



Early Childhood Iowa
(DRAFT GUIDANCE)
Strategies to Measure and Build on Collaborative
Relationships
Tool YY

256I.9

4c.) An area board's designation shall be determined by evidence of successful collaboration among public and private early care, education, health, and human services interests in the area or a documented program design that supports a strong likelihood of a successful collaboration between these interests.

Collaborative partnerships rely on participation by at least two parties who agree to share resources, such as finances, knowledge, and people. Organizations in a collaborative partnership share common goals. ... The relationships between collaborative partners can lead to long term partnerships that rely on one another.

Possible strategy for determining the collaborative relationship: Conduct an early childhood collaboration/relationship survey

The collaboration survey is sent to partner groups to best determine how the community is collaborating to support early childhood in their community. Possible members of the collaboration group could include:

Health Partners

- Local health organizations
- Health providers

Human Service Partners

- Decategorization board(s)
- Prevent child abuse councils
- Community partnerships for protecting children
- Community action agencies
- MCOs

Education Partners

- School district administration
- AEA leadership
- Community colleges or higher education entities
- Libraries and Museums
- Local preschool programs
- Head Start

Community Groups

- Collaborative committees
- Faith community
- Local government
- Parent advocacy groups
- Law enforcement

Business/Economic Development Groups

- Community foundations
- Philanthropic organizations
- Chambers of commerce
- Economic development groups

Questions to Consider:

History of collaboration or partnerships in the community:

Strongly disagree/disagree/neutral/agree/strongly agree

1. Organizations in our community have a history of working together.
2. We have formed a collaborative group to discuss ways for the community to address needs of families and young children.
3. Solving problems through multi-agency/service efforts has been a common practice in the community.
4. Collaboration efforts are built upon prior experiences and shared goals to grow opportunities for meeting the needs of families and young children.

Membership:

Strongly disagree/disagree/neutral/agree/strongly agree

1. The people involved in our collaboration represent a cross-section of those who have a stake in what we are trying to accomplish.
2. All of the organizations that we need to be a part of the community collaboration effort are a part of the discussions.
3. My organization benefits from being involved in this collaboration.
4. Our collaborative partners share an understanding and respect for each other and their respective organizations: how they operate, their cultural norms and values, limitations, and expectations.
5. Collaboration partners reflect the racial/ ethnic/cultural characteristics of the community in which we operate.
Our collaborative has broadened its membership and its outreach to other groups to make us more representative of the whole community we serve and the clients we seek to help.

Common Vision:

1. Our collaborating partners have the same vision and agreed upon large goal for our collaboration.
2. Members in the collaborative share a common understanding of systems change.
3. Our work does not duplicate existing efforts, but adds unique value to members of the group and to other related initiatives.
4. Our collaborative has set a clear, limited number of priorities in a way to enable us to devote concentrated resources to these priorities.
5. We have identified short-term outcomes that are clear and measurable. Long-term impacts are recognized and guide the work.

Collaborative Process:

1. Collaborating partners value the process of engagement as the means to achieve their outcomes.
2. Our collaboration partners hold themselves and each other accountable.
3. Our collaboration embodies a spirit of cooperation and has the ability to discuss differences of opinion and perception and difficult issues openly, working together to find out what will work best for the group.
4. Our collaborative has developed an inventory of community assets including mutual aid, self-help, and support groups.

Governance and Accountability:

1. Our collaborative has agreed upon an annual, public review of the outcomes which we have set as the indicators of our success in meeting our goals.
2. Our collaborative intentionally employs an equity lens when developing priorities, policies, services and programs.
3. Our collaborative has set a clear, limited number of priorities in a way to enable us to devote concentrated resources to these priorities.
4. Our collaboration uses data and information to refine our strategies and has the ability to sustain a community agenda during changes in the environment or among participants.
5. Our collaboration creates opportunities to reflect, assess what is learned and apply it to their community impact work and within their respective organizations.
6. Our collaborative has begun assessing the impact of recent budget cuts on populations in need in our community.
7. Our collaborative has developed a summary of the most important items other governments' and agencies' budgets that affect children and families, including but not limited to entities such as the United Way, local public health agencies, human services programming, cities, and school districts.
8. Our collaborative has developed a plan for identifying and mobilizing non-financial resources from throughout our community.

Community Engagement:

1. Our collaborative has developed ways of gaining feedback and involvement of community residents and parents which are not dominated by service provider points of view.
2. Our collaborative has addressed the problems of family stability and family income as part of our work with children and families and has designed programs that respond to these economic needs.
3. Our collaborative has informed our state legislative delegation of the state policy priorities which we support and the most important actions we need from the state government in support of our agenda at the local level.
4. Our collaborative facilitates a public dialogue of issues and maintains regular contact with the media (Facebook, Twitter, local newspaper, etc.).
5. Our collaborative partners interact often and have created formal, planned channels of communication to ensure all necessary information is conveyed to one another and to people outside the group.
6. We engage high-profile community leaders and emerging leaders who can motivate others, to assume leadership roles and promote the vision and work of our collaboration.
7. Our community is aware of the work of the collaboration and understands that our work is needed.

Open ended questions:

1. What are the strengths of our community collaboration?
2. What are the challenges impacting our collaboration?
3. How could the collaboration improve in terms of structure, membership, decision making, and community engagement?
4. What types of collaborative efforts specifically address services and supports available for young children with special needs?
5. How are young children with special needs, and their families, supported through care coordination and access to early care and education services?
6. What adaptations are made to support including children with and without special needs during community events?