

LEGISLATIVE REPORT

Fiscal Year 2022

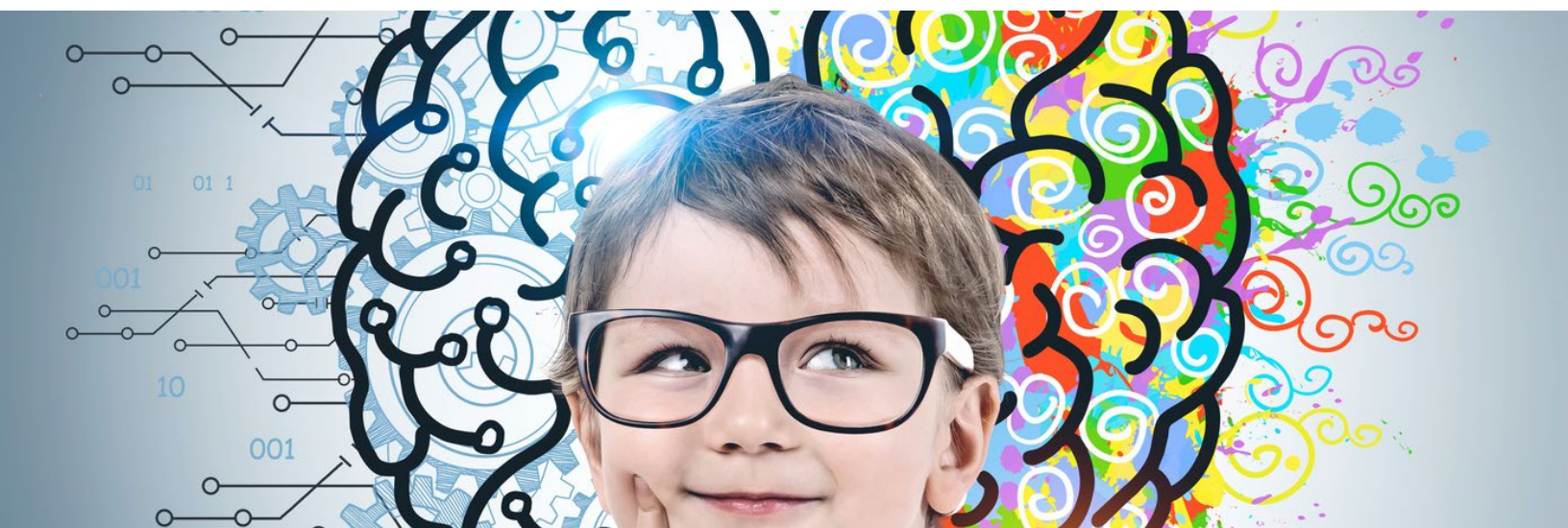


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Section 32p - Purpose

The overall intent of Section 32p Grants is to provide funding for the Great Start Collaboratives and Great Start Parent Coalitions (GSC/GSPC) to continue to enhance and improve the local early childhood systems building and expansion of evidence-based home visiting services. In 2022, the Michigan Legislature allotted \$13.4 million to continue this valuable early childhood systems building work and much needed home visitation services across Michigan.



Early Childhood Outcomes & Strategic Education Plan Alignment

The goal of each GSC/GSPC is to ensure the coordination and expansion of local early childhood systems and programs allowing every child in the community to achieve the early childhood outcomes outlined in [Executive Order 2011-8](#). These are achieved through a strategic planning process, inclusive of district, community, faith-based, business, and other community-based partners. The early childhood outcomes align with several goals within [Michigan's Top 10 Strategic Education Plan](#). Each GSC/GSPC is required to work toward all of the early childhood outcomes and align with Michigan's Top 10 Strategic Education Plan, while addressing the unique gaps and opportunities within their community. Refer to the table below for alignment between the early childhood outcomes and the Michigan Strategic Education Plan Goals.





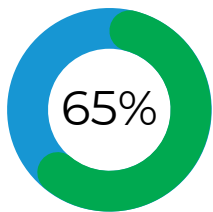
Early Childhood Outcomes and Michigan's Top 10 Strategic Education Plan Alignment

Early Childhood Outcomes	Michigan's Top 10 Strategic Education Plan
Outcome 1: Children are born healthy.	<ul style="list-style-type: none"> • Improve health, safety, and wellness of all learners.
Outcome 2: Children healthy, thriving, and developmentally on track from birth to third grade.	<ul style="list-style-type: none"> • Improve health, safety, and wellness of all learners. • Expand early childhood learning opportunities.
Outcome 3: Children developmentally ready to succeed in school at the time of school entry.	<ul style="list-style-type: none"> • Improve health, safety, and wellness of all learners. • Expand early childhood learning opportunities.
Outcome 4: Children prepared to succeed in fourth grade and beyond by reading proficiently by the end of third grade.	<ul style="list-style-type: none"> • Improve early literacy achievement. • Expand early childhood learning opportunities.



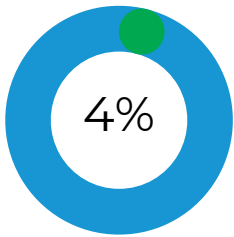
2021-2022 Section 32p Early Childhood Grant Allocations

Section [388.1632p\(5\)](#) of the State School Aid Act 94 of 1979, allows the Michigan Department of Education (MDE) to determine a formula for distribution of the State School Aid funds, as well as develop criteria for the use of funds. Funds distributed in Fiscal Year (FY) 2022 were budgeted to meet the statutory requirements.



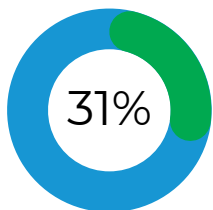
\$8,698,141 was allocated towards Great Start Collaboratives (GSCs) and Great Start Parent Coalitions (GSPCs), reflecting 65 percent of the total allocation.

Highly effective GSCs and GSPCs work together to build and reform the local early childhood system to achieve better outcomes for young children and their families. In order to effectively achieve these outcomes, each local Great Start system must include supports for children birth through age eight in physical health, social-emotional health, family supports and basic needs, parent education, and early education and care.



\$575,892 was allocated for local early childhood programming, not including home visiting programs, reflecting 4 percent of the total allocation.

Each local GSC and Parent GSPC must allocate a minimum amount of funding to support early childhood programming within their service area. The program(s) selected for these funds is identified through the GSC's Strategic Plan and/or community needs and gap analysis and is supported by the GSC.



\$4,124,240 was allocated for evidence-based home visiting, including Section 32p(4) of \$2,498,273, reflecting 31 percent of the total allocation.

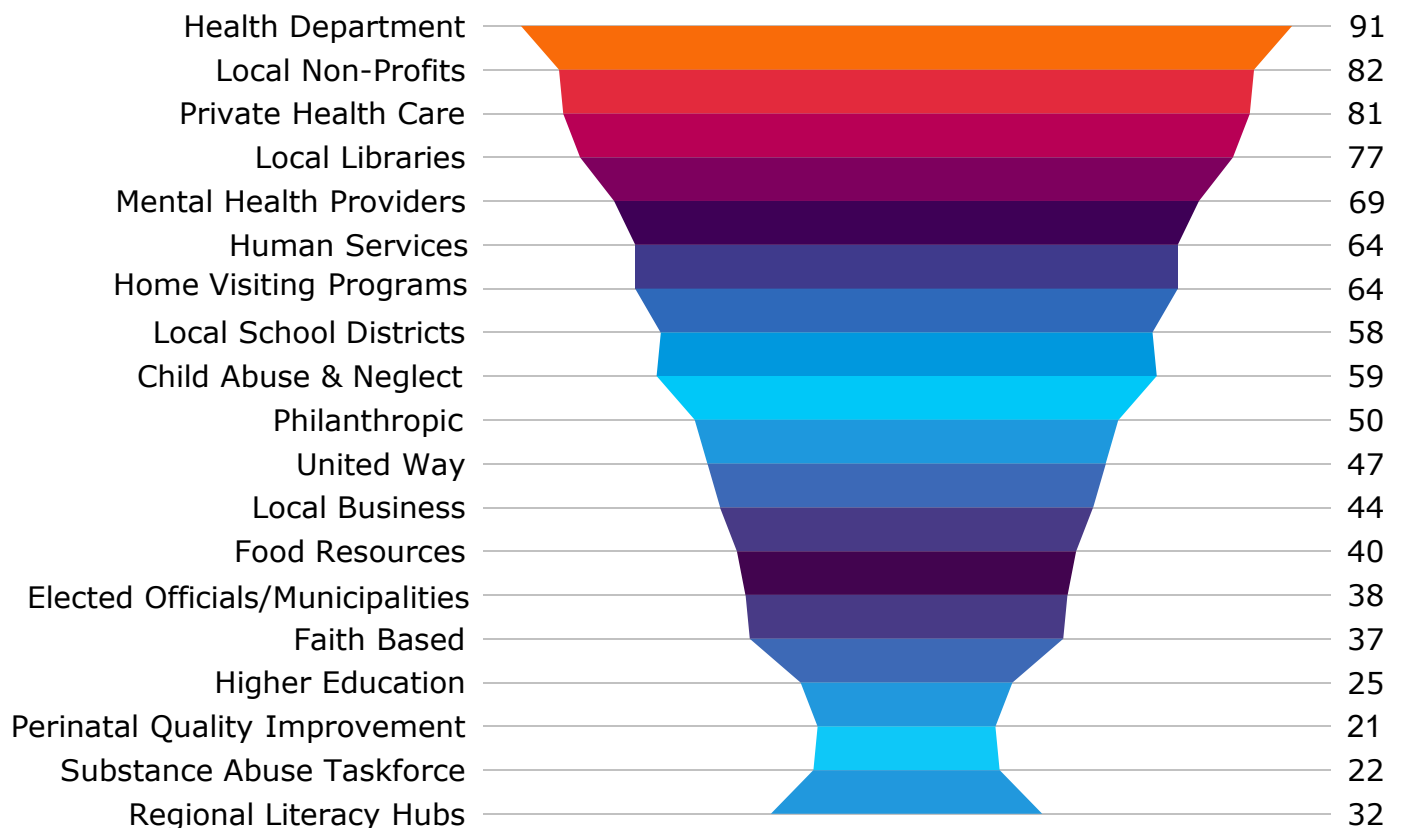
Section 32p(4) funds are awarded to 15 GSCs, through a competitive process, to implement home visitation services based on a locally coordinated, family-centered, evidence-based, data-driven home visiting strategic plan. The goals of this funding are:

- Improve school readiness including developmentally appropriate outcomes for early literacy, and
- Improve positive parenting practices, family economic self-sufficiency, and reducing high-risk impact factors through community resources and referrals.

Commonly Reported Community Partners

Each GSC and GSPC engages their community as they work to improve the early childhood system. All GSCs/GSPCs reported partnerships with their intermediate school district, the Great Start Readiness Program (GSRP), Head Start, and the ten Great Start to Quality Resource Centers. The following chart demonstrates partnerships reported by at least 25 percent of the GSCs/GSPCs.

Community Partners Reported by 25-93% of GSC/GSPCs



Outcome 1

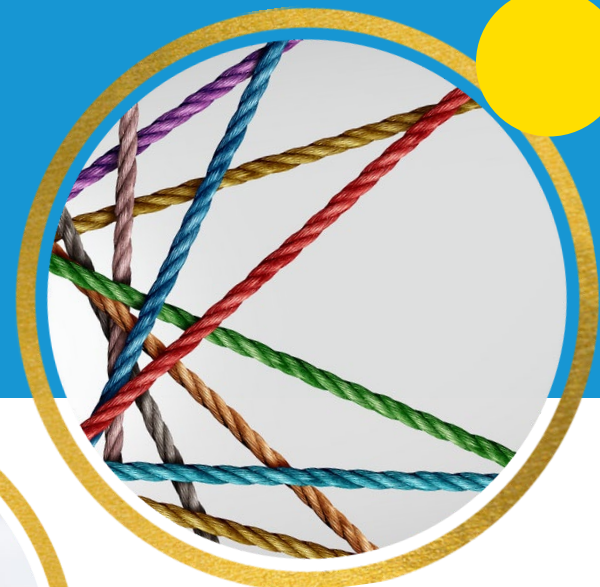
Commonly Reported Strategies



Safe Sleep



Health Disparities



**Systems
Change & Navigation**



Home Visiting



**Program & Service
Access**

Outcome 1: Most Frequently Reported Community Partners

- Parents
- Health departments
- Michigan Department of Health and Human Services
- Home visiting programs
- Private health and dental insurance
- Regional Perinatal Quality Improvement Collaboratives
- Local non-profits

Outcome 2

Commonly Reported Strategies



Strategies

Trauma-informed communities including work related to Adverse Childhood Experiences (ACEs), Healthy Outcomes for Positive Experiences (HOPE), Handle with Care and Strengthening Families Protective Factors.

Increase supports to individuals and families around nutrition and physical activity, including referrals to Women Infants and Children (WIC) programs and services.

Diversity, equity, and inclusion across the early childhood system.

Increasing the number of foster families and kinship care.

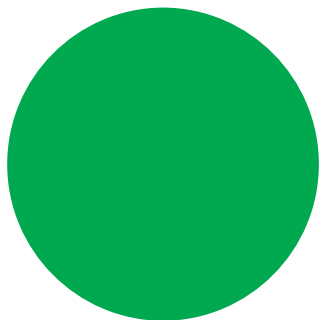
Social emotional supports and social emotional learning efforts.

Common Partners - Health departments, parents, home visiting programs, local non-profits, child care providers, Great Start Readiness Program, mental health providers, Michigan Department of Health and Human Services, Head Start and Early Head Start, and child abuse and neglect councils.



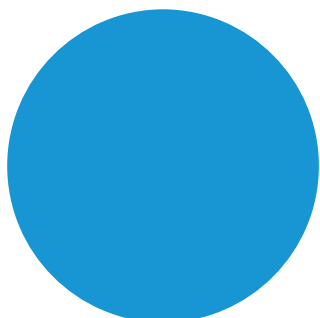
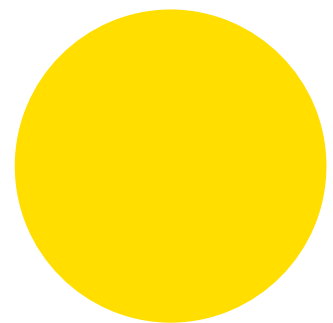
Outcome 3

Commonly Reported Strategies



- Increase child care availability.
- Improve support provided to licensed and unlicensed child care providers.
- Increase participation in child care subsidy program through the Michigan Department of Health and Human Services.

- Increase participation in Great Start to Quality system and improve star ratings for local providers.
- Review and make recommendations regarding the components of the GSRP.
- Increase families' knowledge, understanding, and availability of high-quality care options via Great Start to Quality.



Commonly Reported Partners

- Parents
- Child care providers
- Intermediate school districts
- Higher education
- Head Start and Great Start Readiness Programs
- Faith-based community





Outcome 4

Commonly Reported Strategies

Reading proficiency scores improve for 3rd graders.

Text programs to engage families including Ready4K, Text4Baby, Bright By Text, and Ready Rosie.

Talking is Teaching, now in 50 out of 54 GSCs engaged with at least one campaign.

Access to books and literacy information including mobile libraries, Little Free Libraries, 1,000 Books Before Kindergarten, Raising a Reader, and library partnerships.

Commonly Reported Partners

- Parents
- Local libraries
- Intermediate school districts
- Regional literacy hub
- Local non-profits
- Faith-based community
- Michigan Department of Health and Human Services

TALKING IS
TEACHING.

TALK
READ
SING

Section 32p Early Childhood Programming

In addition to the funding supporting the GSC/GSPCs to attend to system-level changes, Section 32p funds for early childhood programming were also utilized by the GSC/GSPCs. Often, 32p funds were blended with other locally determined resources, often making it impossible to report discretely on the number of families and children served. Early childhood programming funds supported programs that serve children and families locally to achieve the outcomes and components outlined in Public Act (PA) 165 of 2021.

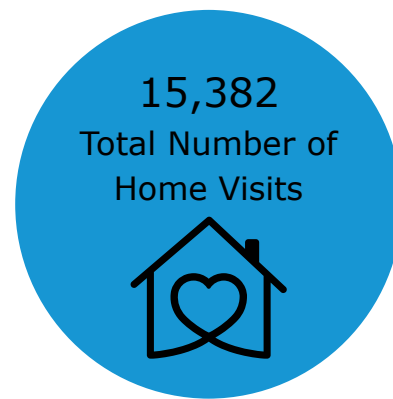
FY2022 Section 32p Funded Early Childhood Programs

Program	FY2022 Funds Budgeted*	# of Families Served	# of Children Served
Center for Early Literacy Learning (CELL)	\$126,695	1821	1968
Centering Pregnancy	\$5,000	5	7
Conscious Discipline	\$18,300	101	253
Dolly Parton Imagination Library	\$17,000	250	400
Early Childhood Scholarships	\$84,000	74	76
Family Outreach	\$15,500	100	250
Making Parenting a Pleasure - iParent Workshop	\$16,410	10	25
Jumpstart to Preschool & Kindergarten	\$9,565	29	44
Love and Logic	\$11,065	45	86
Mom Power	\$15,000	28	68
Music Therapy	\$5,000	287	380
Nurturing Parent	\$14,000	92	161
Partners for Healthy Baby - Welcome Baby Program	\$18,600	66	66
Postpartum Depression Support Group	\$7,500	5	7
Practiced Based Coaching	\$15,000	12	12
Reach Out and Read	\$3,000	250	250
Ready, Set, Learn	\$10,000	3	3
Totals	\$532,846	3,351	4,268



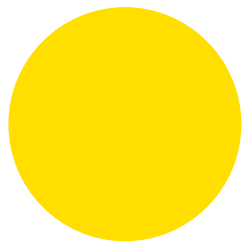
Children and Families Served in Home Visiting

Home visiting is a dual-generation approach that supports parents, caregivers, and children by nurturing strong parent-child relationships, promoting positive parenting practices, supporting parents in achieving life goals, and connecting families to community resources. Home visiting programs partner with families to support them during pregnancy and their child's early years.



Home Visiting Model	FY2022 Home Visiting Budgeted *	Funding Source	# Families Served	# Children Served
Early Head Start - Home Based (EHS-HB)	\$ 424,329.00	32p	18	18
		32p(4)	64	77
Healthy Families American (HFA)	\$ 273,297.00	32p	12	12
		32p(4)	44	43
Nurse Family Partnership (NFP)	\$ 132,626.00	32p	130	90
		32p(4)	24	12
Parents as Teachers (PAT)	\$ 3,176,988.00	32p	664	784
		32p(4)	443	588
Play and Learn Strategies-Infant (PALS-Infant)	\$ 117,000.00	32p	21	21
		32p(4)	35	35
All Models	\$ 4,124,240.00		1455	1680

*Budgets are not submitted by model. Due to costs being shared across models, some costs are approximate.



Home Visiting Across Michigan

Early Childhood Home Visiting programs are located in 31 Great Start Collaboratives across Michigan. Each Great Start Collaborative (GSC) allocated Section 32p and/or Section 32p(4) funding to provide high quality home visitation services to the children and families in their communities.

GSC	HV Model	GSC	HV Model	GSC	HV Model
Barry ISD	PAT	Huron ISD	PAT	Newago County RESA	PAT
Bay-Arenac ISD	PAT	Ingham ISD	PAT	Oakland Schools	PAT, NFP
Berrien RESA	PAT	Kalamazoo RESA	PAT	Ottawa Area ISD	PAT
Branch ISD	PAT	Kent ISD	EHS, PAT, PALS	Saginaw ISD	PAT
Calhoun ISD	PAT	Lenawee ISD	PAT	Sanilac ISD	PAT
COP ESD	PAT	Lewis-Cass (Heritage SW)	PAT	St. Clair County RESA	PAT
Copper Country ISD	EHS	Livingston ESA	HFA	Van Buren ISD	PAT
Delta-Schoolcraft ISD	PAT	Macomb ISD	PAT, NFP	Washtenaw ISD	EHS, PAT
Eastern Upper Peninsula ISD	PAT	Monroe ISD	PAT	Wayne RESA	PAT
Eaton RESA	PAT	Muskegon Area ISD	EHS	Wexford-Missaukee ISD/Manistee	PAT, HFA
Genesee ISD	PAT				

Home Visiting Models

MODEL	INTENSITY	POPULATION SERVED	OUTCOME
Early Head Start—Home Based (EHS-HB)	Weekly home visits (a minimum of 48 visits annually) of 90 minutes each. Two group socialization activities per month.	Parents who are lower-income and their children from prenatal through age three.	Promotes child development and school readiness, reductions in child maltreatment, positive parenting practices, family self-sufficiency, and service referrals.
Healthy Families America® (HFA)	During pregnancy, families receive visits either bi-monthly or weekly. Following birth, families receive one home visit per week for six months. After the first six months, visits depend on the families' needs. Home visits generally last 60 minutes.	Families at risk for adverse childhood experiences, including child maltreatment. Services start prenatally or within three months after the baby's birth and are available until age five.	Promotes child health, maternal health, child development and school readiness, reductions in child maltreatment, reductions in juvenile delinquency, positive parenting practices, family self-sufficiency, and service referrals.
Nurse-Family Partnership (NFP)	Families receive weekly, biweekly, or monthly visits dependent initially on length of enrollment and then age of the child. Visit schedule is determined by the family and can change based on family needs.	First-time mothers (enrolled before the 28th week of pregnancy) and their children to age two.	Promotes child health, maternal health, child development and school readiness, reductions in child maltreatment, reductions in juvenile delinquency, positive parenting practices, and family self-sufficiency.

Home Visiting Models

Continued

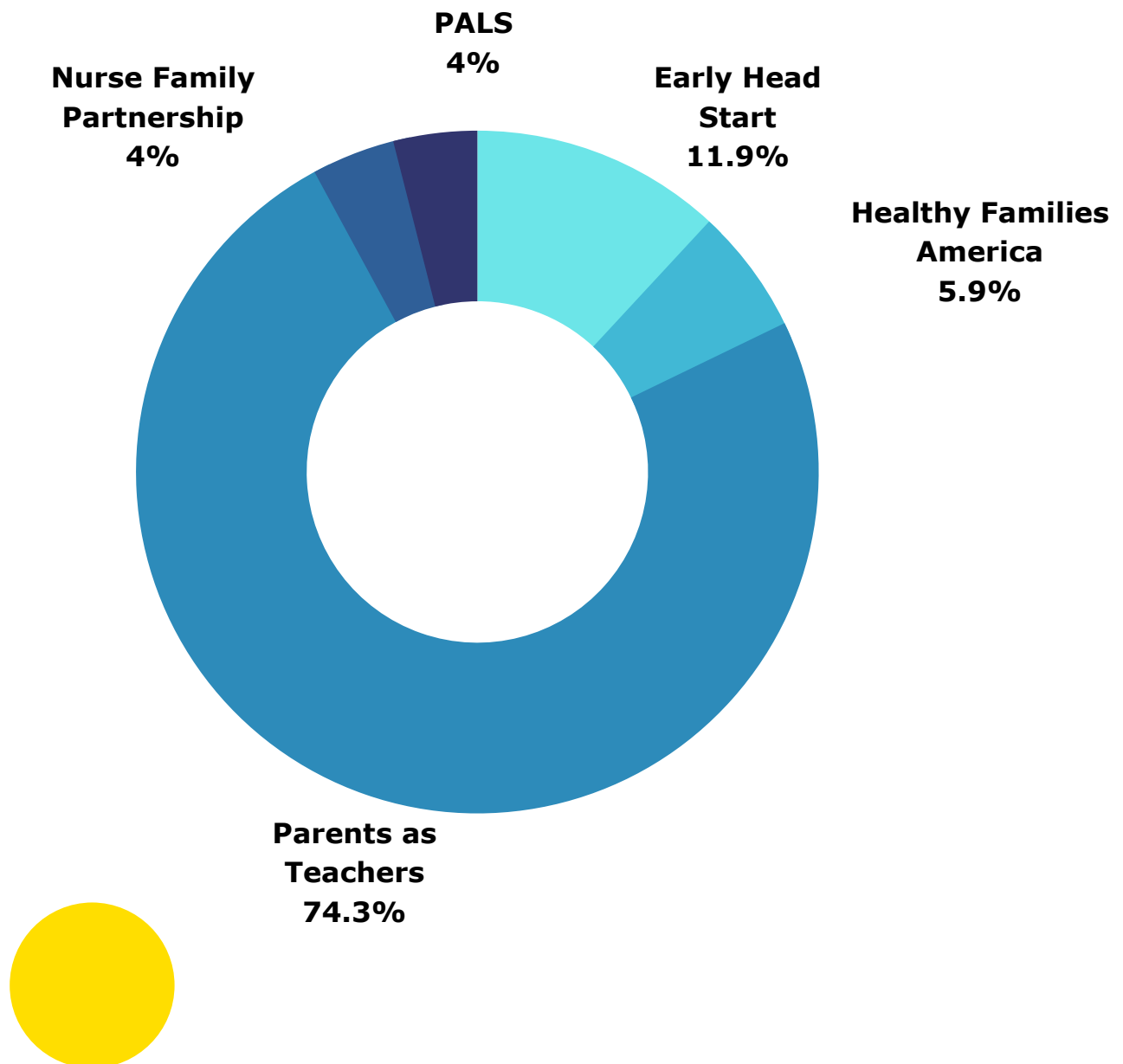
MODEL	INTENSITY	POPULATION SERVED	OUTCOME
Parents as Teachers (PAT)	Families with one or fewer stressors receive at least 12 personal visits annually and families with two or more stressors receive at least 24 visits annually. Home visits are 60 minutes in duration.	Parents and their children from prenatal through kindergarten.	Increases parent knowledge of early childhood development and improves parent practices, provides early detection of developmental delays and health issues, prevents child abuse and neglect, and increases children's school readiness and success.
Play and Learning Strategies Infant (PALS-Infant)	Families participating in PALS-Infant receive 10 weekly home visits lasting a minimum of 90 minutes.	Families participating in PALS-Infant receive 10 weekly home visits lasting a minimum of 90 minutes.	Strengthens the attachment between parent and child stimulates early language, cognitive, and social development.

A small
investment,
for a lifetime of
returns!



FY2022 Section 32p Home Visiting Investment by Model

In FY2022, the total investment in home visiting was \$4,124,240. Thirty-three Parents as Teachers programs were implemented for a total of \$3,176,988, which equals 74.3 percent of the FY2022 investment in home visiting. The remaining 25.7 percent of the funds, \$947,252, were comprised of the other models listed in the chart below.



Summary

FY2022 concludes the GSCs and GSPCs twelfth year of statewide implementation as the local early childhood systems building entities throughout Michigan. The locally driven GSCs respond to the needs and data of their community as developed through implementing strategic plans inclusive of family voice and engagement. At least 20 percent of GSC membership is comprised of parents, particularly those who are engaged in the early childhood system. The GSPCs are continuing to provide local expertise and co-creation of improvements and enhancements to the local early childhood system through parent led strategies included yearly into the local GSC work plan.

As home visiting services, including the expansion funds under Section 32p(4), completed their seventh year of implementation in FY2022, the focus will continue to provide high-quality services. Programs continue to improve data collection efforts to demonstrate improved outcomes outlined for young children. This combined report ensures a comprehensive and aligned overview of all Michigan home-visiting programs, regardless of funding streams, ensuring efficient and effective services across the state.

For more information on the implementation of the Great Start Collaboratives and Great Start Parent Coalitions, or more information on the implementation of Section 32p and 32p(4) Home Visiting, please contact Jonnie Taton, S.Psy.S., NCSP, Director, Early Childhood Development and Family Education at the Michigan Department of Education - Office of Great Start at tatonj2@michigan.gov.

