

HMG Affiliate Summary of Evaluations

HMG Study 1 – First 5 San Joaquin Special Needs Services April 2015	
Responder Information	Name: Kelly Mraz Affiliate: San Joaquin County, California
Status (select one)	Completed
Study Focus (select one)	HMG in combination with other initiative
Model Relevance (Select one)	HMG Call Center Family Engagement Community Outreach Developmental Screening Other (please specify): MLDA
Study Framework (Describe each)	Primary research question: How are F5SJ investments contributing to a coordinated system for early detection and intervention? Target population: Children age 0-5 Sample size (if applicable): N/A Study design: mixed methods document review, statistical review of database services and outcome totals based on HMG Nat data categories; key stakeholder interviews
Key Findings	<ol style="list-style-type: none"> 1. <i>Increase targeted community and health care provider outreach and training to increase the knowledge and familiarity of professionals with screening and services for children with special needs, to ease navigation of a complicated system for families.</i> 2. <i>Identify opportunities to improve communication systems between systems of care, medical and social service professionals.</i> 3. <i>Collect and analyze data annually including the Regional Center and FQHC agencies and consider larger scale ASQ tracking data systems that cross systems.</i>
Other <i>Please describe other relevant information such as budgets, consults, etc.</i>	See attached slide demonstrating increasing funding diversification for the Help Me Grow San Joaquin County programs and projects.

First 5 San Joaquin Special Needs Services

April 2015

Background

First 5 San Joaquin (F5SJ) seeks to strengthen the system for the early detection and intervention of special needs. Special needs refer to disabilities or behavioral, developmental, and/or health conditions that require specialized supports, monitoring and/or services.¹ With early detection of developmental or behavioral delays, as well as early intervention and treatment, increased inclusion, improved academic outcomes, and cost savings to schools are possible. The First 5 San Joaquin Longitudinal School Readiness Update 2012-14 noted that children enrolled in First 5 preschool programs were less likely to have an Individual Education Plan (IEP) during their primary grade years than their peers county-wide. However, numerous barriers make it difficult to connect young children to needed services, and those who do not receive support are at risk of not being ready for school.



To address this issue, the First 5 San Joaquin Commission invests in **outreach** to community members, families, child care providers, and child health providers; **developmental, vision, and hearing screenings** to identify if a child may have a special need or developmental delay; **information and referral** services; and **intervention** services for children who do not meet mandated services for delays and disabilities. In addition, First 5 San Joaquin participates in a number of efforts aimed at increasing service coordination and collaboration.

Key Highlights

- + In 2014 – with First 5 San Joaquin as its organizing entity – San Joaquin County became the fifth county in California to become a *Help Me Grow* Affiliate.
- + First 5 San Joaquin introduced standardized developmental screening across funded early care and education programs. Between July 2013-December 2014, 2,817 children ages 0-5 were screened using the Ages and Stages Questionnaire.
- + Interviews with key leaders revealed a range of strengths and accomplishments for San Joaquin County's special needs system of care including improved child outcomes, service coordination, and countywide collaboration.

¹ First 5 California. "Annual Report Appendix: Fiscal Year 2013-14"
http://www.cfc.ca.gov/pdf/research/reporting_tools/AR/Annual_Report_Appendix_FY_13-14.pdf

This newsletter presents findings from the evaluation of F5SJ's special needs services. Evaluation questions and methods are detailed below, followed by an overview of San Joaquin's approach – *Help Me Grow* – to strengthen the system for the early detection and intervention of special needs. The newsletter continues with findings on early detection, referrals and intervention, and the system of care, closing with recommendations.

Evaluation Questions

To assess the extent to which F5SJ is supporting a coordinated care system for early detection and intervention for at-risk children and their families, this evaluation explored the following questions:

- + Who is receiving F5SJ's special needs-related services?
- + How are F5SJ investments contributing to a coordinated system for early detection and intervention?
- + How can F5SJ investments in the system for early detection and intervention improve early childhood care and education in San Joaquin County?

Methods

The evaluation used a mixed-methods approach to answer the evaluation questions as detailed below:

- **Document review.** A review of secondary data sources was conducted. Documents included 2014-15 Scopes of Work, program descriptions and progress updates, meeting agendas and materials, policy briefs related to *Help Me Grow* National and California and the First 5 Association, and literature related to special needs.
- **Client and Service Database (July 2013- June 2014).** This database records the characteristics of families that receive special needs-related services (e.g., ASQ screenings/referrals, vision and hearing screenings, mandated services, targeted intervention services) from all F5SJ funded programs.
- **Help Me Grow Database (July 2014 – December 2014).** In July 2014, Harder+Company Community Research, the local evaluator for First 5 San Joaquin, developed a separate database for the two *Help Me Grow* funded programs (Family Resource and Referral Center and United Cerebral Palsy). Prior to the development of this database, the *Help Me Grow* programs utilized the Client and Service database to report information about clients served and services provided. The *Help Me Grow* database also allows programs to collect and report on national indicator data related to screenings and information and referral services.
- **Key leader interviews (n=5).** Interviews were conducted with key stakeholders who provide or are familiar with services for children with special needs in San Joaquin County. Respondents included the Director of Clinical and Family Services at United Cerebral Palsy, the *Help Me Grow* call center Manager at the Family Resource and Referral Center, the Executive Director of the Family Resource Network, the School Readiness Director at a local school district, and a pediatrician from the Community Medical Centers.

The Approach: *Help Me Grow* San Joaquin

Help Me Grow is a national model that aims to strengthen the special needs system of care for children and families. It has demonstrated success in identifying at-risk children and connecting them to existing developmental and behavioral services and programs. *Help Me Grow* systems require fidelity to four core components: child health care provider outreach, community outreach, a central telephone access point, and data collection and analysis. Described below is First 5 San Joaquin's approach for implementing the four core components.

“In 2014 – with First 5 San Joaquin as its organizing entity – San Joaquin County became the fifth county in California to become a *Help Me Grow* Affiliate.”

- **Child Health Care Provider Outreach.** F5SJ networks with San Joaquin County Human Services Agency's Covered San Joaquin Campaign and offers training on *Help Me Grow* and the Ages and States Questionnaire (ASQ), the standardized developmental screening for young children that is recommended by the American Academy of Pediatrics. F5SJ's efforts promote medical home services and encourage and equip health care providers to provide developmental screenings.
- **Community Outreach.** *Help Me Grow* provides annual trainings to direct service providers in San Joaquin County, including training on the ASQ developmental screening and the ASQ Social-Emotional screening for behavioral and mental health concerns. *Help Me Grow* also provides ASQ trainings and technical assistance to all First 5 funded preschools and *Race to the Top* child care sites to implement the ASQ.
- **Central Telephone Access Point.** In 2012, the San Joaquin County Human Services Agency funded F5SJ to develop two programs that target care navigation and care coordination services for CalWORKs families: the Family Resource and Referral Center (FRRC) *Help Me Grow* call center and the United Cerebral Palsy (UCP) Care Coordination Program. CalWORKs provides funding for developmental screening, follow-up, information and referral services, and care coordination services for families of children that need referral for an Early Start Individualized Family Service Plan (IFSP), or an Individualized Education Program (IEP).
- **Data Collection and Analysis.** To assist with *Help Me Grow* San Joaquin's data collection efforts, a comprehensive database was developed for FRRC and UCP to enter and track their contact, client, screening, and referral information. The database elements closely align with the required *Help Me Grow* National Center's Common Indicators.

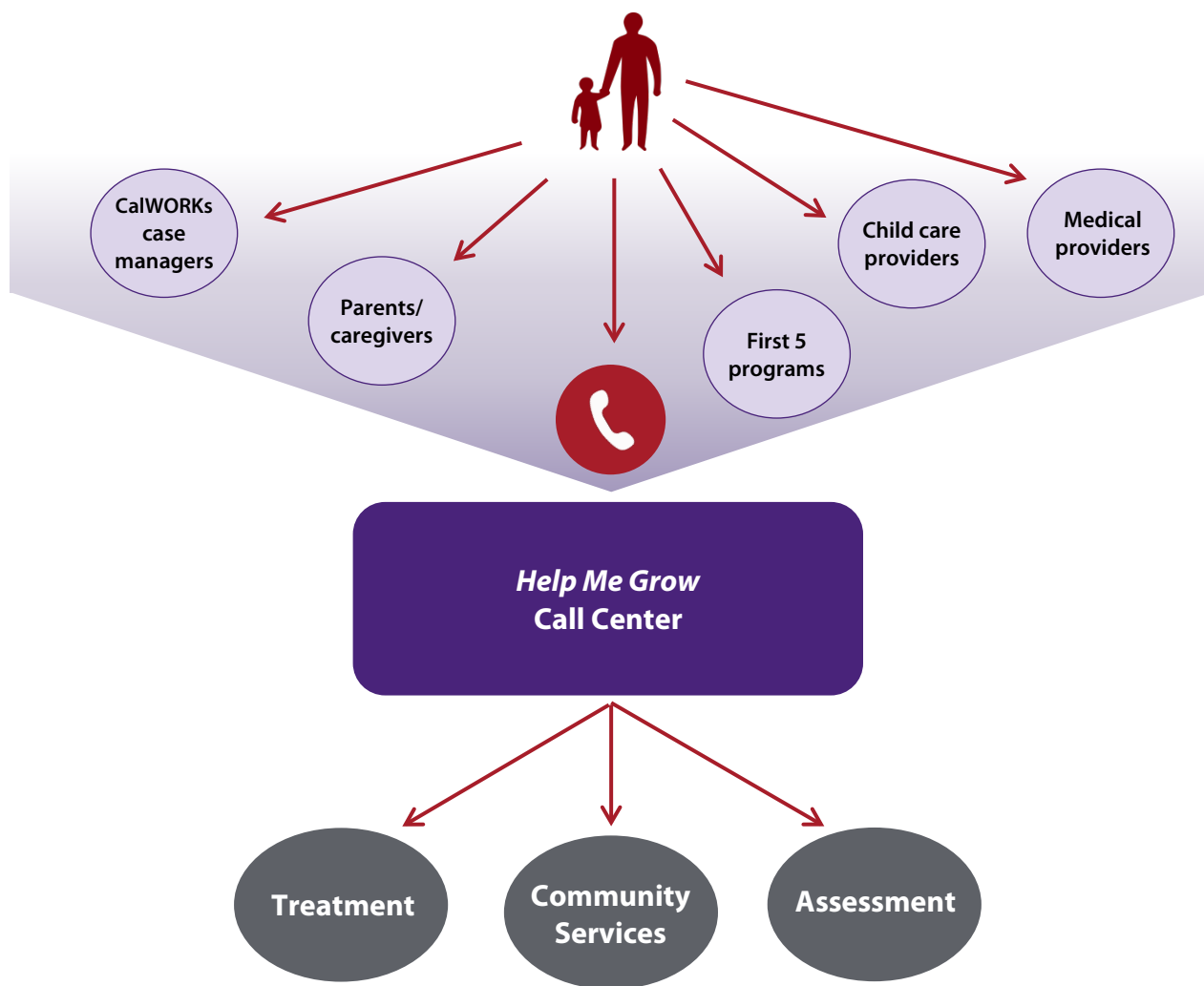
In addition to these efforts, San Joaquin County participates in a statewide care coordination collaborative. In January 2015, the Lucile Packard Foundation for Children's Health awarded \$45,000 to this collaborative² for a series of infrastructure enhancements to improve local systems of care coordination for children with special health care needs. The goal is to improve the system for children with the most complex health needs to serve as a model for use with other populations of children in the county. The Family Resource Network is the lead agency for this project, and First 5 San Joaquin provides fiscal and program support through *Help Me Grow*.

² California Community Care Coordination Collaborative (5Cs).

Overview of *Help Me Grow* in San Joaquin County

In the special needs system of care in San Joaquin County, the *Help Me Grow* call center offers a central access point to connect families to screenings and services. Families may enter the *Help Me Grow* system by calling the call center directly, or as a result of referrals (e.g., from First 5 San Joaquin funded programs, child care providers, county agencies, and medical providers). Once referred, *Help Me Grow* call center staff link children to appropriate treatment, community services, or assessment, primarily through Valley Mountain Regional Center, United Cerebral Palsy, schools, public agencies, community based agencies, and health care providers.

Families access the *Help Me Grow* call center either directly or through referrals.



The *Help Me Grow* Call Center links families to needed services.

Early detection

Research shows that early detection is critical to ensure that children at risk for delays are able to receive support services and have the best opportunity to improve outcomes across developmental domains (e.g., health, cognitive, and social/emotional development).^{3,4} Early detection is important, as one key leader explained, because, “By the time they start kindergarten or first grade, we’ve lost the first four to five years of their life when we could have detected it a lot earlier and gotten them the support and resources to start them on the right path at an earlier age.”

In 2007, F5SJ introduced standardized developmental screening across funded intensive early care and education programs including preschool, service coordination, and home visitation services. In addition, all First 5 funded programs can provide parents with information about the *Help Me Grow* call center if they are seeking developmental screening for their children. Exhibit 1 shows that in FY 2013-14, F5SJ funded programs screened over 2,500 children using the ASQ. Of the children screened, 173 (7 percent) were referred for a developmental assessment.

Exhibit 1. ASQ screenings and referrals, FY 2013-14

	F5SJ intensive programs		Help Me Grow call center		TOTAL
	0-3	3-5	0-3	3-5	
ASQ screenings	589	1,384	271	300	2,544
ASQ referrals	46	99	10	18	173

Exhibit 2 shows the race and ethnicity of children who received a developmental screening from a F5SJ intensive program and through the *Help Me Grow* call center, compared to F5SJ overall. Fewer African American children received a developmental screening from a F5SJ program compared to F5SJ overall. However, through the information and referral services provided to CalWORKs families with *Help Me Grow*, F5SJ is reaching a greater percentage of Black/African American and White children.

Exhibit 2. Ethnicity of children receiving ASQ screenings compared to F5SJ overall, FY 2013-14*

	F5SJ Overall (n=8,052)	ASQ Screenings	
		F5SJ intensive programs (n=1,969)	Help Me Grow call center (n=563)
Hispanic/Latino	59%	67%	41%
White	12%	8%	21%
Asian/Pacific Islander	10%	11%	5%
Black/African American	10%	5%	21%
Other (includes Multiracial)	9%	9%	11%

*Percentages in each column may not total 100 due to rounding.

³ Cunningham, Robert, et al. Delay in referral to early-intervention services. *Pediatrics*, 2004, 114:896.

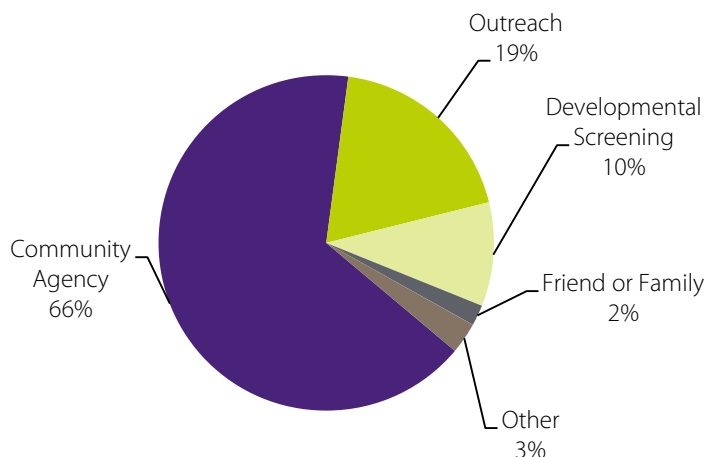
⁴ The National Early Childhood Technical Assistance Center. “The Importance of Early Intervention for Infants and Toddlers with Disabilities and their Families”. 2001. <http://www.nectac.org/~pdfs/pubs/importanceofearlyintervention.pdf>

For early detection to be successful, families must be aware of and connect to available services. As one key leader explained, “There are services out there; we just need to let families know they are available to them.” For example, “Some parents think of services for three year olds or five year olds, but there are laws about education services [being available] for children zero to three. We do a lot of outreach to families to let them know that if they are concerned about their child’s development [at young ages], there are services available.”

Exhibit 3 demonstrates that the majority of families learned about *Help Me Grow* through a community agency (66 percent), followed by outreach through *Help Me Grow* (19 percent), developmental screening (10 percent), and friends or family members (2 percent). Nine of the families (3 percent) learned about *Help Me Grow* through other sources including 2-1-1, CalWORKs, child care providers, media, and from being a previous caller. None of the families reported hearing about *Help Me Grow* from a child health care provider.

“The primary reason families contacted the call center was related to concerns about their child’s development (83 percent).”

**Exhibit 3. Where did you learn about *Help Me Grow*?
(July 2014-December 2014; n=339)**



Referral and Early Intervention

Through referral and early intervention, key leaders described how children and families get the support “they need to be successful in school and beyond.” Respondents reported that “a lot of the issues can be resolved if you catch them early enough,” and in the case of those with lifelong disabilities, “it helps them get in the habit of learning and they are exposed to education in whatever their capacity is.” Early identification benefits caregivers by building what key leaders described as the “family’s understanding of the child’s disability” and “the different types of providers” who offer support.

Of the children who received an ASQ screening, seven percent received an ASQ referral (see Exhibit 1). The *Help Me Grow* database provides preliminary data about why children were referred for services. As seen in Exhibit 4 below, children who were served through *Help Me Grow* were most often referred for a developmental assessment (52 percent).

“Eighty-four percent of children were connected to at least one of their referred services.”

Exhibit 4. Reason for referral, July 2014-December 2014

	Number	Percent
Developmental Assessment	82	52%
Education	26	17%
Speech	13	8%
Child Care	11	7%
Family Support	5	3%
Behavioral Service	1	1%
Health Insurance	1	1%
Health/Developmental Subspecialist	2	1%
Other ⁵	16	10%
TOTAL	157	100%

Early Intervention – United Cerebral Palsy

Once referred, children are linked to services based upon their need and eligibility. The United Cerebral Palsy’s (UCP) Great Beginnings program, which is funded by F5SJ, aims to prevent achievement gaps and promote school readiness for children who do not qualify for mandated services. Based upon the developmental assessment conducted by Great Beginnings staff, an individualized plan is created and approved by the child’s physician that identifies the child’s developmental goals. Specialists visit the child at their home, child care, or at the Great Beginning’s office and progress towards goals are re-assessed every six months. Pediatricians and mandated service providers such as Valley Mountain Regional Center are the primary referral sources to Great Beginnings. In FY 2013-14, the Great Beginning program provided intervention services to 113 children (45 children 0-3 and 68 children 3-5) who did not qualify for mandated services.

⁵ Two families were referred for financial support and one was referred for immigration support. The remaining other reasons are unknown.

Coordinated System of Care

Strengths and Accomplishments

Interviews with key leaders revealed a range of strengths and accomplishments for San Joaquin County's special needs system of care.

- **Outcomes are improving for children and families.** Key leaders shared observed instances of positive changes as a result of the early detection and intervention efforts in San Joaquin County. Examples included improvements in child reading, speech, communication, motor skills, and social/emotional competencies, as well as children no longer needing services after intervention. In the words of one respondent, "Some children who had a [speech] delay when they were young will no longer qualify for services because the issue has been remediated." In addition, it is important to note that data regarding outcomes across the population served will emerge as the children reach school age and rates of IEPs are known.
- **Families receive help navigating a complicated system.** Interview participants noted the benefit of support being available to families to navigate the system of care. For example, one shared how a parent called during the process of getting an IEP for their child because "she didn't know where to start," explaining further that special needs service staff were able to serve as an "advocate between her, her child, and whatever school official she was dealing with, in regards to planning for her child's IEP."
- **Services are available where gaps existed before.** A respondent noted that "First 5 San Joaquin and local schools have done a wonderful job filling in the gaps." In particular, key leaders highlighted the work of United Cerebral Palsy's Great Beginnings program to support young children who do not qualify for federal or state mandated services. As one noted, "We feel so fortunate to have the Great Beginnings program. We refer families all of the time and very much appreciate that it exists."
- **County-wide collaboration is an asset.** An agency representative with a state-wide perspective indicated that San Joaquin County is distinct in the support for collaboration that exists for special needs. While other counties struggle to partner and coordinate, San Joaquin County has "a sense of community," with strong collaboration that has been in place "for a long, long time." This interview participant explained, "We do this particularly well in San Joaquin County compared to other counties and that is very exciting for us," adding, "First 5 San Joaquin plays a big role in that."

“One of the things that I feel puts San Joaquin County apart from the others is our sense of collaboration. It really has helped us move forward on so many things.”

- Key Leader

Challenges and Areas for Improvement

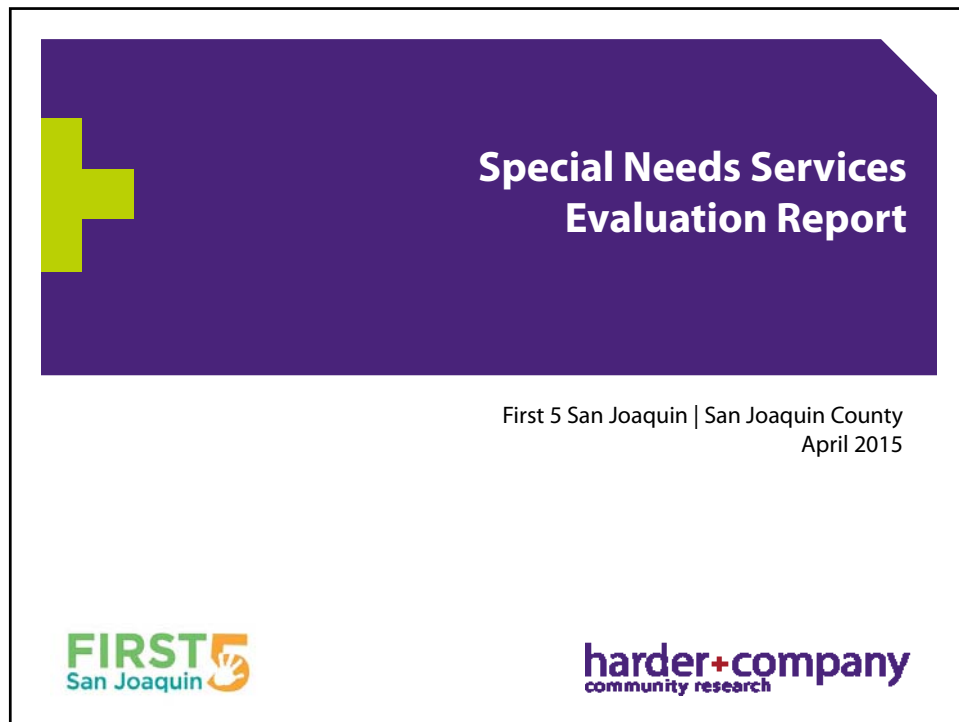
Interviewed leaders also identified several challenges and areas for improvement within the coordinated system of care for young children in the county.

- **The complexity of the system is a barrier to service utilization.** Navigating the system of care is confusing and needs to be “a lot more seamless for the parents.” As one provider explained, “The services are there, but the problem is accessing the services. If you call, does someone answer or [is it] voicemail? [...] is anyone actually there who will set them up with [an] evaluation session?” Another provider described, “We get calls all the time saying ‘I tried calling this school district, and the counselor said that I need to call this other agency...’ so we feel that panic from the parents and hear it in their voice.”
- **Awareness of available services could be strengthened.** A theme that strongly emerged across interviews was the need for greater awareness of available services. As one respondent noted, “A lot of families aren’t aware of these services.” Another mentioned the importance “in general [of] knowing that there is a system out there that could do early detection,” explaining, “I don’t think overall that’s well known.”
- **There is a need to provide culturally and linguistically appropriate services.** Interview participants described how family awareness and use of available services depends on culturally and linguistically appropriate outreach. For example, one remarked, “Outreach is still an issue in terms of families [for whom] English is not their first language, or for families who are not literate.” Given the linguistic diversity of the county, another respondent explained, “There aren’t enough programs in the county in these frequently spoken languages,” and highlighted the particular need to reach migrant workers. Key leaders indicated there may be cultural barriers to talking about special needs and noted the importance of outreach from “someone who understands them and speaks their language at their level.”
- **Better coordination with medical providers would benefit families.** Several interview respondents highlighted the influential role that medical care providers could play in connecting families to services. One explained, “It’s hard for parents to know [about early detection services] unless [their] physician happens to be the one that taps into that service.” One of the challenges medical providers face to effectively screen and link families to care is communication with other agencies and providers within the existing system of care. For patients who may have already received an assessment elsewhere, another interviewee described the difficulty medical providers have accessing information about these referrals and assessments from other agencies.
- **There is a shortage of professionals and specialists for referrals.** Interviewees indicated that there are not enough “vendors” and specialists to refer children to in San Joaquin County. In the words of one interviewee, “One of the things that we struggle with is the need for practitioners including occupational, physical therapists, and speech therapists.” Another noted that “there is a shortage of staffing, especially speech pathologists” throughout the county.

Recommendations

Based on the data presented in this report, there are several recommendations to build on both the accomplishments and opportunities identified to further strengthen the system of detection and intervention for special needs among children ages 0-5 in San Joaquin County.

- **Provide targeted community and health care provider outreach and training on developmental screening, resources, and referral to further promote early detection and intervention.** Key leaders in the county indicated that there is a need for greater awareness of the existing services available for children with special needs. By providing targeted outreach and training, F5SJ can increase knowledge and familiarity of the screening, information, and referral process among providers to better link families to services and ease navigation of a complicated system.
- **Identify opportunities to improve communication systems between medical providers, early care and education, community service providers, and the special needs system of care.** Pediatricians and other medical staff are early points of service contact for families with young children. As such, medical providers have the potential to play an important role in identifying needs through ASQs and linking families to information, referrals, and care. Conversations with key leaders revealed a need to improve communications between medical providers and other stakeholders for this potential to be realized. F5SJ could identify strategies to improve this communication and engage with medical providers as part of the coordinated system of care in the county.
- **Continue to collect and analyze data.** Data collection and analysis allow a better understanding of how the coordinated care system functions, what it is working well, and what could be improved. F5SJ could consider expanding the reach of these data collection activities to include agencies such as Valley Mountain Regional Center and Community Medical Centers, or additional data tracking such as the number of ASQ screenings offered by training participants (e.g., community and health care providers).



First 5 San Joaquin's Investment

- + Outreach**
- + Screenings**
- + Information and referral**
- + Intervention**
- + Coordination and collaboration**

2

Evaluation Questions

- + Who is **receiving F5SJ's special needs-related services**?
- + How are F5SJ investments **contributing to a coordinated system** for early detection and intervention?
- + How can F5SJ investments in the system for early detection and intervention **improve early childhood care** and education in San Joaquin County?

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Evaluation Methods

- + **Document review**
- + **Client and Service Database**
- + **Help Me Grow Database**
- + **Key leader interviews**

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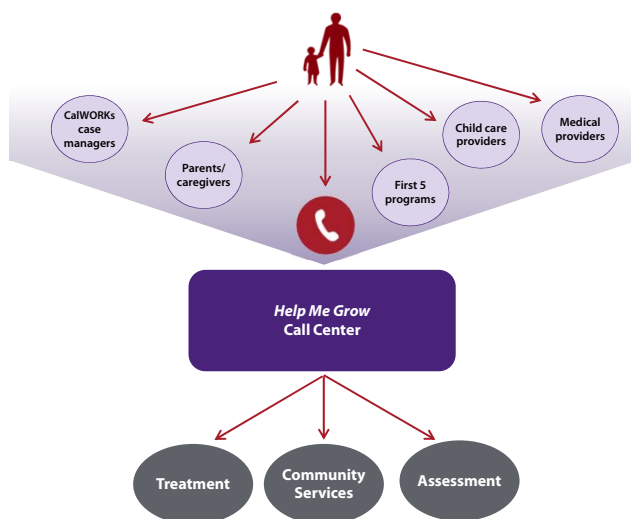
The Approach: *Help Me Grow*

In 2014, San Joaquin County became the fifth county in California to become a Help Me Grow Affiliate.

1. Child Health Care Provider Outreach
2. Community Outreach
3. Central Telephone Access Point
4. Data Collection and Analysis

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The Approach: *Help Me Grow*



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Early Detection

ASQ Screenings and Referrals

	F5SJ intensive programs		Help Me Grow call center		TOTAL
	0-3	3-5	0-3	3-5	
ASQ screenings	589	1,384	271	300	2,544
ASQ referrals	46	99	10	18	173

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Early Detection

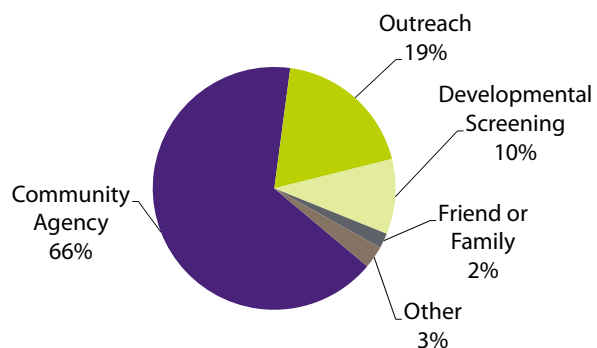
Ethnicity of Children Receiving ASQ Screenings Compared to F5SJ Overall

	F5SJ Overall (n=8,052)	F5SJ intensive programs	Help Me Grow Call Center
Hispanic/Latino	59%	67%	41%
White	12%	8%	21%
Asian/Pacific Islander	10%	11%	5%
Black/African American	10%	5%	21%
Other (incl. Multiracial)	9%	9%	11%

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Early Detection

Where Did You Learn About *Help Me Grow*?



The primary reason families contacted the call center was related to concerns about their child's development.

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Referral and Early Intervention

Reason for Referral

	Percent
Developmental assessment	52%
Education	17%
Speech	8%
Child care	7%
Family support	3%
Behavioral service	1%
Health insurance	1%
Health/developmental subspecialist	1%
Other	10%

84% of children were connected to at least one of their referred services.

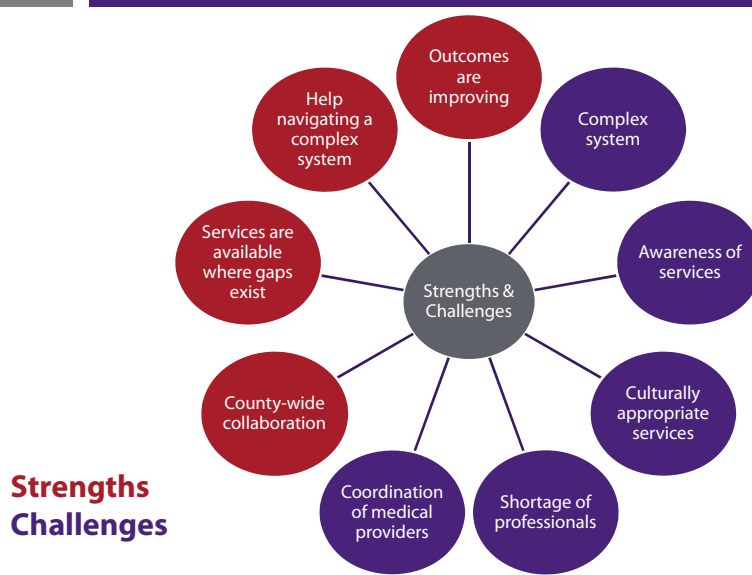
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Early Intervention: United Cerebral Palsy

- + **UCP creates an individualized plan** based on the child's developmental assessment and approved by the child's physician
- + **Specialists visit the child** at home, child care, or their offices to assess progress towards their developmental goals
- + **UCP provides referrals** to pediatricians and mandated service providers such as Valley Mountain Regional Center.

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Coordinated System of Care



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Recommendations

- + Provide **targeted community and health care provider outreach** and training on developmental screening, resources, and referral to further promote early detection and intervention.
- + Identify **opportunities to improve communication systems** between medical providers, early care and education, community service providers, and the special needs system of care.
- + Continue to **collect and analyze data**.

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First 5 San Joaquin Special Needs Services

Fact Sheet

Why is Early Intervention for Developmental Delay Important?

Special needs refer to disabilities, delays, or behavioral, developmental, and/or health conditions that require specialized supports, monitoring and/or services. With early detection of developmental or behavioral delays (as well as early intervention and treatment), increased inclusion, improved academic outcomes, and cost savings to schools are possible. However, numerous barriers make it difficult to connect young children to needed services, and those who do not receive support are at risk of not being ready for school.

What Does First 5 San Joaquin Do?

To strengthen the system for the early detection and intervention of special needs, First 5 San Joaquin follows the *Help Me Grow* National model and invests in **outreach** to community members, families, child care providers, and child health providers; developmental, vision, and hearing **screenings** to identify if a child may have a special need or developmental delay; call center **information and referral** services; and connection to **intervention** services. In addition, First 5 San Joaquin participates in projects like the 5Cs San Joaquin

County aimed at increasing service coordination and collaboration for children with special health care needs.

How are Children with Developmental Concerns Being Served?

In San Joaquin County, the *Help Me Grow* call center offers a central access point to connect families to screenings and services. Families may enter the *Help Me Grow* system by calling the call center directly, or as a result of referrals (e.g., from the Human Services Agency CalWORKs program, child care providers, county agencies, and medical providers). Once contact has been made, call center staff link children to appropriate treatment, community services, or assessment.



SCREENINGS AND REFERRALS

In Fiscal Year 2013-14,

2,544 children ages 0-5 received an ASQ screening and **173** children received an ASQ referral.



REASON FOR REFERRALS*

Dev. Assessment	52%
Education	17%
Speech	8%
Child Care	7%
Family Support	3%
Behavioral Service	1%
Health Insurance	1%
Health/Dev. Subspecialist	1%
Other	10%



CONNECTION TO SERVICES*

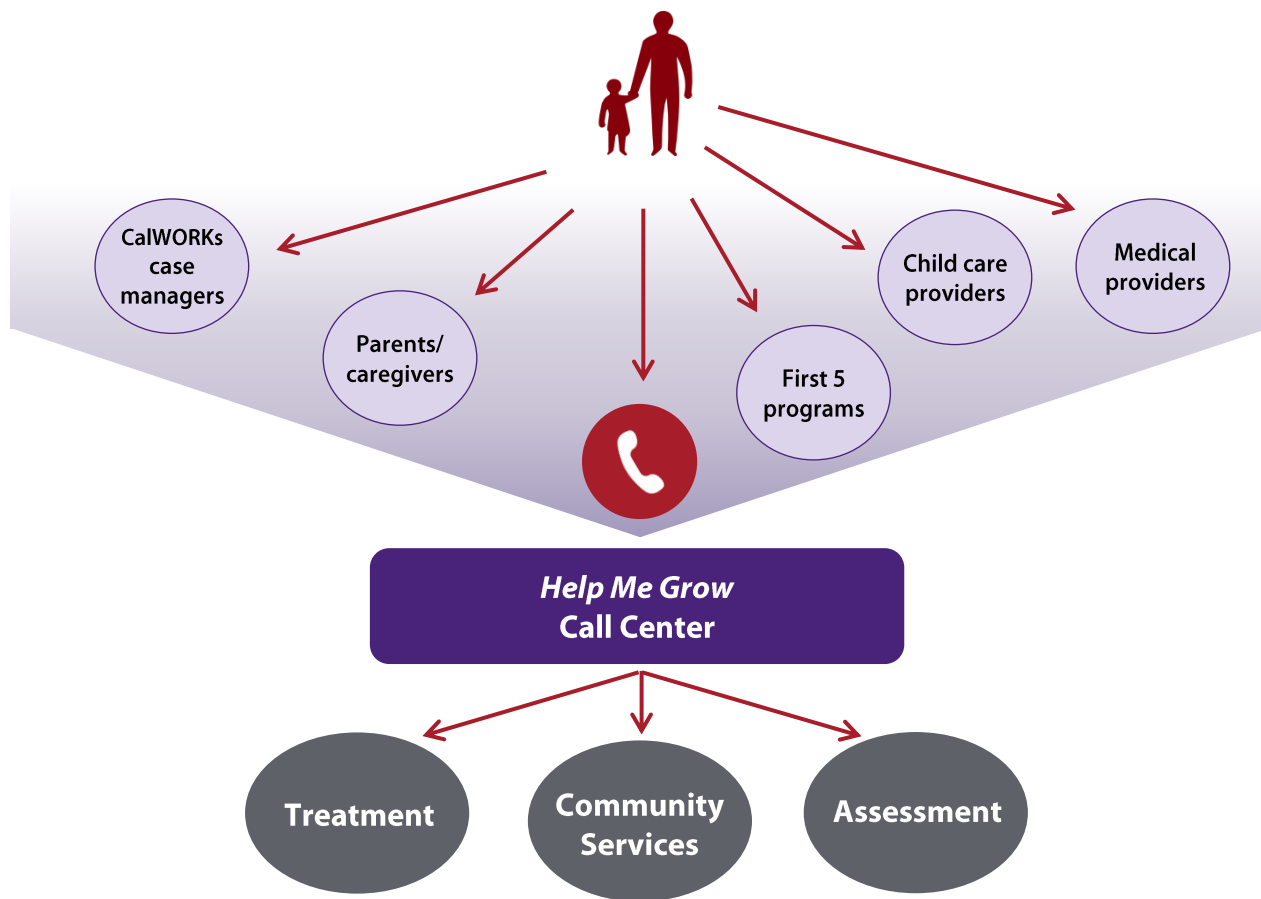
84 percent of children (112 children) were connected to at least one of their referred services.

* Source: *Help Me Grow* Database (July 2014 – December 2014)



Overview of *Help Me Grow* in San Joaquin County

Families access the *Help Me Grow* call center either directly or through referrals.



The *Help Me Grow* Call Center links families to needed services.

Are Systems Improving in San Joaquin County?

As noted below, interviews with key leaders revealed a range of strengths and accomplishments, as well as challenges and areas for improvement, within the system of care for young children in the county.

Strengths and Accomplishments

- Outcomes are improving for children and families.
- Families receive help navigating a complicated system.
- Services are available where gaps existed before.
- County-wide collaboration is an asset.

Challenges and Areas for Improvement

- The complexity of the system is a barrier to service utilization.
- Awareness of available services could be strengthened.
- There is a need to provide culturally and linguistically appropriate services.
- Better coordination with medical providers would benefit families.
- There is a shortage of professionals and specialists for referrals.



Help Me Grow[®]

San Joaquin County

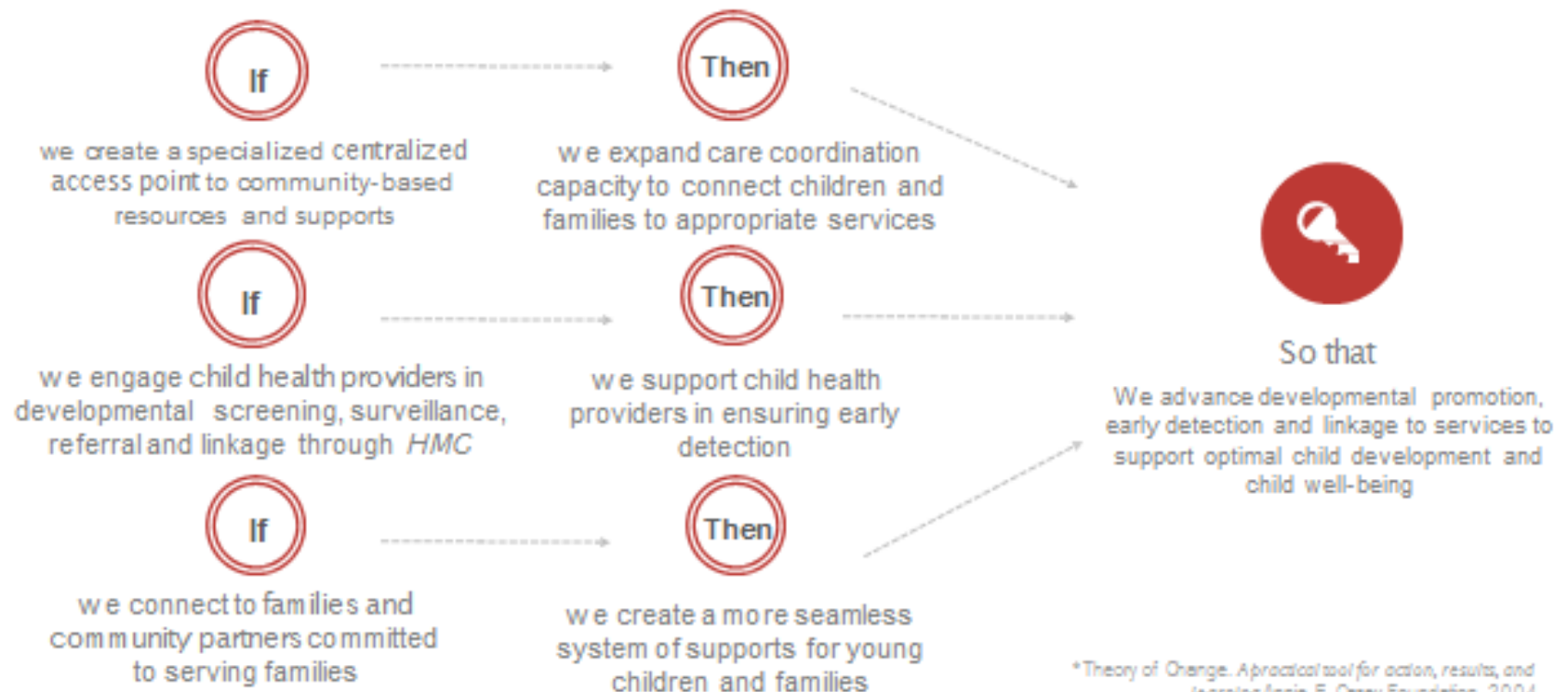


FIRST 5 SAN JOAQUIN CHILDREN AND FAMILIES COMMISSION

May 2017

HMG Theory of Change

LOCAL IMPLEMENTATION



**Theory of Change. A practical tool for action, results, and learning. Annie E. Casey Foundation. 2004.*

HMG and Collective Impact



Common Agenda

Keeps partners working toward same goal

Mutually Reinforcing Activities

Leverages each individual expertise

Continuous Communication

Promotes collaboration and alignment

Shared Approach to Measurement

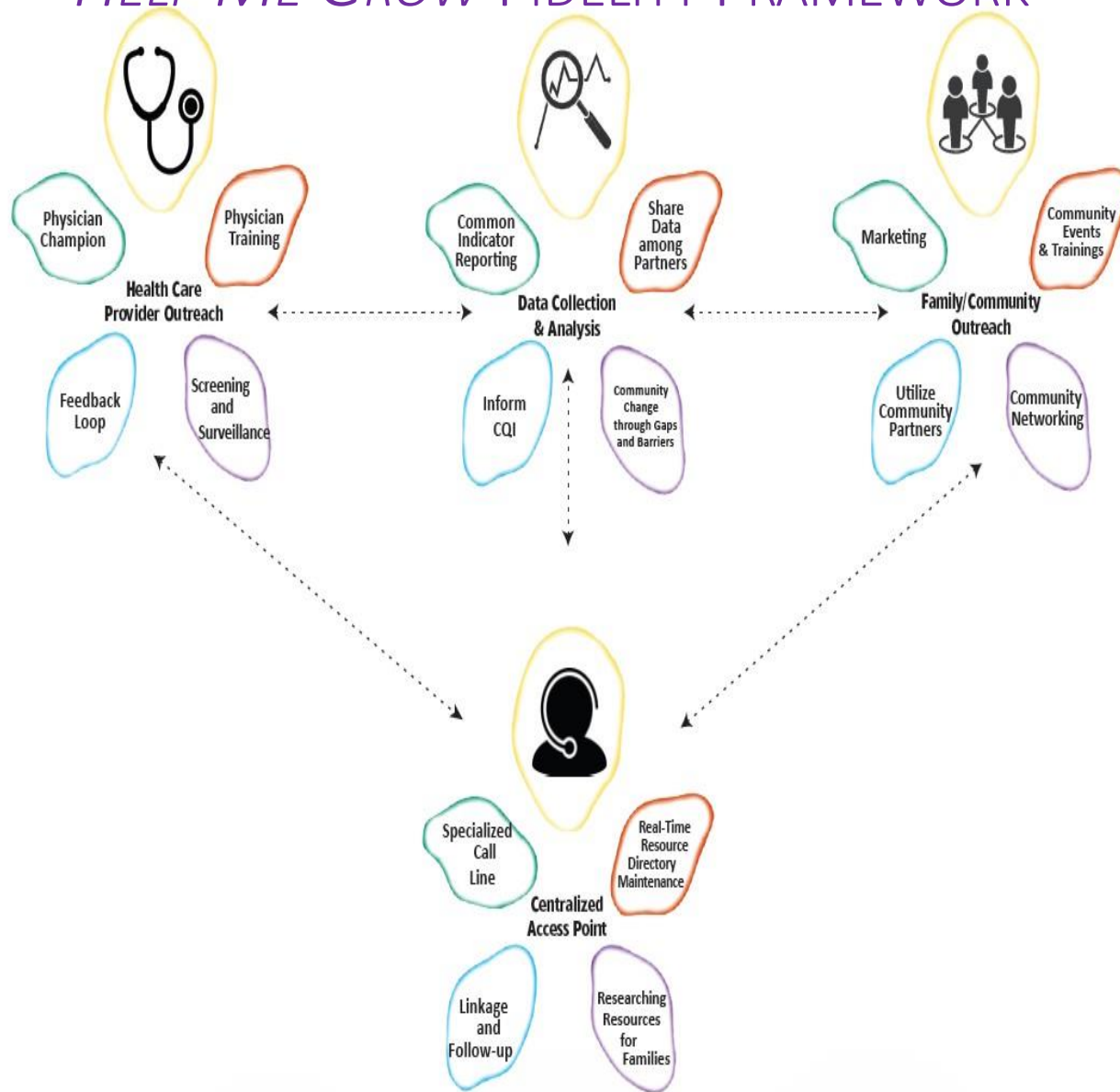
Evaluates true impact

Backbone Organization

Coordinates and manages



HELP ME GROW FIDELITY FRAMEWORK



2-1-1, FIRST 5 SAN JOAQUIN AND HELP ME GROW SEND CONSISTENT MESSAGING TO THE COMMUNITY

The first years of a child's life are critical to brain development, school success, and later life outcomes

If your child is under five years of age

Dial 2-1-1

To connect with the Help Me Grow Call Center about a FREE Ages and Stages Questionnaire to find out how your child is learning, growing, speaking and behaving for his/her age.

Learn about free or low cost early childhood programs in the community to boost your child's development

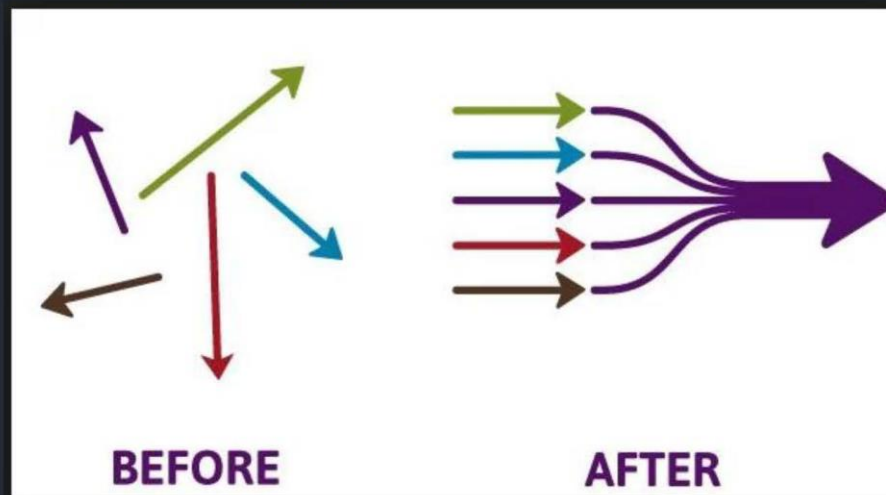


WHAT DOES FIRST 5'S ROLE LOOK LIKE?

Common Agenda

HMG is a....

Shared vision for change underscored by a common understanding of the problem and a joint approach to solve it.

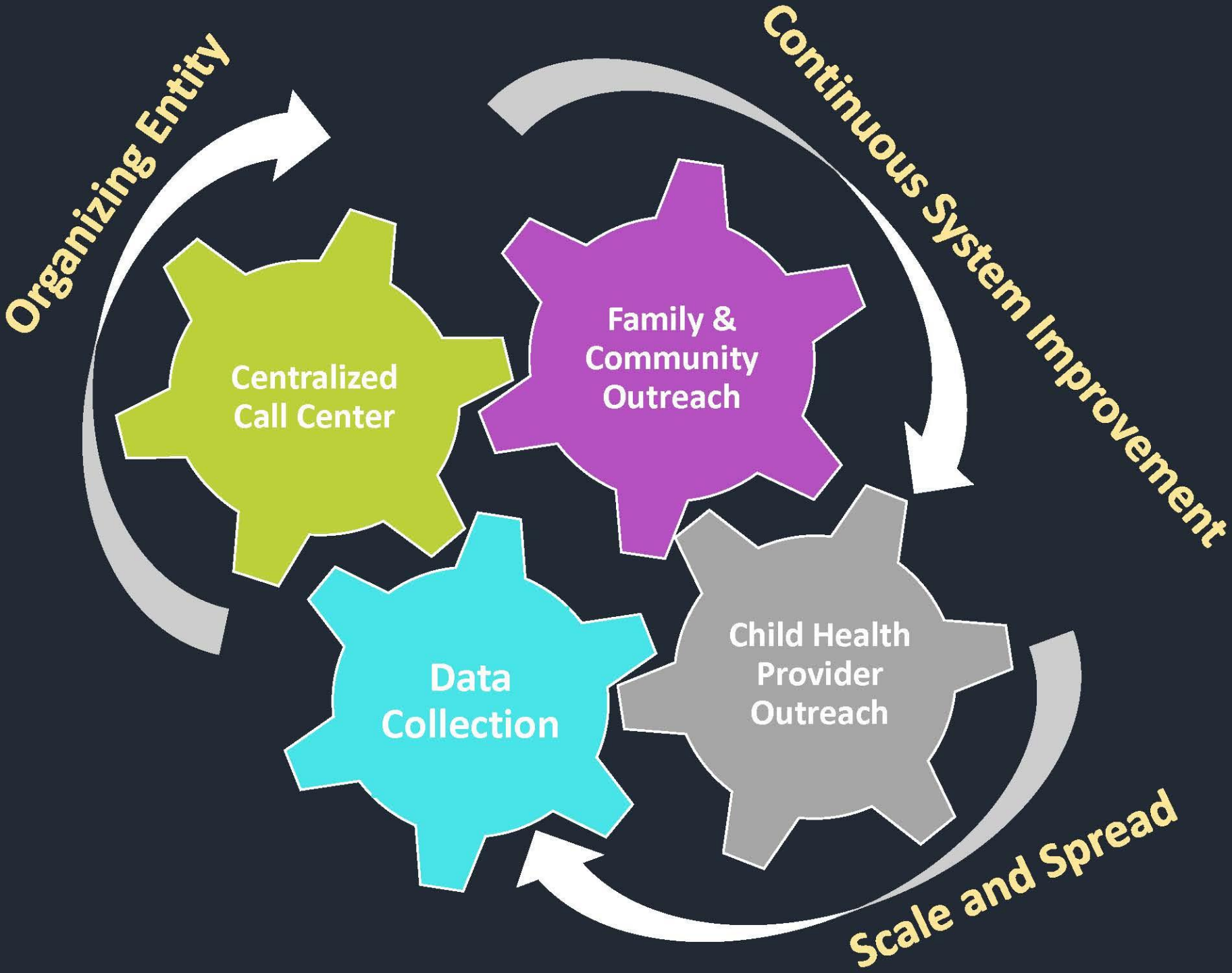


FIRST 5 SAN JOAQUIN, FAMILY RESOURCE NETWORK AND THE LUCILE PACKARD FOUNDATION 5Cs PROJECT: 2 YEAR FUNDING CALIFORNIA COMMUNITY CARE COORDINATION COLLABORATIVES

What have we learned?

1. Children with special health care needs that are beyond current county care coordination processes constitute a small number of children.
2. The challenges of care coordination that were predicted at the beginning of San Joaquin County 5Cs did not change significantly; we can predict and anticipate that these challenges will continue.
3. Locally we can improve the ability of diverse agency staff to offer successful health and care coordination to families by increasing key staff knowledge of resources and agency and systems eligibility beyond their own agency.







Family Resource & Referral Center
Serving San Joaquin County



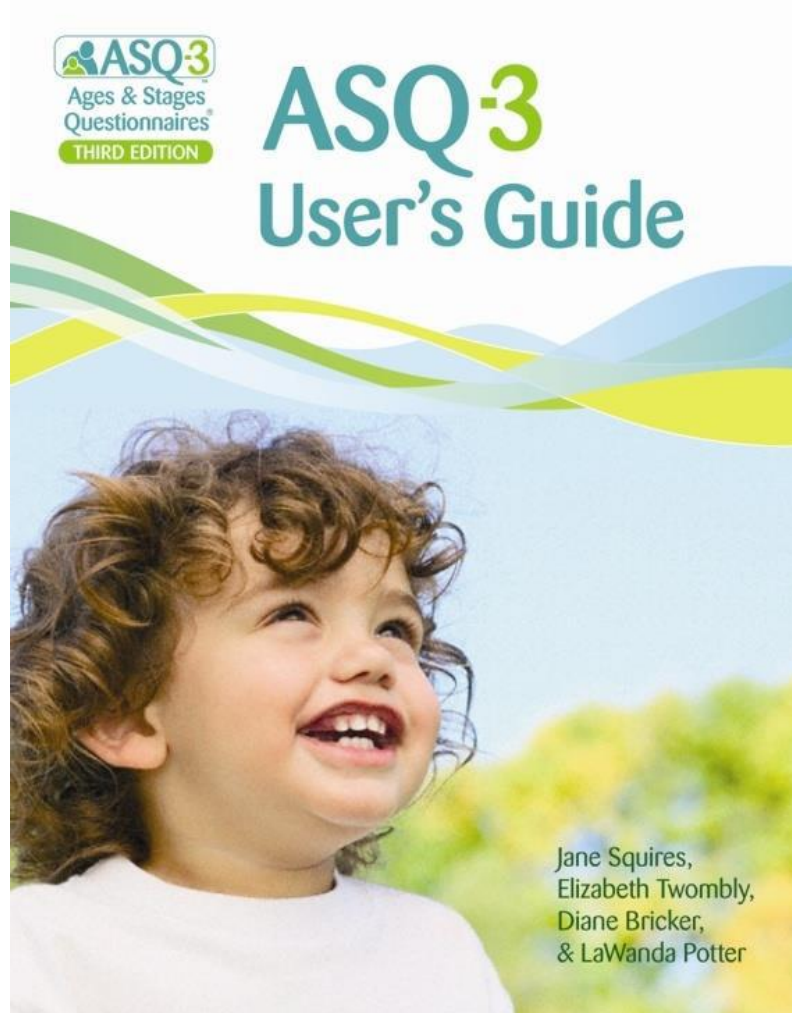
**2-1-1 San Joaquin and Help Me Grow Call Centers
Stakeholder Meeting Agenda
April 17, 2017 at 9:30am**



**Location: Family Resource and Referral Center, Suite 103
Stockton, CA**



FIRST 5 SAN JOAQUIN SUPPORTS SAN JOAQUIN COUNTY TO IMPLEMENT DEVELOPMENTAL SCREENING



FIRST5
San Joaquin



PLANNING: SJGH OUTPATIENT CLINIC SCREENING

- AAP Best Practice: Screen all infants at 9 months in accordance with the American Academy of Pediatrics Recommendation.
- F5SJ ASQ Best Practice: Provide parents with the 9 months ASQ due at their next visit, at the prior visit.
- F5SJ Safety Net Practice: Provide parents with the 9 months ASQ to complete in the lobby if they forget to bring it to their appointment, and Peds Staff will help families to call 2-1-1 for additional support.
- HMG Goal: SJGH staff and patients are supported by the Help Me Grow Call Center to make successful connections to services for young children.



HMG As A System Change Strategy

Its OK to hit your audience over the head with this concept!



Be intentional:

- ***HMG* is a system** – not just a call center, a program or just another initiative
- **You cannot implement it from one sector alone** – we at the health department need our education, child development, family support/child welfare, and mental health partners to help us
- Articulate a **common understanding of the problem**:
“Can we all agree there are young children that are eluding our early detection?”
- **Help your core component partners to identify and message their work as part of *HMG* system building** (no matter how they are funded)



WHAT OPPORTUNITIES DOES HMG CREATE FOR FIRST 5 SAN JOAQUIN?



HELP ME GROW SAN JOAQUIN

FY 2017-2018 BUDGET

\$278,100	United Cerebral Palsy HMG Great Beginnings
\$16,000	United Cerebral Palsy HMG Great Beginnings - CalWORKs
\$186,000	Family Resource & Referral Center HMG Call Center - CalWORKs
\$23,000	First 5 San Joaquin - CalWORKs
\$25,000	First 5 San Joaquin - Sunlight Giving
\$10,000	Stockton Unified School District - Sunlight Giving
\$40,000	Family Resource & Referral Center HMG Call Center - Sunlight Giving
\$12,000	Family Resource & Referral Center HMG Call Center – IMPACT

- ☐ Commission Funding
- ☐ SJC Human Services Agency CalWORKs Funding
- ☐ Sunlight Giving Funding
- ☐ IMPACT Funding

