

**Logic Model for SECCS Grant Program:
The Montana Early Childhood Comprehensive Systems (ECCS) Project**

ORGANIZATIONAL STRUCTURE / ENVIRONMENT	INPUTS/RESOURCES	TARGET POPULATION	INTERVENTION		EXPECTED CHANGE (Outcomes/Objectives)	EVIDENCE OF CHANGE (Indicators)	BARRIERS	FACILITATORS
			DESCRIPTION	ACTIVITIES				
GRANTEE/ PROJECT CHARACTERISTICS (i.e., goals and description of the project, environment, description of population/case load and partner organizations):	TOTAL FUNDS REQUESTED (for the first year of the project): \$140,000 TOTAL PROJECT BUDGET (for the first year of the project): \$140,000	Child Care Providers		Contact American Academy of Pediatrics (AAP) state representative to ask her to provide information on medical homes that could be used in early childhood training.	By December 2006, contacted American Academy of Pediatrics (AAP) state representative to ask her to provide information on medical homes that could be used in early childhood training.	American Academy of Pediatrics (AAP) state representative is contacted to ask her to provide information on medical homes that could be used in early childhood training.		
Family and Community Health Bureau, Montana Department of Public Health and Human Services (DPHHS) is the lead agency. The Montana DPHHS improves and protects the health, well-being, and self-reliance of all Montanans. The Department Chief of the Family and Community Health Bureau within the DPHHS is a co-director for the project.	PROJECT INPUTS (i.e., personnel and non-personnel)	Early childhood provider	Include medical home information for child care provider trainings	Gather materials on Medical Homes for inclusion in early childhood provider trainings.	By November 2006, gathered materials on Medical Homes for inclusion in early childhood provider trainings.	Materials on Medical Homes are gathered for inclusion in early childhood provider trainings.		
Early Childhood Services Bureau in DPHHS signed a Memorandum of Understanding with the Family and Community Health Bureau in DPHHS (lead agency) in which the ECCS coordination was written into the contract for the Head Start Collaboration Director.	Personnel:	Early childhood trainees		Work with the Early Childhood Services Bureau (ECSB) to include medical home materials in the early childhood training and provider mailings.	By November 2006, worked with the Early Childhood Services Bureau (ECSB) to include medical home materials in the early childhood training and provider mailings.	Worked with the Early Childhood Services Bureau (ECSB) to include medical home materials in the early childhood training and provider mailings.		
Montana Early Childhood Comprehensive Systems (ECCS) Project coordinates appropriate systems that serve young children to effectively link comprehensive, quality services and resources to ensure that young children are healthy and ready to learn at school entry.	ECCS Coordinator: 0.25 FTE	Montana Association of Family Physicians		Contact the Montana Association of Family Physicians (AFP) to let them know what is being done to include medical home information for child care provider trainings and to ensure their support.	By December 2006, contacted the Montana Association of Family Physicians (AFP) to let them know what is being done to include medical home information for child care provider trainings and to ensure their support.	The Montana Association of Family Physicians (AFP) is contacted to let them know what is being done to include medical home information for child care provider trainings and to ensure their support.		
Project Goals: 1) Increase access to a Medical Home for all young children; 2) Mental health and social/emotional needs of young children and families are addressed appropriately; 3) All young children have access to quality early care and education services; 4) Parents and families are supported in their complex roles as nurturers of young children; and 5) ECCS planning will move to implementation through developed partnerships and collaborative administration that supports sustainability and accountability.	Non-Personnel:	Early childhood providers & families		Work with the immunization (IZ) program to assure that educational materials regarding availability of IZ is available to early childhood providers and families.	By December 2006, worked with the immunization (IZ) program to assure that educational materials regarding availability of IZ is available to early childhood providers and families.	The immunization (IZ) program is worked with to assure that educational materials regarding availability of IZ is available to early childhood providers and families.		
ENVIRONMENT:	Direct Costs: Sum of staff travel, contractual costs, small community grants for the School Readiness Initiative, and early childhood consultation.	Early childhood providers & families	Disseminate immunization access information to early childhood providers and families through mailings from the Early Childhood Services Bureau (ECSB), Child Care Resource and Referral offices, Temporary Assistance to Needy Families (TANF), and the Food Program.	By February 2007, disseminate immunization access information to early childhood providers and families through mailings from the Early Childhood Services Bureau (ECSB), Child Care Resource and Referral offices, Temporary Assistance to Needy Families (TANF), and the Food Program.	Immunization access information is disseminated to early childhood providers and families through mailings from the Early Childhood Services Bureau (ECSB), Child Care Resource and Referral offices, Temporary Assistance to Needy Families (TANF), and the Food Program.			

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Montana's challenge is to recognize and help coordinate the variable existing pieces of the ECCS system, and to encourage and enable them to work collaboratively and cooperatively to improve the health of young children and their families.	Indirect Costs: is based on a formula figured for cost allocation for grants coming into the Department.	Early childhood programs		Ascertain where oral health training developed by the American Academy of Pediatrics (AAP) is being used.	By December 2006, ascertained where oral health training developed by the American Academy of Pediatrics (AAP) is being used.	Ascertained where oral health training developed by the American Academy of Pediatrics (AAP) is being used.		
Since Montana is a rural state with often scarce services, it is important to assure that families with young children are aware of and connected to the services they need.	OTHER INPUTS (contracts, other grant awards, matching funds):	Early childhood programs		Use mechanisms in place through well child checks to add dental health component.	By June 2007, used mechanisms in place through well child checks to add dental health component.	Mechanisms in place through well child checks are used to add dental health component.		
PARTNERING ORGANIZATIONS:	The first contract is with the Early Childhood Services Bureau, which contracts their ECCS and Head State/State Collaboration work with a private, non-profit Child Care Resource and Referral Agency (CCR&R) for the past 9 years. Thus, the Head Start Collaboration Director is also the ECCS coordinator. This individuals works at the CCR&R.	Early childhood programs	Provide information on oral health to all early childhood programs	Include information on oral health in mailings from/to the Early Childhood Services Bureau (ECSB), Child Care Resource and Referral offices (CCR&R's), Temporary Assistance to Needy Families (TANF), Food Program, Head Start/Early Head Start, Montana Association for the Education of Young Children (MtAEYC), and the Montana Child Care Association (MtCCA).	By September 2007, included information on oral health in mailings from/to the Early Childhood Services Bureau (ECSB), Child Care Resource and Referral offices (CCR&R's), Temporary Assistance to Needy Families (TANF), Food Program, Head Start/Early Head Start, Montana Association for the Education of Young Children (MtAEYC), and the Montana Child Care Association (MtCCA).	Information on oral health is included in mailings from/to the Early Childhood Services Bureau (ECSB), Child Care Resource and Referral offices (CCR&R's), Temporary Assistance to Needy Families (TANF), Food Program, Head Start/Early Head Start, Montana Association for the Education of Young Children (MtAEYC), and the Montana Child Care Association (MtCCA).		
Head Start Association: brings together families, staff, directors and friends of all Head Start programs to provide leadership, education, information and advocacy on behalf of young children, pregnant women, and families throughout Montana.	Through another contract, the University of Montana will conduct the SECCS program evaluation by monitoring the indicators.	Primary Care Officer	Access to medical and dental homes in underserved areas	Coordinate with Primary Care Officer (PCO) to get information on service gaps in primary care, mental health, and dental care at local level.	By Summer 2007, coordinated with Primary Care Officer (PCO) to get information on service gaps in primary care, mental health, and dental care at local level.	The Primary Care Officer (PCO) is coordinated with to get information on service gaps in primary care, mental health, and dental care at local level.		
Head Start/State Collaboration Office: recognizes the need to develop policies and practices that promote the collaboration and coordination that is essential to improving child care availability, quality, and affordability for children.		State/local level agency		When service gaps in primary care, mental health, and dental care at the local level are identified, ensure that the state/local level agency is informed of these identified local needs.	By Summer 2007, when service gaps in primary care, mental health, and dental care at the local level are identified, ensured that the state/local level agency was informed of these identified local needs.	When service gaps in primary care, mental health, and dental care at the local level are identified, ensured that the state/local level agency was informed of these identified local needs.		
Disabilities in DPHHS: provides services that help Montanans with disabilities to live, work and fully participate in their communities.		ECCS partners	Children's Health Insurance Program (CHIP) enrollment meets waiting list	Advocate for increased Children's Health Insurance Program (CHIP) funding if/when necessary so the enrollment meets the waiting list.	During the 2007 Legislative Session, advocated for increased CHIP funding if/when necessary so the enrollment meets the waiting list.	Increased CHIP funding is advocated for if/when necessary so the enrollment meets the waiting list.		
Quality Assurance Division: protects the safety and well-being of Montanans by monitoring and ensuring the integrity and cost-effectiveness of programs administered by the department.		Early childhood programs	Early childhood programs and public schools will have information about CHIP, Medicaid, and other insurance programs	Coordinate with Healthy Mothers/Healthy Babies (HM/HB) to distribute their brochure with information about CHIP, Medicaid, and other insurance programs to early childhood programs.	By August 2007, coordinated with Healthy Mothers/Healthy Babies (HM/HB) to distribute their brochure with information about CHIP, Medicaid, and other insurance programs to early childhood programs.	Healthy Mothers/Healthy Babies (HM/HB) is coordinated with to distribute their brochure with information about CHIP, Medicaid, and other insurance programs to early childhood programs.		
Child Care Resource and Referral Network: provides statewide leadership in shaping collaborations and strengthening local resource and referral agencies for the purpose of collectively building a diverse, high quality early care and education system accessible to all Montana families.		Early Periodic Screening, Diagnosis, and Treatment (EPSDT) official	Increasing EPSDT screening in children	Coordinate with Early Periodic Screening, Diagnosis, and Treatment (EPSDT) official at Montana Department of Public Health and Human Services (DPHHS) to increase EPSDT screening in children.	By Fall 2006, coordinated with EPSDT official at DPHHS to increase EPSDT screening in children.	The EPSDT official at DPHHS is coordinated with to increase EPSDT screening in children.		
Governor's Office: ensures that the state government continues to live within its means using the existing taxes collected equitably and imposing no additional tax burden on its citizens.		Children's Mental Health Bureau Staff		Follow up on previous EPSDT planning and changes that were initiated by the Children's Mental Health Bureau.	By Fall 2006, followed up on previous EPSDT planning and changes that were initiated by the Children's Mental Health Bureau.	Previous EPSDT planning and changes that were initiated by the Children's Mental Health Bureau are followed up on.		

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Children's Mental Health Bureau: offers mental health services that may include crisis intervention, counseling, medication review, inpatient treatment and day treatment programs for children.		Head Start Association Staff	Increasing EPSDT screening in children	Coordinate EPSDT education and promotion efforts with the Head Start Association.	By Fall 2006, coordinated EPSDT education and promotion efforts with the Head Start Association.	EPSDT education and promotion efforts with the Head Start Association are coordinated.		
		American Academy of Pediatrics Staff		Work with American Academy of Pediatrics (AAP) on increasing EPSDT screening in children to clarify what can be done and how.	By Fall 2006, worked with American Academy of Pediatrics (AAP) on increasing EPSDT screening in children to clarify what can be done and how.	American Academy of Pediatrics (AAP) is worked with on increasing EPSDT screening in children to clarify what can be done and how.		
		Kids Management Authority	Availability of mental health services	Montana Children's System of Care Committee will advise the local Kids Management Authority's (KMA) on early childhood mental health.	During quarterly meetings, Montana Children's System of Care Committee advised the local Kids Management Authority's (KMA) on early childhood mental health.	The local Kids Management Authority's (KMA) is advised by the Montana Children's System of Care Committee on early childhood mental health.		
		Early childhood programs		Regularly advise early childhood programs on how to link with the Montana Children's System of Care/KMA's in their community.	By Fall 2006, regularly advised early childhood programs on how to link with the Montana Children's System of Care/KMA's in their community.	Early childhood programs are regularly advised by the Early Childhood Services Bureau on how to link with the Montana Children's System of Care/KMA's in their community.		
		All early childhood professionals and kindergarten teachers	Educating early childhood professionals and kindergarten teachers on mental health issues and services for young children	Determine where professional development activities exist for this target group of early childhood professionals and kindergarten teachers on the topic of mental health and social emotional development issues and services for young children.	By Fall 2006, determined where professional development activities exist for this target group of early childhood professionals and kindergarten teachers on the topic of mental health and social emotional development issues and services for young children.	Professional development activities that exist for this target group of early childhood professionals and kindergarten teachers on the topic of mental health and social emotional development issues and services for young children are determined.		
		All early childhood professionals and kindergarten teachers		Provide an analysis of approved training events on the topic of mental health and social emotional development issues and services for young children.	By January 2008, provided an analysis of approved training events on the topic of mental health and social emotional development issues and services for young children.	An analysis of approved training events on the topic of mental health and social emotional development issues and services for young children is provided by the Early Childhood Project (ECP).		
		All early childhood professionals and kindergarten teachers		Conduct inventory of Infant/Toddler programs and services as per work plan for the Infant/Toddler initiative.	Conducted an inventory of Infant/Toddler programs and services as per work plan for the Infant/Toddler initiative.	An inventory of Infant/Toddler programs and services is conducted as per work plan for the Infant/Toddler initiative.		
		Early childhood professionals		Provide training on child development at the spring public health conference.	By September 2007, provided training on child development at the spring public health conference.	Training on child development is provided by early childhood professionals at the spring public health conference.		
		Attendees of the Mental Health Association and the Montana Education Association/Montana Federation of Teacher (MEA/MFT) conferences; Public Health professionals	Cross-training	Encourage Mental Health Association, Montana Education Association/Montana Federation of Teacher (MEA/MFT), and Public Health professionals to include information on early childhood mental health and social emotional development issues in their conferences.	By January 2007, encouraged Mental Health Association, Montana Education Association/Montana Federation of Teacher (MEA/MFT), and Public Health professionals to include information on early childhood mental health and social emotional development issues in their conferences.	Mental Health Association, Montana Education Association/Montana Federation of Teacher (MEA/MFT), and Public Health professionals are encouraged to include information on early childhood mental health and social emotional development issues in their conferences.		
		Families	Families have increased access to appropriate mental health services	Provide information about mental health services to families through media, Child Care Resource and Referral (CCR&Rs), Public Health and private health facilities, early intervention agencies and schools.	By September 2007, provided information about mental health services to families through media, CCR&Rs, Public Health and private health facilities, early intervention agencies and schools.	Information about mental health services is provided to families through media, CCR&Rs, Public Health and private health facilities, early intervention agencies and schools.		
		Parents	Increase parent's awareness of when a need for mental health intervention exists	Identify what information exists about the indicators of the need for mental health intervention.	By May 2007, identified what information exists about the indicators of the need for mental health intervention.	What information exists about the indicators of the need for mental health intervention is identified.		
		Service providers within and outside the mental health field		Encourage and promote cross-training among service providers so that service providers outside the mental health field can help families identify the indicators of the need for mental health intervention.	By September 2007, encouraged and promoted cross-training among service providers so that service providers outside the mental health field can help families identify the indicators of the need for mental health intervention.	Cross-training among service providers is encouraged and promoted so that service providers outside the mental health field can help families identify the indicators of the need for mental health intervention.		

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		Child Care Resource & Referral agencies, Public Health, private health, early intervention agencies and school social workers	Information for parents on professional contacts for children's mental health needs	Coordinate with the Child Care Resource & Referral (CCR&R) agencies, Public Health, private health, early intervention agencies and school social workers to ensure that they have the contact information for those who provide mental health services and make that information available to families.	By November 2006, coordinated with the Child Care Resource & Referral (CCR&R) agencies, Public Health, private health, early intervention agencies and school social workers to ensure that they have the contact information for those who provide mental health services and make that information available to families.	Child Care Resource & Referral (CCR&R) agencies, Public Health, private health, early intervention agencies and school social workers are coordinated with to ensure that they have the contact information for those who provide mental health services and make that information available to families.		
		Early Childhood Mental Health Consultants		Explore the development of the Early Childhood Mental Health Consultation Model.	By September 2007, explored the development of the Early Childhood Mental Health Consultation Model.	The development of the Early Childhood Mental Health Consultation Model is explored.		
		Local programs	Information on services that are available to children with special needs is made available to local programs serving high-risk populations	Develop list of local programs that need information on services that are available to children with special needs.	By November 2006, developed a list of local programs that need information on services that are available to children with special needs.	A list of local programs that need information on services that are available to children with special needs is developed.		
		Public health conferences and meetings	Cross training materials between and within early childhood systems	Disseminate the Early Learning Guidelines at the public health conferences and meetings.	By May 2007, disseminated the Early Learning Guidelines at the public health conferences and meetings.	The Early Learning Guidelines are disseminated at the public health conferences and meetings.		
		Montana Primary Care Association		Disseminate the Early Learning Guidelines through the Montana Primary Care Association (MPCA).	By Summer 2007, disseminated the Early Learning Guidelines through the Montana Primary Care Association (MPCA).	The Early Learning Guidelines are disseminated through the Montana Primary Care Association (MPCA).		
		American Academy of Pediatrics and Montana Academy of Family Physicians		Disseminate the Early Learning Guidelines through American Academy of Pediatrics (AAP) and Montana Academy of Family Physicians (AFP).	By Summer 2007, disseminated the Early Learning Guidelines through American Academy of Pediatrics (AAP) and Montana Academy of Family Physicians (AFP).	The Early Learning Guidelines are disseminated through the American Academy of Pediatrics (AAP) and Montana Academy of Family Physicians (AFP).		
		Public health conferences and meetings, Montana Primary Care Association conferences and meetings, American Academy of Pediatrics and Montana Academy of Family Physicians conferences and meetings	Cross training materials between and within early childhood systems	Disseminate the parent version of the Early Learning Guidelines through the public health conferences and meetings, Montana Primary Care Association, American Academy of Pediatrics and Montana Academy of Family Physicians.	Beginning June 2007, disseminated the parent version of the Early Learning Guidelines through the public health conferences and meetings, Montana Primary Care Association, American Academy of Pediatrics and Montana Academy of Family Physicians.	The parent version of the Early Learning Guidelines are disseminated through the public health conferences and meetings, Montana Primary Care Association, American Academy of Pediatrics and Montana Academy of Family Physicians.		
		Public health conferences and meetings, Montana Primary Care Association conferences and meetings, American Academy of Pediatrics and Montana Academy of Family Physicians conferences and meetings		Determine other possible documents from the Office of Public Instruction (OPI) and Public Health that could be shared through public health conferences and meetings, Montana Primary Care Association, American Academy of Pediatrics and Montana Academy of Family Physicians.	By September 2007, determined other possible documents from the Office of Public Instruction (OPI) and Public Health that could be shared through public health conferences and meetings, Montana Primary Care Association, American Academy of Pediatrics and Montana Academy of Family Physicians.	Other possible documents from the Office of Public Instruction (OPI) and Public Health that could be shared through public health conferences and meetings, Montana Primary Care Association, American Academy of Pediatrics and Montana Academy of Family Physicians are determined.		
		Community		Assure that access to information about best practices in early childhood is available in every community through Early Childhood Services Bureau (ECSB), Child Care Resource and Referral (CCR&R's), media, and (private and public) health facilities.	By January 2007, assured that access to information about best practices in early childhood is available in every community through Early Childhood Services Bureau (ECSB), Child Care Resource and Referral (CCR&R's), media, and (private and public) health facilities.	Access to information about best practices in early childhood is available in every community through Early Childhood Services Bureau (ECSB), Child Care Resource and Referral (CCR&R's), media, and (private and public) health facilities.		
		Businesses at annual Economic Outlook Seminars & Early Childhood Business Summit	Supporting quality early childhood programs	Work with Montana KIDS COUNT to distribute pertinent information about child care to businesses at annual Economic Outlook Seminars & Early Childhood Business Summit.	By October 2006, worked with Montana KIDS COUNT to distribute pertinent information about child care to businesses at annual Economic Outlook Seminars & Early Childhood Business Summit.	Montana KIDS COUNT is worked with to distribute pertinent information about child care to businesses at annual Economic Outlook Seminars & Early Childhood Business Summit.		
		Communities		Host School Readiness Summit and offer community incentive grants to foster quality early childhood transitions.	By September 2007, hosted School Readiness Summit and offer community incentive grants to foster quality early childhood transitions.	School Readiness Summit is hosted and community incentive grants are offered to foster quality early childhood transitions.		

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		Child Care Resource & Referral (CCR&R) agencies and Public Health agencies	Educating Early childhood educators	Encouraged disseminating information on safety and health by Child Care Resource & Referral (CCR&R) agencies and Public Health agencies.	By September 2007, encouraged disseminating information on safety and health by the Child Care Resource & Referral (CCR&R) agencies and Public Health agencies.	Disseminating information on safety and health is encouraged by the Child Care Resource & Referral (CCR&R) agencies and Public Health agencies.		
		Public health officials	Early Childhood Health Consultation	Presentations on high quality early care made by public health officials at the American Academy of Pediatrics (AAP) conference.	By March 2007, presentations on high quality early care made by public health officials at the American Academy of Pediatrics (AAP) conference.	Presentations on high quality early care are made by public health officials at the American Academy of Pediatrics (AAP) conference.		
		Public health officials		Early Childhood Health Consultation is developed and services are provided in early childhood programs.	By March 2007, developed Early Childhood Health Consultation and consultants provided services in early childhood programs.	Early Childhood Health Consultation is developed and services are provided by early childhood health consultants in early childhood programs.		
		Child care providers	Strengthen linkages between early childhood providers and the community service resources	Child Care Resource & Referral (CCR&R) agencies continue to work on a local level to connect child care providers and other community services (locally designated).	Every quarter, Child Care Resource & Referral (CCR&R) agencies continue to work on a local level to connect child care providers and other community services (locally designated).	Child Care Resource & Referral (CCR&R) agencies continue to work on a local level to connect child care providers and other community services (locally designated).		
		Early Childhood Programs	Addressing Access Barriers	Address areas that can be changed at state level using the internet and technology when possible to provide easy access to needed programs.	Beginning in Fall 2006, addresses areas that can be changed at state level using the internet and technology when possible to provide easy access to needed programs.	Areas that can be changed at state level are addressed using the internet and technology when possible to provide easy access to needed programs.		
		Service Providers	Educating service providers	Disseminate information and materials to Head Start/Early Head Start Programs, County Health Departments, American Academy of Pediatrics (AAP), Academy of Family Physician (AFP), Hospitals, Child Care Resource & Referral agencies, and other early education professionals at meetings, conferences and in newsletters.	By November 2006, disseminated information and materials to Head Start/Early Head Start Programs, County Health Departments, American Academy of Pediatrics (AAP), Academy of Family Physician (AFP), Hospitals, Child Care Resource & Referral agencies, and other early education professionals at meetings, conferences and in newsletters.	Information and materials are disseminated to Head Start/Early Head Start Programs, County Health Departments, American Academy of Pediatrics (AAP), Academy of Family Physician (AFP), Hospitals, Child Care Resource & Referral agencies, and other early education professionals at meetings, conferences and in newsletters.		
		Parents	Parent leadership training	Promote adoption of Connecticut Parent Leadership Training Institute (PLTI) model in Montana.	On an ongoing basis, promoted the adoption of the Connecticut Parent Leadership Training Institute (PLTI) model in Montana.	The adoption of the Connecticut Parent Leadership Training Institute (PLTI) model in Montana is promoted.		
		Home-based visiting program staff	Families' knowledge about available services and support systems	Evaluate potential for expansion of the County Public Health Department's home-based visiting program.	By December 2006, evaluated the potential for expansion of the County Public Health Department's home-based visiting program.	The potential for expansion of the County Public Health Department's home-based visiting program is evaluated.		
		Local early childhood providers and Child Care Resource & Referral (CCR&R) agencies, Local Chamber of Commerce staff,	Promote the investment in young children as part of economic development	Encourage local early childhood providers and Child Care Resource and Referral (CCR&Rs) to work with Human Service Committees of the local Chamber of Commerce to promote the investment in young children as part of economic development.	By November 2006, encouraged local early childhood providers and CCR&Rs to work with Human Service Committees of the local Chamber of Commerce to promote the investment in young children as part of economic development.	Local early childhood providers and CCR&Rs are encouraged to work with Human Service Committees of the local Chamber of Commerce to promote the investment in young children as part of economic development.		
			Policy Changes	Include partners in problem solving, information gathering and policy changes.	Include partners in problem solving, information gathering and policy changes as needed.	Partners are included in problem solving, information gathering and policy changes as needed.		

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			Sustainability	Engage in updating of strategic plan	By Spring of 2007, engaged in updating the strategic plan.	The strategic plan is updated.		
				Maintain and update Memorandum of Understanding (MOU) between partnering bureaus for coordination of ECCS project.	By Summer of 2007, maintained and updated Memorandum of Understanding (MOU) between partnering bureaus for coordination of ECCS project.	Memorandum of Understanding (MOU) is maintained and updated between partnering bureaus for coordination of ECCS project.		
				Attend annual ECCS meeting in Washington, DC and bring back resources two times a year.	Attended the annual ECCS meeting in DC and brought back resources two times a year.	The annual ECCS meeting in DC is attended by ECCS program staff and resources are brought back two times a year.		
				Review the budget quarterly.	Reviewed the budget quarterly.	The budget is reviewed quarterly.		
				Seek other grant sources as necessary.	Sought other grant sources as necessary.	Other grant sources are sought as necessary.		
				Analyze present funding of services and determine if dollars can be used differently to maximize effectiveness and efficiency.	By September 2007, analyzed present funding of services and determined if dollars can be used differently to maximize effectiveness and efficiency.	Present funding of services is analyzed and it is determined if dollars can be used differently to maximize effectiveness and efficiency.		
				Analyze policies and identify those that need updating and changing to minimize barriers and maximize effective service delivery.	By Fall 2006, analyzed policies and identified those that need updating and changing to minimize barriers and maximize effective service delivery.	Policies are analyzed and those that need updating are identified and are changed to minimize barriers and maximize effective service delivery.		
				Use expertise and Technical Assistance (TA) from National Governor's Association (NGA) and Anne Mitchell.	Used expertise and Technical Assistance (TA) from National Governor's Association (NGA) and Anne Mitchell, an early childhood policy expert, when offered.	Expertise and Technical Assistance (TA) from National Governor's Association (NGA) and Anne Mitchell, an early childhood policy expert, is used when offered.		
				Use expertise and Technical Assistance of Health Resources and Services Administration (HRSA).	Used expertise and Technical Assistance of Health Resources and Services Administration (HRSA) when offered.	Expertise and Technical Assistance of Health Resources and Services Administration (HRSA) is used when offered.		
				Conduct a quantitative evaluation to track indicators and adjust indicators as necessary.	Conducted a quantitative evaluation to track indicators and adjust indicators as necessary.	A quantitative evaluation is conducted to track indicators and adjust indicators as necessary.		
			Evaluation	Conduct a qualitative evaluation to track activities of the ECCS core team and coordinator.	Conducted a qualitative evaluation to track activities of the ECCS core team and coordinator.	A qualitative evaluation is conducted to track activities of the ECCS core team and coordinator.		
				Conduct interviews and surveys of partners as part of the qualitative evaluation.	Conducted interviews and surveys of partners as part of the qualitative evaluation.	Interviews and surveys of partners are conducted as part of the qualitative evaluation.		
				Complete the annual evaluation report.	By September 2007, completed the annual evaluation report.	The annual evaluation report is completed.		