

EARLY CHILDHOOD DEVELOPMENT

Action Plan 2017-2020



Cover photo:

Winter Walk (Yellowknives Dene) – *A toddler creating memories and a love for the outdoors.*

A good memory for many people in the North is walking along winter trails with our families, setting snares or looking for grouse. Being outside is a healthy way to keep busy during the long winter season.

Message

from the Minister of Health and Social Services and the Minister of Education, Culture and Employment

The first few years of a child's development are critical to creating a foundation for healthy development. Those early years provide an essential opportunity to nurture and support the healthy, social, emotional, cognitive and physical development of young children. Science is showing us that positive development in early childhood helps prevent adult physical and mental health issues, as well as many social problems. Our investment in early childhood development not only improves overall child outcomes, but also builds a future where people are healthy, productive and contributing members of family, community and society as a whole.

Together, the Departments of Health and Social Services and Education, Culture and Employment continue to support all children and their families through programs and systems so that every child reaches their full potential. It is our pleasure to present the Early Childhood Development Action Plan for 2017-2020. This document continues to implement the directions set by the *Right from the Start: Early Childhood Development Framework* and subsequent Action Plans, while building on the priorities set out in the Mandate of the Government of the Northwest Territories.

This important work can only be achieved through continued partnerships and collaboration with Indigenous governments and community organizations. By working together as parents, caregivers, healthcare workers, childcare operators and teaching professionals, we will guarantee our

children receive the very best care and a strong start in a safe, nurturing and healthy environment. Optimizing the early years of children's lives is one of the best investments the Northwest Territories can make towards achieving future long term economic and social sustainability.



Glen Abernethy
Minister of Health and Social Services



Alfred Moses
Minister of Education, Culture and
Employment

Artistic interpretation of the early childhood development action plan commitments – Art and words by Melaw Nakehk’o



Winter Walk (Yellowknives Dene)
A toddler creating memories and a love for the outdoors.



Three Mothers (Inuit)
Indigenous women support each other in pregnancy, childbirth and early motherhood.



Family Time, Story Time (Tłı̨chǫ)
A family with young children spends time together during their bedtime routine.



Feeding Baby (South Slave)
An Elder patiently showing a young father how to feed and bond with his baby.



Bush Tea (Gwich'in)
Stopping for tea while traveling on the land or to a family camp.



Reading Time
Children discovering their love for books, for stories, being comfortable in a classroom with their classmates.



Getting Ready
Getting ready to go outside to play, putting on boots and zipping up coats, becoming more independent, learning to take care of yourself.



Whale Camp (Inuvialuit)
A clear day with no wind nor bugs, it is a nice day to work, share and pass down knowledge.



Home with Baby (Dehcho)
A new family experiences the growing love and joy in a safe and nurturing home.

Contents

Action Plan Overview	3
The Early Childhood Development Framework Implementation Review.....	4
The Early Development Instrument.....	5
RIGHT FROM THE START	6
Commitment 1 Expectant mothers will have access to evidence-based services that support improved outcomes for mom and baby.....	8
Commitment 2 Early intervention programming aimed at infants, children and parents will be expanded	12
Commitment 3 Early childhood assessment, intervention, and responses will be improved.....	15
Commitment 4 Coordination and integration improved across the continuum of ECD programs and services.....	18
Commitment 5 Promotion, awareness and education initiatives related to early childhood development available to all families and communities.....	21
Commitment 6 Access to high quality, affordable early learning programs and child care services are enhanced.....	24
Commitment 7 Monitoring, reporting and ongoing evaluation for continuous quality improvement in early childhood development programs and services.....	30

Action Plan Overview

The Framework for *Early Childhood Development: Right from the Start* (The Framework) was released in 2013 and guides the Government of the Northwest Territories' actions over a ten year period to improve the development of all children aged 0-5. It was based on a comprehensive community engagement process that included parents and caregivers, elders, early childhood experts and northern leaders. In addition, the report entitled *Success in Early Childhood: How Do We Get There* provided the evidence to support the Framework's development. The Departments of Health and Social Services (HSS) and Education, Culture and Employment (ECE) continue to work in collaboration to implement a renewed action plan for 2017-2020 which includes seven commitments and nineteen areas for action.

The first Early Childhood Development (ECD) Action Plan described the actions the two departments would undertake from 2014 to 2016 to advance the goals and commitments made in The Framework. Subsequently, the departments released the ECD Bridge Action Plan for 2016-2017 and undertook an ECD framework implementation review of the first three years of The Framework. The results of this review have been used to guide the development of the ECD Action Plan for 2017-2020. Where actions are listed as ongoing, this means that they will continue for the life of this Action Plan.

The Departments of HSS and ECE continue to utilize evidence informed decision making to develop a system that serves the needs of children and families, and enables children to be healthy, school-ready and reach their full potential.

The Department of HSS is working on the system wide adoption and roll out of a single Electronic Medical Record which is a potential source of data for monitoring patient level outcomes, and the Department of ECE is collecting data from the Early Development Instrument, which has been implemented at a territorial level since 2012.

Important work to support expectant mothers and their families is being advanced, including increasing access to midwifery, standardizing prenatal referrals for expectant mothers with addiction issues, and improving outreach and support through prenatal programming.

The Department of HSS is also expanding programs to improve oral health and nutrition, and building on the strength of the Healthy Family Program to reach families who do not access programming. In partnerships with one Indigenous Government and two Health and Social Services Authorities, the Department of HSS has developed and is supporting three early childhood early intervention pilot projects. Concurrently, universal screening tools and assessment are being standardized to identify vulnerable or at-risk families and children who could benefit from early intervention programs and services.

This Action Plan continues to expand work to ensure that every child, family and community in the NWT, including those most at risk, has access to high quality, comprehensive, integrated ECD programs and services that are community driven, sustainable and culturally relevant.

The Department of ECE is continuing to advance work that supports children, families, and communities by providing access to high quality early education programs, such as implementing Junior Kindergarten (JK) for four-year-old children in all Northwest Territories (NWT) communities and building an action plan for universal daycare within the NWT. This work includes enhancing program resources, such as developing an Early Learning Framework for children ages 0-3 years that reflects the cultures of the NWT, as well as identifying infrastructure needs to support early childhood and JK programming.

The Department of ECE is also continuing work to increase the number of qualified ECD professionals in licensed programs and developing a dual-credit ECD program for senior secondary students. A focus on improving the quality of licensed early childhood education and care programs is evidenced by the Department of ECE's efforts to implement the Early Childhood Environment Rating Scale in licensed early childhood programs. Lastly, both departments continue to work together to support children and families using an interdisciplinary approach to ensure that children who need support reach their full potential.

The renewed action plan supports the Government of the Northwest Territories' effort to offer high quality, inclusive and accessible ECD programs and services in a culturally capable environment.

The Early Childhood Development Framework Implementation Review

The implementation of the ECD Framework was reviewed in 2016-2017 with the purpose of generating evidence and background information from the first three years of Framework implementation and the first two Action Plans. The findings from this review process were used to inform the development of the Action Plan for 2017-2020.

Throughout the review process, ECD needs and gaps related to each of the Framework's commitments, and progress and accomplishments to date were identified. Targets for the 2017-2020 Action Plan were also suggested. Findings from the review process are represented under "Progress to Date, Accomplishments, and Gaps" in the Action Plan for 2017-2020. Additionally, the findings were used by staff to develop the targets and deliverables represented under "Work to Date" in the Action Plan for 2017-2020. Sources of information for the review included twenty one existing documents from both Departments, such as reviews and evaluations, Action Plan status reports, and feedback from ECD staff.

During the review process, many successes and challenges in implementing the ECD Framework were identified. Below are three recommendations that HSS and ECE must consider when implementing the Action Plan for 2017-2020.

1. Focus on the most relevant actions that align with the mandate of the GNWT (2016-2019). This ensures that the human and financial resources of both Departments are focused on the areas that are the highest priority of the Government. Both ECE and HSS have committed to prioritizing those actions that align with the mandate of the 18th Legislative Assembly for Action Plan for 2017-2020. This is reflected under each Area for Action's targets and deliverables.
2. Clearly identify program and service responsibilities at the staff/position level, rather than exclusively at the Departmental and divisional levels. Both ECE and HSS have committed to ensuring program and services responsibilities are identified through an internal workplan developed alongside the 2017-2020 Action Plan.

These internal, departmental documents will be continuously updated over the lifespan of the 2017-2020 Action Plan.

3. Develop and implement detailed program plans, data collection systems, and reporting structures to understand ECD progress on target initiatives and key indicators. Improved planning, data collection, and reporting would allow for more informed decision-making to ensure that the initiatives having the greatest impact are supported. This recommendation is being addressed across the Areas for Action, and has specific prominence within Area for Action 6 (Standardize the use and implementation of universal screening tools and assessments aimed at identifying vulnerable or at-risk families and children), and Area for Action 17 (Develop and implement a Monitoring, Evaluation and Accountability Plan for the renewed Early Childhood Development Framework and Action Plan).

The Early Development Instrument

The Early Development instrument (EDI), developed by the Offord Centre for Child Studies at McMaster University, is a population-based measure for communities to assess children's readiness to learn at school. Children are ready to learn when they can meet the expectations placed on them and when their development allows them to fully benefit from the learning experiences at school. Children who are not ready are at a disadvantage from the beginning and often never catch up. This highlights the importance of being able to assess the learning readiness of children early on in their development.

As the EDI is a population measure, it does not diagnose individual children, but instead provides a snapshot of the learning readiness of groups of five year olds as they get ready to enter grade one.

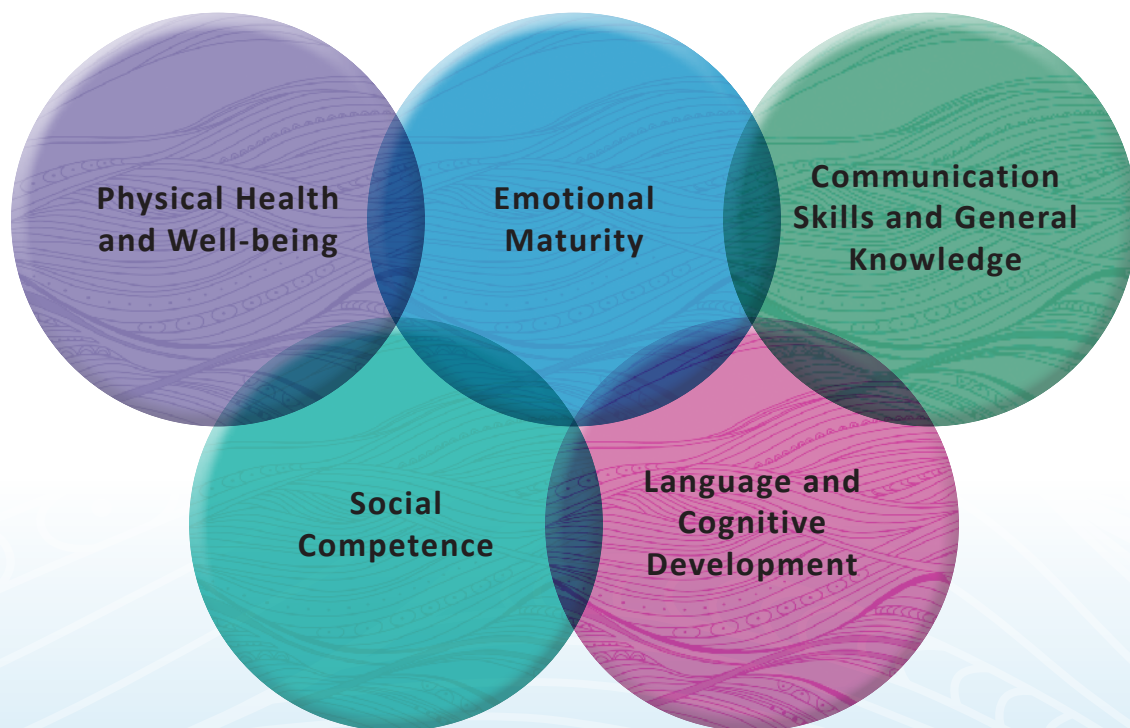
The EDI is a valid and reliable tool that has been implemented in school districts all across Canada and in several other countries around the world.

The EDI measures children's developmental health by asking questions about the five areas of their early development – referred to by researchers as developmental domains (Figure 1). These five areas of ECD are known to be good predictors of adult health, education, social outcomes and school readiness.

The Department of ECE has been collecting EDI information at a territorial level since 2012. All Education Authorities participate in EDI collection through a confidential checklist completed by all kindergarten teachers. ECE has completed a summary of the baseline results for the 2012, 2013 and 2014 school years.

As of 2016-2017, EDI data is in its sixth year of collection. ECE has continued a practice of providing training sessions for kindergarten teachers to ensure accurate completion of the survey, as well as sharing annual reports with Education Authorities.

ECE recognizes that the most important use of the EDI is for the evaluation and improved development of public policy, programs and funding initiatives that support children and families in their communities. As such, ECE has identified a need to make greater use of EDI data. In addition to developing and sharing a report on the first six years of EDI data, the 2017-2020 Action Plan identifies a further need to establish approaches to make effective use of EDI data to inform future planning and evaluation activities.



RIGHT FROM THE START

Vision

Children will have the best start in life, with supports that allow them to develop their fullest potential; creating a positive future for themselves, their families, and their communities.

Mission

To provide equitable access to a continuum of inclusive, culturally relevant ECD programs, services, and resources for children, parents, families and communities.

Guiding Principles



Our Goals

- Increased accessibility and participation in early childhood development programs, services, and supports for children and families.
- Enhanced quality of early childhood development programs, services, and supports.
- Improved integration and collaboration at all levels of the early childhood development system.

Our Commitments

- Expectant mothers will have access to evidence-based services that support improved outcomes for mom and baby.
- Early intervention programming aimed at infants, children, and parents will be expanded.
- Early childhood assessment, intervention, and responses will be improved.
- Coordination and integration will be improved across the continuum of ECD programs and services.
- Promotion, awareness, and education initiatives related to early childhood development will be available to all families and communities.
- Access to high quality, affordable early learning programs and child care services will be enhanced.
- Monitoring, reporting, and ongoing evaluation for continuous quality improvement in early childhood development programs and services.

Outcomes for Early Childhood Development

- Mothers are healthy and give birth to healthy babies who remain healthy.
- Children have safe, culturally appropriate early childhood development opportunities, including early learning and play.
- Children and families participate fully in their community: no one is left behind.
- Families have the knowledge, skills and resources needed to support their children's development.
- Residents of the NWT have access to quality ECD programs, services and supports.

Commitment 1

Expectant mothers will have access to evidence-based services that support improved outcomes for mom and baby.



Three Mothers (Inuit) – Indigenous women support each other in pregnancy, childbirth and early motherhood.

Many women in the North have to travel to a larger community one month before their due date to wait and have their babies in the hospital. Expectant mothers from small communities often travel alone and with little support from their partners or close family members. During these times supporting each other is so important.

Area for Action 1

Increase access to midwifery services and further integrate midwifery into perinatal care.

Progress to Date, Accomplishments, and Gaps

A child's early experience and environment have long-reaching impacts. Healthy development begins with a healthy pregnancy.

Hay River Midwifery and Fort Smith Midwifery Services continue to provide prenatal care, postpartum care and birthing services. The community midwifery program was implemented in Hay River in early 2015. A monitoring and evaluation framework for Hay River has been drafted.

The Beaufort Delta region implemented a Maternal Care Nurse Practitioner model in 2015-2016, which increased support to community-based perinatal services. The Beaufort Delta Regional Maternal Care Nurse Practitioner provides direct and indirect clinical services and education, and supports staff, perinatal clients and their families throughout the region. This model has improved continuity of care and care consistency for women in Inuvik and the Beaufort Delta region, successfully reaching previously hard to reach prenatal clients.

The department of HSS is currently engaging with the public on the design of a Territorial Midwifery Program to increase access to perinatal care options for NWT women.

The *NWT Prenatal Record* form was revised and standardized for use in all NWT health facilities to help identify mothers and families who can benefit from additional services.

In addition, the department is identifying ways to enhance the quality of perinatal care for NWT mothers and families. Consistent monitoring of the various

birthing service options currently available in the NWT will take place to identify infant and family outcomes across the service options.

Work to Complete

Deliverable:

Enhance access to birthing services and pre and postnatal care, including development of a Territorial Midwifery Model.

Targets:

- Examine ways to expand birthing options for NWT women and families by building on the results of public engagement activities to propose options for a Territorial Midwifery Program. (2017-2018)
- Implement the Hay River midwifery program monitoring and evaluation plan. (2017-2019)
- Renew and update the NWT Midwifery Practice Framework. (2018-2019)

Deliverable:

Establish a comprehensive perinatal database to further identify program and service needs.

Targets:

- Integrate the NWT Prenatal Record into the NWT Electronic Medical Record. (2017-2018)
- Develop perinatal information strategy, drawing on Electronic Medical Record data source and other data sources. (2019-2020)

Accountability: HSS

Area for Action 2

Standardize prenatal referrals for expectant mothers with addiction issues.

Progress to Date, Accomplishments, and Gaps

A harm reduction and recovery focused approach for mothers with addictions issues can help improve outcomes for mothers and baby. Supportive and non-stigmatizing interventions have been shown to be effective in supporting women to reduce or eliminate alcohol and drug consumption during pregnancy.

Fetal alcohol spectrum disorder (FASD) is the broad term used to describe the range of facial, intellectual and other issues associated with fetal alcohol exposure, and includes the more severe form, called fetal

alcohol syndrome (FAS). Drug use during pregnancy can also pose threats to unborn children and result in a range of issues, including intellectual challenges.

HSS formalized and standardized its referral process for expectant mothers with addictions issues in 2014-2015. Monitoring and reporting on the implementation of screening and priority access protocols for addictions and mental health treatment will be carried over to 2016-2017 to determine if the referral process is working in practice and if the

needs of women with addictions issues are met. Furthermore, the broader topic of addiction issues in pregnant women or the specific use of alcohol use during pregnancy will be addressed to work towards establishing a harm reduction intervention.

The Department of HSS is identifying ways to share information on care available to communities and clarify referral pathways to increase access to services.

Work to Complete

Deliverable:

Improve the new referral process for mothers with addictions to effectively meet the needs of families.

Targets:

- Improve awareness amongst front line professionals (CHNS, Physicians, teachers etc.) of the community based programs and services available to expectant mothers with addictions issues and how to make a referral. (2017-2018 ongoing)
- Develop a referral form and triage process that provides priority access to expectant mothers. (2017-2018 ongoing)
- Improve access to recovery oriented supports for expectant mothers experiencing social issues, including addictions. (2018-2019)
- Review existing data sources to validate the prevalence of risk factors and incidence of FASD. (2019-2020)

Accountability: HSS

Area for Action 3

Improve outreach and support for expectant mothers in the areas of nutrition, breastfeeding, referrals to community groups and resources, education around smoking, alcohol and drugs, mental health, labor and delivery information.

Progress to Date, Accomplishments, and Gaps

An expectant mother's environment and behavior have permanent effects on the health and well-being of her child. Prenatal programming provides expectant families with the knowledge, skills and confidence to prepare for delivery and parenthood.

The Healthy Pregnancy Group operated by the THSSA in Yellowknife aims to improve birth experiences and outcomes of pregnant women by providing education and training in four sessions – labour and delivery, post-partum, breastfeeding and healthy families. In addition, the Centering Pregnancy Program®, an evidence based group prenatal care model originally developed in the United States, is now being offered in Yellowknife since December 2015.

Work on achieving Baby Friendly Designation is ongoing. The Baby Friendly designation is an international initiative established by the World Health Organization to protect, promote, and support breastfeeding and care for childbearing women, their infants, and families. Breastfeeding training was conducted in Yellowknife and Inuvik in February 2016. Funding was allocated to Moms, Boobs and Babies to develop and implement peer support training which will take place in Yellowknife, Hay River and Inuvik in 2016-2017. Standards for breastfeeding and nutrition will also be identified based on best practices and BFI requirements. A standard BFI approved training package that supports the BFI process is to be developed and delivered in all regions.

As part of *Charting Our Course: Northwest Territories Cancer Strategy* partnerships were established to provide tobacco education and support to pregnant women and new mothers.

Although significant progress in this area across a variety of topic areas has been made, there is limited information on referral processes to family support programs for expectant mothers and their families.

Work to Complete

Deliverable:

Support facilities to achieve and maintain their BFI designation, and continue to promote community-based breastfeeding and prenatal nutrition programs.

Targets:

- Identify the barriers to breastfeeding in the NWT. (2017-2018)
- Support community groups, including NGOs to establish peer support groups adapted for local and Indigenous context. (2017-2018)
- Expand peer support groups to other communities in the NWT. (2018-2019)
- Deliver the BFI approved training package in all regions to support the BFI process. (2018-2020)

Deliverable:

Deliver standardized community based prenatal education programs to all expectant mothers in the NWT.

Targets:

- Continue to deliver the Centering Pregnancy Program® in birthing centers. (2017-2020)
- Determine approaches to share resource information to all families in the NWT (see Area for Action 10). (2017-2018)
- Examine prenatal education programs currently delivered in the NWT and determine opportunities for synthesis and standardization based on best practices. (2017-2018)
- Support community groups, including NGOs to promote the development and well-being of expectant mothers in a culturally relevant way. (2017-2018)
- Develop standards for prenatal education program based on existing programs. (2018-2019)
- Develop and implement alcohol and tobacco education and support for pregnant women and new mothers. (2018-2020)
- In partnership with community groups, including NGOs, deliver a renewed prenatal education program in all the regions of the NWT. (2019-2020)

Accountability: HSS

Commitment 2

Early intervention programming aimed at infants, children and parents will be expanded.



Family Time, Story Time (Tłıchǫ) – A family with young children spends time together during their bedtime routine.

It's important to make time in our busy lives to spend together as a family. Reading about our legends, poems or a book for 30 to 45 minutes every night helps our toddlers grow a love for books and reading. Our children will have great memories of this special and calm time.

Area for Action 4

Build on the strengths of the Healthy Family Program in all regions in the NWT.

Progress to Date, Accomplishments, and Gaps

The Healthy Family Program is a voluntary, home visiting prevention program focused on ECD. It is open to pregnant women and parents to be, caregivers and families with young children. The Healthy Family Program aims to improve the lives of young children as early as possible by nurturing parent-child relationships and the sharing of knowledge about ECD. The Program plays an important role in supporting overburdened families, a key element

of the *Building Stronger Families* Action Plan. Another aspect of the program is the promotion of healthy eating through the Collective Kitchen, a program funded by the Anti-Poverty Strategy. The program enhances cooking skills and addresses food security by providing access to healthy ingredients and recipes.

The 18th Assembly has made it a priority to foster healthy families by focusing on wellness, prevention, and improved nutrition. The Program is currently

available in all regions of the NWT, servicing sixteen NWT communities.

In 2015-2016, work was done to update the Healthy Family Program standards and process, and further review was required to determine whether there are more effective ways to reach families facing multiple stressors – especially in communities where the program is currently not available. A Healthy Family Program Framework will be finalized for implementation beginning in 2017-2018.

Work to Complete

Deliverable:

Deliver the Healthy Family Program framework and expand the program to additional communities.

Targets:

- Implement the revisions to the Healthy Family Program. (2017-2018)
- Refresh the guidelines of the Collective Kitchen program. (2017-2018)
- Subject to available resources, expand the Healthy Family Program to service additional communities. (2017-2020)
- Use the disparities identified within EDI reports and early childhood assessment data to design and deliver programming that addresses identified inequities. (2017-2020)

Accountability: HSS, ECE

Area for Action 5

Expand programs aimed at improving oral health and nutrition.

Progress to Date, Accomplishments, and Gaps

Based on the 2014 review entitled *Brushing Up on Oral Health*, HSS is developing an approach to address the following three goals:

1. Improve the quality of oral health programs for all NWT children;
2. Implement a population health approach to the promotion of oral health; and,
3. Implement a continuous quality improvement and accountability system to support oral health programs and services.

A regional oral health demonstration project was implemented in the last quarter of 2015-2016. The objective is to test the community-based prevention programming approaches to ensure relevancy at the community level. Stakeholder engagement to review and make appropriate revisions to program materials will be completed in 2016-2017.

During 2016-2017, ECE will continue to share oral health promotion and

prevention information, provided by HSS, with licensed child care facilities.

Consistent postnatal information, programming and supports including oral health prevention and promotion, and breastfeeding and nutrition should be made available to all families in the NWT.

Work to Complete

Deliverable:

Continue to support the development and implementation of an NWT Oral Health Strategy to improve oral health outcomes for children in the NWT.

Targets:

- Improve access to oral health promotion and prevention programs and services by integrating oral health care prevention activities into traditional primary care service delivery practices and establishing collaborative pathways for health and dental service providers to better coordinate care to children. (2017 and ongoing)
- Develop Oral Health Program standards, which will support standardized delivery of programs and services. (2017-2018)
- Improve oral health literacy through a public awareness campaign. (2017-2018)
- Improve our ability to measure oral health outcomes. (2018 and ongoing)

Deliverable:

Continue to share information and support licensed day cares and family day homes regarding oral health programming.

Targets:

- Change *NWT Child Day Care Standards Regulations* to include best practices for oral health. (2018-2019)

Accountability: HSS, ECE

Commitment 3

Early childhood assessment, intervention, and responses will be improved.



Feeding Baby (South Slave) – An Elder patiently showing a young father how to feed and bond with his baby.

Our communities support all families. Sometimes the mom cannot breastfeed or the parents aren't home. The support could come from a community health care worker, caregiver, elders, and many others.

Area for Action 6

Standardize the use and implementation of universal screening tools and assessments aimed at identifying vulnerable or at risk families and children.

Progress to Date, Accomplishments, and Gaps

Early intervention programming is important in preventing developmental delays, minimizing the negative effects of existing developmental challenges, and supporting children-at-risk. Screening should happen early and often to refer

children and their guardians to early intervention programs and services.

In 2014-2015, HSS completed a one-time assessment of 75% of all NWT children aged 5 born in 2009 using a pilot version of the new NWT Well Child Record form. The form

was an NWT version of the *Rourke Baby Record*, which is a clinically validated and nationally recognized early childhood health and development assessment tool. The assessment includes screening of sight, hearing, speech and developmental readiness.

The new Well Child Record is used by community and public health nurses as well as physicians as part of the delivery of the NWT Infant-Child Program and in primary care. Implementation of the NWT Well Child Record was completed in May 2015, including the development of resource material and training of health care providers.

The results from the pilot assessment, along with those from the Early Development Instrument (EDI), were used in the development of the Early Intervention Pilots (see Area for Action 7 for more information).

The Early Development Instrument (EDI) is a standardized assessment tool, developed by the Offord Centre for Child Studies, used to measure five core areas of early childhood development that are known to be good predictors of adult health, education, social outcomes and school readiness. EDI data is captured through a questionnaire completed by kindergarten teachers. As of 2016-2017, the EDI data is in its sixth year of collection. ECE has received the 2015-2016 EDI reports and will continue the practice of sharing reports with education authorities and other key stakeholders.

To support effective data collection in 2016-2017, ECE has continued to provide EDI training for JK/K teachers.

ECE has identified the need to make greater use of EDI data. As a result, a work plan has been developed so that EDI results can better inform programming and activities. This work will include the development of information sharing arrangements to allow key stakeholders to make effective use of EDI data, as well as an exploration of ways to link existing data sources, including broader socio-economic and program data, to the NWT Well Child Record and EDI data to inform planning and evaluation activities.

Work to Complete

Deliverable:

Generate a consistent reporting process intended to inform the general public and to identify population health and development trends for children aged 0-5.

Target:

- Use data from the NWT Well Child Record to identify population health needs of children and families. (2017-2018 and ongoing)

Deliverable:

Continue EDI data collection and reporting, and make effective use of EDI data to inform Early Childhood programs and services.

Targets:

- Report and publish results from the first six years of EDI data and share with key stakeholders including Education Authorities, Aboriginal Governments, other government departments, and licensed early childhood programs. (2017-2018)
- Use EDI data to inform program, resource and service delivery decisions that consider identified areas of greatest need. (2017-2020)
- Establish an approach for ECE to make effective use of data emerging from the Early Development Instrument (EDI), including exploration of data-linking possibilities. (2017-2020)
- Explore possibilities for information sharing arrangements with key stakeholders, which may include the establishment of formal information/data sharing agreements. (2017-2020)
- Explore possibilities to link EDI data and NWT Well Child Records to existing data sources, including broader socio-economic and program data, to inform planning and evaluation activities for both departments. (2017-2020)

Deliverable:

Continue to support the new NWT Well Child Record screening tool.

Targets:

- Continue to integrate NWT Well Child Record into the Electronic Medical Record system. (2017-2018)
- Ensure the NWT Well Child Record is meeting the needs of children and families, and being implemented as intended, by regularly monitoring and auditing this program. (2017 and ongoing)

Accountability: HSS, ECE

Area for Action 7

Provide consistent, equitable access to Occupational Therapy, Speech Therapy, Public Health, and mental health services, and follow up for children identified with developmental issues.

Progress to Date, Accomplishments, and Gaps

Part of early intervention programming is rehabilitation services, which provides targeted supports in key developmental areas to support children to achieve their full potential at home, in school and in their community.

Over the past two years, HSS has conducted two evaluations of important early childhood intervention and response services; Rehabilitation Services and TeleSpeech. These Reports will help guide future plans to improve service delivery in these areas.

During this time, the HSS has also worked with two Health and Social Services Authorities and one Indigenous Government to develop three ECD early intervention pilot projects. The pilot project teams used baseline data from the EDI, as well as the one-time NWT Well Child Record pilot results, to develop projects targeting regional needs.

Work to Complete

Deliverable:

Improve access to services and programs to meet the needs of children with developmental delays.

Targets:

- Develop an NWT integrated early childhood services delivery model for supporting children with complex needs and their families. (2017-2019)
- Implement the model based on availability of resources. (2017 and ongoing)
- Improve rehabilitation programming based on evidence, including research and evaluation findings from our own jurisdiction. (2017 and ongoing)
- Continue to advance and support the regional Early Childhood Intervention Pilot projects in the Tłıchǫ, Beaufort Delta, and Dehcho, and publish a final report on findings from these projects in 2018-2019.

Accountability: HSS, ECE

Commitment 4

Coordination and integration improved across the continuum of ECD programs and services.



Bush Tea (Gwich'in) – *Stopping for tea while traveling on the land or to a family camp.*

When you are out on the land, you make a fire and prepare tea. The camp is already set up and you are not in a rush. It could be a 45 min or a 10 min break where everyone is laughing and feeling good to be on the land. Different family members tell stories, usually the older family members will have a memory come back to them and share their stories. A tea break brings everyone together from their chores.

Area for Action 8

Strengthen the coordination and alignment between early childhood development programs, services, and the needs of communities.

Progress to Date, Accomplishments, and Gaps

Access to programs and services involves not just availability, but also family awareness of what is offered.

The *Review of Small Communities Initiative Funding* (2015) conducted by ECE found that there was limited community capacity to initiate and coordinate ECD programs in the community, speaking to the need to continue providing support for communities.

Over the past three years, HSS has supported the development of community wellness plans. Some of these plans have identified ECD-related goals, serving as important sources of information regarding community-based ECD priorities. ECE is currently working with HSS to increase early childhood representation in the development of community wellness plans and Community Healthy Living Fairs.

Throughout the NWT, the health and social services system works to provide quality services for all NWT residents – care that is respectful, responsive and accessible. A key part of this is making sure that all aspects of health and social services system are culturally safe for everyone, particularly for persons from cultures whose healthcare needs have been seen through a lens of racial discrimination.

The Department of HSS is committed to ensuring a culturally capable health care environment by planning and implementing initiatives to combat structural racism and develop cultural competency and safety.

Work to Complete

Deliverable:

Improve the coordination and alignment between early childhood programs and the needs of communities.

Targets:

- Continue to increase early childhood representation at the community and regional level in the development of community wellness plans and Community Healthy Living Fairs. (2017 and ongoing)
- Joint HSS/ECE Target: Promote, distribute and maintain a draft GNWT inventory of early childhood related supports, services and programs available in each community to licensed programs and other key stakeholders, including parents/ caregivers, education authorities, Aboriginal Governments, and other GNWT departments. (2017 and ongoing)

Deliverable:

Develop standard processes that assist with easing the transition to JK/K for NWT children and their families.

Targets:

- Develop a standard, territorial JK/K student registration form for schools. (2017-2018)
- Small scale pilot of a standard, territorial JK/K orientation process involving other community partners to support NWT children and their families' transition to school in a manner that creates the least amount of stress. (2017-2018)
- Small scale pilot the use of a standard, territorial JK/K student registration form for schools. (2018-2019)
- Large scale pilot of a standard JK/K orientation process involving other community partners to support NWT children and their families' transition to school in a manner that creates the least amount of stress. (2018-2019)
- Large scale pilot of standard JK/K student registration form for schools. (2019-2020)
- Territorial implementation of a standard JK/K orientation process involving other community partners to support NWT children and their families' transition to school in a manner that creates the least amount of stress. (2019-2020)

Deliverable:

Design interventions to support improved cultural safety for HSS, THSSAs and ECE family workers such as nurses, home visitors, teachers, social workers and early childhood educators.

Targets:

- Deliver a session on culturally relevant care and programming at any gatherings of ECD care providers. (2017 and ongoing)

Accountability: HSS, ECE

Area for Action 9

Support children who are at-risk, and their families, using an integrated case-management approach.

Progress to Date, Accomplishments, and Gaps

The complex challenges faced by many children and families in the NWT are best addressed through integrated and coordinated social supports and early interventions. An integrated team approach is a proven way of reaching

at-risk children and families, reducing barriers to wellness, achieving better outcomes, and helping children and families to receive appropriate and consistent care.

Information sharing is essential to supporting integrated care. For the past two years, an Integrated Case Management Pilot Project was managed by the Department of Justice to determine ways to effectively coordinate and respond to barriers that create challenges for residents seeking support and assistance from the social services system. The pilot program is currently being evaluated. This work is linked to ECE's Education Renewal and the ECD Action Plan Area for Action 10.

Through the Education Renewal Action Plan, HSS and ECE formed a working group to move forward on the information sharing pieces necessary to develop an integrated early childhood services delivery model. The Department of Justice supported HSS and ECE in discussions around a common consent form and Information Sharing Agreement, in compliance with HSS and ECE legislation.

To support earlier efforts to move forward on information sharing in a collaborative manner, the working group is assisting GNWT departments and agencies, Education Authorities, along with key stakeholders such as Aboriginal governments, non-governmental agencies, and other relevant service providers and individuals to work together to provide integrated services for the benefit of children and their families in early childhood settings and JK-12 schools, in particular those with complex needs and at risk.

In October 2016, ECE introduced a revised Early Childhood Program (ECP) funding model that includes a phased-in rebranding of the Healthy Child Initiative (HCI) funding to the Early Childhood Intervention Program (ECIP), which will lead to better programs and services for children who are at-risk, vulnerable and/or have specific needs.

Work to Complete

Deliverable:

Develop an NWT integrated early childhood services delivery model for supporting children with complex needs and their families.

Targets:

- Research and develop a NWT integrated early childhood services delivery model for supporting children with complex needs and their families. (2017-2018)
- Pilot the NWT integrated early childhood services delivery model in select communities with key stakeholders to support children with complex needs and their families. (2018-2019)
- Year 2 pilot of integrated early childhood services delivery model for supporting children with complex needs and their families. (2019-2020)

Deliverable:

Provide funding to assist licensed early childhood facilities with developing programs and services to meet the needs of children who are at-risk, vulnerable and/or have specific needs.

Target:

- Provide information and training to licensed early childhood facilities to assist with: identifying children who are at-risk, vulnerable and/or those with specific needs; and designing programs that will meet ECIP requirements. (2017-2020)

Deliverable:

Revise the Dealing with Child Abuse Handbook.

Targets:

- HSS and ECE work together to review and revise the Dealing with Child Abuse Handbook to be used in K-12 schools and licensed day care and family day homes. (2017-2018)
- Promote and distribute the Dealing with Child Abuse Handbook to all licensed day care and family day home operators. (2018 and ongoing)

Accountability: HSS, ECE

Commitment 5

Promotion, awareness and education initiatives related to early childhood development available to all families and communities.



Reading Time – Children discovering their love for books, for stories, being comfortable in a classroom with their classmates.

Teaching in pre-school is such a fun and interesting time: children ask questions and have their favorite books.

Area for Action 10

Target campaigns and technology to reach people with culturally relevant promotion and prevention tools to raise awareness about the importance of early childhood development, the impact of the early years, and the role of parents and those who work with children.

Progress to Date, Accomplishments, and Gaps

Supporting NWT parents and caregivers with information, tools, and options for programs and services aimed at healthy childhood development remains a priority. Work in this area has been focused on:

- Implementation of a social marketing campaign focused on self-regulation and oral health. Resources developed as part of the 2016-2017 bridge ECD Action Plan oral health communication

activities have been built in to the NWT Oral Health Strategic Initiative. Resources and promotional information on the topic of children's oral health continues to be distributed through various forums including the 2016 Early Childhood Symposium and ongoing Community Healthy Living Fairs. (see Area for Action 5)

- Distribution of iPad Mini Initiative, which was expanded in 2016-2017 to include NWT Library Services;
- Planning for revising the *Right from the Start* website and Facebook page.

The evaluation process identified a need to better understand the specific ECD information that parents, caregivers and families need most. Evaluations of the iPad Minis and TeleSpeech revealed that parents are interested in more information about developmental milestones, nutrition, health, and culture and language.

HSS continues to support the pre-natal programming offered through Vital Abel and Inuvik boarding homes; and

HSS will conduct an analysis of early results from the Early Childhood Intervention Pilot Projects to identify knowledge and information gaps where existing communication tools can be used to build awareness in areas of need and to inform future planning. HSS will conduct a health promotion campaign.

Work to Complete

Deliverable:

Publish a social marketing plan to guide ongoing community engagement.

Targets:

- Review current social marketing initiatives and collect additional research to ensure the intended audiences are being reached with impactful messaging and that barriers to behavior change are identified. (2017-2020)
- Recommends key tools, interventions and messaging to help mitigate identified barriers to desired ECD behaviors among key target audiences. (2017-2020)
- New content for the *Right from the Start* website/Facebook page and explore the feasibility of other non-digital outreach mediums (i.e. radio) based on evaluation evidence from the early intervention pilot projects. (2017-2020)
- Continue to enhance the *Right from the Start* website and social marketing platforms with information and resources that support and promote the importance of ECD and the healthy growth and development of children. (2017-2020)
- Implement the social marketing plan and monitor early results. (2018-2020)
- Distribute the self-regulation materials developed through social marketing campaign to all licensed early childhood centers and family day homes, as well as other key stakeholders. (2017-2018)
- Survey parents and families with children in licensed early childhood programs to determine what ECD information parents and families need to know. In addition, use the survey to determine the most effective ways to reach them to inform future awareness campaigns, including use of technology and innovative mediums. (2019-2020)
- Continue distribution of iPad Minis for new parents and primary caregivers throughout NWT and evaluate effectiveness of this initiative. (2017-2019)
- Post the inventory of all GNWT ECD supports, services and programs available in each community on the *Right from the Start* website. (2017-2018)
- Build on NWT Library Services by distributing iPads to any new libraries. (2017-2020)

Accountability: HSS, ECE

Area for Action 11

Strengthen preventative approaches to children's health and well-being and build understandings of healthy child development in children and youth.

Progress to Date, Accomplishments, and Gaps

In 2016-2017, ECE continued a partnership with Aurora College to continue the delivery of a dual-credit senior secondary ECD course. High school students who complete the postsecondary course will receive credits on their high school transcript, as well as credits towards an Aurora College certificate. Leaving high school, students who take the dual credit course will be better prepared if they wish to pursue further education and a career in ECD.

During 2016-2017, ECE continued to work in partnership with Aurora College to promote and support delivery of a dual-credit pilot in up to two communities.

Immunization of children in their early years ensures they are protected from a wide range of infectious diseases. Early childhood immunization rates in the NWT range from 70-85% coverage (depending on the vaccine), which fall about 10-15% below nationally recommended rates. The health and social services system is taking steps to improve immunization rates for all NWT children, with a goal to achieving national target rates. A multi-disciplinary, multi-agency approach is needed to counter misinformation about vaccine safety and effectiveness, and to reduce barriers for children to receive vaccinations at the right time.

Work to Complete

Deliverable:

Highlight basic child care needs and assessment of normal growth and development.

Targets:

- Work with front-line health professionals, childcare providers, foster parents, schools and others to promote the importance of early childhood immunizations for protection against vaccine-preventable diseases, and improve the NWT's immunization registry to monitor and report on immunization rates of NWT children at a community, regional and territorial level. (2017-2018)
- Explore the use and implementation of screening tools that could be used by parents and community based programs working with young children to detect developmental delays. (2018-2019)
- Support parents' knowledge of common childhood illness and milestones and other information presented previously. (2018-2019)
- Develop a screening tool for parents and community-based programs to assess the development of their own children prior to 18th month visit. (2018-2019)

Deliverable:

Offer a dual-credit ECD program for interested senior secondary students.

Target:

- Continue offering a dual-credit Early Childhood Development ECD program for interested senior secondary students and explore options for expansion. (2017-2020)

Accountability: HSS, ECE

Commitment 6

Access to high quality, affordable early learning programs and child care services are enhanced.



Getting Ready – *Getting ready to go outside to play, putting on boots and zipping up coats, becoming more independent, learning to take care of yourself.*

Some children take more time to get ready; others are learning to put their things away properly; and some need help to figure out how to zip their coats.

Area for Action 12

Address the infrastructure challenges of finding safe and appropriate locations for early childhood development programs and child care services as identified by each community.

Progress to Date, Accomplishments, and Gaps

Finding safe, affordable space to establish new day care facilities was identified as a need in the *Feasibility Study of Universal, Affordable Daycare in the Northwest Territories* (2015).

The development of a policy on publicly funded, private owned infrastructure was led by the Departments of Executive and Finance during the 2013-2015 ECD Action Plan. This policy was not finalized.

To address identified infrastructure challenges in schools to facilitate adding Junior Kindergarten in regional centres and Yellowknife, surveys were sent to Education Authorities for completion in September 2016. Information collected from these surveys will be used to inform an implementation plan for the territorial delivery of JK.

Work to Complete

Deliverable:

Identify and address infrastructure needs to support early childhood and JK programming.

Targets:

- In partnership with Education Authorities, address any remaining infrastructure needs for JK implementation. (2017-2019)
- Identify appropriate space within NWT schools and other government buildings that could be used for 0-3-year-old early childhood programming. (2017-2019)
- As part of developing a universal day care plan, identify the infrastructure needs within every NWT community. (2017-2019)
- Based on direction from the 18th Legislative Assembly, begin to implement approved plan for universal day care. (2019-2020)

Accountability: ECE

Area for Action 13

Provide access to high quality early education programs.

Progress to Date, Accomplishments, and Gaps

This area for action is directly related to the Mandate of the 18th Legislative Assembly to:

- Work with stakeholders and communities to explore options for free play-based care for 4-year olds; and
- Develop an action plan for universal daycare within the next two years, including a time-line for implementation.

Access and increased affordability to high quality early childhood education programs was identified as a need by parents in the *Feasibility Study of Universal, Affordable Daycare in the Northwest Territories* (2015).

At the direction of the Premier, a review of Junior Kindergarten (JK) was completed in October, 2015. The JK Review will be shared with the 18th Legislative Assembly for direction on moving forward with territorial implementation.

JK was implemented in small communities in 2014-2015 and continued in 16 communities during the 2015-2016 and 18 communities in the 2016-2017 school year.

In 2016-2017, work is continuing to support territorial implementation of Junior Kindergarten in 2017-2018, including ongoing professional development/training opportunities and

enhanced play-based curriculum and resources for JK/K teachers, surveying schools to identify and prioritize infrastructure needs, engaging with stakeholders to identify lessons learned on how to best implement JK in all communities, and development of a communications plan.

Additional work to be completed during the 2016-2017 fiscal year includes beginning the development of an action plan for universal daycare.

Work to Complete

Deliverable:

Support access to quality early childhood education programs in the NWT.

Targets:

- Implement JK for 4-year-old children in all NWT communities. (2017-2018)
- Draft an action plan for universal day care for the NWT. (2017-2018)
- Based on the direction from the 18th Legislative Assembly, begin to implement the approved plan for universal daycare within the NWT. (2018-2020)

Accountability: ECE

Area for Action 14

Enhance program resources for early childhood development programs which reflect the cultures of the NWT.

Progress to Date, Accomplishments, and Gaps

In October 2016, ECE began implementing the revised ECP funding model to better meet the needs of early childhood programs and shared an Information Kit with all licensed early childhood facilities. In 2016-2017, as a way to strengthen consistency throughout the regions and to ensure policy, procedure and reporting guidelines are up-to-date, ECE developed a Procedure Manual for Regional Early Childhood Consultants.

ECE has revised the JK/K curriculum, including articulation of specific expectations for 4 and 5 year olds. Starting in the fall of 2016, ECE will be providing ongoing training and webinars for JK/K teachers, with topics including play-based learning and assessment of 4 and 5 year olds.

The Feasibility Study of Universal Affordable Day Care (2015) report indicated that the NWT lacked some basic resources for day care operators that are available in other jurisdictions, such as a curriculum guide and program materials. In response, ECE has started preliminary research of other existing early learning frameworks to inform the future development on an NWT Early Learning Framework (ELF) and implementation guide for children ages 0-3 years.

Additional work to be completed in 2016-2017 includes the following actions:

- With participation from interested Aboriginal Governments, review the

current NWT Aboriginal Language Nest program to ensure effective support for Aboriginal cultures and languages for licensed early childhood programs.

- Through the early intervention pilot projects, test and explore the concept of cultural relevancy and cultural competency in practice with children, families and communities.
- Provide HR's PeopleSoft Manual information to licensed early childhood programs so that staff can access training such as the GNWT's online Aboriginal Cultural Awareness training modules.

Work to Complete

Deliverable:

Enhance program resources for ECD programs which reflect the cultures of the NWT.

Targets:

- Provide ongoing training and support to JK/K teachers related to curriculum, culture and language, and student assessment. (2017-2018)
- Begin developing an Early Learning Framework (ELF) and Implementation Guide for children 0-3 years that reflects the cultures of the NWT. (2017-2018)
- Complete development of an Early Learning Framework (ELF) and Implementation guide for children 0-3 years that reflects the cultures of the NWT. (2018-2019)
- Continue to provide relevant culture-based awareness training for all licensed early childhood program staff. (2017-2020)
- Introduce the ELF for children ages 0-3 years in licensed child day care facilities that have the required primary staff. (2019-2020)

Accountability: ECE

Area for Action 15

Improve the quality of licensed early childhood education and care programs.

Progress to Date, Accomplishments, and Gaps

The Early Childhood Environment Rating Scale (ECERS) is an internationally recognized tool used to assess group programs for preschool and kindergarten aged children from 2 through 5 years of age.

A jurisdictional scan was conducted to confirm what is used and the pros and cons

of the tools, with related costs, before recommending training and the use of the tool. Early Childhood Consultants were provided online introductory courses for Early Childhood Environment Rating Scale (ECERS) for completion by March 2015. Face-to-face training for ECERS, by an

authorized trainer, occurred in Yellowknife, NT in March 2016.

The 3rd Annual NWT Early Childhood Symposium was held in August 2016 with attendance from early childhood educators and operators throughout the north.

Work to Complete

Deliverable:

Improve the quality of licensed early childhood education and care programs.

Targets:

- Begin to implement the Early Childhood Environment Rating Scale (ECERS) through the assessment of licensed early childhood programs. (2017-2020)

Accountability: ECE

Area for Action 16

Increase the number of qualified early childhood development professionals in licensed programs.

Progress to Date, Accomplishments, and Gaps

The *Feasibility Study of Universal Affordable Day Care* (2015) reported the following challenges:

- Current number of ECD staff with formal post-secondary training in early childhood is low
- Difficult for ECD staff to access training and professional development opportunities.
- Low salaries are a barrier for recruiting and retaining staff.

In 2016-2017, ECE has supported the following initiatives to assist with increasing the number of qualified ECD staff in licensed programs:

- Competency-Based Assessment (CBA) process will recognize the experience and prior learning of staff already working in licensed early childhood programs and support ECD program staff in meeting the NWT Standards Regulation requirement that states “primary staff will have the opportunity to demonstrate competency”.
 - As of 2016-2017, the CBA is currently being reviewed and further developed.

- Professional learning opportunities
 - ECE has funded Aurora College for the delivery of the ECD Certificate program for 2016-2017.
 - ECE is working with Aurora College to establish transferability between Aurora College’s Early Childhood Certificate program and other postsecondary programs
 - providing NWT licensed early childhood program staff with access to an “Introduction to Early Childhood” online course.
 - Hosting the third annual Early Childhood Symposium, held in Yellowknife in August 2016.
- Staff grants, based on the staff’s level of post-secondary education and the number of hours worked per quarter, are provided to licensed early childhood program staff.
- Scholarships to support eligible post-secondary students enrolled in early ECD.

Work to Complete

Deliverable:

Develop a mechanism to formally recognize the experience and prior learning of the staff in licensed early childhood programs who do not meet the current requirements under the *NWT Child Care Act and Standards Regulations*.

Targets:

- Develop the NWT Competency Based Assessment (CBA) model and process to recognize the experience and prior learning of staff already working in licensed early childhood programs. (2017-2018)
- Draft and revise manual to support training for Early Childhood Consultants on the use of the CBA program. (2017-2018)
- Complete development of a draft credentialing system for licensed early childhood staff. (2017-2018)
- Jurisdictional scan of Provinces/Territories’ salary grids and related processes for licensed day care staff. (2017-2018)
- Pilot draft credentialing system for licensed early childhood staff. (2018-2019)
- Based on jurisdictional scan, explore options for developing a salary grid for licensed day care staff in the NWT and determine how to proceed. (2018-2019)
- Implement the CBA model and process to recognize the experience and prior learning of staff already working in licensed early childhood programs, through a pilot-based approach. (2018-2020)

Deliverable:

Support and expand access to postsecondary learning opportunities that lead to a certificate in ECD.

Targets:

- Explore possible training options for licensed early childhood staff, including options that lead to a certificate in ECD. (2017-2018)
- Promote a variety of different training methods for licensed early childhood staff. (2018-2020)

Accountability: ECE

Commitment 7

Monitoring, reporting and ongoing evaluation for continuous quality improvement in early childhood development programs and services.



Whale Camp (Inuvialuit) – *A clear day with no wind nor bugs, it is a nice day to work, share and pass down knowledge.*

Community members of all ages are cutting up the Beluga for Muktuk, working together, harvesting traditional foods, and are passing on the knowledge, love and respect for our way of life. Everyone gets out, comes together and shares the knowledge.

Area for Action 17

Develop and implement a Monitoring, Evaluation and Accountability Plan for the renewed Early Childhood Development Framework and Action Plan.

Progress to Date, Accomplishments, and Gaps

A comprehensive approach to monitoring, evaluation and accountability (MEA) was created by both departments. It was formalized in the MEA Plan, created to accompany the ECD Framework. Findings from an implementation review of the first three years of the ECD Framework and MEA Plan were used to identify gaps and develop recommendations that helped develop the 2017-2020 Action Plan, and helped revise the approach to monitoring, evaluation and accountability moving forward, which will include a focused effort on improving the departments' ability to collect, analyze and share aggregate level information from a variety of data sources.

As part of the monitoring, evaluation and accountability approach, a number of evaluations were undertaken by the

departments over the course of the last two Action Plans. These evaluations have generated important information on the ECD Framework, its commitments, areas for action, and associated programs and services. The evaluations and reviews completed included the following:

- Evaluation of TeleHealth Services for Children aged 0-5
- Evaluation of Rehabilitation Services
- Monitoring Reports on the Early Childhood Intervention Pilot Projects
- Junior Kindergarten Implementation Evaluation
- Junior Kindergarten Review
- Feasibility Study for Universal Day Care
- Early Childhood Program Review
- Small Community Initiative Review
- Healthy Children's Initiative Review
- iPad Minis Pilot Evaluation

The departments also conducted a status update of the 2014-2016 ECD Action Plan. A summary of the accomplishments were included in the 2016-2017 Bridge Action Plan tabled in the 18th Legislative Assembly.

The following specific gaps and challenges in this area for action were identified through the implementation review:

- Lack of internal data collection systems and program data to determine the effectiveness and impact of programs
- Limited capacity of program staff to collect data consistently and accurately
- Reporting schedule not fully implemented as intended, in part due to staff turnover

Work to Complete

Deliverable:

Use the Monitoring, Evaluation and Accountability (MEA) Plan to support continual improvement to the ECD and learning related programs and services offered by both HSS and ECE.

Targets:

- Create a revised approach to monitoring, evaluation and accountability of the Framework to reflect lessons learned from the first three years of framework implementation. (2017-2018)
- Implement the revised ECD Framework monitoring, evaluation, and accountability approach that focuses on a risk-based analysis to program evaluation, and that includes regular reporting on results to inform future ECD actions. (2017-2018 and ongoing)

Accountability: HSS, ECE

Area for Action 18

Develop an analytics approach to improve frontline clinical and support services.

Progress to Date, Accomplishments, and Gaps

HSS is examining ways to improve electronic data capture, management and population level analysis capability to

provide information that informs frontline clinical decision-making.

Work to Complete

Deliverable:

Develop a vision for improved analytics capacity to generate population-level evidence that can inform frontline clinical decision-making for children ages 0-5 years.

Targets:

- Identify clinical information needs through consultations with frontline practitioners. (2018-2019)
- Implement the clinical information needs identified. (2018-2019)
- Based on clinical feedback, identify existing and emerging data sources as well as limitations in data quality, data sharing and privacy requirements as well as analytical tools and capacity. (2018-2019)

Accountability: HSS

Area for Action 19

Release a health status report of children aged 0-5 years.

Progress to Date, Accomplishments, and Gaps

The Territorial Chief Public Health Officer is committed to releasing a health status report for children aged 0-5 as an additional means for reporting on progress towards the ECD outcomes, which are identified in the *Right from the Start Early Childhood Development Framework*.

Work to Complete

Deliverable:

Publish a report on the health status of children aged 0-5 using a variety of information sources.

Targets:

- Analyze data captured in Area for Action 17 and 18. (2018-2020)
- Release a health status report for children aged 0-5 years. (2020)

Accountability: HSS



If you would like this information in another official language, call us.

English

Si vous voulez ces informations dans une autre langue officielle, contactez-nous.

French

Kīspin ki nitawih̄tīn ē nīhīyawih̄k ōma ācimōwin, tipwāsinān.

Cree

Tłıchq̄ yatı k'èè. Dı wegodı newq̄ dè, gots'o gonede.

Tłıchq̄

ʔerih̄t'ıs Dēne Sų́íné yatı t'a huts'elkēr xa beyáyatı theɔ́ ɔat'e, nuwe ts'ēn yóftı.

Chipewyan

Edı gondı dehgáh got'ıe zhatıé k'èè edat'éh enahddhę nıde naxets'é edahı́.

South Slavey

K'áhshó got'ıne xədə k'e hederı ɔedıht'é yerıniwę níde dúle.

North Slavey

Jii gwandak izhii ginjik vat'atr'ijáhch'uu zhit yinothtan jı', diits'at ginohkhiı.

Gwich'in

Uvanittuaq ilitchurisukupku Inuvialuktun, ququaqłuta.

Inuvialuktun

Ċ'bdĳ nĳn'bbΔĊ' ΛrLJΔrĊ' Δd'ndĊ'-'b'γLĳn'b, Δ'ēn'ā-'d' Δ'ıbc'ā-'ē'ᵛĳn'Ċ'.

Inuktitut

Hapkua titiqqat pijumagupkit Inuinnaqtun, uvaptinnut hivajarłutit.

Inuinnaqtun

Aboriginal Languages Secretariat: 867-767-9346 ext. 71037

Francophone Affairs Secretariat: 867-767-9343



Home with Baby (Dehcho) – *A new family experiences the growing love and joy in a safe and nurturing home.*

Bringing a new baby in a safe and nurturing home is a special moment. A child changes the dynamic of the relationship and the parents are learning how to become a family.