



**M.K. Gandhi Institute
for Nonviolence**

Strategic Planning Final Report

Prepared for the Whole Child Initiative

By Gwendolyn Olton
Co-Executive Director
MK Gandhi Institute for Nonviolence

Introduction

On October 19 and 20, 2023 facilitators from the MK Gandhi Institute for Nonviolence (MKGI) conducted a strategic planning session using Appreciative Inquiry for and with the Whole Child Health Initiative. The purpose of this report is to summarize the content of the two days and provide recommendations for next steps.

About Appreciative Inquiry

Appreciative Inquiry (AI) is both a paradigm and strategic methodology for discovering what is working well within a group or system, and building on strengths to work towards a shared vision. This process assists groups in gaining clarity about their preferred future state as well as which steps they will need to take to move towards their vision. Rather than focusing on weaknesses and critique, AI invites creativity and deep-learning to constructively build the world we most want to inhabit. Using an AI approach aligns well with the Whole Child Initiative as it is strength-based, person-centered, and naturally lends itself to solutions-focused actions in the direction of a shared vision. Additionally, because the future-state solutions will be generated by the group, there is a higher likelihood of shared accountability with proposed action steps. To support effective, connecting, and collaborative planning, MKGI facilitators used the standard “5D” process of AI - Define, Discover, Dream, Design, and Deliver, with some modifications and adjustments specific to this convening.

Modifications and Limitations to AI in this Convening

Due to the specific constraints of this convening, some modifications were made to the AI process as it is usually delivered. These modifications are outline below:

Planning Team Modifications:

In a typical AI process for large-scale systems change, AI facilitators would create a planning team, or “core team”, composed of members of the group that are part of the change group. These members would meet to plan and deliver the event together as well as any other meetings or process components leading up to the event. These meetings and processes would usually occur at least several months before the primary planning event takes place. Additionally, this team would be responsible for ensuring all aspects of the processes leading up to the event are delivered using an AI approach. Whole Child Initiative was unable to engage with appreciative facilitators until mid-September so a core team was not created.

Multiple Approaches Used:

Additionally, because WCI came to the AI approach after switching from another facilitator and facilitation process, Appreciative Inquiry was not used for all aspects of the planning process or information gathering phases. For example, Parent Cafes and other groups convened for the

purposes of information and input gathering informed the planning process and did not utilize an AI methodology.

Rotating and / or inconsistent participant group:

Finally, in a typical AI process, facilitators and the core team would look to ensure that participants in the strategic planning were consistent and able to attend the entirety of the session. This convening had a number of participants who were only able to come to portions of the event and sometimes were trading off time with a colleague from the same group or organization.

The purpose of naming these deviations from a typical AI process is to provide clarity about what fidelity to an AI model would entail as well as to point to potential aspects of the planning that may be challenging through the Delivery phase in the months following the two-day event. Naming these limitations is not in any way a criticism of the Whole Child Initiative Team who provided as much information and time as was possible given their constraints and the challenges they faced in switching to a different facilitation team.

In the next sections, this report will outline the activities that took place over the course of the two days. All documents and handouts can be found at the end of this report.

Day One Summary

The first day of the event was focused on the Discover and Dream phases of AI. Define was completed prior to the convening with the following purpose and topic:

Purpose: To build strategies for the Whole Child Initiative.

Topic: Child honoring communities and systems at their best.

Below is an expanded outline of the Day One Agenda:

I. Opening and Information Sharing with Whole Child Initiative

The beginning of Day One consisted of several talks with keynote speakers including Dr. Peluso and Commissioner Thalia Wright, followed by information sharing from the work of the Whole Child team prior to the event.

II. Opening with Gandhi Institute Facilitators

To begin the planning section of the day, facilitators from MKGI engaged participants in several warm-up activities. Movement and game-based activities were utilized throughout the course of the event for several purposes: to support relationship building, to increase creative problem-solving skills, and to create opportunities for participants to have fun together. Two games were introduced at this time, the Opposite of Jackson in which a group walks around a

room and is given increasingly challenging tasks of doing the opposite of what a facilitator tells them to do. The second activity invited folks, after forming a circle, to say their names and use a movement to represent how they were feeling or showing up that day, at which point the whole group would repeat their name and the movement three times. Following these warm-up activities, facilitators shared the purpose of the event, expected outcomes, reviewed group agreements, the agenda and logistics for the day, and reviewed the five D processes of AI.

III. Discovery Phase - Appreciative Interviews

Following the opening activities, participants were placed into groups of three and given a handout with appreciative interview questions to use in their small groups. Among other items, the questions ask the interviewees to consider which aspects of the child-serving systems in Rochester they have found supportive or value and what aspects of these systems seem to be working well and benefiting the community. After completing the interview process, participants were then invited to merge their triad with another, forming a group of six. These new groups were then instructed to share highlights from their interviews and listen for themes that stood out to them. The teams were also instructed to place each shared theme they heard on a sticky note as well as select someone to share themes with the whole group. Facilitators then collected these themes on poster papers and arranged them during a lunch break. The themes were divided into two primary categories: 1) How the Systems (we) are at our Best and 2) Ideas for the Future. Themes for each category are listed below:

The Systems at Their Best:

- Collaborative and collective
- Passionate
- Persistent
- Humanizing
- Holistic
- Parent, family, and youth are integral decision makers
- Information flows freely and easily
- Integration and coordination between systems

Ideas for the Future:

- Providers in systems reflect the communities they serve
- There are change agents in every system
- There are healthy corner stores
- There's accessible, affordable, high quality:
 - Programming
 - Childcare
 - Transportation

- Dismantling othering and systems

These themes were displayed on poster paper to be used for the design stage. Following a lunch break, participants were invited into another movement activity and then we proceeded to the Dream phase.

IV. Dream

50 Years in the Future

For the first activity of this phase, facilitators lead the group in a guided, meditative activity called “50 Years in the Future” which is loosely based on an activity from Joanna Macy’s Work that Reconnects. The facilitator reads a script, explaining that the participants have traveled to a future time in which all the positive changes they have been working for have been achieved and all children and families are cared for and are thriving. The group is then invited to imagine a child of this future time asks them a series of questions including, “What did you and others do to change from the old ways to the current world that works for all?” and “How did you find the strength to keep going?”. Participants were then invited to jot some reflections down from this experience to share in small groups. After allowing space for reflections and debriefs we invited participants to think through themes that came up for them during this exercise and their relationship to the themes that emerged in the Discovery Phase. Participants then took a short movement and game break before pivoting to another Dream Phase activity.

Collaborative Zines

A second, visually based activity followed this guided work to continue to elicit participants’ desired future state for this work. Facilitators handed out a number of creative tools such as colorful markers and pens, glue sticks, scissors, and magazines. Facilitators also handed out a photo-copied sheet of paper with sentence stems and instructed participants on how to fold them to create a small “zine”. Zine is short for magazine and is a self-publishing tool for sharing information, ideas, art, and more. Three prompts were used within the zine that stated:

- We know children are thriving when...
- We know families are thriving when...
- We know communities are thriving when...

Folks were instructed to work on visually communicating their response to the sentence stem for eight minutes, at which point, they were directed to pass their zine to their right at their tables and the process was repeated two more times to complete each subsequent page and question prompt. A final, four-minute brief round was used to decorate the front cover. Following the creation stage of these zines, tables spent time reviewing their zines together and then a gallery of all the zines was set up to be explored during the following break. The zines were collected by the Whole Child Initiative team.

V. Design Part I

Following a break and a brief game, facilitators presented a potential list of planning areas developed from the themes collected in the first half of the day as well as information shared from the WCI conveners prior to the event. Participants engaged in a dialogue and brainstorming practice to collect other themes and important areas for planning. They are listed below:

- Economic security
- Root causes of disparities
- Out of school and after school programming
- Maternal health care, especially for Black & Brown families
- Family Court
- Housing
- Community Safety
- Racial Equity
- Re-entry services
- Mental health services
- Early childhood education and literacy
- Early intervention services focused on Black & Brown families
- Special education services in RCSD (linked to early education)
- Childcare
- Remembering history to bridge to the future
- Nutrition and physical activity

After collecting these focus areas, participants wrote their names on post-its and placed them next to content areas they would be excited or willing to plan for during the rest of the Design phase.

VI. Closing

After assessing energy levels for continued work and evaluating the agendas, MKGI facilitators collaboratively decided with the participants to work on the rest of the Design phase during Day Two and begin to close the Day One event. Facilitators gave a preview of the efforts ahead in the next day and more information about what the Design phase would entail. They then collected feedback in the form of Pluses (things the group liked or enjoyed), Deltas (things they didn't like or wished were different), and Bright Ideas for how things could go differently the next day or in future planning sessions. Below is a summary of the feedback that was collected:

- Pluses: Movement and games, facilitation team, mixing people up so they were able to meet others and build relationships

- Deltas: Feeling sleepy after lunch and during the 50 years in the future activity, the lighting was too dark in the space.
- Bright Ideas: More light

Day Two

The second day of the convening was focused primarily on the Design phase of AI, with a focus on the Delivery phase during the closing of the session.

Day Two Summary:

I. Opening

Members of the WCI kicked off Day Two with an activity celebrating the work of the initiative and the community members involved in the work. MKGI facilitators then reviewed what was accomplished in Day One, the upcoming agenda, and held a warm-up game.

II. Design Part II

MKGI facilitators discussed the design process generally and explained the instructions for brainstorming, prioritization, and planning projects with next steps using examples from design phases at the Gandhi Institute. The group then spent time clarifying which content areas from Day One are value-based priorities and which are projects that can be planned for during the session. Participants were given an opportunity to choose other content areas and join with other groups in order to have a planning team of at least two. The final planning areas were as follows:

1. Maternal health disparities in People of Color including neonatal births
2. Mental Health Services - including Tele-Mental Health for children in RCSD
3. Early Childhood Education (including literacy)
4. Early Intervention Services focused on Black and Brown families
5. Special Education Services in RCSD
6. Accessible and school curriculum aligned Out of school time / After school programming
7. Family Court
8. Root causes of disparities
9. Nutrition & Physical Activity

Due to the inconsistent availability of some participants, not all content areas received focused time during the design time.

Once participants were in their planning teams, they were given handouts and instructions to:

- Choose a facilitator & note-taker
- Utilize the Team Design Handout
- Brainstorm - actions, initiatives and more for your team's content area.

- Prioritize - 5 - 10 ideas or projects
- Make a mini-action plan for each. May consider SMART goals, breaking into smaller tasks, etc.

Teams were also given example planning documents and a handout for creating SMART goals. Groups proceeded to work together to create a draft action plan, or multiple plans and were invited into a break with a movement-based game after over an hour of planning. Teams continued with their planning until a lunch break was given.

III. Design Part III

Following lunch, teams were paired up with another planning team and instructed to present their plans to one another. After presenting their plans, time was allotted for teams to give one another feedback using the following questions:

- What did you enjoy and appreciate?
- What would you like to see more of?
- What other ideas do you have or changes would you want to make?

Teams were then given time to revise their plans based on the feedback they received in the group presentations in preparation for a final presentation to the whole group.

IV. Final Design Presentations

During the final two hours of the convening, design teams were invited to give brief, five minutes or less, presentations outlining their designs and plans. Most of the teams did not fully capture their plans in a planning document, however facilitators and conveners of the event captured elements of their design work through photos and notes of the presentations. Below is a summary of each group's reported design plan along with PDF images of the materials each group presented. As often as possible, the participant-presenter's own language is used with slight editing and abbreviations.

Root Causes of Disparities

Abbreviated Notes

- Need for universal health care to address disparities
- Disparities in education - discussed: challenges and connections between where teachers live and disparities, school to prison pipeline, importance of hiring Black and Brown teachers and making incentives.
- Human Service - applications come from a deficit approach. Discussed who sets and decides the poverty guideline income?

Proposed Project

- Redesign - everybody to have human centered design training. Provide this training to everyone in all sectors.
- Parents and WCI backbone to design training with recipients.

- Everyone to leave trainings with commitments and next steps
- Estimated timeline of 6 - 12 months.

Maternal Health Care + and family health care

Abbreviated Notes

- Discussed needs and scope such as: OB care; Doula support, awareness, and access; Overlap with infant care; Education for mothers, parents, and providers; Financial support
- Disparities between city and rural
- Transportation creates barriers
- Discussed fathers and birthing parents and potentially changing name. Need to ground in family based approach
- Work together with data, what's working, what can we bring together with scale
- Data drives what we're doing so we need to start off assessing where we are and where we need to go.
- Before beginning project, need to connect with WCI director and find out which pieces to address first

Proposed Project(s)

Step One:

1. Form a strategy team
2. Identify potential team members including (full list in attached pdf notes)
3. Develop charter
4. Establish meeting times

Step Two

1. Increase access to quality OBGYN Care
 - a. Pre-Pregnancy
 - b. During Pregnancy
 - c. Post Pregnancy
2. Get Data
 - a. Connection to OB / GYN Care - when will they connect, what are the costs?
 - b. Barriers to care
3. Education (Parents, Community, Providers)
 - a. Pre-Pregnancy
 - b. During Pregnancy
 - c. Post Pregnancy

Normalized Mental Health

Abbreviated Notes & Proposed Project(s)

Goal: To Normalize Mental Health through Communication and Information

- Create an implementation work group integrated and collaborating with different agencies
- Trusted sources relay the message
- Social media posts with information on self-awareness and knowing what triggers are
- Creating a network of shared resources and common information
- Support information sharing and increased awareness of services for ages 0 to 8 in faith based communities
- Build awareness and accessibility for mindfulness
- Increase numbers of Black and Brown therapists through free tuition
- Campaign and share at sports events
- Family based
- Peer-family-advocates
- Measuring impact: Evaluate pre and post campaigns

Shifting Power to Parents - Action Planning for Equity and Educational Needs (formerly: Special Education)*Abbreviated Notes*

- Discussed focus to create an action plan for youth to receive a diagnosis and a plan within a 6 month time period.
- Goal of system planning for 25% of kids to need support rather than planning for far fewer and being over capacity
- Flow of plan: Seeing / Visual, Walking along with families (and using waiting times effectively), Pulling Team Together, Assessment, Action Planning

Project Plan

- Month 1: Visual - Beginning with teacher, parent -teacher conference, then primary care
- Month 2: Distribute proper forms to schools. Provide info at parent cafes
- Month 3 - Pulling together a team - parents, friends, advocates, teachers, etc. Get support from parent cafe
- Month 4: All testing is done!
- Months 5 and 6: Action plan and diagnosis is to be done. There aren't a lot of providers, so the parents are gonna step up and help
- CQI process so that systems are lifting and listening to parents so they can drive with accountability from the different partners.
- Initiate this as a demonstration project

Equitable Access to High Quality, Affordable, OST Programs for all City Residents

Abbreviated Notes

- Diverse and complicated funding streams - whether from OCFS, the county, etc. We have regulatory bodies that aren't compliant.

Project Plan

Five Ideas

1. Whole child hubs at large community centers
 - a. Geographic or quadrant based and encompass the idea of providing service where families are.
 - b. Mental health, dental care, early intervention, and health care all at the centers
2. Transportation
 - a. What if we created an informal carpooling network - so that each neighborhood had a car that was self-organized that provided safe, distributed and self-organized transportation. For example, a church could hold onto a car and a trusted neighbor helps coordinate and drive
3. Workforce Support
 - a. Help retain and train the workforce while creating economic development for childcare workers.
 - i. Creating opportunities for advancement, certification, peer-to-peer networks and mentoring.
4. Ensuring there's a neighborhood childcare place in every census tract
 - a. Maybe we take an old house, refurbish it and it's given to people who are running the center.
 - b. Minimum of one in each census tract.
 - c. Place based, economic development at the same time.
5. School Aged Kids
 - a. How do we tap into already existing community schools, the r-centers, the program based centers and coordinate more? Specifically around hours!
 - b. Coordinating wrap around care

Early Education and Literacy*Abbreviated Notes*

- We talked about the objective too late! But we want every child to get what they need when they need it. Want literacy rates to be better.
- We want to see what already exists out there and who is doing what. Learning what we don't know
- Who needs to be at the table? Many do and figuring out who needs to be there will be critical to further design and define our goals. More than we could think of in this session.

- Advocacy for parents - we don't know what we don't know! How can we reach them and give them what they need

Project Plan

1. Collect and analyze existing data along with information from cafe's
 - a. February of 2024
2. Create a formal systems map on the ECE landscape
 - a. March 2024
3. Create an intentional leadership team to reflect the sector
4. Advocacy training for parent-family-partners (PFPs).
 - a. Ongoing and June 2024
5. Develop an Action Plan from information gathered in other steps with shared outcomes
 - a. March 2024

Increased Access to High Quality Early Intervention Services for Black and Brown Families

Abbreviated Notes

- Looking at what can we do here in shorter term here in Rochester
- Raise awareness about early interventions and measure with survey
- Treatment planning using diagnostic criteria to use DC 0-5
 - Training and support to crosswalk
- Livable wages for workforce in early intervention
- Develop good equity measures
- Cross integrated systems!
- Expand workforce! Scholarship funded by businesses and community partners

Project Plan

1. To Be Named Campaign - measuring awareness
2. Treatment Planning using DC:0-5
3. EI Business Model & Compensation Redesign
4. Equity Measures
5. Expand Workforce - Create Scholarship Program & Incentives

V. Closing

Following the presentations, facilitators again collected feedback in the form of Pluses, Deltas, Bright Ideas:

- Pluses: Mix of activities was helpful for attention spans, having props, facilitators' energy
- Deltas: That facilitators didn't sit at the tables to help with planning, not giving the handouts sooner
- Bright Ideas: Giving handouts before facilitators explain activities.

The day was concluded with a final movement activity, the “Bad Dance Move Dance Line” to celebrate the work of all participants.

Final Recommendations from MKGI Facilitators

Following the conclusion of this event, facilitators from MKGI recommend the following next steps, some of which may be under way prior to receiving this report:

- 1. Review this report and associated materials from the planning process*

Due to the expansive scope of this convening and the Whole Child Initiative, we suggest spending time reviewing the extensive documentation and notes to ensure team members have sufficient clarity about suggestion plans, projects, and recommendations from participants at the event.

- 2. Revise plans with participants*

With the understanding that not every design team was able to finish a design plan within the timeframe of the convening and there are differences in scopes of projects, it will be important to confer with participants to clarify projects after completing Step One.

- 3. Create or integrate an overarching plan*

Given the enormity of the scope of work presented at the convening, we recommend creating, or integrating into a pre-existing plan, a prioritized map and timeline for the multiple projects associated with the efforts of WCI that includes a capacity assessment.

MKGI facilitators wish to express their sincere gratitude and appreciation to the Whole Child Initiative team and all participants. We celebrate the work each one of you is doing individually and collectively in our communities to create a future that truly honors and cares for children, families, and all people.



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Additional Documents

Strategic Planning Handouts:

- Agenda, pages 15 - 16
- A Brief Introduction to Appreciative Inquiry, pages 17 - 18
- Facilitator Information, pages 19 - 20
- Interview Questions, pages 21 - 22
- Team Design Group Instructions, pages 23 - 24
- SMART Goal Tool, page 25
- Project Design Worksheet, pages 26 - 27

Project Planning Documentation:

- Root Causes of Disparities, pages 28 - 30
- Maternal Health Care and Family Health Care, pages 31 - 36
- Normalized Mental Health, pages 37 - 41
- Shifting Power to Parents (Formerly Special Education), pages 42 - 51
- Equitable Access to High Quality, Affordable, OST Programs for all City Residents, pages 52 - 54
- Early Education and Literacy, pages 55 - 60
- Increased Access to High Quality Early Intervention Services for Black and Brown Families, pages 61 - 63



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Day One Agenda

- I. Opening by Whole Child Initiative & Roc the Future (1 hour)
 - A. Norms
 - B. Presentation by Dr. Peluso
 - C. Presentation with Commissioner Thalia Wright
 - D. Information sharing from past year

- II. Gandhi Institute - Introduction & Opening (Defining) (45 mins - 1 hour)
 - A. Warm-Up
 - B. Purpose & Agenda Review
 - C. Group care, agreements, logistics

- III. Discover & Information-Sharing (1 hr 40 mins)
 - A. Appreciative Interviews in groups of three (45 -60 mins)
 - B. Collect themes from interviews (20 mins)
 - C. Whole group theme sharing and collection (20 mins)

- IV. Dream & Vision (1 hour 45 mins)
 - A. 50 years in the future activity (45 mins)
 - B. Creating visuals of preferred future state (1 hour)

- V. Design Part One (30 mins)
 - A. Form ad hoc planning teams
 - B. Team-Design
 1. Brainstorming
 2. Prioritization
 3. Draft action plan

- VI. Closing and Prep for Day Two (30 mins)
 - A. Prompts & agenda review for Day Two
 - B. Debrief - feedback



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Day Two Agenda - Draft

- I. Opening (30 mins)
 - A. Warm-up / gathering
 - B. Review agenda for day

- II. Design Part Two (2 hours 45 mins)
 - A. Meet in teams, collect & integrate changes (75 mins)
 - B. Team plan feedback - Presenting mini-plan to another team (1 hour)
 - C. Teams iterate on plan based on feedback (30 mins)

- III. Design Part Three - Reports & Changes (2 hours)
 - A. Teams share mini-plan with whole group (with facilitator support)

- IV. Deliver - Next Step & Commitment Mapping (15 - 30 mins)
 - A. Immediate next steps for each element of plan
 - B. Identifying individuals and groups to hold aspects of the plan
 - C. Noting any gaps in plan
 - D. Scheduling progress check-ins and other follow-ups

- V. Closing (30 mins)
 - A. Feedback
 - B. Celebrations and closing activity



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A Brief Introduction to Appreciative Inquiry

In this two-day planning session, facilitators from the MK Gandhi Institute for Nonviolence will be leading participants from the Whole Child Initiative through a process using a model known as Appreciative Inquiry. We'll be explaining and exploring this process together as we go through it and we hope this handout can serve as a supplemental resource as well as a starting point for learning more.

Background:

Appreciative Inquiry (AI) is both a theory and strategic process for discovering what is working well within a group or system, and building on strengths to work towards a shared vision. This process helps groups gain clarity about the world they want to live in and what steps can be taken to start to build that world. Rather than focusing on weaknesses and problems, AI uses creativity, learning, and collaboration to build the world we want to inhabit. Using an AI approach aligns well with the Whole Child Initiative because it is strength-based, person and community centered, and supports solution-focused plans generated by the group.

The Process:

We'll be using what's called a standard "5D" process of AI - Define, Discover, Dream, Design, and Deliver, with some modifications and adjustments here and there based on anything that the group needs. Here's a little information about each phase:

- Define - What's the topic of our inquiry and planning process? This phase is often determined before folks gather in a room together. In this case, the topic is: *Child honoring communities and systems at their best.*
- Discover - In this phase, we use dialogue to uncover and learn together what works and what strengths and practices the group already has available.
- Dream - The dream phase invites participants to imagine and share what their vision of the future is, related to our topic.
- Design - In this phase, the group will begin to map out what projects, initiatives, and steps can be taken to reach their vision for the future.
- Deliver - The final phase occurs after the planning is over and participants put their next steps into action.



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Principles:

Like any planning model, Appreciative Inquiry holds a certain perspective about how the world is and what can be done to positively impact it. Here are some of the core principles of AI:

- Constructionist - Our realities and the world as we know it are socially created - in part through conversation and dialogue. “Words create worlds”
- Simultaneity - Asking questions is itself an intervention. The moment we ask a question, begins to create a change
- Wholeness - Groups are at their best and most creative when individuals are able to bring their whole self and when groups bring all of themselves together
- Enactment - Acting “as if” brings about change. Positive change happens best when our processes model how we want to be in the world.
- Awareness - Building understanding of our underlying principles allows us to strengthen relationships. Cycles of action and reflection help build awareness

Frequently Asked Questions:

Q: Why are we using Appreciative Inquiry?

A: We are using AI at the request of the Whole Child Initiative and because we've had the best success bringing people together to create plans in a short period of time with this model.

Q: What will we have at the end of the two days?

A: We expect you to leave having shared stories, built relationships and with a draft plan for strategies for the Whole Child Initiative.

Q: What are the limitations or criticisms of AI?

A: Here are few limitations of AI 1) It is likely that more planning will need to take place after the two-days since more people will need to work on the plan than are in the room (this is a limitation for any planning process). 2) Some groups or organizations have used AI to create a sort of “toxic positivity” where participants feel they can't share what is challenging or hurtful. 3) Other models are better for root cause analysis of systems problems.

Q: Am I only “allowed” to talk about things that I like or are going well in this process?

A: Nope! You are invited to share whatever you'd like, feels important to share, and will help build understanding, and next steps. Appreciative Inquiry is based on asking questions that help us think about what works well and what we want, but that doesn't mean your experiences of what *doesn't* work aren't welcome!



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Facilitator Information

Jonathon Jones - *Community Trainer*

jonathon@gandhiinstitute.org

Jonathon grew up in Rochester and learned deeply about nonviolence in many forms while incarcerated, including becoming a trainer with the Alternatives to Violence Project (AVP) as well as learning and then teaching Nonviolent Communication through the Gandhi Institute. Since his return home, he has continued his study of nonviolence, becoming a Certified Level II Kingian Nonviolence Trainer as well as leading the AVP program as the Vice President. Jonathon teaches and speaks on nonviolence in a variety of community settings. Check out his TEDx Talk: Lessons from Gandhi on the violence within all of us | Arun Gandhi and Jonathon Jones | TEDxAttica (Arun Gandhi, Jonathon Jones | TEDxAttica)

Matt Liston - *Community Training & Youth Educator*

matt@gandhiinstitute.org

Matt grew up in Colorado and studied history-political science at Colorado College. After graduating in 2013, he completed a Public Allies Teaching Fellowship at Eagle Rock School and Professional Development Center in Estes Park, CO. Matt then worked at a wilderness therapy program in Wisconsin before spending a year in Jordan as a Fulbright English Teaching Assistant. Matt moved to Rochester in the fall of 2017. He enjoys cooking, spending time in the city's parks, and studying Spanish and Arabic. Matt believes that all young people have the ability to transform their communities for the better. He also believes that every young person deserves the opportunities, resources, and support to be able to make that change. In his work with youth, Matt facilitates experiences that provide opportunities for young people to build self-awareness, resilience, and creative problem-solving skills.



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Gwen Olton - Co-Director

gwen@gandhiinstitute.org

Gwen is a lifelong student of nonviolence and brings a unique background in geological and health sciences, philosophy, and creative practices to her work. She is passionate about communication models and group processes that call forth our whole-selves and leverage for systemic and liberatory change. She is an Appreciative Inquiry facilitator, member of the Motivational Interviewing Network of Trainers, restorative process facilitator, transformative mediator, and an Apprentice Provider with the Nonviolent Global Liberation Community. Gwen studied philosophy and geology at the University of Rochester, nursing at St. John Fisher University, and holds a master's in peace and conflict resolution from Arcadia University. She published a [book on conflict transformation](#) and currently serves as the co-director for the [MK Gandhi Institute for Nonviolence](#) in Rochester, NY.

Erin Thompson - Co-Director

erin@gandhiinstitute.org

Erin Thompson was born in Rochester, and graduated from John Marshall High School, Monroe Community College and SUNY Brockport (B.S. in Accounting). Raised in an artistic, socially aware family, Erin's perspective orients around universal justice and equity, and is informed by the variety of divergent experiences he absorbed between growing up in the Conkey Avenue "Crescent" neighborhood as a child/young man and working in public accounting as an adult. Erin's appreciation for restorative practices stems from his direct involvement in the restorative justice process following a burglary, and his wife's employment of restorative practices as an administrator at an RCSD middle school. Presently focused on managing the Gandhi Institute's operations, Erin's goal is to position the Institute for programmatic and physical growth while strengthening the Gandhi House's connection with its local neighbors. Erin spends time with his family, reads, and creates music as often as possible.



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Team Design Group Instructions

Design Phase - During this phase, we are working to make a plan that will help us reach our vision or desired future state. You might consider questions such as:

- What actions can we take to make our vision happen?
- What initiatives or projects can we start or strengthen to reach our vision?

Below are some steps you can use with your team to start this Design phase:

Step One: Brainstorm

What are all the ideas, projects, initiatives, actions, etc. you can think of to help reach our vision for the future? Feel free to dream big, don't limit yourself or your team members in this step.

Step Two: Prioritize and Focus

What are 5 - 10 projects from your brainstorming list that you think would be best to focus on and plan for in the next 6 months to 2 years? Come to an agreement as a team on which projects to focus on.

Step Three: Action Planning

Create a draft plan for each project you identified in Step Two. You'll want to consider at least some of the following for each project:

- If it's a large project, what are some milestones that can be reached?
- What's the final outcome or goal of each project?
- What are the small tasks that will need to be completed to reach the goal of this project?
- What kind of timeline will be needed to accomplish each project?
- Who will need to work on the project?
- Who will be responsible for tracking progress on the project?

You may find the design template and SMART Goal handouts helpful as well.



M.K. Gandhi Institute for Nonviolence

Design Team Feedback

You and your team will have several opportunities to give and receive feedback as you update your plans. Here are some questions to consider for giving feedback to other groups.

Questions to Consider:

1. What do you appreciate, enjoy, or like about this plan?
2. What would you change about this plan?
3. What ideas do you have for making this plan better?
4. What do you want to ask this team to consider?



SMART Goal Tool

Use the questions below to help create goals for your team's plan. After going through the questions, it can be helpful to state your goal as a single sentence.

- Specific: What do we want to happen?

- Measurable: How will we know when we've achieved our goal?

- Attainable: Is the goal realistic and do we have the resources to achieve it? If not, do we have a plan to access the resources?

- Relevant: Is the goal important to us? Does the goal align with our work?

- Timebound: When will we achieve this goal?

Project / Overall Objective: *What's the overall objective or project this work plan is meant to address?*

Date overall objective to be completed:

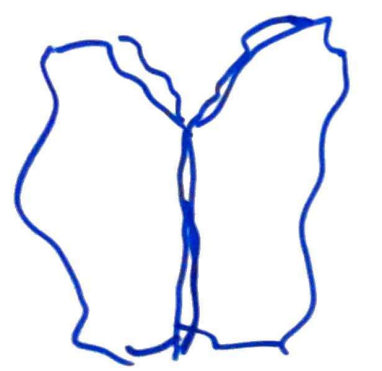
Task / Sub-Goal <i>Small concrete tasks that will get you to the larger objective or outcome written above.</i>	Timeline <i>When will this task / sub-goal be accomplished? If you need multiple timelines in one square, you probably need to break up the task into multiple rows.</i>	Person Holding <i>Who is the person tracking this task and moving it along? Doesn't have to be the only person working on the task!</i>	Other People / Groups <i>Who else needs to work on or be involved in the project or task?</i>

Project / Overall Objective: *What's the overall objective or project this work plan is meant to address?*

Date overall objective to be completed:

Task / Sub-Goal <i>Small concrete tasks that will get you to the larger objective or outcome written above.</i>	Timeline <i>When will this task / sub-goal be accomplished? If you need multiple timelines in one square, you probably need to break up the task into multiple rows.</i>	Person Holding <i>Who is the person tracking this task and moving it along? Doesn't have to be the only person working on the task!</i>	Other People / Groups <i>Who else needs to work on or be involved in the project or task?</i>

Root Causes
of
Disparities



education



Human
Service

Goal:

Structures & Instructures
Processes

Shared measurement
sys
Communication
structures

Project / Overall Objective: What's the overall objective or project this work plan is meant to address?

Date overall objective to be completed:

<p>Task / Sub-Goal Small concrete tasks that will get you to the larger objective or outcome written above.</p>	<p>Timeline When will this task / sub-goal be accomplished? If you need multiple timelines in one square, you probably need to break up the task into multiple rows.</p>	<p>Person Holding Who is the person tracking this task and moving it along? Doesn't have to be the only person working on the task!</p>	<p>Other People / Groups Who else needs to work on or be involved in the project or task?</p>
<p>Human centred design training all sectors</p>	<p>6-12 months</p>	<p>BB staff Parents</p>	<p>All sectors stake holders commitments next steps</p>
<p>one stop shop - continue services</p>	<p>Indial Indigenes racism</p>		
	<p>city sub rural</p>		

Insurance type

Universal
Insurance

or

Education

Zipcode zoning

access materials, technology

in value True intent of education

live ^{teachers}, not same color-

Deceitful approach

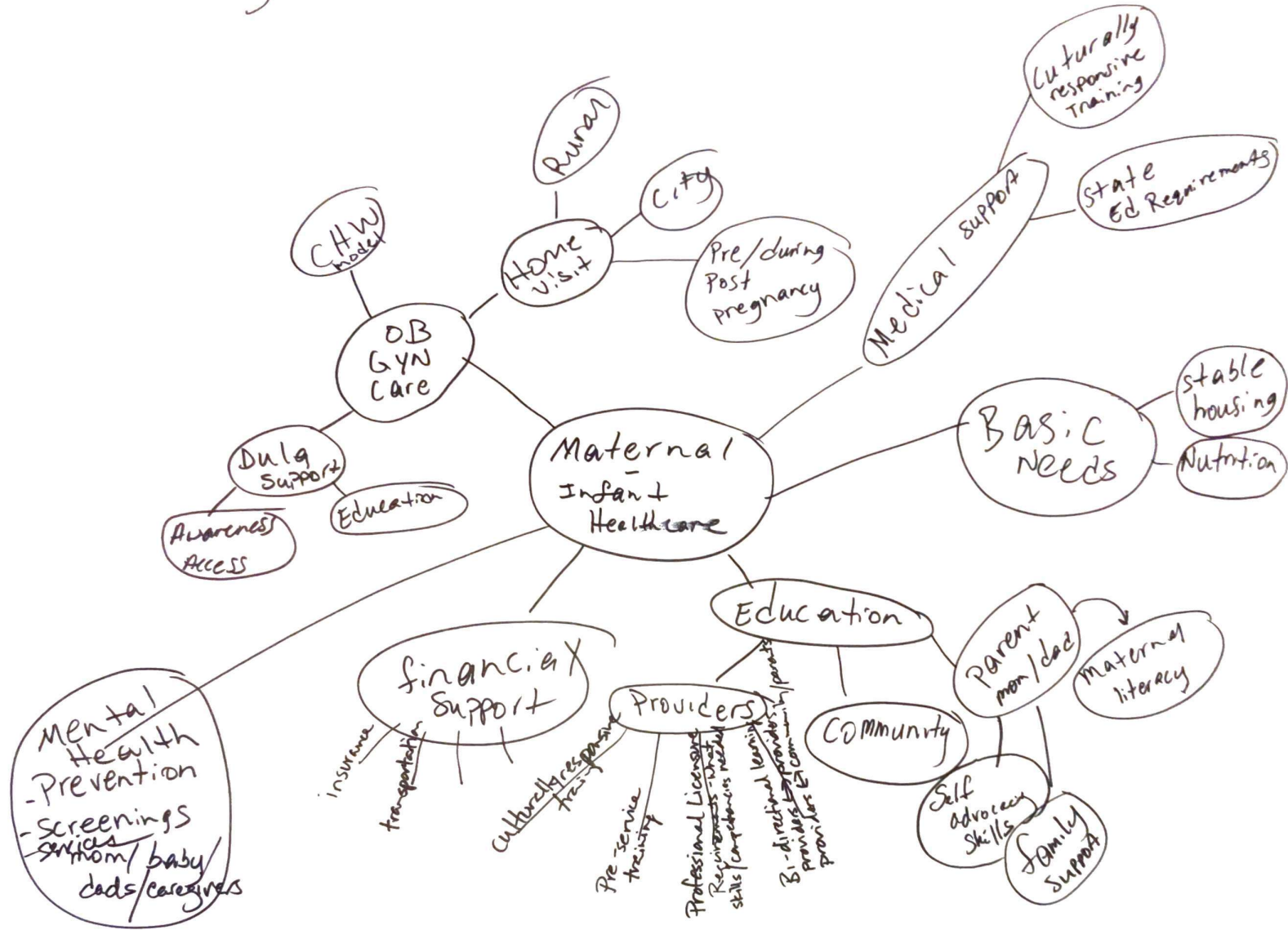
who sets poverty guidelines
policy

application-process

Human centered

Maternal-Infant Health Care

Family-based approach -



- What needs to be done before launch

- who's at the current table and who needs to be brought in?

- What's working? Can it be expanded

Next Steps

1 Form a Strategy Team

2 Identify ^(Potential) Team Members.

Contacts

- PFP's
- ~~Wendy~~ - March of Dimes
- March of Dimes → Darcey Dwyer
- UR - → LJ (?) - include ob/gyn
- RRA - (Rock. Regional Health) → LaKeah - Katie Sienk.
- Jordan Health Center → Linda Clark - Noora
- RCSD → Erin Graupman
- Healthy Baby Network → Cherita Bullock.
- ~~CHWAR~~ → Community Health Works Assoc. of Rock. → Lucia Calindres
- Common Ground Health → Dina Faticone → Julie
- MCDPH - MC Dept. of Public Health → Mike Mendez/Phillip
- Dula's → Cheritta Bullock
- Senator Brouk Office

UR + PFP
RRA
CHWAR

Health Contact
Junior's Wit.
Twylla

3 Develop Charter

4 Est. Mtg. Date & Time } (confirmed when team is established) (from Senator's Office)

Questions:

- What needs to be done before we launch Strategy Team.
- Who's at the current table and who needs to be brought in?
- what's working? Can it be expanded?

Willie
Dana
Janice
LS

Step 2¹

* Combining! 2, 4, 7

① - Increase Access to Quality OBGYN Care

A. Pre-Pregnancy,

B. During Pregnancy

C. Post Pregnancy

② Get Data

A. Connection to OBGYN Care

- When are they getting connect

- Cost

↳ Get the Rates of Insurance

" " Under-insurance

B. - Barrier's to Care

③ Education (pre, during, post pregnancy)

Parents community Provider

④ Financial Supports.

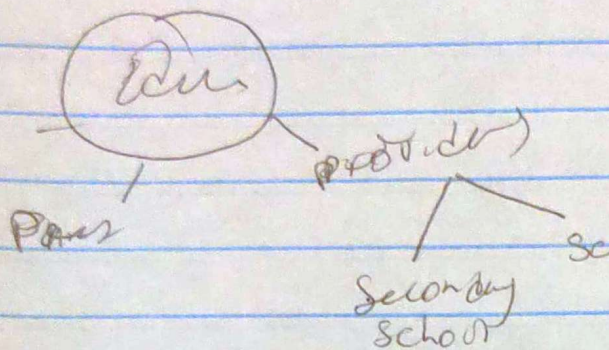
A. Insurances

B. ~~Bas~~ Stable Housing (Food, Clothing, Safe Home)

C. childcare options

Maternal Health care

- Connected to early ob/gyn care
- Education - cultural ^{sentative} ~~care~~ ^{care}
- ↳ Training of health care professionals
 - state ed set policy not Health department



~~Feedback~~ Feedback from presentation

- Make sure cultural/advocacy is there for family to be train on how to advocate for themselves.
- How you get birth control/infant info
 - providers don't tell you what you are signing/process is rushed and not really cleared during time in hospital/delivery
- Would it cover teen mom?
- What about adaption/serrogate
- Paternal connection to maternal hem
 - Both parent should be ~~parent~~ supported

metam/pam?

- financial support
- Dental care

- Disparities
 - stereotypes
 - bias
 - stigma

Both

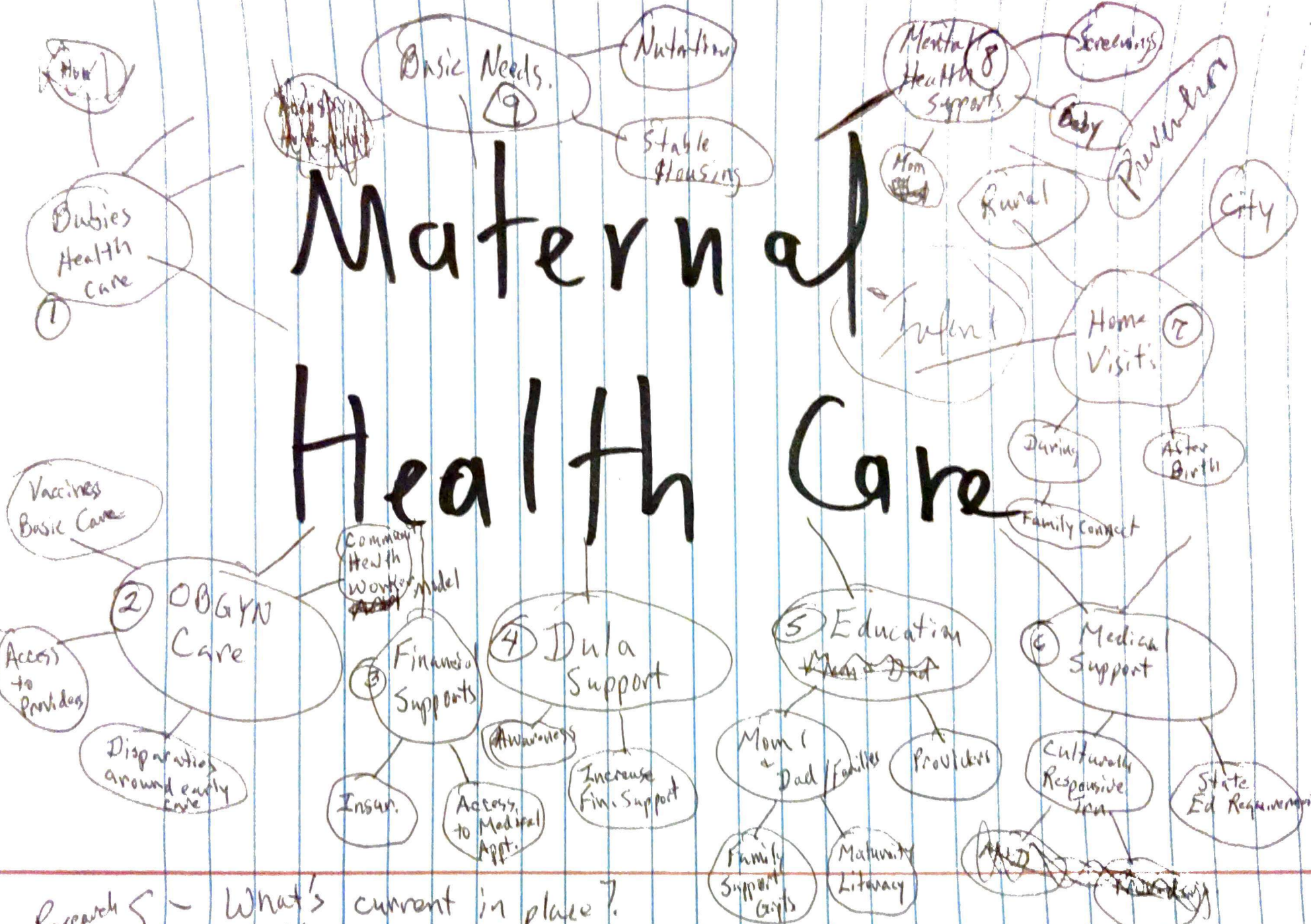
- Data
- mental health
- home visits
RN/cnw models
- stable housing
- nutrition incl
BF programs
- insurance
- Education/
literacy
- access to providers

• Culturally
Sensitive Approach
+
Patient/family
centered

Infant

- Disparities of health care
specific to infant (cultural
ethnic)
- Infant development/
milestones

Maternal Health Care



- Research
- What's current in place?
 - What's working?
 - What would it take to scale it up?
 - Subject Matter experts

Normalized Mental Health

Parent Cafe Through Communication
and Information
BIPoC

* Put words to our emotions
x - All groups talking about it

x - Having Trusted sources relay

The message:

x - Social ^{media} Positive Messages
Self Awareness / ^{know} Triggers

x - Network of ~~shared~~ shared Resource
Common Information

* - Sport Events / Mindfulness

x - Family Based

* - PEER Family Advocate

* - Music

Normalized Mental Health

Parent Care Through Communication
And Information
BIPoC

* - Put words to our emotions

x - All groups talking about it

x - Having Trusted sources relay

The message:

x - Social ^{Media} Positive Messages
Self Awareness / ^{know} Triggers

x - Network of ~~peers~~ shared Resource
Common Information

* - Sport Events / Mindfulness

x - Family Based

* - PEER Family Advocate

* - Music

How we measure

~~At~~ Evaluation of a Pre/Post
with ^{some} ~~all~~ the objective

Data set to Numeric
values

Increased BIPOC Family
Peer Advocate ⁱⁿ/same

Roc Future
whole
child
Inst.
IWG

Collaborating
ROC Future
OMH
NAMI

Agency
DePaul MH
County MH
Grass Roots



Team Design Group Instructions

Design Phase - During this phase, we are working to make a plan that will help us reach our vision or desired future state. You might consider questions such as:

- What actions can we take to make our vision happen?
• What initiatives or projects can we start or strengthen to reach our vision?

Below are some steps you can use with your team to start this Design phase:

Step One: Brainstorm

(0-8) (attend school or born in city of Rochester)

What are all the ideas, projects, initiatives, actions, etc. you can think of to help reach our vision for the future? Feel free to dream big, don't limit yourself or your team members in this step.

Step Two: Prioritize and Focus

no matter how you are, you receive supports from pre-natal (free) rebuilt into pre-natal care

What are 5 - 10 projects from your brainstorming list that you think would be best to focus on and plan for in the next 6 months to 2 years? Come to an agreement as a team on which projects to focus on.

Step Three: Action Planning

Create a draft plan for each project you identified in Step Two. You'll want to consider at least some of the following for each project:

- If it's a large project, what are some milestones that can be reached?
• What's the final outcome or goal of each project?
• What are the small tasks that will need to be completed to reach the goal of this project?
• What kind of timeline will be needed to accomplish each project?
• Who will need to work on the project?
• Who will be responsible for tracking progress on the project?

You may find the design template and SMART Goal handouts helpful as well.

Handwritten notes: -> pre-natal support that is free (starts at sonogram, assessment, screening)
-> home environment supported supporting faith groups, religious leaders
-> whoever providing mental health, they need to receive

Handwritten note: -> increase the wage for mental health

Mental Health

Project / Overall Objective: What's the overall objective or project this work plan is meant to address?

Date overall objective to be completed:

0-8 Age Range

<p>Task / Sub-Goal Small concrete tasks that will get you to the larger objective or outcome written above.</p>	<p>Timeline When will this task / sub-goal be accomplished? If you need multiple timelines in one square, you probably need to break up the task into multiple rows.</p>	<p>Person Holding Who is the person tracking this task and moving it along? Doesn't have to be the only person working on the task!</p>	<p>Other People / Groups Who else needs to work on or be involved in the project or task?</p>
<p>Help to Support faith Base Community. Increase Awareness of 0-8 Services</p>			
<p>Free prenatal Care Nutrition Have student / peer advocates</p>			
<p>Awareness Campaign and increasing accessibility mindfulness</p>			
<p>Increase Black & Brown therapist - free tuition - Career</p>			

How can we measure

* BUILDING A SYSTEM!

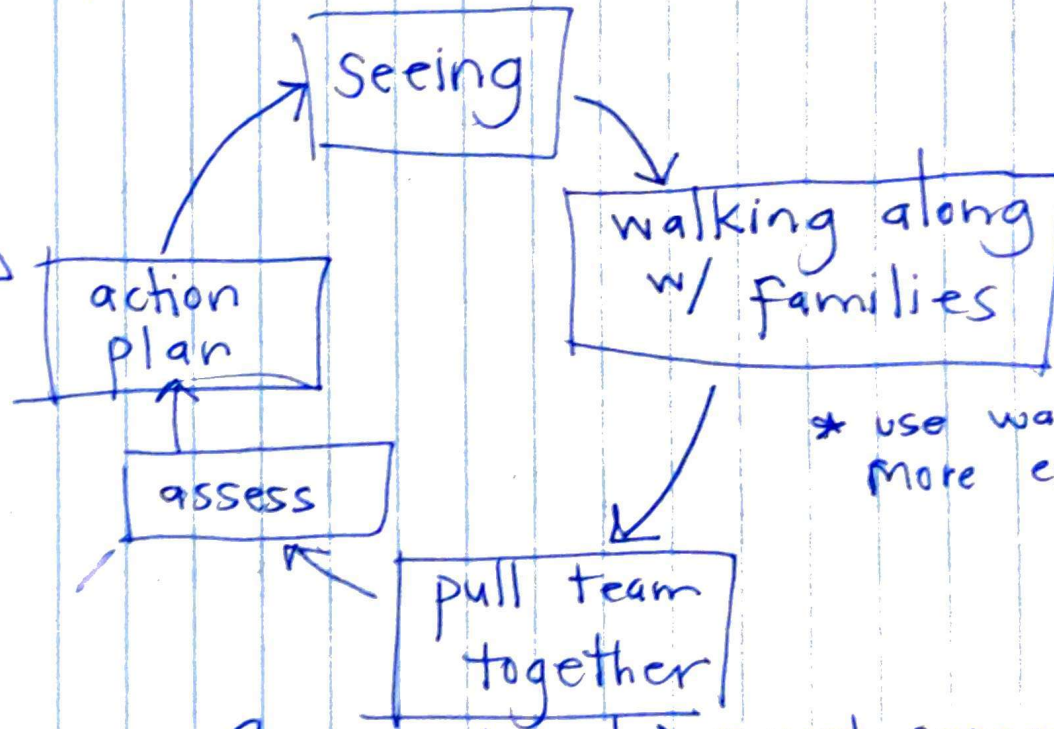
• EARLY • STANDARD PROCESS

community / school supports to fill in remaining gaps?

* Plan for 25% Kids needing support

* schools need to step up w/ resources to meet the needs - address the gaps in learning

6 months AT MOST



* use waiting times more effectively

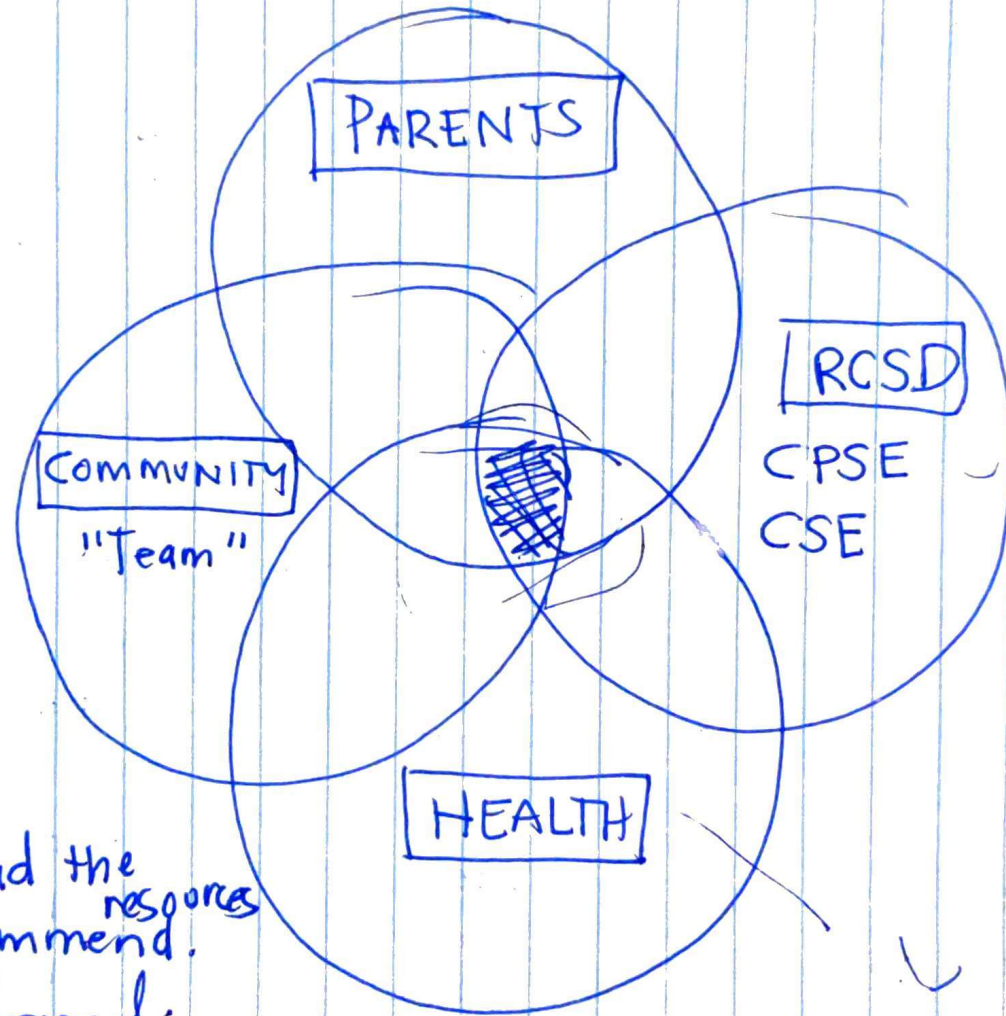
? what happens when mom doesn't have a team?

parent support people (day care provider, TA, grand extended family, pediatrician, close parent friend/advocate)

Mom pulled team together

Special Education

Abby
AnniSSa
Jasmin
Ann Marie



- we need to actually ~~not~~ read the ^{resources} what we recommend.
- TRAUMA-informed;

information building & alignment
'in all the areas' ★

Collaborate with
Box The Future For
~~Parent~~ Parent Cafe

provide cafe to educate
parents by parents
already experiencing
& dealing with common
situations
♡

6 Month Goal
Month 1 (Seeing)
• Converse with
teachers, set up parent
teacher conference (see if
they see like behaviors)
• see pediatrician

Month 2
• Distribute Vanderbilt
forms to school + team
members (ex. grandma +
grandpa)
← ~~Walk~~ Walk along-
side parents
• use waiting time
more effectively
• provide resources
that help w/ screening

Month 3

- pull team together
- support people

• teachers, pediatrician,

close parent friend,

daycare providers + advocate

• What happens

when mom doesn't have team

Month 4

- crises! ♡

Month 5 + 6

- ACTION PLAN! ♡

Plan for 25% kids
needing support! ♡

Shifting Power
to Parents;
Action Planning
for
Equity &
Educational
NEEDS!
♡

We need more
providers! ♡

Unintended Consequences!
- During process (part)

Parents
Advocating
For Parents
In Special
Education

Who can help
build our
project?

Strong Center for
Developmental Disabilities



SMART Goal Tool

Use the questions below to help create goals for your team's plan. After going through the questions, it can be helpful to state your goal as a single sentence.

- Specific: What do we want to happen?

We want an action plan within 6 months TOPS!

- Measurable: How will we know when we've achieved our goal?

When we prepare for 25% kids needing support.

- Attainable: Is the goal realistic and do we have the resources to achieve it? If not, do we have a plan to access the resources?

↑ We have the resources we just ~~are~~ need them to listen.

- Relevant: Is the goal important to us? Does the goal align with our work?

Very important as many families struggle to get solutions & yes it aligns perfectly with our work!

- Timebound: When will we achieve this goal?

TODAY



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Team Design Group Instructions

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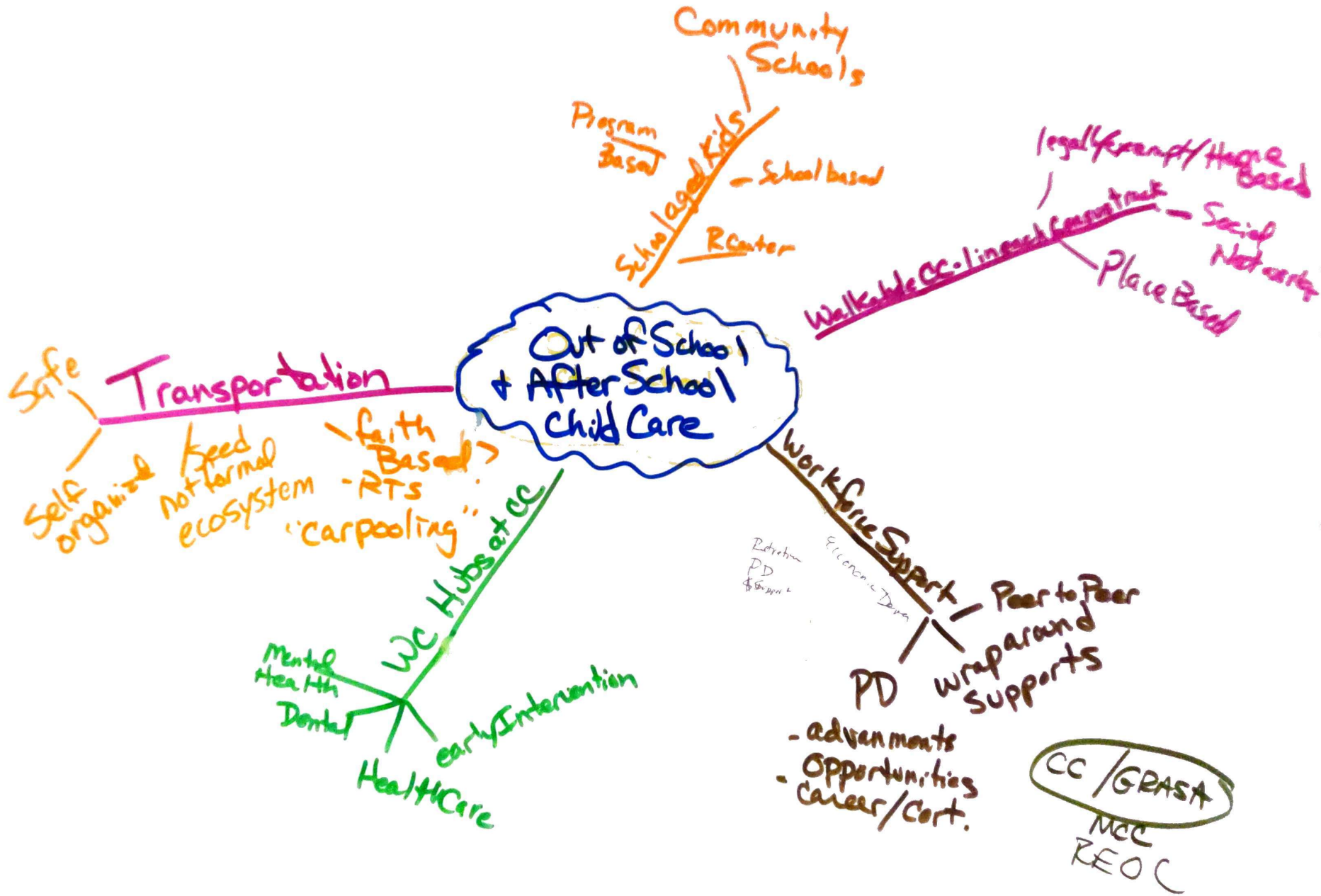
Step Three: Action Planning

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- If it's a large project, what are some milestones that can be reached?
- What's the final outcome or goal of each project? *action plan within 6 mths*
- What are the small tasks that will need to be completed to reach the goal of this project?
- What kind of timeline will be needed to accomplish each project?
- Who will need to work on the project?
- Who will be responsible for tracking progress on the project? *Parent, healthcare provider, & school*

You may find the design template and SMART Goal handouts helpful as well.

Equitable access to quality, affordable child and OST Programs



~~RTA~~ ~~OST~~ / After School / RACI / AAA Premiera → Pre-natal → B, OCFs, NYSED, County, CC
 Infant to 8 Child FOST

Project / Overall Objective: What's the overall objective or project this work plan is meant to address?

Date overall objective to be completed: Equal Access to high Quality, affordable, OST Programs for all City Residents

Task / Sub-Goal Small concrete tasks that will get you to the larger objective or outcome written above.	Timeline When will this task / sub-goal be accomplished? If you need multiple timelines in one square, you probably need to break up the task into multiple rows.	Person Holding Who is the person tracking this task and moving it along? Doesn't have to be the only person working on the task!	Other People / Groups Who else needs to work on or be involved in the project or task?
Meta Analysis on Current Status - existing Data / Reports - Census mapping - person Profiles	1-2 months from start date	CC / GRASA	TCA, RAD, RCSI, 21st, NYSED, RTA, UW/PA → fiscal impact, PFP, ECOC
Creating WC System Hubs w/in Child Care / OST sites in each census tract	walking distance	WCI-San Project mgmt / facilitator	CC / GRASA, County OCFs, County PFP, PETS
Transportation Ecosystem Free, safe, Not formal Self organize seed ecosystem	2-3 project		RTS, RCSI, Weishi Center, Funders, Faith Based PFP
Workforce Supports - SED - special ed → PFP - Trauma, Cultural - Coaching - Comp - PD training - Peer to Peer - Wraparound Support Academics		GRASA / CC REOC	WCI / RTA ecoc REOC PFP Head Start

elo

- Who is missing?
 - Secondary Role
 - Primary

Project / Overall Objective: What's the overall objective or project this work plan is meant to address?

Date overall objective to be completed:

<p>Task / Sub-Goal Small concrete tasks that will get you to the larger objective or outcome written above.</p>	<p>Timeline When will this task / sub-goal be accomplished? If you need multiple timelines in one square, you probably need to break up the task into multiple rows.</p>	<p>Person Holding Who is the person tracking this task and moving it along? Doesn't have to be the only person working on the task!</p>	<p>Other People / Groups Who else needs to work on or be involved in the project or task?</p>
<p>Create one walkable Child Care Center in each</p>	<p>1x</p>	<p>-</p>	<p>- Sam's - Group - Center</p>
<p>Census track</p>		<p>-</p>	<p>- Corridor Study - Redco - City</p>
		<p>-</p>	<p>- McE workfen - SBA - GRASP - Venture funds</p>
		<p>-</p>	<p>- RHA - Housing Council</p>

Early Childhood & Literacy 0-8 years old Rochester

1) Collect ^{+ analyze} existing data & cafe



2) formal systems map on the ECE
Landscape

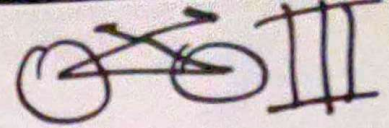
3) Create an intentional Leadership
Team to Reflect the Sector

4) ~~Advocacy~~ training for ~~PFPs~~
PFPs → Professionals

5) Shared Outcomes Roc/
action County

Family
Every child gets what they need when they need it

BIKE RACK



List of Projects / Ideas that
would be great to do some day.

Existing projects / Ideas / Groups

- Joy of Literacy for all UPR / EPK - Hoekema Center
- Dolly Parton Library - book give aways
- Dyslexia Allies of WNY - parent to parent information ^{support}
- Students Success Project - inform parents of educational rights + needs
- Rochester Children's Dyslexia Center - free tutoring ^{parent support}
- Parents Helping Parents Coalition of Monroe County - ages 0-5
- Anti Racist Curriculum Project - Talk, Read, Sing
- UR Center for Urban Success - Raising a Reader
 - The Rochester Literacy Mission (teachers + parents)
- How is each school / district in Monroe county teaching kids to read? Is it aligned with the science?
- County wide measuring of outcomes (same measurement)
- All educators / families / admin / higher ed understand science of reading.
- Explicit, systematic, sequential, cumulative literacy instruction in general education and SPED.
- Meaningful family engagement / partnership in schools
- Social Emotional Support Capacity Building in Educators
 - Classroom + Leadership Coaching
- Every school/org has a family engagement plan (title I ^{support} guidance)
- Data sharing - EARLY ED MODEL INTO SCHOOLS

EARLY CHILDHOOD + ED + LITERACY

6 months - 2 years

Edu 8

ECE-Response

screening

Responsive Care

Outcomes

Emergent literacy

→ Respo

mat

Emotional

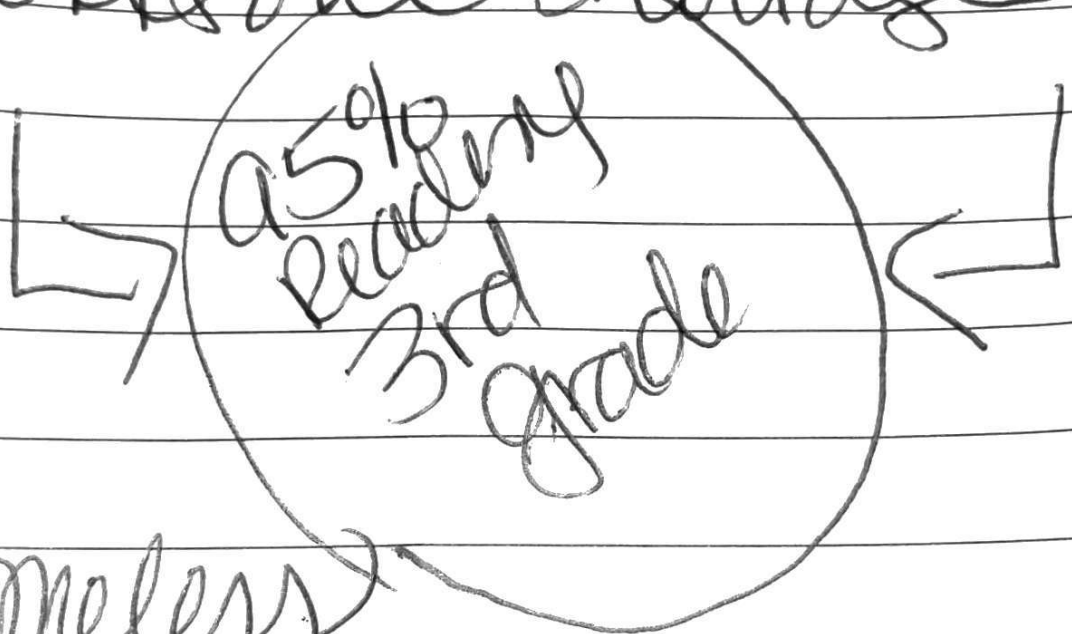
narrow focus → library

Early Childhood Outcome

All Children & families
get what they need
when they
need it.

Expulsion suspension
SPLED systems

Shortage of infant toddlers
Workforce shortage



homeless
runaways

ineffective school
approach

mental health
trauma impacts
learning

maternal health

Early Child Educ & Literacy (AGE 0-8)

(0-3)

(3-5)

5-(5-8)

LEARNING TO READ

3RD
GRADE

Net
Leads

EARLY CHILDHOOD EDUCATION + LEGACY (0-8)

Project / Overall Objective: What's the overall objective or project this work plan is meant to address?

Date overall objective to be completed:

Read by 3rd grade?
 ↑ 95%

Task / Sub-Goal Small concrete tasks that will get you to the larger objective or outcome written above.	Timeline When will this task / sub-goal be accomplished? If you need multiple timelines in one square, you probably need to break up the task into multiple rows.	Person Holding Who is the person tracking this task and moving it along? Doesn't have to be the only person working on the task!	Other People / Groups Who else needs to work on or be involved in the project or task?
Collect existing data + information from systems map + parent cafe - conduct a formal systems map of the ECE Landscape. Formal = RFP	Feb 2024	RFP ↓ Backbone + chairs PFPs	Common Ground Health Health Kids
Build a team of (leadership team) w/ PFPs 5450 to rep sector based on above (Implementation Science)	influenced by ↓ Follow	March 2024	
Develop an Advocacy training for PFPs + PFP/Professionals training	ongoing ↓ PFPs 6/2024	March 2024	
Action plan- Develop an action plan based on info gathered → make from talk	TBD	March 2024	

Increase Access to High Quality Early Intervention Services for Black and Brown Families

Brainstormed/Prioritized Ideas:

1. Raise awareness in black and brown communities of the EI services (SF) JG, SM, SD, ab
2. Model the early intervention team approach used in other states and locales. There is integration of disciplines – cross training, comfort related to social, emotional health, particularly infant and early childhood mental health (the professionals of different disciplines work together with the family) to provide a more holistic approach – includes evaluators, providers, service professionals. (SF) JG, SM, SD, ab
3. Use the DC 0-5 – a manual about diagnosis that is specific to kids ages 0-6 but it isn't currently used (current diagnostic system is geared toward older children/youth and even adults). (SF) JG, SDK, ab
4. Create scholarships and other incentives for Black and Brown students to become Early Intervention Specialists (at all levels) (SF) JG, SD, ab
5. Loan forgiveness programs, Tuition breaks, scholarships (SF), SM, SD
6. Pay EI professionals a living wage and make the careers in Early Intervention financially sustainable (SF), SM, SD
7. Establish equity measures JG, SD, ab
8. Peer to peer or family to family navigator. SM, SD
9. Make the systems and professionals more trustworthy – ensure the professionals and systems are set up to intervene with cultural humility, aware of their own bias, mitigate professional compassion fatigue/secondary trauma (SF), SD
10. Create opportunities outside of services that can only be provided by people with a masters/ license (SF), SD
11. Create career opportunities within our own community in the Early Intervention system, SD
12. Use trusted community gathering places to help raise awareness and increase acceptance and not attach stigma SD
13. Speech language pathology assistant – a middle level position
14. Remove the stigma from Early Intervention services
15. Leverage Faith Communities for raising awareness of Early Intervention Services
16. Understand constraints of scope practice and figure out ways to collaborate and/or flex to be more person centered
17. Understand and address accessibility challenges
 - a. “No shows” – providers don't get paid for no shows

18. Volunteer program for community members to work as peer advocate for the family to help facilitate home visits
19. Create a free certification course and a new position that supports Early Intervention
20. Create a class action lawsuit against the state for being negligent to meet its policy and failing kids
21. Integrate the EI and PreK systems – they are funded by two different offices and it is not at all integrated

Portfolio of Projects

#	Project Name	Description	Benefit	Timeline	Person Holding
1	To Be Named Campaign	Measure awareness via survey; social media campaign; PR campaign; direct mail campaign; storytelling & testimonials	Increased awareness of EI Services in Black & Brown Communities	Now – December 2024	TBD
2	Treatment Planning using DC:0-5	Shift providers and systems to using the DC:0-5 that includes consideration of culture, parent-child relationships, physical health, psychosocial stressors. Training and support. Cross-walk to ICD-10 and DSM.	Improved treatment planning	Now-2025	TBD
3	EI Business Model and Compensation Redesign	Re-examine the business model of EI services, taking compensation, living wage, and cost studies to advocate locally and at the state level to increase reimbursement and total compensation for EI providers. Look at opportunities to bring EI ecosystem together	Improved economics Living wage for workforce	January 2024	TBD

4	Equity Measures	Establish a set of measures and targets that will be used to determine current state and improvements in equitable delivery of EI	Improved service provision especially for Black and Brown families who are currently underserved	Spring 2024	TBD
5	Cross-systems integrated, IECMH-informed, provider team-based approach	Pilot an a cross-disciplinary, team-based approach to providing EI services, providers are trained in IECMH, trauma	More holistic, integrated services for families; better support for providers and	Now – Jan 2025 to prepare, begin implementation Spring 2025	TBD (in partnership with Monroe County EI, SPCC/Mary Ellen Institute, etc.)
6	Expand workforce- create scholarship program and incentives	Crete a scholarship program to support Black and Brown students interested in relevant career paths	Representation of Black and Brown people in the workforce. Long term- build trust between providers and families through racial equity lens	Now-March 2024	Program staff, schools, community centers/ programs