

**Logic Model for SECCS Grant Program:  
The Puerto Rico Early Childhood Comprehensive Systems (SECCS) Statewide Plan/United for the Early Childhood**

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> (for the first year of the project): <b>\$140,000</b> <b>TOTAL PROJECT BUDGET:</b> (for the first year of the project): <b>\$140,000</b>	Families of Children Aged 0-5		Administer a Satisfaction Survey, starting and ending the first year of implementation, to 70 families with children aged 0-5 years old.	At the beginning and ending of Year 1, administered a satisfaction survey to 70 families with children aged 0-5 years old.	Conducted the pre- and post- satisfaction surveys of families with children aged 0-5.		
The lead organization (lead fiscal agency) for the implementation project is the <b>Puerto Rico Department of Health (DOH)</b> . For the SECCS Project, the DOH will share human resources for data collection; educate service providers from different agencies; share project information with early childhood programs; coordinate among programs with similar goals; and offer experience with infrastructure development.	<b>PROJECT INPUTS (i.e., personnel and non-personnel)</b>	Health Providers  Medical Homes		Administer a Self-Evaluation Survey to health providers, at the beginning and ending of the first year of implementation.	At the beginning and ending of Year 1, administered a Self-Evaluation Survey to health providers.	Conducted the pre- and post- self-evaluation surveys of health providers.		
<b>State Early Childhood Comprehensive Systems (SECCS) Project:</b> Following a retreat held for participating SECCS agencies/organizations (e.g., legislators, governmental agency representatives, providers, families, and faith-based ministries) in early 2006, MOUs with agency directors or representatives were formalized detailing project roles and responsibilities. There has also been identification of the need to network among agencies and develop a communication system for all (required by the project's Strategic Plan). In developing the Strategic Plan, the following goals and objectives were laid out for the SECCS project:	<b>Personnel:</b>	Health Providers; Families of Children Aged 0-5		Establish a baseline with the results of the surveys (at the beginning of the first year of implementation), and compare with data at the end of the first year of implementation to develop statistics data.	By the end of Year 1, established a baseline with the results of the surveys (at the beginning of the first year of implementation), and compare with data at the end of the first year of implementation to develop statistics data.	Interpreted the results of the data's surveys, tables, and graphics.		
<b>Project goals:</b> 1) Assure access to health insurance and the medical home; 2) Assure that children at environmental risk or CSHCN receive comprehensive and on-time services through the Early Intervention System, Early Head Start/Head Start (EHS/HS) and/or day care centers; 3) Empower direct service providers to support the healthy social-emotional development in early childhood; 4) Provide education to families so that they can recognize the healthy social-emotional development in early childhood; 5) Educate and support day care providers to understand and promote positive development in early childhood and its relation to high-quality services; 6) Education and support parents and families in understanding and promoting the positive development for early childhood; and, 7) Assure that SECCS and services fulfill family needs.	SECCS Project Coordinator: \$45,000	Health Providers	Screening Instruments	Train health providers on the use of the screening instrument, Ages and Stages.	By the end of Year 1, trained health providers on the use of the Ages and Stages screening instrument.	Trained health providers on the use of the Ages and Stages screening instrument.		

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<p><b>Project Objectives:</b> (1a) Promote that 0-5 year old children receive health services through medical homes; (1b) Promote that all 0 to 5 year old children have a medical insurance plan; (1c) Adopt the use of "Ages and Stages" to detect early developmental delays through medical homes, day care centers and EHS/HS programs; (1d) Increase the number of children with disabilities/delays in Head Start and Special Education Pre-school programs that have participated in Early Intervention Services; (1e) Promote that pregnant women receive prenatal care starting in the first trimester; and (1f) Promote that pregnant women obtain high school diplomas. (2a) Promote at-risk children and/or CSHCN receiving health services through the medical home; (2b) Promote screening through medical homes, day care centers, EHS and HS to detect maternal depression, ADHD, abuse and neglect, Pediatric Symptomatic Check, TWEAK, hearing and vision;</p>	SECCS Project Administrative Assistant: \$10,956	Health Providers	Screening Instruments						
					Train health providers on the use of the screening instrument, Ages and Stages.	By the end of Year 1, trained health providers on the use of the Ages and Stages screening instrument.	Provided certificates of continuing education credits to health providers trained on the use of the Ages and Stages screening instrument.		
<p>(2c) Promote the use of Fluoride varnish application to use over children's teeth (0-4 year-olds); (2d) Identify low birth weight (less than 2,500 grams) in WIC programs to assure that their physical, emotional and spiritual needs are met; (2e) Identify all children in poverty to assure that their physical, emotional and spiritual needs are met; (2f) Identify all children in WIC programs with incarcerated parents to assure that their physical, emotional, and spiritual needs are met. (3a) Require continued education credits on healthy social-emotional development in early childhood for direct services providers in medical homes, day care centers, and EHS/HS. (4a) Offer education in PAN and WIC waiting rooms; (4b) Prepare training modules with social-emotional development information; and (4c) Develop a plan for the use of audiovisual material identified in a day care center and other interested agencies regarding healthy social-emotional development.</p>	Families Advocate: \$12,000	Health Providers	Screening Instruments						
				Train health providers on the use of the maternal depression screening instrument.	By the end of Year 1, trained health providers on the use of the maternal depression screening instrument.	Increased the numbers of maternal depression screening instruments administered.			
<p>(5d) Require continuous education to day care providers over positive development in early childhood; and(5e) Assure that curriculum objectives in EHS/HS are delivered and obtained in the areas of reading and math. (6a) Establish education programs for families to be offered locally at service centers such as medical and dental homes, day care centers, EHS/HS, community-based organizations, and local churches; (6b) Parents read to their children before going to bed; (6c) Increase the opportunities for learning about positive values for families; and (6d) Parents receive training in leadership to practice it at home and in the community.</p>	Nurse: \$29,904								
						Increased the number of mothers with children less than 6 years of age who were identified as experiencing depression post-partum.			

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(7a) Families informed consumers of health, mental health, dental, day care centers, and EHS/HS services; (7b) Services rendered through medical homes and mental services coordinated for both children and families, and that every family has as service coordinator; (7c) Determine the number of families that request and access services through SECCS; (7d) Basic needs (e.g., food, housing, and clothing) for children aged six years-old or less are met.	Fringe Benefits (e.g., social security, medical pan, state insurance fund): \$16,044	Health Providers	Screening Instruments	Train health providers on the use of the "alcohol use in the pregnant woman" screening instrument.	By the end of Year 1, trained health providers on the use of the "alcohol use in the pregnant woman" screening instrument.	Increased the numbers of "alcohol use in the pregnant woman" screening instruments administered.		
<b>ENVIRONMENT:</b>	<b>Non-Personnel:</b>					Increased the number of mothers at risk who were identified for alcohol consumption.		
Though the majority of Puerto Rico's population is insured (98%), a large majority are still underinsured. Services are not accessible to part of this population, especially to the most vulnerable populations (e.g., mothers and children) living below the poverty level. Physicians' information about existing government services for children is also scarce and fragmented. In a recent questionnaire given to physicians about the medical home, they reported that only 50% have information about care coordination; 30% have home care information; and 20% know about respite care.	Staff travel: \$3,500	Dental Pediatric Services Personnel	Medical Homes	Train personnel on the medical home for dental pediatrics services (including the use of fluoride varnish over the teeth of children under six years old).	By the end of Year 1, trained personnel on the medical home for dental pediatrics services (including the use of fluoride varnish over the teeth of children under six years old).	Provided a list of participants for the training offered by the Dental Home of Belaval Center.		
There is also a resistance of primary care physicians to refer kids for specialty services due to capitation constraints. Mental health services and providers are limited for children aged 4 years and older. There are challenges to achieving MCHB's goal that every child with special health care needs (CSHCN) has a medical home. Additionally, other areas in need of improvement include: family participation; parental education; integration of the community into the state's efforts.	Equipment: \$0	Uninsured Children Aged 0-5	Uninsured Children	Identify annually the percentage of uninsured children aged 0 to 5 to establish a baseline for developing statistics data.	By the end of Year 1, identified annually the percentage of uninsured children aged 0 to 5 to establish a baseline for developing statistics data.	Decreased the percent of children under 6 years old without health insurance.		
<b>PARTNERING ORGANIZATIONS:</b>	Supplies: Provided by the state	Children Aged 0-3 in Special Education	Early Intervention System	Identify children in special education without a history of enrollment in the early Intervention System of Services.	By the end of Year 1, identified children in special education without a history of enrollment in the early Intervention System of Services.	Increased the percent of 0 to 3 year-olds with developmental problems who participate in Early Intervention System Services.		

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<b>Department of Health (DOH):</b> Share human resources for data collection; educate service providers from different agencies; share project information with early childhood programs; coordinate among programs with equal goals; and offer experience with infrastructure development.	Indirect Costs: \$2,596	Children Aged 0-5	Screening Instruments	Use a social-emotional development screening instrument with children under 6 years old.	By the end of Year 1, used a social-emotional development screening instrument with children under 6 years old.	Increased the number of social-emotional development screening instruments administered.		
<b>Women, Infants and Children Program (WIC):</b> Share human resources for data collection; and offer education to families concerning critical subjects (e.g., obesity, breast-feeding).	<b>OTHER INPUTS (contracts, other grant awards, matching funds):</b>					Increased the number of kids (under 6 years old) that were referred to evaluation and treatment.		
<b>Head Start State Collaboration Office (HSSCO)/Early Head Start/Head Start (EHS/HS):</b> Share human resources for data collection; and offer the Fatherhood Project curriculum to other agencies that have direct service programs for these families.	Promotional Materials: \$1,500	Direct Services Providers		Train direct services providers on the use of a social-emotional screening instrument.	By the end of Year 1, trained direct services providers on the use of a social-emotional screening instrument.	Increased the number of direct service providers trained on the use of a social-emotional screening instrument.		
<b>Department of Education:</b> Share enrollment data to the Special Education Program; and facilitate the transition from Part C to Part B.	Training Participant Meals: \$3,000 (for pediatricians regarding the Medical Home)	Direct Services Providers	Early Childhood Social-Emotional Development and Mental Health	Train direct services providers on continued education on the healthy social-emotional development and mental health in early childhood.	By the end of Year 1, trained direct services providers on continued education on the healthy social-emotional development and mental health in early childhood.	Increased the number of direct service providers with certificates of Continuing Education Credits.		
<b>Mental Health:</b> Identify service resources and mental health programs for the families of children aged 0 to 5 years old; adopt the PSC as a screening instrument; and require PSC screening.	Steering Committee Family Participation Incentives: \$2,000	State Agencies	Training	Establish training of personnel through inter-agency agreements (MOUs).	By the end of Year 1, established training of personnel through inter-agency agreements (MOUs).	Increased the number of signed MOU documents.		
<b>Child Care/Healthy Child Care America (HCCA):</b> Share human resources for data collection; and share trainers and consultant resources among all agencies who offer direct services to early childhood.	Steering Regional Committee Meetings: \$2,000 (includes meals, cost of copying materials)	General Public; State Agencies	Early Childhood Social-Emotional Development and Mental Health	Establish for the distribution of informative and educational material about the healthy social-emotional development in early childhood through inter-agency agreements (MOUs).	By the end of Year 1, established for the distribution of informative and educational material about the healthy social-emotional development in early childhood through inter-agency agreements (MOUs).	Increased the number of signed Agreements (MOUs).		
<b>Private Legal System:</b> Support families by making accessible information on the availability of free legal services resources; and provide resources for minors' defense rights.	Parent Educational Materials: \$3,500					Increased the number of brochures, newsletters, and articles about healthy social-emotional development in early childhood.		
<b>CBO:</b> Make a list of key persons to offer training; offer direct service referrals to those agencies identifying high-risk cases; and serve as a facilitator in identifying community resources.	Community Outreach conferences: \$2,000	Early Care and Education Providers	Training	Train early care and education providers on the use of the Ages and Stages screening instrument.	By the end of Year 1, trained early care and education providers on the use of the Ages and Stages screening instrument.	Increased the number of Ages and Stages screening instruments administered.		
<b>Faith-Based Ministries:</b> Offer education in values and healthy lifestyles to families with children aged 0-5.	Publicity/Mass Media Campaigns: \$2,000					Increased the number of Certificates of Continuing Education Credits offered.		

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<b>Private Collaborators:</b> Serve as a resource for the development and implementation of a marketing and communication plan for the SECCS Plan; and collaborate for system survey distribution and analyses.	Video Production: \$4,000 (for families on Medical Home benefits)	Nurses; Social Workers; Early Care and Education Center Workers	Training			Provided an attendance list of nurses, social workers, or responsible persons in early care and education centers that attended training.					
<b>American Academy of Pediatrics (AAP):</b> Share human resources for data collection; and inform physicians of medical home developments.	In-kind staff: Approximately, \$27,692 (10% time for: the Division Director; the Coordinator for CSHCN; Evaluator; Information System Administrator; and Epidemiologist); will also donate administrative costs related to telephones, office supplies, copier/fax, etc.					Train nurse, social workers, or persons responsible in early care and education centers on the use of the maternal depression self-screening instrument.	By the end of Year 1, trained nurse, social workers, or persons responsible in early care and education centers on the use of the maternal depression self-screening instrument.	Increased the number of maternal depression self-screening instruments administered.			
<b>ASES:</b> Provide data information concerning quality and utilization of health services in GHP; serve as the quality auditing agency for health care plans and provide direct education to professionals; and provide health services to children 0 to 5 years of age through medical health plans, and in coordination with the DOH.						Train nurse, social workers, or persons responsible in early care and education centers on the use of the maternal depression self-screening instrument.	By the end of Year 1, trained nurse, social workers, or persons responsible in early care and education centers on the use of the maternal depression self-screening instrument.	Increased the number of recommendations of mothers with children less than 6 years old who are identified as experiencing depression post-partum or are at-risk for alcohol consumption to visit her primary doctor (Medical Home) and keep a registry for follow-up.			
<b>University of Puerto Rico School of Odontology:</b> Provide research information with pertinent studies for early childhood; and collaborate in the development of dental homes.								Provided an attendance list of nurses, social workers, or responsible persons in early care and education centers that attended training.			
<b>APNI:</b> Serve as lobbying liaison with the Legislature for System; education provider for families with children with special health care needs (CSHCN); and collaborate as an interagency advisor.						Nurses; Social Workers; Early Care and Education Center Workers	Train nurse, social workers, or persons responsible in early care and education centers on the "alcohol use in the pregnant woman" self-screening instrument.	By the end of Year 1, trained nurse, social workers, or persons responsible in early care and education centers on the "alcohol use in the pregnant woman" self-screening instrument.	Increased the number of mothers at risk that have been identified for alcohol consumption.		
<b>Labor Department:</b> Provides information to families regarding work programs.								Increased the number of recommendations of mothers with children less than 6 years old who are identified as experiencing depression post-partum or are at-risk for alcohol consumption to visit her primary doctor (Medical Home) and keep a registry for follow-up.			
<b>United Way of Puerto Rico:</b> Provide meeting space for SECCS; provide a website for the SECCS directory and information line; provide training in child care practices; and serve as a lobbying liaison with the Legislature for the system.		Healthy Child Care America/Child Care Health Consultants	Healthy Child Care America	Use the Healthy Child Care America (HCCA) Standards.	By the end of Year 1, used the Healthy Child Care America (HCCA) Standards.	Used the National Training Institute's Child Care Health Consultant (CCHC) instrument with the HCCA Standards.					
<b>Family Advocate:</b> Provide and promote participation of focus groups and data collection; and provide access to family voices.		Day Care Providers; Early Care Educators	Training	Train day care providers and early care educators on the Child Care Health Consultant (CCHC) program.	By the end of Year 1, trained day care providers and early care educators on the Child Care Health Consultant (CCHC) program.	Offered the attendance list of day care providers and early care educators attending CCHC training.					

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Education Foundation for the Holistic Development of Early Childhood: Serve as a means of communication (through the local newspaper) for the System; and oversee development of a curriculum for child care promoters.		Day Care Providers; Early Education Teachers; Teachers' Assistants	Early Care and Education	Offer continuous education to day care providers, early education teachers, and teachers' assistants on early literacy, appropriate practices in early childhood centers, children's development, and health in early education programs and child care.	By the end of Year 1, offered continuous education to day care providers, early education teachers, and teachers' assistants on early literacy, appropriate practices in early childhood centers, children's development, and health in early education programs and child care.	Increased the number of Continuous Education certificates offered.			
Legislators				Families and Communities in Each of the Seven Health Regions	Establish a Regional Board at each of the seven health regions to identify resources, services, needs, barriers, solutions, and success relations with the services to early childhood.	By the end of Year 1, established a Regional Board at each of the seven health regions to identify resources, services, needs, barriers, solutions, and success relations with the services to early childhood.	Provided certificates of participation in conference, seminars, symposiums, and workshops related to various topics.		
		General Public	Early Childhood Public Awareness Campaign	Establish a sub-committee to leverage a public awareness campaign about the worth of Early Childhood Development.	By the end of Year 1, established a sub-committee to leverage a public awareness campaign about the worth of Early Childhood Development.	Provided a meeting notice, agenda, and attendance list for the subcommittee established to leverage a public awareness campaign about the worth of Early Childhood Development.			
				Conduct a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers to detect developmental delays, maternal depression, and alcohol use in pregnant women.	By the end of Year 1, conducted a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers to detect developmental delays, maternal depression, and alcohol use in pregnant women.	Increased the number of announcements on billboards, radio, TV and newspapers regarding the importance of using screening instruments.	Offered participation in conferences and disseminated information at symposiums and conferences.		
				Conduct a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers to provide an orientation to families on the importance of receiving services in a medical home.	By the end of Year 1, conducted a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers to provide an orientation to families on the importance of receiving services in a medical home.	Increased the number of announcements on billboards, radio, TV and newspapers regarding the importance of using screening instruments.	Offered participation in conferences and disseminated information at symposiums and conferences.		
				Conduct a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers on the importance of pregnant women receiving prenatal care starting in the first trimester.	By the end of Year 1, conducted a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers on the importance of pregnant women receiving prenatal care starting in the first trimester.	Increased the number of announcements on billboards, radio, TV and newspapers regarding the importance of using screening instruments.	Offered participation in conferences and disseminated information at symposiums and conferences.		
				Conduct a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers on the vital significance of administering developmental screening during well-child visits.	By the end of Year 1, conducted a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers on the vital significance of administering developmental screening during well-child visits.	Increased the number of announcements on billboards, radio, TV and newspapers regarding the importance of using screening instruments.	Offered participation in conferences and disseminated information at symposiums and conferences.		

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		General Public	Early Childhood Public Awareness Campaign	Conduct a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers to empower parents as the first educator of their kids.	By the end of Year 1, conducted a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers to empower parents as the first educator of their kids.	Increased the number of announcements on billboards, radio, TV and newspapers regarding the importance of using screening instruments.		
				Offered participation in conferences and disseminated information at symposiums and conferences.				
				Conduct a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers on the importance of school attendance.	By the end of Year 1, conducted a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers on the importance of school attendance.	Increased the number of announcements on billboards, radio, TV and newspapers regarding the importance of using screening instruments.		
				Offered participation in conferences and disseminated information at symposiums and conferences.				
				Conduct a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers on the worth of early literacy in the life of children under six years old.	By the end of Year 1, conducted a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers on the worth of early literacy in the life of children under six years old.	Increased the number of announcements on billboards, radio, TV and newspapers regarding the importance of using screening instruments.		
				Offered participation in conferences and disseminated information at symposiums and conferences.				
				Conduct a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers and that pregnant women obtain high school diplomas.	By the end of Year 1, conducted a public awareness campaign on the importance of using screening instruments in medical homes, day cares, and early education centers and that pregnant women obtain high school diplomas.	Increased the number of announcements on billboards, radio, TV and newspapers regarding the importance of using screening instruments.		
				Offered participation in conferences and disseminated information at symposiums and conferences.				
		Families of Children Aged 0-5	Family Education	Establish an education program for families.	By the end of Year 1, established an education program for families.	Provided an attendance list and curriculum (topics, courses, and workshops) for the education program established for families.		
		Medical Homes; Child Care Centers; Early Education Centers; Parents/Families of Children Aged 0-5	Family Resources and Supports	Provide free distribution of newsletters in medical homes, child care and early education centers, and in waiting rooms to promote the 2-1-1 information line.	By the end of Year 1, provided free distribution of newsletters in medical homes, child care and early education centers, and in waiting rooms to promote the 2-1-1 information line.	Increased the number of calls received by the 2-1-1 information line.		
		Families of Children Aged 0-5		Provide free distribution of a parents' activities guide to encourage the linguistic, physics, motor, social, emotional, creative, and cognitive development in young children.	By the end of Year 1, provided free distribution of a parents' activities guide to encourage the linguistic, physics, motor, social, emotional, creative, and cognitive development in young children.	Increased the number of parents' guides distributed.		
		Children Aged 0-12 months; Parents	Family Education	Establish agreements of collaboration with the program, "Lee y Sueña" (Read and Dream) from the PR-First Lady's Office to promote early literacy.	By the end of Year 1, established agreements of collaboration with the program, "Lee y Sueña" (Read and Dream) from the PR-First Lady's Office to promote early literacy.	Signed a MOU with the Program, "Lee y Sueña".		
		Current Early Childhood Programs/Initiatives	Sustainability	Review current programs and initiatives for funding opportunities.	Reviewed current programs and initiatives for funding opportunities.	Increased knowledge of the current programs and initiatives available island-wide.		
		Current Early Childhood Programs/Initiatives		Seek opportunities to maximize funds from existing sources.	Sought opportunities to maximize funds from existing sources.	Increased use of funding provided from existing sources.		
		SECCS Project		Develop a finance/sustainability plan for the SECCS Project.	Developed a finance/sustainability plan for the SECCS Project.	Developed a finance/sustainability plan for the SECCS Project.		