

# INHVAB/ECCS State Advisory Team Meeting

## Agenda

April 17, 2017

9:00-12:00



### NOTES:

#### 1. Welcome & Introductions

- In attendance
  - i. Mary Ann West, ISDH
  - ii. Cynthia Smith, DCS
  - iii. Carrie Higgins, DCS
  - iv. Adis Coulibaly, ISDH
  - v. Nancy Ward, FSSA
  - vi. Sara Abdalla, ISDH
  - vii. Fatma Yousif, ISDH
  - viii. Casey Kinderman, ISDH
  - ix. Gary Parker, Medicaid
  - x. Kristy Wright, DOE
  - xi. Gretchen Martin, ISDH
  - xii. Martha Allen, IDSH
  - xiii. Megan Griffie, ISDH
  - xiv. Justin Searcy, ISDH
  - xv. Jennifer Akers, Family Voices Indiana
  - xvi. Bethany Ecklor, FSSA
  - xvii. Christina Commons, FSSA
  - xviii. Connie Sherman, St. Mary's Child Center
  - xix. Steve Viehweg, Riley Child Development Center
  - xx. Whitley Wynns, John Boner Community Center
  - xxi. Patrick Jackson, Welborn Foundation
  - xxii. Amanda Lopez, Transform Consulting
  - xxiii. Beth Barrett, FSSA
  - xxiv. Lacey Kottkamp, FSSA

#### 2. General Updates from INHVAB

- MIECHV All-Grantee Meeting/ ISDH, DCS, FSSA submitted a proposal for a panel discussion at the September 2017 meeting
- Congresswomen Walorski site visit to St. Joseph County Healthy Families site
- Incoming Funding (MIECHV, State)
  - MIECHV is up for reauthorization – appropriations committee reviewing opportunity to continue funding for MIECHV – bi-partisan support
  - Expansion of NFP in Indiana – 5m allocated from Gov. office
- Outgoing Funding (Title V, NFP, MIECHV CQI/Benchmark RFA)
  - Title V – RFA is going out by the end of the week for services - Baby & Me Tobacco Free, Group Prenatal Care, Injury Prevention, Early Start, Abstinence Education
  - MIECHV CQI Coordinator – IDOA posted very soon
  - MIECHV Benchmark provider – IDOA posted very soon
  - ECCS Impact Implementation Evaluator-IDOA posted very soon
  - NFP will be going out for open bid – pending final confirmation that funds are in the state budget

- Bill for developmental delay up to Age 9 – passed
  - Developmental Delay services used to only be 3-5 years old
  - This means that up until 3<sup>rd</sup> grade for services needed as provided in schools
- DMHA has agreement with DFR – to use TANF funding to provide Parent cafés across the state – with child care for those who are 250% poverty level or less
  - Parent Cafes is an evidence based structured model to engage and educate parents on developing support, and eventually taking on the leadership
  - Be Strong Families – requires the partnership of the providers with the parents
    - Provider Café will be the first event to emphasize and assist with partnership
  - Ireland Home Base services will provide Parent Cafes in 15 counties in southern Indiana
  - DMHA will provide where these are being held and who are leading the cafés
    - These will be provided monthly
    - DCS Prevention may be able to assist with finding partner agencies to lead these in areas that may not already have community partner commitments
- Infancy Onward – “keep getting your endorsements!” Infant Early Childhood Mental Health Endorsement
  - Training Modules (developed out of the previous ECCS grant) (Steve will be able to provide statistics on number earning endorsement at a later meeting)

- <https://www.train.org/DesktopShell.aspx>

- Create an account and type in Module number under “Search by Keyword or Course ID”

Module	ID	Title
1	1064260	Introduction to Trauma and Toxic Stress
2	1064296	Using Screening Tools and Methods with Families Exposed to Trauma: Part 1
3	1064298	Using Screening Tools and Methods with Families Exposed to Trauma: Part 2
4	1064300	Infant Mental Health: Basic Concepts and Background
5	1064301	Using Interpersonal Methods: Relationship-Based Approach, Parallel Process, Professional Use of Self
6	1064302	How Trauma Affects Adults and Parenting Behavior: Part 1
7	1064303	How Trauma Affects Adults and Parenting Behavior: Part 2
8	1064305	Helping Parents Develop Skills that Support Social and Emotional Development of Babies and Toddlers
9	1064306	Determining and Developing Relationships with Referral Partners
10	1064307	Strengthening Skills in Infant and Early Childhood Mental Health

- Online reflective supervision groups
- Mentioned that a new website has launched called Bloom Bright

### 3. Home Visiting Fact Sheets

- HRSA MIECHV
  - <https://mchb.hrsa.gov/maternal-child-health-initiatives/home-visiting/home-visiting-program-state-fact-sheets>
    - Overview of the fact sheet above which is specific to MIECHV funded home visiting
- Association of State and Tribal Home Visiting Initiatives (ASTHVI)
  - <http://asthvi.org/membership/state-home-visiting-fact-sheets/>
    - Above is example of fact sheet
    - This will be more comprehensive overview

- If partners have suggestions that they would like to see on this fact sheet about home visiting in Indiana, please provide those suggestions.
  - May link to ELAC fact sheet
  - May link to Happy Babies report
  - Federal funding for head start may be moving to federal block grants
  - Will this increase the sites and/or slots for Head Start?

#### 4. Home Visiting Needs Assessment Update

- Emerald Consulting is still working on completing the statewide Needs Assessment
- County fact sheets will also be provided as part of this needs assessment
- Because this was not required by MIECHV, we are taking our time to make sure we have what we want for the needs assessment
- New needs assessment will be helpful to know changes around the state since the last MIECHV needs assessment, eg., Grant County is not having as many births so are the needs still high in that county?
- Discussion of Rural vs. urban – Steve sent link for Purdue fact sheet – note also HRSA definition for rural (<https://pcrd.purdue.edu/files/media/What-is-Rural-and-What-is-Urban-in-Indiana.pdf>)

#### 5. Project LAUNCH Sustainability Plan

- Mental Health Consultation
  - This workgroup conducted the sustainability for LAUNCH
  - Worked through the tool – this took about an hour
- Enhanced Home Visiting workgroup will be volunteers from INHVAB
  - A no cost extension may be requested to the end of 2017
  - Using existing workgroups to contribute to sustainability (tool questions below):
    - Identify opportunities for meaningful family/parent participation. These can be with partner agencies or other councils. These opportunities will be shared after parent trainings for participation have occurred.
    - What data are you collecting that can be shared with LAUNCH? How can we link this back to LAUNCH efforts to support sustainability?
    - What are you currently doing to communicate the importance of this area to the public? What could you do to expand on those efforts?
    - Optional: Look at the evaluation report and provide feedback on your strand. What does this information and the way it is framed say to you?
    - Looking for a sub-set of this workgroup to work on the sustainability plan
    - 1-2 meetings
  - Shannon Garrity will be sending out meeting invite to be on the workgroup
- Developmental Screening & Assessment
  - This fits well with the ECCS Impact Award
  - EPDST letter discussion
    - Families who spoke with Jennifer Akers from Family Voices Indiana are not understanding the EPDST letters and what they need to do with them
    - Medicaid office mentioned they are looking at ways to improve this process for waiver families

#### 6. MIECHV Innovations Update

- ECCS - This grant proposed to bring Help Me Grow to Indiana

- MIECHV Innovations focused on non-direct services to expand Help Me Grow to the MIECHV sites around the state.

## **BREAK (10 minutes)**

### **7. ECCS Overview (See PowerPoint)**

- **What is ECCS Impact? Slides 3-4**
  - i. Overall ECCS Impact Project Aim
- **What is the CoIIN? Slides 5-6**
  - i. Straightforward aims and specific, measurable, action-oriented, realistic, and time-specific objectives – to explain what they are setting out to achieve
  - ii. Evidence-based strategies – to show how these objectives will be accomplished
  - iii. Clear-cut metrics and real-time data – to show what’s working and what isn’t in real time, and ultimately determine how successful the change was in achieving the goal
  - iv. Framework for ECCS CoIIN: Common Agenda, Shared Measurement, Mutually Reinforcing Activities, Continuous Communication, Backbone Organization
- **Cohorts A, B, C timeline (Slide 7)**
- **Cohort A Info (Slide 8)**
- **Learning Session #1 (Slide 9)**
- **ECCS in Indiana (Slides 10-12)**
  - i. Map of IndyEast Promise Zone/Near Eastside
- **Meeting / Organizational Structure (Slides 13-14)**
  - i. Note the diagram illustrated
  - ii. *This group is the State Advisory Team and will meet quarterly.*
  - iii. *Highlight that information is flowing between the various groups.*
  - iv. *Participation in national CoIIN events is optional.*
  - v. Change from ECCS email address to ISDH/MCH general email – revised standing appointments will be forthcoming

### **8. Cohort A Overview:**

- **Learning Session #1 in Arlington, VA Update (Slide 15)**

**Summary:** 12 state grantees and their community based teams were welcomed to Arlington, VA by HRSA and the National Institute for Children’s Health Quality (NICHQ). We heard from experts in the areas of early childhood systems building, quality improvement methodology, and family engagement that provided us a framework for the ECCS CoIIN. Grantees had opportunities to network and learn about state initiatives happening nationwide. Our team had time to work together to refine our aim, prioritize the drivers, and begin planning our first PDSA cycle.

  - **12 ECCS CoIIN Impact Grantee Teams (Slide 16)**
- **Aim Statement & Primary Drivers**
  - i. **Aim Statement for Cohort A (Slides 17-18)**
  - ii. **Prioritize the Primary Drivers (Slide 19)**
    - a. The left part of the screen are the ratings of the group that went to Arlington, VA. The right side is what was submitted for Indiana. This was a result of the survey that took place after our February Local Place-Based Team meeting. We want to make sure that we used the local input for the driver’s worksheet because our local partners will better inform us of what is going on the ground level.

iii. Identify P3. And P5 as the current focus. (Slide 20)

iv. Drivers for Future PDSA Cycles (Slide 21)

• **PDSA Updates (Slides 22-23)**

- a. Interviews during PDSA Cycle #1 were very informal. We let the families guide the conversation.
- b. Study Findings
  - Families that need to be connected *may not be* because they don't have the information.
  - Total Families Interviewed 19: Screened: Yes: 5, No: 0, Don't Know: 14
  - Primary Care: Yes: 4, No: 6, Don't Know: 9
  - Next Steps with PDSA Cycle #2
  - Show them the ASQ questionnaire: Has anyone asked you these questions or done these activities with your child?
  - If they respond yes:
    - Who asked you these questions?
    - Did you go to a doctor's office or did someone come to your home? *Get as much information as possible (name of hospital or doctor's office, who is the person coming to your home; what organization are they with, etc.)*
    - If they respond no:
      - How often do you see a doctor?
      - If not on a regular basis: What has stopped you from seeing a doctor? *(Trying to get as much information about outside stressors or life barriers they face)*
- c. PDSA Cycle #2
  - *Locations where interviews were conducted:*  
JBNC, Westminster, Wheeler Mission, Daystar, Spades Park Library, Brookside/Martindale-Brightwood Library
  - 33 Screened
    - Updated - local meeting brought to light that WIC does not do developmental screening, which is what many families believed was happening with the "yes"
  - 3 Not Screened
  - 13 Don't Know---All 13 are connected to a doctor's office
  - 5 Prenatal
  - It is fantastic that we got so many interviews. More people were connected this time to screenings.
  - We wanted to examine the barriers to not getting a screening.
  - Findings: Perceived Barriers to not screening
    - Potential Immigration issue
    - Lack of Physician concern (wait to K)
    - Parent Advocacy Limitation
    - Lack of Parent Education
    - Lack of Parent Awareness (15)
      - ❖ If they were screened, if they should be screened, belief that services are not available
      - Hard to make and keep appointments....Why is it?.....We don't know....Time? System? Priorities?
  - In the process of planning our next PDSA cycle:

Possible New Questions: Exciting that we are finished with 2 PDSA cycles and can move on to testing now. ☺

How can we increase parent awareness? Protective Factor: Knowledge of Parenting & Child Development

- All 13 “don’t know” were connected to physician.

How can we improve Parent Awareness through Physician Contact?

Local meeting resulted in more local contacts to conduct additional study

## **9. Measuring the baseline AIM statements**

- Data Sharing
  - A data sub-committee will be formed to look at identifying data sources and setting up appropriate data sharing agreements for use in this project. (Maybe ELAC data workgroup?)
    - This data will not be identified data
    - This is not intended to set up “linking” data
- Help Me Grow—Slide 24

## **10. Mission/Vision—**

- **Creating a vision/mission statements**
  - i. Next time revisit the development of a mission and vision
  - ii. Possibly a consultant can conduct a retreat to create a strategic plan
  - iii. INHVAB-Slides 25-26
  - iv. Project LAUNCH-Slides 27-28
  - v. ELAC-Slide 29
  - vi. Commission on Improving the Status of Children in IN-Slide 30

## **11. Newsletter**

- **ECCS Quarterly Newsletter Draft**
  - i. Feedback?
    1. “Did you know” (interviewed this many families...)
    2. Embed links
    3. Spotlight a particular topic
    4. infographics
    5. What cohort you’re in and whose on the table
    6. What PDSA completed
    7. AIM statement
    8. Next PDSA Cycle
    9. Healthy recipes

## **12. Future Makeup & Meetings**

- Please provide feedback to Cynthia or MaryAnn
- General consensus was that combined meetings worked well
- Suggestion to have some sort of phone connection for future meetings