



# **GROWING TOGETHER MODEL**

## ***DARTMOUTH - NOVA SCOTIA***

### **DESCRIPTION**

**GROWING TOGETHER IS** an umbrella project of the Dartmouth Family Resource Centre (DFRC). The project provides health promotion, prevention, and early intervention services for all children from 0-6 years of age and their families living in the Dartmouth North community. The Dartmouth North community is characterized by a high density population with 35% of Dartmouth children aged 0-4 years and 33% of children aged 10-24 years living in this Dartmouth North DFRC community.<sup>1</sup> The Growing Together Project compliments the existing programs offered by the DFRC and works in cooperation with staff and parents of the Centre. The DFRC is committed to working with the community to strengthen and build the capacities of its families and the community as a whole. The Centre's mission is to provide social support, education, and promote a nurturing and enabling community environment in order to enhance the well-being of children ages 0-6 years and their families who are at an increased risk in today's society.

**STRATEGIES:** The Growing Together project provides Dartmouth North with: universal home visitation, early family assessment and infant/child monitoring services, a modified and expanded well-baby/developmental drop-in and clinic, expanded prenatal/postnatal education and support services for families. In addition, Growing Together offers: child-centred programs, parent-child programs, family support programs and community development involvement under the umbrella of services and programs offered by DFRC and other community groups. Through a collaborative and transdisciplinary approach, the Growing Together team is able to provide targeted support by way of individualized family support and individualized assessment and intervention services.

**APPROACH:** Growing Together in Dartmouth North is committed to programs and services that:

- provide a range of interventions recognizing that child development is influenced by multiple factors that interact as parts of a whole
- Begin intervention early in life- i.e., initiate programs during prenatal period.
- Provide long-term services.
- Encourage intensive participation - i.e., programs “work with” rather than “do to” participants
- Target both parent and child
- Include high-quality providers (specific preparation to the task)-i.e., both lay and professional providers have specific roles and targeted training.

The Growing Together project in Dartmouth North is committed to working with the community to strengthen and build the capacities of its families and the community as a whole. Programs and services are provided in a seamless manner whereby families can avail of any combination of supports that are best tailored to meet their needs and build on their strengths.

<sup>1</sup> Population Health Research Unit Report, 1999



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### **ESSENTIAL PROGRAM COMPONENTS**

**Early Screening of Mothers and Newborns** All new mothers are phoned and offered a visit by both a Community Home Visitor and Public Health Nurse (postnatal guarantee). Informal observations of and dialogue with families during Well Baby Clinic and Baby Club and during home visits provide us with opportunities for informal risk factor assessments. New birth notices are obtained from Public Health, the IWK Maternal and Newborn Unit, self-referral through Welcome Wagon notices, community notices and self-referral. Our Prenatal program also provides as a way to connect with families before the birth of a baby, provide support, begin to work with the family in identifying areas of strength and concern.

**Ongoing and Regular Monitoring, Assessment, and when Necessary, Referral to Services** Ongoing monitoring occurs through a variety of mechanisms. Firstly, families voluntarily participate in the Ages and Stages Questionnaire (ASQ), an ongoing screening protocol. Any developmental areas of concern noted are addressed with the family. Suggestions for supporting development in the specific area are provided, with a referral made to one of the clinicians in consultation with the family if deemed appropriate.

All families visited by the Community Home Visitor after the birth of a child will receive follow-up calls within a month of the initial visit as a way of staying connected and further promoting programs and services. Discussions may arise that warrant another home visit or that result in the family attending the Dartmouth Family Resource Centre for programs and services. In addition, the weekly Well Baby Clinic/Baby Club provides Community Home Visitors, the Developmental Psychologist, and Public Health with opportunities to monitor developmental and family issues and/or concerns through their interactions and discussions with families.

When the need for targeted support is identified, it may include any combination of the following: developmental assessment by the Developmental Psychologist, formal speech-language assessment by the Speech Language Pathologist, ongoing home visits by Community Home Visitors, further assessment by Public Health Nurse, referral to outside services, and/or participation in related programming at the Dartmouth Family Resource Centre. When support shifts to a more targeted approach, Family Plans are used as a mechanism to ensure the approach is family-centred, collaborative and transdisciplinary in nature. The family plan process takes into account a family's strengths and challenges, identifies the family's desired outcomes, and clearly identifies who will be responsible for implementing actions.

**Child Centred Programs** includes:

***Sunshine Gang:*** A summer recreational and learning program for children between ages 3 and 5.

***Preschool:*** A school readiness program for children entering school the following year with an increased emphasis on language, literacy and cognitive development.

***Child Development Programs:*** Provides children with opportunities to engage in child directed and developmentally appropriate activities aimed at promoting: social, emotional, cognitive, and physical development.

Opportunities exist for Growing Together Staff to work with children and families on specific developmental goals in these settings if required.

**Parent-Child Centred Programs** includes:

**Parent-n-Tot:** A parent and child interactive program for families of children 0-18 months. It focuses on using rhymes, songs, and stories in interactions with the children.

**Baby Talk:** A program for parents and their new babies aged 0-6 months. Topics covered include: attachment, infant communication, behaviour, cues, feeding, sleeping/waking, and effective ways for parents to respond.

**Play Shop:** Using a theme-based approach, Child Development workers offer a program which encourages parent-child interaction.

**Baby Club:** While families visit the Public Health Nurse, parents connect with other families in an informal drop-in setting. The Developmental Psychologist is available to talk with families, and Community Home Visitors is present to talk and interact as well. The area is infant-friendly and set up in way that encourages group conversation.

**Baby Playgroup:** Families with babies under a year of age can drop in to the playroom, interact with their babies and other families in a space set up in an infant-friendly way.

**Toddler Club:** The Public Health Nurse makes herself available to families with children over a year who are no longer eligible for Well Baby Clinic and Baby Club. Special topics are arranged such as oral health, nutrition, etc.. General growth and weight measurements can also take place at this time, as well as one-on-one consultations with the Nurse.

**Toddler Circle:** As babies grow, they quickly enter the Toddler years. To meet the needs of many of our families, Toddler Circle was developed to provide families and their toddlers with a rich set of language and learning activities, in a group, circle setting.

**Infant Massage:** One of our Staff, a certified Infant Massage Therapist, provides a hands-on program for parents and their infants that explores the benefits and enjoyment of infant massage.

**Family Support** services include:

**Systematic Training for Effective Parenting (STEP):** A 10 week program which provides parents with developmentally appropriate ways to understand and respond to children's behaviour.

**Strengthening Family Capacity(Webster-Stratton):** A 14-week program that uses peer support and a home visiting approach to provide parents with strategies and support in the areas of behaviour, play and language/literacy.

**DropIn/Respite/Social Programs:** These include opportunities for families to connect and interact with staff and other families while their children participate with other children in the Child Development Room (Child Care).

**YMCA Fitness Program:** Partnering with our local YMCA, this weekly fitness program for Women, brings fitness opportunities to our neighbourhood at no cost. The focus is specifically on women's fitness issues.

**YMCA Fitness Workshops:** Offered once a month, these workshops provide specific topics in health and fitness areas, such as use of stability ball, exercising while pregnant, etc.

**A Healthier Me:** A topic series that focuses on health and nutrition issues that families face.

**Women's Wellness Focus Groups:** As a way to explore the issues women in our community face in the areas of social, emotional, and physical well-being, focus groups will be held once-twice a year. Results and ideas from the focus groups will be used in supporting women's wellness in our Community.

**You Make the Difference:** Promotes ways in which parents can facilitate their child's language development and learning through the ordinary conversations of everyday living.

**Nobody's Perfect:** Parents explore issues around their children's safety, development, and

behaviour.

**Self Esteem:** A program that explores issues around self esteem, and ways to foster personal self esteem.

**The Cupboard:** Provides families with an opportunity to barter and trade goods with each other and give back to the community.

**New Baby...New Feelings:** Provides an opportunity for new moms to network with each other and explore postpartum emotional issues with a trained professional.

**Coffee Talk:** An opportunity for families to receive respite and participate in social networking with peers. Staff are available at parents' request.

**Creative Cooking:** A program that provides an opportunity for families to get together and cook in bulk to divide and share. Parents learn through practice, to plan, shop for and prepare a menu, then divide it accordingly to family size.

**Coffee House:** An informal evening for parents and caregivers to experience and/or participate in poetry readings, author readings, music, crafts, cooking, etc., while in a Coffee House setting.

**Parenting Workshops:** As families identify areas of parenting they are most concerned about at any given time, we will provide on-going workshops on specific parenting topics throughout the year.

**Community Development** activities to enhance the community surrounding our program include:

**Leadership Training:** Community members have the opportunity to participate in leadership positions. A training protocol has been developed to provide parents with the skills and capacity to facilitate programs and participate in other leadership roles at DFRC.

**Centre Facilitator Programs:** Community parents are active in supporting Staff in our daily work. Centre Facilitators participate in training and then work at the Centre for a half day/week, meeting and greeting parents, providing administrative support, and ensuring a family-friendly and welcoming environment for families.

**Community and Play Ground Cleaning (Mural):** Community members have the opportunity to come together and contribute to the beautification of our neighbourhood.

**Food Costing Project:** provincial project aimed at examining equitable food costing in low income neighbourhoods. Members of our Community and some staff are participating in this study.

**Social and Cultural Awareness Committee:** A committee consisting of staff and parents which aims to promote social and cultural awareness in all DFRC activities.

**Dartmouth North Community Action Network:** : A group of citizens and agencies from our Community who meet regularly to identify community issues and plans events and initiative to address the issues.

**Parent and Tot Outreach Program:** As a way to reach out to all families in our Community, we have been doing parent and tot programs in other Community venues.

**Parent Advisory Committee:** Staff provide ongoing support to the Parent Advisory Committee, a group of dedicated community parents who help in shaping decisions around programming and services at the Dartmouth family Resource Centre.

**Resources:** A Community Cupboard (food and toiletry items for exchange), toy lending and resource libraries, as well as a clothing room are available for families to access on a daily basis.



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### **FEATURES**

#### **SITES AND SERVICES**

**LOCATION:** Many families in Dartmouth North are living in difficult circumstances characterized by poverty, poor housing, and limited education levels. Dartmouth North has one of the highest birth rates in the province. Data from the Province's Department of Community Services (Family and Children's Services) show that this area has a significantly higher incidence of child abuse. Reports from the police suggest that the rate of crime is higher than elsewhere. School personnel have voiced concern that children are not adequately prepared for school entry.

**FOCUS: (families with pregnant mothers, infants and young children)** Programs are created for families when the mother first learns she is pregnant, and families with infants and young children up to the age of six.

**ACCESS:** Within the Dartmouth North catchment area programs and services are offered to all families with young children.

**ACCESSIBILITY: (time, location, transportation, child care)** Most programs take place at consistent times in the day, (i.e. 9:30-11:30 or 1:30-3:30) to ensure less confusion for families around program times. Some evening programs take place to accommodate families who are not able to make daytime programs. Programs take place primarily at the DFRC, however some programs take place at the Dartmouth North Community Centre to improve accessibility and visibility. The DFRC provides bus tickets for families to attend programming and also provides child care for families while participating in programs.

**SERVICES:** The following represents a list of partners instrumental in providing the essential program components:

- IWK Health Centre (provision of Developmental Psychologist for 2 half days per week).
- Public Health Services (Public Health Nurse)
- DFRC Staff (Speech-Language Pathologist, Early Childhood Educators, Community Home Visitors, Administrative Assistant, Executive Director, Program/Evaluation Assistant)
- Dartmouth Boys' and Girls' Club (Preschool Program)
- Social Worker (Dept. Of Community Services)

Agencies to network with that also provide early intervention services:

- The Progress Centre for Early Intervention
- The Nova Scotia Hospital's Mental Health Outpatient Services
- Dartmouth Developmental Centre
- Nova Scotia and Hearing and Speech Clinic
- Drug Dependency Services
- Dalhousie University
- Child Protection Services (Dept. Of Community Services)

- IWK Developmental Clinic

**FUNDERS: Major funders include:**

- Health Canada, CAP-C
- Lawson Foundation
- Invest-in-Kids Foundation
- Provincial Department of Community Services
- Provincial Department of Health
- IWK Health Centre
- Metro United Way
- Royal Bank of Canada

**Additional Funders (Including In-kind Support)**

- Capital District Health Authority
- Human Resources Development Canada
- Various businesses, service clubs, etc.
- Mt. Saint Vincent University
- Dalhousie University
- Unilever Canada

**OUTREACH:** One of Growing Together’s essential services is the offer of a celebratory visit by our Community Home Visitors to each family of a newborn in Dartmouth North. Subsequent follow-up calls and visits are made to the new parents. The Community Home Visitor role is to assist families to celebrate family, strengthen confidence, promote satisfaction, promote access to community and its resources, and to reduce isolation. The types of support they offer include information and advice, emotional support and encouragement, material goods and physical assistance. The purpose of this support is to promote social comparison, validation and normalization, exchange and learning of coping strategies and resources through peer problem solving. The Community Home Visitor Role is filled by women from the community who share similar life experiences as the families they visit and have direct knowledge of, and passion for, the types of programs and supports offered at the Centre.

Recognizing that many families in our Community with toddlers and preschoolers are not being accessed, we have decided to expand our outreach capability. We have set aside strategic days of the month to attend food banks, shopping areas, and neighbourhood streets in order to talk to families in person. We will also look at expanding programming to other areas in the Community, such as church basements, recreation centres, etc..

**ADAPTATION:** Home visiting by the Developmental Psychologist and the Speech and Language Pathologist are made as a way of reaching families with children who have developmental concerns or who are at risk for developmental delay. The Growing Together team has also established a process to enhance our linkages with Community Services and the Child Protection Unit in order to best support those families who are involved in Child Welfare cases. Parenting programs are adapted by the Community Home Visitors in order that they can bring parenting programs into the homes of families who are not regularly attending the Centre, yet who are in high need of parenting support.

**PARENT PARTICIPATION:** Parents have meaningful and significant roles in the design and implementation of the Growing Together model at DFRC. Parents sit on the DFRC Board and there is a Parent Advisory Committee which provides staff with programming ideas and suggestions, provides feedback on programming and facilitates community awareness and involvement. The Growing Together site committee has two parent representatives who help assure that the design of the Growing

Together model reflects the needs, wishes, and resources of the community. Parents are also involved as program facilitators and centre facilitators. They also provide direct input into programming by attending coordinators meetings for DFRC planning. Focus groups with community members occur periodically as a way to get feedback and input into programs and services.

**QUALITY:** Statistics are collected on program attendance and family activity at the DFRC. Feedback sheets are distributed to families who participate in programs and services. Periodic focus groups take place to get input and feedback from families. Regular staff development days are held to ensure ongoing training and that best practices are reviewed. Biweekly staff meetings take place as well as biweekly Growing Together team meetings. Informal feedback from the community is valued and integrated when possible into the Growing Together model.

**EVALUATION:** The DFRC has set up a IMS to input all of the data that we have been collecting for the Growing Together project including:

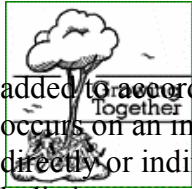
- Community Home Visitor Statistics
- Program Attendance
- Family Activities
- Assessments or Monitoring
- Ages and Stages Data
- Family Plan Information
- Information obtained from questionnaires
- Family demographic information

## **TEAM FUNCTIONING**

**SERVICE PROVIDERS: Transdisciplinary** The Growing Together team uses a systematic process for sharing roles and crossing disciplinary boundaries to maximize communication, interaction, and cooperation between members. Team members consist of Psychologist, Public Health Nurse, Community Home Visitors, Speech Language Pathologist, Social Worker, Early Childhood Educators, Administrative Assistant, Program and Evaluation Support Staff, and Executive Director. Members have made a commitment to teach, learn, and work together across disciplinary boundaries to implement coordinated services. Parents are full active team members and can coordinate services if they chose to.

**PROFESSIONAL RELATIONSHIPS:** Training for the team is ongoing and occurs during regular professional development days. Case conferences take place during regular Growing Together team meetings or during meetings scheduled throughout the week. Team members also participate in training workshops outside of DFRC when it is relevant to the Growing Together mandate. Students from our local universities in fields such as: social work, nursing, early childhood development, speech and language pathology, and nutrition do regular placements within the DFRC.

**RELATIONSHIPS:** Team members and family conduct a comprehensive developmental assessment together, with parents as full, active and participating members of the team. Team members and the parents develop a family plan based upon family priorities, needs, and resources. Specific team members are assigned to implement the plan with the family. To reflect the coordinated service, a central filing system exists where all information pertinent to a particular family is kept in one file and



added to accordingly by team members as they interact with the family. Debriefing by team members occurs on an informal basis outside of case conferences, when appropriate. All team members, either directly or indirectly involved with family, are involved in the planning and implementation to ensure a holistic approach.

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#### **PRINCIPLES**

**CHILD DEVELOPMENT FOCUS:** The goal of Growing Together, Dartmouth North is to improve the health, well-being, and development of infants and young children from 0-6 years of age in the catchment area of Dartmouth North. The project recognizes that during the early years, healthy child development is influenced by a number of interacting factors, the most critical of which is the parent/caregiver. Therefore, programs and services directly address child development areas, as well as those areas important to parents and caregivers that are thought to affect the child.

**ECOLOGICAL OR TRANSACTIONAL:** The theoretical stance of the Growing Together Dartmouth North model recognizes that multiple factors contribute to children's development. This approach recognizes that parental support is critical and that some of the problems families face are of a systemic nature requiring intervention at the community level. Intervention can occur by mobilizing group and community resources and by advocating for a variety of measures and services that contribute to the development of safe and sustainable communities. Factors thought to have an influence on healthy child development include the family's: income and social status, social support networks, education, employment and working conditions, physical and social environments, personal health practices and coping skills, health services, and culture.

**RESPECTABLE, TRUSTING, CARING:** The Growing Together Dartmouth North (GTDN) model reflects respect, trust, and caring for all involved by:

- valuing the knowledge and skills that community members bring to the project
- welcoming families in a warm open non-threatening way
- supporting without judgement
- providing a physical environment which is comfortable for all ages and developmentally appropriate
- ensuring that staff and volunteers interact with children, parents, and families and with each other in a welcoming, caring, and respectful manner
- ensuring that the content of the programs are respectful of and responsive to the needs of participants
- using language that focuses on strengths and skills rather than deficits and weaknesses

#### **FLEXIBLE, CULTURALLY APPROPRIATE AND SENSITIVE SERVICES:**

GTDN provides services and programs that are sensitive to the diverse needs of individuals, families, and the community. The project responds to the needs through the:

- type, duration and content of the activities offered
- formal and informal training opportunities available



- policies developed and procedures followed
- working relationships established

Specifically, the project demonstrates sensitivity to and respect for differences by putting in place and adhering to an anti-discriminatory policy and process, using language and processes in recruitment, programming and management practices that are respectful and inclusive and applying policies and practices equitably to all people.

**CONSIDERATION OF STRENGTHS AND PROTECTIVE FACTORS:** We

recognize that individuals come to our program with different strengths, goals, and capacities, and that strengths should be recognized and nurtured as a way to focus on healthy child development goals. Strengths and capacities are identified and are used as a foundation to work with the families in setting goals to meet the needs and the challenges that they face.

**SEAMLESS SERVICES:** Families involved in GTDN are provided with unhindered access to community resources, professional services, and social supports. Support and services are provided in natural settings including: the family home, DFRC, Preschools, schools, etc. In this way, programs become integrated into families' daily lives. Service providers work in a coordinated and collaborative manner so that families are provided with an array of services, hence avoiding duplication, enhancing existing services, smoothing movement between existing services, and meaningful use of existing resources.

**PROFESSIONALISM:** Staff development days occur on an ongoing basis. Training from outside facilitators from Dalhousie University, Community Services, and in-house staff takes place to enhance our work. All non-clinical staff are currently being trained in the NCAST Infant and Feeding Assessment and Teaching protocols. Team meetings occur on a weekly basis where family plans, best practices, and communication amongst staff and participants are highlighted.

**PARENT AND COMMUNITY LEADER PARTICIPATION:** Parents, families, and communities participate fully in all aspects of the model (planning, developing and evaluating programs and DFRC's management) as they know best what will work in their community. DFRC understands that the community, which it serves, must form the Centre's evolution, including the direction of GTDN. Specifically, the Growing Together Advisory Committee which is comprised of community members works with DFRC and project staff to assure that the design and implementation of Growing Together Nova Scotia :

- reflects the needs, wishes and resources of the community
- adheres to the philosophy and mission of DFRC
- contributes to shaping the program guidelines set forth by the DFRC, the Provincial Advisory Group, Invest In Kids, and other partners.

**HIGH QUALITY:** All staff and volunteers require extensive orientation, and on-going training around the GTDN program (e.g., philosophical underpinnings, programs and services); individual roles, responsibilities, and team concepts; and use of materials (e.g., administering assessment and monitoring instruments), etc. Some of the training material (e.g., home visitation program) will come through Invest in Kids. Where necessary appropriate resources will be used to assist with training needs assessment, development of materials and delivery of training. In order to be most effective, it is recognized that staff and volunteers will need to pay particular and on-going attention to building a strong, cohesive team. To this end, regular training and team-building opportunities will be developed for all those who provide services through Growing Together. Feedback from the community and the GTDN team around the programs and services are continually monitored and integrated in planning and implementation.

The DFRC Board is committed to ensuring that pay equity and appropriate compensation occurs for all staff.

# BUDGET & TRACKING TEMPLATE

DATE: April 15, 2003 Annual Plan

PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
<p>➤ Early Screening of Mothers and Newborns</p>	<p>i) Nobody's Perfect Parenting Program A program which helps parents to recognize their strengths and to find positive ways to raise happy, healthy children.</p> <p><b>In-kind Services from Public Health Services</b></p> <p>ii) Helen Parkyn Post Partum Screening Tool for newborns to identify families with babies at potential for developmental and other issues.</p> <p>iii) Home visits by Public Health nurses focussing on maternal and newborn health in the post partum period.</p> <p>iv) Canada's Prenatal Nutrition Program (Baby Building Club) A self-directed program for expectant moms offered in a group setting. Moms have an opportunity to talk with other moms and share experiences along the nine-month journey in to parenthood. Groups are supported by Public Health</p>	<p>\$ 1, 512.44</p>	<p>\$ 7,952.44</p>	<p>Statistics are not yet available from Public Health Services.</p> <p>N= 30 families</p>	<p>Anticipate serving 9 families through Nobody's Perfect.</p> <p>Statistics from Public Health Services are not available</p>

PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
	Services. To increase accessibility to nutritionally sound food during pregnancy, food supplements are available to the participants				
➤ Ongoing Monitoring, Assessment and Referral	<p>i)Case management of Family Home Visiting Program by GT Coordinator. Families are referred to other agencies in catchment area for consultation and service.</p> <p><b>In-Kind Services from Public Health Services</b></p> <p>ii)Postpartum Nursing Home Visit</p> <p>i)Case management of Family Home Visiting Program by GT Coordinator. Families are referred to other agencies in catchment area for consultation and service.</p> <p><b>In-Kind Services from Public Health Services</b></p> <p>iii)Postpartum/Infant Monitoring to Six Weeks Families with newborns are typically seen within four weeks by physician or Public</p>	\$ 5,555.09	\$ 13,635.09	62 children  Statistics are not available from Public Health Services.	34 families  Statistics are not yet available from Public Health Services.

PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
	<p>Health nurse</p> <p>Immunization Status Public Health Services and physicians administer the publicly funded immunization program. Public Health monitors the immunization status of children ages 0-6 and has a reminder system in place.</p>				
<p>➤ Child Centred Programs</p>	<p>i) "Ready to Learn" An opportunity for children to experience learning in a small group setting, this program is designed for children who will enter the school system in the upcoming year.</p> <p>ii) School Support Working in cooperation with a Grade Primary teacher, a family home visitor assists 5-year olds that require extra classroom support. This program takes place two mornings per week.</p> <p>iii) Early Intervention Program</p>	<p>\$ 6,064.07</p>	<p>\$ 21,024.07</p>	<p>66 Children (Total # for all programs in this category)</p>	<p>66 Families (Total # for all programs in this category)</p>

PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
	<p>A home visiting program available in one area of the Growing Together catchment area, this program focuses on children with disorders, disabilities and /or health impairments. Home visits provide developmentally appropriate activities and suggestions that can work in the home to better support the child and family.</p>				
<p>➤ Parent-Child Centred Programs</p>	<p>i) Play Groups/Drop-In's An informal opportunity for parents/caregivers and children to come together in a safe, friendly, developmentally appropriate environment to enjoy each other's company.</p> <p>ii) "Read to Me"/Book Bag Programs A literacy program aimed at three-year olds which focuses on the enjoyment of books and exposes the parents to various authors. With the Book Bag program, children are allowed to borrow books on a weekly basis.</p>	<p>\$ 32,121.78</p>	<p>\$ 102,661.78</p>	<p>318 Children (Total # for all programs in this category)</p>	<p>269 Families (Total # for all programs in this category)</p>

PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
	<p>iii) Baby Talk An informal opportunity for parents and their infants (0-24 months) to come together and enjoy a safe, friendly, developmentally appropriate environment. The program involves a play time and an information exchange between parents.</p> <p>iv) Mother Goose An early literacy program for parents and children which uses familiar nursery rhymes and stories to encourage parents to use language with their children from infancy on up.</p>				
➤ Family Support Programs	<p>i) Outreach – Family Home Visiting Program Six family home visitors work out of three GTNV sites. This program is offered to all new mothers in the catchment area by Public Health nurses during their initial postpartum contact. Referrals also come from community agencies as well as families themselves.</p> <p>ii) First Steps Parenting</p>	\$ 43,755.06	\$ 115,495.06	103 Children (Total # for all programs in this category)	75 Families (Total # for all programs in this category)

PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
	<p>Program A ten week program that is designed for parents of newborns. The program will help to answer some of the questions that new parents have, and offer support as the participants share their experiences. Topics include bathing, feeding, play, health and safety.</p> <p>iii) “How to Talk So Kids Will Listen” An eight week program that is designed to help parents communicate and improve their relationship with their children.</p> <p>iv) Parent Circle Chats An informal opportunity for parents to get together and discuss a variety of issues.</p>				
➤ Community Development	i) Education on the importance of early childhood development is the focus of a display that GTNV uses at various Health Fairs, Community Information Sessions and Conferences	\$ 10,991.56	\$ 39,231.56		500 Families (This is an estimate as we reach a lot of families through our community development activities.)



PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
	<p>throughout the catchment area.</p> <p>ii) Newsletters Information and updates on Growing Together programs and services.</p> <p>iii) Family Health Fair Day long information sessions for parents which focuses on their interests.</p> <p>iv) Babysitting Course Childcare is a major issue in the GT catchment area as formal childcare services do not exist. GT staff are trained facilitators in the St. John Ambulance Babysitters course and offer this program in many GT communities.</p> <p>v) Parent Information Workshops on Childcare</p> <p>vi) Growing Together</p>				

PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
	Partners' Meetings Quarterly meetings of community agencies and organizations that work with the GT program on a regular basis.				
TOTAL	Programs	\$ 100,000.00	\$ 300,000.00	579 children	953 families

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DATE: April 15, 2003 Annual Plan

PROGRAM COMPONENT	PROGRAMS	INVEST IN KIDS \$ ALLOCATION	TOTAL BUDGET ALLOCATION	TOTAL NUMBER OF CHILDREN SERVED	TOTAL NUMBER OF FAMILIES SERVED
<p>➤ Early Screening of Mothers and Newborns</p>	<p>i) Nobody's Perfect Parenting Program A program which helps parents to recognize their strengths and to find positive ways to raise happy, healthy children.</p> <p><b>In-kind Services from Public Health Services</b></p> <p>ii) Helen Parkyn Post Partum Screening Tool for newborns to identify families with babies at potential for developmental and other issues.</p> <p>iii) Home visits by Public Health nurses focussing on maternal and newborn health in the post partum period.</p> <p>iv) Canada's Prenatal Nutrition Program (Baby Building Club) A self-directed program for expectant moms offered in a group setting. Moms have an opportunity to talk with other moms and share experiences along the nine-month journey in to parenthood. Groups are</p>	<p>\$ 1, 512.44</p>	<p>\$ 7,952.44</p>	<p>Statistics are not yet available from Public Health Services.</p> <p>N= 30 families</p>	<p>Anticipate serving 9 families through Nobody's Perfect.</p> <p>Statistics from Public Health Services are not available</p>

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	supported by Public Health Services. To increase accessibility to nutritionally sound food during pregnancy, food supplements are available to the participants				
➤ Ongoing Monitoring, Assessment and Referral	<p>i)Case management of Family Home Visiting Program by GT Coordinator. Families are referred to other agencies in catchment area for consultation and service.</p> <p><b>In-Kind Services from Public Health Services</b></p> <p>ii)Postpartum Nursing Home Visit</p> <p>i)Case management of Family Home Visiting Program by GT Coordinator. Families are referred to other agencies in catchment area for consultation and service.</p>	\$ 5,555.09	\$ 13,635.09	<p>62 children</p> <p>Statistics are not available from Public Health Services.</p>	<p>34 families</p> <p>Statistics are not yet available from Public Health Services.</p>

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	<p><b>In-Kind Services from Public Health Services</b></p> <p>iii) Postpartum/Infant Monitoring to Six Weeks Families with newborns are typically seen within four weeks by physician or Public Health nurse</p> <p>Immunization Status Public Health Services and physicians administer the publicly funded immunization program. Public Health monitors the immunization status of children ages 0-6 and has a reminder system in place.</p>				
➤ Child Centred Programs	<p>i) "Ready to Learn" An opportunity for children to experience learning in a small group setting, this program is designed for children who will enter the school system in the upcoming year.</p> <p>ii) School Support Working in cooperation with a Grade Primary teacher, a</p>	\$ 6,064.07	\$ 21,024.07	66 Children (Total # for all programs in this category)	66 Families (Total # for all programs in this category)

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	<p>family home visitor assists 5-year olds that require extra classroom support. This program takes place two mornings per week.</p> <p>iii)Early Intervention Program A home visiting program available in one area of the Growing Together catchment area, this program focuses on children with disorders, disabilities and /or health impairments. Home visits provide developmentally appropriate activities and suggestions that can work in the home to better support the child and family.</p>				
➤ Parent-Child Centred Programs	i)Play Groups/Drop-In's An informal opportunity for parents/caregivers and children to come together in a safe, friendly, developmentally appropriate environment to enjoy each other's company.	\$ 32,121.78	\$ 102,661.78	318 Children (Total # for all programs in this category)	269 Families (Total # for all programs in this category)

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	<p>ii) "Read to Me"/Book Bag Programs A literacy program aimed at three-year olds which focuses on the enjoyment of books and exposes the parents to various authors. With the Book Bag program, children are allowed to borrow books on a weekly basis.</p> <p>iii) Baby Talk An informal opportunity for parents and their infants (0-24 months) to come together and enjoy a safe, friendly, developmentally appropriate environment. The program involves a play time and an information exchange between parents.</p> <p>iv) Mother Goose An early literacy program for parents and children which uses familiar nursery rhymes and stories to encourage parents to use language with their children from infancy on up.</p>				

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<p>➤ Family Support Programs</p>	<p>i) )Outreach – Family Home Visiting Program Six family home visitors work out of three GTNV sites. This program is offered to all new mothers in the catchment area by Public Health nurses during their initial postpartum contact. Referrals also come from community agencies as well as families themselves.</p> <p>ii) First Steps Parenting Program A ten week program that is designed for parents of newborns. The program will help to answer some of the questions that new parents have, and offer support as the participants share their experiences. Topics include bathing, feeding, play, health and safety.</p> <p>iii) “How to Talk So Kids Will Listen” An eight week program that is designed to help parents communicate and improve their relationship with their children.</p>	<p>\$ 43,755.06</p>	<p>\$ 115,495.06</p>	<p>103 Children (Total # for all programs in this category)</p>	<p>75 Families (Total # for all programs in this category)</p>



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	iv) Parent Circle Chats An informal opportunity for parents to get together and discuss a variety				
➤ Community Development	i) Education on the importance of early childhood development is the focus of a display that GTNV uses at various Health Fairs, Community Information Sessions and Conferences throughout the catchment area.  ii) Newsletters Information and updates on Growing Together programs and services.  iii) Family Health Fair Day long information sessions for parents which focuses on their interests.  iv) Babysitting Course Childcare is a major issue in the GT catchment area as formal childcare services do not exist. GT staff are trained	\$ 10,991.56	\$ 39,231.56		500 Families (This is an estimate as we reach a lot of families through our community development activities.)

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	<p>facilitators in the St. John Ambulance Babysitters course and offer this program in many GT communities.</p> <p>v) Parent Information Workshops on Childcare</p> <p>vi) Growing Together Partners' Meetings Quarterly meetings of community agencies and organizations that work with the GT program on a regular basis.</p>				
TOTAL	Programs	\$ 100,000.00	\$ 300,000.00	579 children	953 families