**Community Convener and State Level Priorities Self-Assessment, 2017**

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| **Partnership name:** |  | | | | | | | |
| Describe the local partnership’s current involvement in state-level activities, including but not limited to the involvement of the ED, board members, or staff in state level activities of SC First Steps. |  | | | | | | | |
| Describe how the partnership currently supports state level First Steps programs (4K, EHS-CCP, etc.) and BabyNet within the local community, as applicable. Include the work of Local FS Teams. |  | | | | | | | |
| Describe how the partnership supports or promotes state, regional or local initiatives to improve school readiness, not necessarily connected to First Steps. Examples: Eat Smart Move More, ACEs Initiative of the Children’s Trust, etc. |  | | | | | | | |
| **Implementation Metric** | **Current Rating**  Check the box that best describes how effective the partnership currently meets the benchmark (check by clicking on the box) | | | | | | **Reason(s) for Rating** | |
| **Support for state level priorities for school readiness** | **Needs Improvement**  Does not often engage in state level activities of FS or other state partners; does not work with state FS programs (4K, EHS), as well as BabyNet on a consistent basis | | **Meets**  Collaborates with state level FS programs and BabyNet in the county; ED involved in one or more FS committees; supports one or more non-FS state initiatives | | **Exceeds**  Meets + actively recruits providers and clients for state programs; ED chairs one or more FS committees | |  | |
| **Interagency and Public-Private Collaboration**  Describe each interagency organization, committee or initiative the local partnership **participates in**, within the local community. Describe the group’s purpose and what role the local partnership serves in the group (convener, partner, etc.), and how the group meets an **identified need** per the partnership’s community needs assessment. | | | | | | | | |
| **Organization/Initiative**  Name, purpose, membership | | **Lead Organization**  (can be the local partnership, or other organization) | | **Role of Local Partnership** and who from the partnership participates (ED, staff, board) | | **School Readiness Need(s)** addressed by the organization or group | | |
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| **(Optional) Innovative Practices** What about the partnership’s approach to serving as a community convener is particularly innovative, in terms of making progress toward school readiness goals and benchmarks? | | | | | | | | |
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| **RECOMMENDATIONS for board consideration:**  **COMMUNITY CONVENER services through 2020**  ***Consider any unmet, or in progress, Priority Goals from 2016-17*** | | | | | | | |
| What’s going well, that we should keep doing? Expand? | | | | | | | |
| What do we need to improve? | | | | | | | |
| Are we achieving the outcomes we want to see, based on our financial and staff investment? | | | | | | | |
| Are there activities we should discontinue? | | | | | | | |
| What community needs aren’t we addressing with our current activities? Are there new initiatives we should consider? | | | | | | | |
| What resources do we need, based on the changes we want to make? | | | | | | | |