

**Logic Model for SECCS Grant Program:  
The Ohio State Maternal and Child Health Early Childhood Comprehensive Systems (SECCS) Grant Program**

ORGANIZATIONAL STRUCTURE / ENVIRONMENT	INPUTS/RESOURCES	TARGET POPULATION	INTERVENTION		EXPECTED CHANGE (Outcomes/Objectives)	EVIDENCE OF CHANGE (Indicators)	BARRIERS	FACILITATORS
			DESCRIPTION	ACTIVITIES				
<b>GRANTEE/ PROJECT CHARACTERISTICS (i.e., goals and description of the project, environment, description of population/case load and partner organizations):</b>	<b>TOTAL FUNDS REQUESTED:</b> \$140,000 (for the first year of the project) <b>TOTAL PROJECT BUDGET:</b> \$140,000 (for the first year of the project)	Child care providers			By the end of Year 3, the medical home and SCHIP program promoted with child care providers through the provision of materials and education.	Medical home and SCHIP promoted at 85% of initial consultations by CCHCs.		
The lead agency for the implementation grant is the <b>Ohio Department of Health (ODH)</b> . ODH is organized by function, with programs housed within three Divisions in the department. The majority of the Maternal and Child Health (MCH) funded programs and positions are located under the Division of Family and Community Health Services. The other divisions include the Division of Prevention (receives limited Title V MCH Block Grant funding for the Women's Health Program), and the Division of Quality Assurance. There are also bureaus within the Dept. of Health, of which the SECCS project and the Healthy Child Care Ohio (HCCO) program fall under the Bureau of Early Intervention Services (BEIS). Other BEIS programs include the Health Me Grow, umbrella program for children who are birth to three and are at-risk for or have developmental disabilities (and their families), and the Universal Newborn Hearing Screening program. ODH has primarily served as the catalyst among diverse organizations and initiatives to bring together a more coordinated early childhood system.	<b>PROJECT INPUTS (i.e., personnel and non-personnel)</b>	Children from birth to age five	Medical Home/Availability of Health Insurance	Healthy Child Care Ohio (HCCO) Child Care Health Consultants (CCHCs) continue to promote the medical home and SCHIP program with child care providers by providing materials and education.	By the end of Year 3, increased the percentage of children with health insurance.	Increased percentage of children with health insurance.		
<b>The Ohio State Maternal and Child Health Early Childhood Comprehensive Systems (SECCS) Grant Program</b> seeks to identify existing programs and planning efforts related to early childhood issues, and to determine how they may be more efficiently integrated. A task force of key stakeholders was convened to work on the project's planning and implementation processes. Internal and external environmental scans of national and statewide data were also conducted, of which the internal scan focused largely on other Maternal and Child Health activities and programs within ODH. The external scan included focus groups and surveys of community providers and parents offering input on perceptions of the early childhood system, concerns, priorities for change, and recommendations for improvements. The task force also delineated four overarching goals for the project, along with accompanying objectives, goals and evaluation methods. Most activities focus on strengthening the system's infrastructure, as well as taking into account Ohio's "home rule" structure.	<b>Personnel:</b>	Children from birth to age five			By the end of Year 3, increased the percentage of children with a medical home.	Increased percentage of children with a medical home.		

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The SECCS implementation schedule targets improving the linkage between the early childhood community and the health community, and supporting quality child care initiatives already in place. There will also be additional planning on establishing relationships with additional stakeholders, and identifying appropriate programs to ensure that the cross-system collaboration will adequately reflect the needs and resources of a diverse audience. All activities are based on evidence of a specific need; all activities will take place within a collaborative system that has the support and commitment of other programs, agencies and initiatives; the methods will be based on current best practices; and the SECCS project supports other initiatives with a greater scope.	Human Services Program Consultant: 0.75 FTE	Children from birth to age five		Support the expansion of the Medical Home initiative by providing information to child care providers.	By the end of Year 3, increased the percentage of children with a medical home.	Increased percentage of children with a medical home.		
The overarching goal of the SECCS project is to utilize the information gained during the planning process to support, expand and connect existing initiatives without duplicating them. Specific project goals include: (1) Caregivers and parents of young children will have increased knowledge of the importance of a medical home and access to health care; (2) The importance of social-emotional development of young children will be promoted through public awareness, education and advocacy; (3) Linkages will be established between the health care and early care and education communities; and (4) State systems will support planning, development and implementation of effective collaboration.	Fringe Benefit: 30% of salary	Child care providers	Medical Home/Availability of Health Insurance	Support the expansion of the Medical Home initiative by providing information to child care providers.	By the end of Year 3, publicized web-based directory to child care providers listing (a) health care providers who accept new Medicaid patients; and (b) services and resources for CSHCN via the CCHC network.	Publicized web-based directory to 300 child care providers listing (a) health care providers who accept new Medicaid patients; and (b) services and resources for CSHCN via the CCHC network.		
<b>ENVIRONMENT:</b>	Indirect costs (32% of salary + fringe): \$17,236.	Children from birth to age five and their families		Support the Ohio Chapter of the AAP in their promotion of the medical home.	By the end of Year 3, the Ohio Chapter of the AAP was supported in their promotion of the medical home.	300 copies disseminated of the listing of health care providers who participate in Medicaid/SCHIP.		
There are approximately 907,000 children under the age of six residing in Ohio. Of these, 37% live in low-income families; 9% between the ages of birth through five have special health care needs; and 30% of Ohio's children enter kindergarten requiring some type of intervention. Ohio has eight large urban centers, but the poorest and least populated counties are the state's 29 Appalachian counties. Additionally, the current unemployment rate is at its highest level since 1993.	<b>Non-Personnel:</b>	County-based coordinators of early childhood services	Strategies for Linking Children to Appropriate Services	Coordinate annual regional meetings to provide networking opportunities to county-based coordinators of early childhood services to develop strategies about ways to link children with appropriate services.	By the end of Year 3, coordinated annual regional meetings to provide networking opportunities to county-based coordinators of early childhood services to develop strategies about ways to link children with appropriate services.	Four regional meetings conducted with a minimum of 250 attendees annually.		
In relation to systems building in the state, Ohio is considered a "state administered, county-controlled" state. Therefore, each of Ohio's 88 counties have 88 separate service delivery systems for services such as child care assistance, early interventions, Medicaid, and housing. The governance structure is evident in the municipal law-making, allocation of state funding and the establishment of certain eligibility criteria. Financially, Ohio is facing a growing budget shortfall, with approximately \$3 billion cut by the General Assembly from the Governor's proposed budget. These cuts have had a large impact on early childhood programs, with expansion of early care and education services for children and families in the upcoming budget unlikely.	Staff Travel and mileage reimbursement (\$0.30/mile): \$2,000.	Children from birth to age five and their families	Medicaid Reimbursement for Developmental Assessments	Conduct feasibility study of Medicaid providing reimbursement for developmental assessments as part of EPSDT.	By the end of Year 1, feasibility study of Medicaid providing reimbursement for developmental assessments as part of EPSDT conducted.	Report generated with recommendations for Medicaid providing reimbursement for developmental assessments as part of EPSDT.		
<b>PARTNERING ORGANIZATIONS:</b>	<b>OTHER INPUTS (contracts, other grant awards, matching funds):</b>	Children from birth to age five and their families		Identify mechanisms for Medicaid reimbursement of developmental assessments and implement appropriate and feasible recommendations.	By the end of Year 2, identified mechanisms for Medicaid reimbursement of developmental assessments and implemented appropriate and feasible recommendations.	Appropriate and feasible recommendations for Medicaid reimbursement of developmental assessments are implemented.		

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<b>Build Ohio:</b> Systems Planning Task Force Member.	The SECCS Project Director will work on the project 25% of the time (i.e., 10 hours/week), but payment of her salary will not include any SECCS funding. The salary will be split 50% between Temporary Assistance to Needy Families via an interagency agreement with Ohio Dept. of Job and Family Services and the U.S. Dept. of Education Part C.	Early Childhood Professionals	Social-Emotional Development Tool Kit	Identify, review and develop materials (tool kits) addressing social-emotional development in young children for use by a variety of professionals.	By the end of Year 2, tool kit created by group of early childhood professionals and state agency stakeholders.	Tool kit created by group of early childhood professionals and state agency stakeholders.		
<b>Ohio Chapter of American Academy of Pediatrics:</b> Systems Planning Task Force Member. Works in collaboration with ODH to provide education, communication and material dissemination to their members.	Funding for the HCCO-Child Care Health Consultant (CCHC) network is obtained from the Child Care Development Block Grant via an interagency agreement with the Ohio Dept. of Job and Family Services, the MCH Block Grant, and the U.S. Dept. of Education Part C funds.	Early Childhood Professionals			By the end of Year 2, tool kit rated as effective through participant (professionals who work with young children) evaluation survey.		Tool kit rated as effective through participant (professionals who work with young children) evaluation survey.	
<b>Ohio Child Care Resource and Referral Association:</b> Systems Planning Task Force Member. The current vendor for the Child Care Health Consultant network. This organization will also provide outreach and education to all resource and referral staff in Ohio. The local resource and referrals house the ASQ and ASQ-SE packets for use and copying by child care providers.	The ASQ and ASQ-SE training has been funded through U.S. Dept. of Education Part C funds and Child Care Development Block Grant funds (though SECCS grant funds will be used for its evaluation).	Parents and Early Childhood Professionals		Distribute tool kits addressing social-emotional development in young children to parents and a variety of professionals who work with children.	By the end of Year 3, tool kits addressing social-emotional development in young children distributed to parents and a variety of professionals who work with children.	Three hundred tool kits addressing social-emotional development in young children distributed to parents and a variety of professionals who work with children.		
<b>Ohio Department of Job and Family Services, Bureau of Child Care Development:</b> Systems Planning Task Force Member. Provides programmatic and regulatory oversight to all out-of-home settings. The child care quality initiatives are funded and led by this state agency.	Child Care Plus training will be funded in State Fiscal Year 2005 through Part C funds and Child Care Development Block Grant funds, though SECCS funds will be used for expansion.	Parents and Early Childhood Professionals		Provide training on the use of tool kits addressing social-emotional development in young children to parents and a variety of professionals who work with children.	By the end of Year 2, training provided to parents and a variety of professionals on the use of tool kits addressing social-emotional development in young children.	Trainings for parents and a variety of professionals who work with children are presented in 4 regions of the state.		
<b>Ohio Department of Mental Health:</b> Systems Planning Task Force Member. The programmatic lead for the Access to Better Care (ABC) Initiative and the Early Childhood Mental Health (ECMH) Initiative.	Contractual: Program evaluation of the Healthy Child Care Ohio Child Care Health Consultant network: \$26,900.	Parents and Early Childhood Professionals			By the end of Year 2, increased the knowledge among parents and early care and education providers about strategies to manage children with challenging behaviors.	Increased knowledge among parents and early care and education providers about strategies to manage children with challenging behaviors.		
<b>Bureau for Children with Medical Handicaps (BCMh):</b> Systems Planning Task Force Member. BCMh is the lead for the medical home initiative, however their focus remains on Children with Special Health Care Needs (CSHCN). SECCS will support their activities through staff participation in workgroups to determine how their efforts can be integrated with other systems, including expansion to all children.	Contractual: Evaluation of the Ages and Stages Questionnaire-Social Emotional (ASQ-SE) training effort: \$9,000.	Early Care and Education Providers		Provider Training on the Triple P Program	Provide training on using the Triple P program (Positive Parenting Program) to 20 early care and education providers annually.	By the end of Year 2, increased the number of group activities for parenting education using the Triple P curriculum.	Increased number of group activities for parenting education using the Triple P curriculum.	
Children's Defense Fund; Ohio Family and Children First; Family members; Every Child Succeeds; Rocking Horse Center; Ohio Head Start Association; United Way of Greater Cincinnati; Ohio Federation for Children's Mental Health; Voices for Cleveland's Children; Ohio Association for the Education of Young Children: Systems Planning Task Force Members.	Contractual: Expansion of the Project Open House training to include children with special health care needs in group child care settings. This would allow an additional 70 child care providers to receive training about including children with special health care needs in the out-of-home setting: \$20,000.	Early Care and Education Professionals		Provider Training on Social-Emotional Development Screenings	Continue and expand the Ages and Stages Questionnaire (ASQ) and the Ages and Stages Questionnaire - Social-Emotional (ASQ-SE) training for early care and education professionals and home visitors regarding screening young children for delays in development and social-emotional development.	By the end of Year 3, early care and education professionals trained on ASQ and ASQ-SE.	Four hundred early care and education professionals trained on ASQ and ASQ-SE annually.	

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	Contractual: Support a portion of a contract to research the use of Early Periodic Screening, Detection, and Treatment (EPSDT) as a resource for child development screening/assessment and related activities: \$5,000.	Home Visitors	Provider Training on Social-Emotional Development Screenings	Continue and expand the Ages and Stages Questionnaire (ASQ) and the Ages and Stages Questionnaire - Social-Emotional (ASQ-SE) training for early care and education professionals and home visitors regarding screening young children for delays in development and social-emotional development.	By the end of Year 3, Help Me Grow home visitors trained on ASQ and ASQ-SE.	Three hundred Help Me Grow home visitors trained on ASQ and ASQ-SE annually.			
	Contractual: Five regional meetings to allow for networking and discussion among county coordinators of EPSDT, Help Me Grow Project Directors, HCCO Child Care Health Consultants, and Nursing Managers of Public Health Nursing Departments: \$6,000 (5 meetings @ \$1200 each).	Early Care and Education Professionals and Home Visitors		By the end of Year 3, increased the knowledge among early care and education providers and home visitors about screening young children for delays in development and social-emotional development.	Increased knowledge among early care and education providers and home visitors about screening young children for delays in development and social-emotional development.				
		Children from birth to age five		By the end of Year 3, increased the number of children routinely and appropriately screened and referred for socio-emotional development.	Increased number of children routinely and appropriately screened and referred for socio-emotional development.				
		New Mothers		New mothers are screened by HMG home visitors for depression and referred for appropriate services.	By the end of Year 1, screenings are conducted in 6 pilot counties, and 100 new mothers are screened.	Screenings are conducted in 6 pilot counties, and 100 new mothers are screened.			
		New Mothers			By the end of Year 2, screenings are expanded to 6 more counties, and 100 additional new mothers are screened.	Screenings are expanded to 6 more counties, and 100 additional new mothers are screened.			
		Early Childhood Key Stakeholders		Nurses continue to provide free training and consultation to early childhood key stakeholders regarding children's health and safety issues using the publication: <i>Caring for Our Children</i> .	By the end of Year 3, free training and consultation regarding children's health and safety issues provided by nurses to key stakeholders.	One thousand consultations regarding health and safety issues for children conducted annually by nurses.			
		First Steps Program Specialists		Maintenance of the HCCO CCHC Network	Develop a health component for use by First Steps specialists with infant and toddler programs.	By the end of Year 1, the health component was developed through HCCO-CCHC network for use by First Steps specialists in infant and toddler programs.	Health component developed through HCCO-CCHC network for use by First Steps specialists in infant and toddler programs.		
		First Steps Program Specialists			By the end of Year 1, improved Infant and Toddler Environmental Rating Scale (ITERS) scores on relevant health issues and indicators.	Improved ITERS scores on relevant health issues and indicators.			
		Parents of young children			Nurses attend community fairs and provide all parents with education related to health and safety for young children.	By the end of Year 3, nurses attended community fairs and provided all parents with education related to health and safety for young children.	HCCO nurses participated in at least nine community fairs.		
		CCHC Network Members	Conduct quality improvement evaluation of CCHC network to determine its effectiveness and need for expansion.	By the end of Year 2, a quality improvement evaluation conducted of the CCHC network to determine its effectiveness and need for expansion.	Report generated on the CCHC network with recommendations for improvement and expansion.				

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		HCCO Network Members	Nutrition Component of the HCCO Network	Continue the nutrition component of the HCCO network through licensed/registered dietitians providing free consultation and training regarding nutrition and obesity prevention in two regions of the state.	By the end of Year 3, licensed/registered dietitians provided free consultation and training regarding nutrition and obesity prevention in two regions of the state.	A minimum of 150 consultations/trainings on nutrition and obesity prevention completed annually by licensed/registered dietitians.		
		HCCO Network Members		Conduct quality improvement evaluation of HCCO network to determine its effectiveness and need for expansion.	By the end of Year 2, a quality improvement evaluation conducted of the HCCO network to determine its effectiveness and need for expansion.	Report generated on the HCCO network with recommendations for improvement and expansion.		
		Parents of young children		Licensed/registered dietitians attend community fairs and provide all parents with education and resources related to nutrition and obesity prevention.	By the end of Year 2, licensed/registered dietitians attended community fairs and provided all parents with education and resources related to nutrition and obesity prevention.	HCCO dietitians participated in at least four community fairs.		
		Child Care Providers and Licensing Specialists	National Health and Safety Standards for Out-of-Home Care	Provide training from the National Resource Center for Health and Safety in Child Care to child care providers and licensing specialists regarding national health and safety performance standards for out-of-home care.	By the end of Year 2, training provided from the National Resource Center for Health and Safety in Child Care to child care providers and licensing specialists regarding national health and safety performance standards for out-of-home care.	Training presented for 200 participants regarding national health and safety performance standards for out-of-home care.		
		Child Care Providers and Licensing Specialists		Distribute copies of <i>Stepping Stones</i> (focused on national health and safety performance standards for out-of-home care) to child care providers and licensing specialists.	By the end of Year 2, copies distributed of <i>Stepping Stones</i> to child care providers and licensing specialists.	Two hundred copies of <i>Stepping Stones</i> distributed to child care providers and licensing specialists.		
		Step-Up to Quality Initiative Participants	Child Care Improvement Initiatives	Support and partner with the Step-Up to Quality initiative by offering health and safety consultation to programs in the initiative.	By the end of Year 3, providers reported changes in child care practice and/or policy.	The number of providers who report changes in child care practice and/or policy.		
		Step-Up to Quality Initiative Participants		Support and partner with the Step-Up to Quality initiative by offering health and safety consultation to programs in the initiative.	By the end of Year 3, CCHCs contacted and offered consultation to programs participating in the initiative.	CCHCs contacted and offered consultation to 100% of programs participating in the initiative.		
		First Steps Initiative Participants	Child Care Improvement Initiatives	Support and partner with the First Steps Initiative by offering health and safety consultation to programs in the initiative.	By the end of Year 3, CCHCs contacted Infant-Toddler Specialists serving their region.	CCHCs contacted 100% of Infant-Toddler Specialists serving their region.		
		First Steps Initiative Participants			By the end of Year 3, CCHCs offered consultation to child care programs assigned to "high intervention" category.	CCHCs offered consultation to 100% of child care programs assigned to "high intervention" category.		
		CSHCN Providers	Child Care Programs for CSHCN	Conduct Child Care Plus training for 20 persons who will each provide training and/or technical assistance (TA) for 25 child care providers.	By the end of Year 1, conducted Child Care Plus training for 20 persons who will each provide training and/or technical assistance (TA) for 25 child care providers.	Twenty master trainers are trained, and 300 child care providers are provided with training/TA.		
		CSHCN Providers		Consider use of the University of Toledo's Project Open House pending ODJFS approval.	By the end of Year 2, use of the University of Toledo's Project Open House was considered, pending ODJFS approval.	Project Open House piloted in two counties, pending ODJFS approval.		
		CSHCN Providers		Continue providing training/TA utilizing the Child Care Plus curriculum.	By the end of Year 3, continued providing training/TA utilizing the Child Care Plus curriculum.	Training/TA provided to 300 additional child care providers utilizing the Child Care Plus curriculum.		

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		SECCS Key Stakeholders	Coordination between MCH Agency and Other Planning Initiatives	Maintain active leadership and/or membership on boards and committees, including ODJFS Day Care Advisory Council, Build Ohio, and Ohio's School Readiness Initiative.	By the end of Year 1, active leadership and/or membership maintained on boards and committees, including ODJFS Day Care Advisory Council, Build Ohio, and Ohio's School Readiness Initiative.	Active membership maintained on boards and committees, including ODJFS Day Care Advisory Council, Build Ohio, and Ohio's School Readiness Initiative.		
		SECCS Task Force Members		Update SECCS Task Force members on project activities and invite members to provide ongoing input.	By the end of Year 1, SECCS Task Force members were updated on project activities and invited to provide ongoing input.	Email updates sent to all Task Force members semi-annually.		
		Parents of young children from birth to age 5 and Child Care Providers	Parent/Provider Education Regarding the Healthy Development of Young Children	Disseminate educational materials to parents and child care providers on Infant Toddler Guidelines promoting the healthy development of young children.	By the end of Year 2, Educational materials disseminated to parents and child care providers on Infant Toddler Guidelines promoting the healthy development of young children.	Two thousand copies of the Infant Toddler Guidelines and other educational materials disseminated.		
		Parents of young children from birth to age 5 and Child Care Providers		Provide training to parents and child care providers on Infant Toddler Guidelines promoting the healthy development of young children.	By the end of Year 2, training provided to parents and child care providers on Infant Toddler Guidelines promoting the healthy development of young children.	Six trainings conducted throughout the state for 300 participants, including child care providers, home visitors, families and community professionals.		
		Children from birth to age five and their families		Home visitors will continue to provide parents with social-emotional development education using the Parents As Teachers "Born to Learn" (PAT BTL) Curriculum.	By the end of Year 1, home visitors provided parents with social-emotional development education using the Parents As Teachers "Born to Learn" (PAT BTL) Curriculum.	PAT BTL curriculum utilized with 4000 children and their parents.		
		Parents of young children		Submit funding request to Ohio Children's Trust Fund to pilot PAT group sessions for all parents in a community setting.	By the end of Year 1, submitted funding request to Ohio Children's Trust Fund to pilot PAT group sessions for all parents in a community setting.	PAT group sessions are piloted in two community settings, and 15 group sessions are conducted.		
		Parents of young children		If original PAT group sessions pilot is successful, then expand pilot to two more community settings.	By the end of Year 2, expand PAT group sessions pilot to two more community settings.	PAT group sessions pilot is expanded to two more community settings, and 15 additional PAT BTL group sessions are conducted.		
		Parents of young children		If expanded PAT group sessions pilot is successful, then further expand pilot to two more community settings.	By the end of Year 3, expand PAT group sessions pilot to two more community settings.	PAT group sessions pilot is expanded to two more community settings, and 15 additional PAT BTL group sessions are conducted.		
		Children from birth to age five and their families		Launch and maintain revised Help Me Grow website.	By the end of Year 3, the revised Help Me Grow website is launched and maintained.	The revised Help Me Grow website is launched and maintained.		
		Children from birth to age five and their families		Support Build Ohio's public awareness/messaging campaign.	By the end of Year 3, one thousand copies of "Early Years Last a Lifetime" materials are printed and distributed to families, early care and education professionals, businesses and school professionals.	One thousand copies of "Early Years Last a Lifetime" materials are printed and distributed to families, early care and education professionals, businesses and school professionals.		
		Parents of young children		Support development of Ohio Head Start Collaboration Office's parent information network website (OH-PIN).	By the end of Year 1, resources and links are provided to OH-PIN.	Resources and links are provided to OH-PIN.		
		Children from birth to age five and their families		Support the Strengthening Families initiative.	By the end of Year 1, "Preventing and Responding to Challenging Behaviors in Children" training is promoted to child care providers and families via HCCO and HMG.	"Preventing and Responding to Challenging Behaviors in Children" training is promoted to child care providers and families via HCCO and HMG.		

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		Children from birth to age five and their families		Continue to promote and maintain 1-800-755-GROW, a free hotline that includes information on multiple programs and local resources for families of young children in Ohio.	By the end of Year 3, the 1-800-755-GROW statewide hotline is promoted and maintained.	The 1-800-755-GROW statewide hotline is promoted and maintained.		
		Parents of young children	Parent/Provider Education Regarding the Healthy Development of Young Children	Continue to distribute the HMG Wellness Guide, a free publication for families and parents-to-be.	By the end of Year 3, 150,000 copies of the HMG Wellness Guide are distributed to families through HMG, community fairs, medical facilities and private businesses.	150,000 copies of the HMG Wellness Guide are distributed to families through HMG, community fairs, medical facilities and private businesses.		
		Children from birth to age five and their families		Establish new partnership with two regional PBS stations and support their "Parenting Counts: A Focus on Early Learning" initiative.	By the end of Year 3, twenty-five trainings are conducted by PBS stations.	Twenty-five trainings are conducted by PBS stations.		
		Early Childhood System	Sustainability	Continue the early childhood partnerships developed throughout the implementation process beyond the end of the grant period.	By the end of Year 3, increased resources (e.g., financial, administrative, program support) available to continue the SECCS project beyond the end of the grant period.	Increased resources (e.g., financial, administrative, program support) available to continue the SECCS project beyond the end of the grant period.		
		Early Childhood System	Evaluation	Achieve project goals and objectives within the project's timeline.	By the end of Year 3, achieved project goals and objectives within the project's timeline.	Achieved project goals and objectives within the project's timeline.		