>Appoint a Steering Committee for this work.</li> <li>Utilize DPH needs assessment to develop a matrix of existing services, including the categories of age range, targeted groups, geographic distribution, demographics, models, goals, training required, and funding sources.</li> </ul>	Matrix that exhibits a continuum of Home Visitation programs and services for children ages prenatal to 5. Identified gaps in service.	Year 1 Q1: Appoint Steering Committee. Q2; Begin to develop matrix of services. Q3: Complete matrix of services. Q4: Complete identification of gaps in services.
	Literature review of best practices and research.	Best practices document.	Year 2 Q1: Complete report of best practices and research.
	Define competencies and credentials for home visitors.	Skilled workforce. Quality standards.	Year 2 Q1: Define competencies Q2: Define quality standards

	Define quality standards for all home visitation programs/services. Ongoing training for home visitors.	Improved outcomes for children and families.	Year 3 Q1: Develop training program Q2: Deliver training
	Develop a forum for legislature and exec branch on home visitation	Greater awareness among policy leaders, working across silo	<b>Year 1</b> Forum on Home visitation with executive branch and legislature
Promote father engagement with children	Link fatherhood initiative with home visitation Expand use of fatherhood audit	More engaged fathers Increased use of Fatherhood Audit to highlight how the system unintentionally leaves fathers out.	