

2020 Annual Report



# **Building Impact**

This 2020 Help Me Grow (HMG) report synthesizes information collected from 100 HMG systems in 29 states across the country to capture the following:

- The breadth and scope of HMG system implementations and progress since 2019
- Fidelity to each Core Component of the HMG Model across communities
- O The capacity of HMG to reach children, families, community partners, and child health care providers
- Novel approaches and system enhancements currently explored by the National Affiliate Network, including those deployed in response to COVID-19

I am pleased and honored to have the privilege of introducing the 2020 Building Impact Annual Report of the Help Me Grow National Center. How to best frame this report in the context of a year that was unprecedented from the standpoint of its challenges and misery is a daunting task. The COVID-19 pandemic has exposed families' critical needs, as well as the inadequacies of the social safety net. Tragedies across the nation have demanded and amplified calls for racial and social justice that must address inequities that are a consequence of the lack of equal access to critical services. An important implication for early childhood system building includes the imperative of viewing families' social determinants in the context of families' circumstances, priorities, and need. We must engage families as partners in the co-design and co-production of our innovations and interventions. The evolution of HMG model development, with its progression from family engagement to the "voice of the family" to family co-production and co-leadership, exemplifies the importance of a collaborative approach with families determining the desirable outcomes for our efforts, as reflected by the emerging process of "goal-concordant care."

I am inclined to view activities and accomplishments of the past year through a tripartite lens of continuing to advance the scale and impact of the HMG Model, our pivoting in response to the impact of Covid-19 on families and their children, and acknowledging the imperative of viewing all that we do in the context of diversity, equity, and inclusion. In this report, you will read of notable, perhaps even remarkable, accomplishments, especially considering the magnitude of the tasks at hand and the obstacles necessary to overcome. I could not be more proud of the outstanding efforts of our HMG National Center, our affiliates and systems across the nation, and our many partners and collaborators in our work. I trust that, upon reviewing this report, you will share my pride and gratitude.

Despite the many limitations imposed by the pandemic, HMG experienced remarkable growth in both scale and impact. Growth of the network included both new and established affiliates and systems. The network continued to demonstrate important progress in achieving fidelity to the model, with 91% of the network in Installation or Implementation. While the numbers of children and families served continues to escalate, I am most proud that over 80% of families who engaged with a HMG Central Access point reported that their identified needs were met.

The response of the network to families' needs due to the pandemic was so inspiring. As you will learn, in response to an increase in call volume from families in their communities, HMG systems expanded the capacity of their Centralized Access Point to link families to critical services. In 2020, addressing families' basic needs became a critical component of the model. Thanks to extremely generous support from one of our major funders, the National Center allocated financial resources to affiliates for the provision of emergency infant and toddler basic needs.

Despite the challenges and limitations imposed by the pandemic, HMG affiliates advanced Family and Community Outreach efforts through a variety of innovative approaches. In response to calls for racial and social justice, HMG ensured that families had equitable access to the resources they need when they needed them. Advances in tracking the percentage of referrals coming from targeted zip codes guided adjustments in outreach efforts to those most at risk and disadvantaged.

In the long term, perhaps the most impactful achievement of the year was the development, in consultation with the Bridgespan Group, of a comprehensive plan for HMG scaling and impact advancing five strategic growth priorities. You will note that all priorities wisely emphasize key aspects of the HMG value proposition. The National Center, in partnership with our affiliates, is now implementing this ambitious plan.

As you peruse this report, I am confident that you will be inspired by the accomplishments of the past year, as well as impressed by the commitment to continued growth and impact of the HMG model. As always, we welcome your impressions and feedback. Together, we will accomplish our goal of strengthening all families to ensure their capacity to promote their children's optimal health, development, and well-being.

Paul H. Dworkin, MD

Thurs Worth .

Founding Director, Help Me Grow National Center

The Help Me Grow National Center is a program of the Office for Community Child Health within Connecticut Children's Medical Center.





2020 BUILDING IMPACT

# **CONTENTS**

60 Conclusion

80	About Help Me Grow	11	About This Report	12	Help Me Grow in Action
14	Advancing The Help Me Grow Model	15	Report Highlights	<b>17</b>	Evaluating Help Me Grow
19	Help Me Grow Implementation	25	Centralized Access Point	31	Affiliate Highlight: Help Me Grow North Texas
33	Family and Community Outreach	37	Affiliate Highlight: Help Me Grow Delaware	39	Child Health Care Provider Outreach
44	Affiliate Highlight: Help Me Grow Washington	46	Data Collection & Analysis	51	Affiliate Highlight: Help Me Grow Florida
54	Developmental Surveillance and Screening	56	SMART Aims	<b>57</b>	System Enhancements and Future Trends

# About Help Me Grow

#### THE HELP ME GROW DIFFERENCE

A better future starts with Help Me Grow. By supporting our young children today, we promote healthier and more prosperous communities tomorrow.

### AN OPPORTUNITY TO MAXIMIZE CHILDREN'S POTENTIAL

The early years present incredible opportunity to build a strong foundation as the brain rapidly develops during the first five years of life. All children benefit from an organized system of community resources to help them thrive, like health care, quality early learning experiences, healthy nutrition, and parent support. However, when the system is not well organized, it can be difficult for families to access resources for their children and challenging for service providers to connect families to needed supports. This can have long-lasting consequences on children's health and well-being.

#### HELP ME GROW: A SOLUTION TO HELP YOUNG CHILDREN SHINE

A network of community resources works like a power grid. When the grid functions well, families can plug in to an organized flow of resources and easily access the ones they need. Help Me Grow strengthens the grid by maintaining a current directory of available services and connecting service providers to each other to create an interconnected system. Families benefit as Help Me Grow listens to them, links them to services, and provides ongoing support. Help Me Grow is available to all children, including those whose families may have concerns or simply want to learn more about their child's development.

### A VISION FOR A BRIGHTER FUTURE

Thriving communities depend on the well-being of all members. By providing families with equitable access to the resources they need when they need them, Help Me Grow works to ensure we all enjoy more vibrant years ahead.

Help Me Grow (HMG) is not a stand-alone program, but rather a system model that leverages existing resources in order to develop and enhance a comprehensive approach to early childhood system building in any given community. Successful implementation of the HMG Model requires communities to identify existing resources, think creatively about how to make the most of existing opportunities, and build a coalition to work collaboratively toward a shared agenda.

Four cooperative and interdependent core components characterize the HMG Model:



A Centralized Access Point assists families and professionals in connecting children to the grid of community resources that help them thrive;



Family & Community Outreach builds parent and community-based organization understanding of healthy child development, supportive services that are available to families in the community, and how both are important to improving children's outcomes;



When providers identify potential concerns early on, they can be easier to address. *Child Health Care Provider*Outreach supports early detection and intervention efforts and connects medical providers to the grid of community resources to best support families.

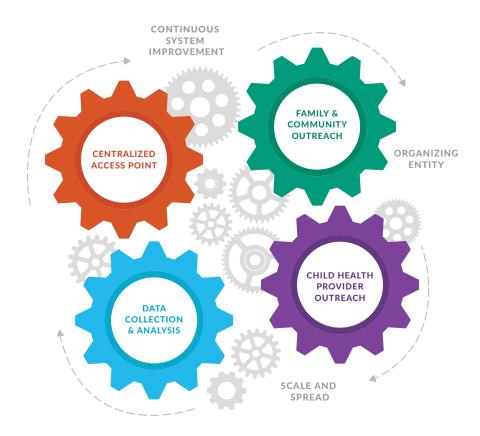


To make sure the resource grid is working effectively, *Data Collection* supports evaluation, helps identify systemic gaps, bolsters advocacy efforts, and guides quality improvement.

2020 BUILDING IMPACT 2020

The HMG Model also depends on three Structural Requirements to provide the foundation for building and managing the Core Components of a HMG system effectively over time. Implementation relies on an **Organizing Entity** to provide support, oversight, continuity, and facilitation of collective impact efforts. Critical strategies for **Scale and Spread** ensure that systems optimally serve to meet the needs of all children and families. The efficacy and durability of the Help Me Grow model also hinges on **Continuous System Improvement**, or constant efforts to enhance, refine, and innovate.

HMG piloted its first system in Hartford, Connecticut in 1997. Since that initial implementation, a growing number of states and communities have replicated the HMG Model as a strategy to support early detection of developmental or behavioral concerns, as well as the referral and linkage of those children to appropriate medical and community services. This 2020 Help Me Grow (HMG) report synthesizes information collected from 100 HMG systems in 29 states across the country.



## **About this Report**

The HMG National Center administers an annual, standardized Fidelity Assessment to every HMG system in the National Affiliate Network. The Fidelity Assessment is a self-reported survey intended to measure:

**BUILDING IMPACT** 

- 1) Progress in HMG Implementation in each of the Model's four Core Components
- 2) Relevant process and outcome metrics
- 3) Adoption of system enhancements that may serve as innovative strategies to further advance developmental promotion, early detection, referral, and linkage.

The 2020 Fidelity Assessment informed findings presented in this report. All HMG systems report data through the Fidelity Assessment regardless of their implementation status; thus, certain data points reflect only the subset of HMG affiliates that track relevant measures. For questions, or to request copies of the report, please contact the HMG National Center.

<sup>\*</sup> Any portion of this report may be reproduced without prior permission, if cited as: Therriault C, Cornell E, Zucker S, Dudack D, Sibley S, Martini-Carvell, K, and Dworkin PH. 2020 Help Me Grow Building Impact Report. Help Me Grow National Center. 2021.

# Help Me Grow in Action

### **Cooperation of Four Core Components**

Outreach to Community-Based Service Providers through community events, service fairs, networking meetings, and other opportunities helps engage these organizations as partners and integrated members of the broader early childhood system. Building partnerships with community-based service providers helps expand the use of the Centralized Access Point, which supports these providers through the provision of system navigation, primarily telephone-based care coordination efforts overseen by experts in early childhood development, and access to a comprehensive, up-to-date resource directory of all available and appropriate local early childhood resources for families with young children. Continued and coordinated Outreach to Community-Based Service Providers serves to address an important challenge in ensuring accuracy of the resource directory.

Targeted **Outreach to Families** through marketing and public awareness campaigns, family engagement events, and strategic partnerships with existing parent support and advocacy groups increases knowledge and understanding of children's optimal healthy development. It engages families as critical partners in supporting the wellness of their young children. These family outreach strategies also foster awareness of the **Centralized Access Point**, which provides families of young children with support in navigating the landscape of early childhood programs, thus transferring the onus of complex system navigation from the caregiver to trained and dedicated **Centralized Access Point** staff. Families receive best-fit referrals, and **Centralized Access Point** staff systematically follow up with families to help them overcome barriers to accessing needed services, provide ongoing support, and ensure needs are met.

Child Health Care Providers are uniquely positioned to identify children who are at risk for adverse developmental outcomes. They have near universal access to young children and provide ongoing monitoring of developmental status during well-child visits that include developmental promotion and early identification through periodic developmental surveillance and screening. However, due to the structure and requirements of the well child visit, child health care providers often face challenges in identifying early signs of developmental or behavioral concerns. Even when needs are recognized, keeping comprehensive and updated information on community-facing services is difficult and ensuring successful connection to those programs is time-consuming. Further, only a subset of children with developmental delays or those who are at risk for developmental delays will qualify for early intervention and early childhood special education services, which often prompts a "wait and see"

approach among child health care providers.

The HMG system implements strategic outreach to **Child Health Care Providers** through office-based training sessions, which frequently include the implementation of American Board of Pediatrics Maintenance of Certification Quality Improvement projects. These **Child Health Care Provider Outreach** efforts advance education around developmental promotion, motivate physicians to conduct systematic surveillance and validated screening of young children, and encourage providers to leverage HMG as a resource for their patients by recommending families access the **Centralized Access Point** as a support. In this way, the **Centralized Access Point** serves as a care coordination arm for busy pediatric primary care practices when providers identify concerns and, in so doing, HMG partners with pediatricians to ensure effective linkage to appropriate programs and services.

The Centralized Access Point systematically closes the loop with referring Child Health Care Providers and Community-Based Service Providers so families are optimally supported, communication is streamlined, redundancies are minimized, gaps are identified, and children receive what they need when they need it. Throughout each component, Data Collection and Analysis further bolsters the ability to close identified systemic gaps and strengthens the entire system as a whole.



2020 BUILDING IMPACT

# Advancing The Help Me Grow Model

Beginning in 2021 and over the next five years, the HMG National Affiliate Network will collaborate with the HMG National Center in advancing five strategic growth priorities. These five priorities emphasize key aspects of the HMG value proposition and include:

1. Further validate HMG's impact model and measure performance toward equitable outcomes



2. Accelerate National Affiliate Network's ability to use data to achieve community change at the system and state level



3. Clearly define how HMG can be used to advance racial equity through the components of targeted universalism



4. Secure robust funding for early childhood systems infrastructure in several key states to build momentum for a parallel national policy and advocacy agenda



5. Pursue 3x growth, emphasizing equitable growth within existing states



Our foundational awareness of affiliate progress in each of these areas, as measured through the annual Fidelity Assessment, will provide needed data to benchmark our efforts and identify areas where we can elevate strong affiliate examples of understanding impact, using data, advancing racial equity, securing funding, and increasing penetration and coverage in existing communities.

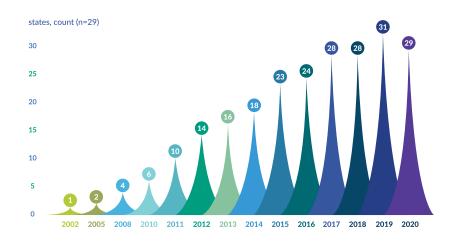
# Report Highlights

2020

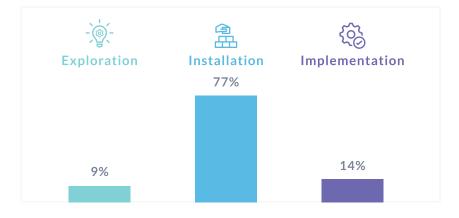
The Help Me Grow (HMG) National Affiliate Network consists of affiliates in 29 states across the country operating 111 HMG systems.

The National Affiliate Network has steadily grown over time, though cumulatively, the number of HMG states trended down between 2019 and 2020. This fluctuation occurs each year as states face challenges in maintaining/expanded funding, leadership, and community partnerships.

Year of Affiliation: From 2002 to 2020



This report reflects 100 HMG systems in 29 states that reported data in the 2020 Fidelity Assessment.



The efforts of HMG systems to implement the entire HMG Model are categorized as being in an exploration, installation, or implementation stage. As of 2020, 9% of the network is in exploration, 77% is in installation, and 14% is in implementation.

**BUILDING IMPACT** 

• Across the four HMG Core Components, systems are furthest along in implementation of Family and Community Outreach, with 79% in full implementation of this Core Component.

79%
of affiliates are in full implementation of Family and Community Outreach core component

147,884
families reached by
HMG community
events and trainings in
2020

 Throughout 2020, HMG systems conducted targeted outreach to families, community providers, and child health care providers, reaching more than 147,884 parents, caregivers, and other family members. In addition, HMG reached 23,615 individuals from community-based agencies across the country through efforts such as events, trainings, and networking.

 HMG systems served 102,726 children and families through the Centralized Access Point. Of the families that engaged with the Centralized Access Point, an average of 81% reported that HMG met their identified needs. 102,726

children and families served through the Centralized Access Point



 HMG systems pursued a wide array of enhancements to their HMG implementation, many of which aimed to utilize technology in order to engage families and community partners and better serve families affected by the COVID-19 pandemic.

# **Evaluating Help Me Grow**

Since its inception, the focus of HMG has been to strengthen efforts in support of the early detection of developmental and behavioral concerns, as well as the referral and linkage of such children to services within the broader early childhood system. Isolated initiatives within a system often fail to generate and sustain the large-scale systems change needed to provide optimal benefit to all young children and families. Yet, through an emphasis on comprehensive system building and alignment with other key early childhood partners, HMG stands at the other end of the spectrum from an isolated initiative – embracing a collective impact approach. Given the vast collective potential among more than 100 HMG systems across the country, it is imperative that the National Affiliate Network is oriented toward a common agenda. The greater the coordination and alignment across our efforts, the greater is our likelihood of addressing the complex and multi-faceted dynamics that limit the impact of comprehensive, effective early childhood systems.

Efforts to ensure alignment include an emphasis on fidelity to the Model across the communities that have implemented or seek to implement HMG. Measurement of fidelity ensures that communities are adopting similar approaches in contributing to effective systems that ensure developmental promotion, early detection, referral, and linkage. In addition, HMG embraces the concept of shared measurement: the methods to document the impact of HMG systems, communicate, and leverage lessons learned, which are essential to enhance capacity to operate as a movement and strengthen the potential to generate policy change at the local, state, and national levels.

The HMG measurement framework balances both the need to assess HMG efforts at the local-level while considering the important context that shapes community capacity. This assessment also aims to capture impact at the national-level, bridging together HMG efforts into a single movement. Therefore, the HMG National Center distinguishes between Common Indicators and Impact Indicators to describe metrics that serve unique purposes. Common Indicators are a shared set of metrics among affiliates that are heavily influenced by local variations in HMG systems and which inform local continuous quality improvement and system enhancements. Impact Indicators are a shared set of metrics among affiliates that, in the aggregate, inform the national narrative of HMG. Together, Common and Impact Indicators enable HMG affiliates to monitor progress, share lessons learned across the National Network, and advocate for change.



# Help Me Grow Implementation

The collective efforts and capacity of HMG are ever evolving; especially as new affiliates join the National Affiliate Network. Through the annual Fidelity Assessment, HMG systems provide an update on their implementation progress, specific approaches deployed over the last year, and key process and outcome metrics. This report attempts to capture the breadth and impact of the National Network through key findings and lessons learned from the 2020 Fidelity Assessment.

### **Local HMG Implementation**

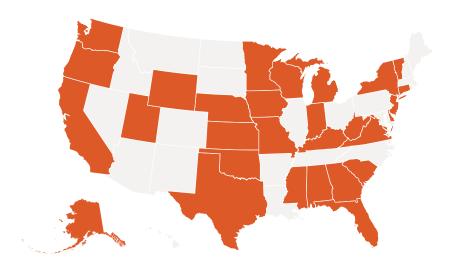
Communities often explore the HMG Model as a strategy to strengthen their early childhood systems building to ensure developmental promotion, early detection, referral, and linkage to services. The reasons that a particular community may consider implementation of HMG reflect a variety of priorities, including the desire to promote universal developmental surveillance and screening, improve collaboration and coordination among early childhood system stakeholders, improve referral and linkage rates for young children following developmental screening, and expand care coordination capacity across a given system.

States and communities beginning to explore HMG will do so under the guidance of a designated HMG state lead. The role of the state lead may take different forms in different states, but generally comprises the following activities: providing direct oversight, building relationships, strategic planning, advocacy, community engagement and marketing, and fund management. For HMG systems that will function in a statewide capacity, state leads oversee the efforts of a single system designed to meet the needs of the entire state. Some states instead choose to function as a multi-system state; in such instances, the state lead maintains a leadership role in addition to local HMG system leads that oversee HMG efforts in designated regions (often at the county level). Each implementation of HMG is unique, drawing on existing resources, partners, and efforts already present in a given community at the start of HMG exploration. Local variations aside, all HMG systems are encouraged to move toward fidelity to the HMG Model over time.

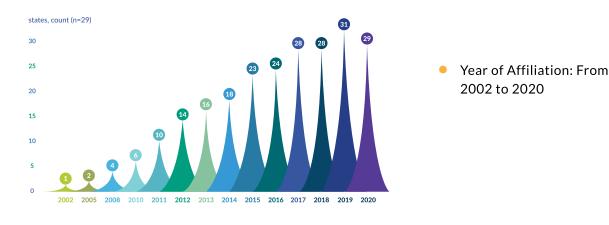
### **The HMG National Network**

The HMG National Center defines HMG systems at the level of the Centralized Access Point, with unique Centralized Access Points designated as individual systems (e.g., individual, county-based HMG systems in a given state). HMG systems, for the purposes of the Fidelity Assessment, may also include systems currently not operational but, nonetheless, exploring implementation of a HMG Centralized Access Point. Of the 100 HMG systems whose data are reflected in this report, 88 are operational and defined as actively moving toward implementation.

At the close of 2020, the National Affiliate Network consisted of 111 HMG systems embedded within 29 states across the country, and Washington DC; 100 of these systems are represented by the data in this report.



Network affiliation continues to steadily increase over time, though cumulatively, the number of HMG states trended down between 2019 and 2020. This fluctuation occurs each year as states face challenges in maintaining/expanded funding, leadership, and community partnerships



### Fidelity to the Model

The HMG National Center categorizes implementation of the HMG Model as an affiliate being in either an exploration, installation, or implementation stage. Such stages are generally consistent with those defined in the field of implementation science and signal advancement through a continuum of activities that move a community closer to replication of a defined model.

The Fidelity Assessment measures achievement of HMG's 16 Key Activities, four associated with each of the four Core Components, to enable classification of system implementation.



#### **EXPLORATION**

Refers to affiliate systems that have implemented none of the four activities (0)



#### INSTALLATION

Refers to systems that have implemented between one to three Key Activities (1-3)



#### MPLEMENTATION

Refers to systems that have implemented all four Key Activities for that Core Component of the Model. (4)

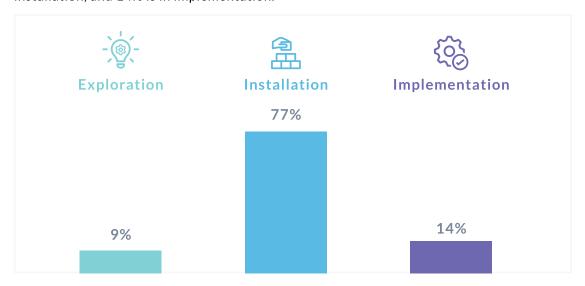
HMG systems receive an overall classification based on their Core Component classifications, using the lowest-scoring Core Component as the overall classification. Systems are in Full Implementation when they have achieved implementation of all four individual HMG Core Components.



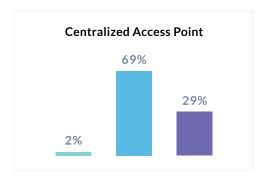
### Fidelity to the Help Me Grow Model

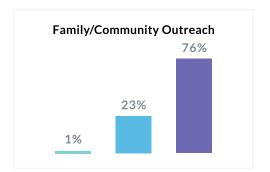
MODEL CORE COMPONENT	KEY ACTIVITIES
Centralized Access Point	<ul> <li>Specialized child development line</li> <li>Linkage and follow-up</li> <li>Researching resources</li> <li>Real-time directory maintenance</li> </ul>
Family and Community Outreach	<ul><li>Engaged community partners</li><li>Networking</li><li>Community events and trainings</li><li>Marketing</li></ul>
Child Health Provider Outreach	<ul> <li>Physician champion</li> <li>Training on surveillance and screening</li> <li>Training on referral and linkage</li> <li>Closing the feedback loop</li> </ul>
Data Collection and Analysis	<ul> <li>Data monitoring</li> <li>Sharing data across partners</li> <li>Continuous quality improvement</li> <li>Community change through data</li> </ul>

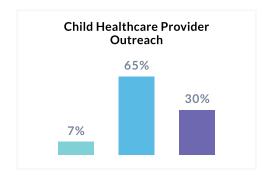
As of 2020, 9% of the National Affiliate Network is in exploration of the HMG Model, 77% is in installation, and 14% is in implementation.

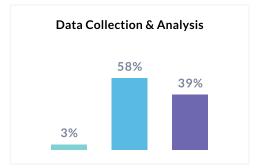


**Level of Affiliation** 









Among the four Core Components, HMG systems are making the most progress implementing Family and Community Outreach, with 76% of systems having achieved all four Key Activities associated with this Core Component. This finding has held steady over the last four years.

In contrast, only 29% of HMG systems have achieved all four Key Activities associated with the Centralized Access Point, despite only a modest 2% of systems being in exploration in this Core Component. This finding suggests that one or more of the Key Activities associated with the Centralized Access Point may be relatively easy to achieve and quickly propels affiliates to an installation stage, while successful adoption of all four activities in this Core Component may require a more substantive effort. While 95 percent of HMG systems are operating a Centralized Access Point with an active child development line, Key Activities related to linkage and follow up, as well as real-time maintenance of resource directories have emerged as areas for further support and innovation in order to move into full implementation of this Core Component.

Few HMG systems maintain a classification of exploration in any Core Component for long, with the highest being 7% of systems in the exploration stage for Child Health Provider Outreach, meaning they have yet to implement any of the four Key Activities associated with one of the HMG Model Core Components.

The HMG National Center administers the HMG Fidelity Assessment annually, enabling year-to-year comparisons of the National Affiliate Network over time. However, the denominator of affiliate systems is consistently shifting year to year; thus, while comparison is possible, it is more difficult to determine changes. The HMG National Center observed the following trends from 2019 to 2020:

- 16 new systems joined the National Affiliate Network through regional expansion in existing affiliate states. However, the National Network lost two affiliate states due to difficulties sustaining leadership buy-in and funding to support the HMG Model.
- Ten HMG systems advanced from overall implementation status
- Twenty HMG systems are just one or two Key Activities shy of being in full implementation of the HMG Model
- HMG affiliates continue to exhibit the greatest progress in the Family & Community Outreach
   Component of the HMG Model

Across all Key Activities associated with fidelity to the HMG Model, the greatest number of affiliates exhibit progress in the following:

• Identifying and engaging with community partners in their local comprehensive early childhood systems. Partners include, but are not limited to, child health providers, educators, social service agencies, advocacy and policy professionals, and parent leader groups.

Data from the 2020 Fidelity Assessment suggest the following as priority areas for development across the HMG National Affiliate Network, based on the observation that these activities are implemented by the fewest overall HMG systems:

- Real-time resource directory maintenance
- Training on screening and surveillance for partners and providers
- Referral and linkage to services
- Closing the feedback loop with child health providers through the Centralized Access Point
- Driving community change through the utilization of data describing barriers families face to accessing existing resources



The HMG Centralized Access Point typically takes the form of a call center that serves as a coordinated portal of entry for family members, child health providers, and other professionals seeking information, support, and referrals for children. The Centralized Access Point connects children and their families to needed services through the efforts of HMG Care Coordinators. Care Coordinators work to provide education and support to families around specific developmental or behavioral concerns or questions, help families recognize typical developmental milestones, provide referrals to community-based supports, and follow-up to ensure successful linkages.

#### FIDELITY TO THE CENTRALIZED ACCESS POINT



#### **Specialized Child Development Line**

A specialized child development line distinct from a general call line which can be directly accessed by families and providers



#### Linkage and Follow-up

The capacity of the call line to facilitate connection to a variety of early childhood services and follow-up with families to ensure linkage to services



#### **Researching Resources**

A systematic process to research available resources in the community



#### **Real Time Directory Maintenance**

An early childhood resource directory that has the capacity to be maintained and updated at least quarterly



### **IMPACT INDICATORS**

Number of Unique Interactions (12 months)

102,726 call center interactions

in 2020

45%

of the National
Affiliate Network
fielding 1,000
or more unique
interactions per yea
from families

12%

of the National
Affiliate Network
fielding 2,000
or more unique
teractions per yea

2020 BUILDING IMPACT 2020

### **Needs Met**

Among the 58 HMG systems reporting on this measure, an average of 81% of callers reported that HMG met their needs.

#### Affiliate Progress in Implementing Centralized Access Point Activities

ACTIVITY	2019	2020
Specialized child development line	84%	88% †
Linkage and follow-up	50%	50%
Researching resources	82%	80% ↓
Real-time directory maintenance	39%	47% <b>†</b>



### **Specialized Child Development Line**

Implementation of HMG requires a specialized child development portal of entry, typically through a call line, with the capacity to both address questions and make referrals for topics tied to child development. Activities associated with implementing a specialized line consist of identifying a partner entity to serve as the call center (e.g., most commonly through 2-1-1), ensuring that the call line has the capacity to accept calls, designating a target population for those served by the call center, and being accessible as a resource to families, community-based service staff, and child health providers.

As shown below, there has been a steady increase in the HMG National Affiliate Network's establishment of active HMG Centralized Access Points, each equipped with a specialized child development line and HMG Care Coordinators trained to assist families' needs.

#### **HMG Care Coordination**

Effective, powerful support to families with young children, delivered by well-trained HMG Care Coordinators, is a fundamental part of the HMG Model. Without well-informed, positive, persistent, well-supported, and empathetic Care Coordinators, families cannot be linked successfully to the supports and services they need.

**BUILDING IMPACT** 

A HMG Care Coordinator is a staff member at a HMG Centralized Access Point. She or he provides information and education to families with young children, helps identify needs, may conduct a validated screening tool or assist families in understanding and using the results of a screening previously conducted by their provider, maintains an up-to-date and comprehensive directory of all available resources for families with young children in the area, and links children and their families to community-based services and programs.

Through helping families overcome barriers to services and following up with them to make sure linkages are successful, HMG Care Coordination (HMG CC) is critical to assuming the challenging responsibility of navigating an oftentimes complex grid of agencies, services, and programs that exist in any given community or state. HMG works to create a more coordinated grid of services and the HMG Care Coordinator role undertakes the task of maneuvering through that grid, thereby alleviating the challenges for families in successfully accessing services.

Essential attributes of HMG CC include motivational interviewing, active listening, responding reflectively, taking a parent/caregiver-centered approach, operating from a strengths-based method, cultural responsiveness, critical and creative reasoning, providing trauma informed care, as well as employing an empathetic and non-judgmental communication style.



2020

### **Linkage and Follow-Up**

Common duties of a HMG Care Coordinator include conducting research to identify available and appropriate resources, providing education and information on development, behavior management and services, and providing advocacy and follow-up as needed. With client permission, HMG Care Coordinators loop client information back to the medical home or social service providers, childcare and early education providers, and other service providers that may be working with that child and family. HMG Care Coordinators assess client situations and enter accurate data into their HMG data system, they work closely with primary care providers, early intervention staff, other HMG staff, departments of public health, and other community agencies and providers to ensure a smooth referral process for families. HMG Care Coordinators assist in identifying gaps and barriers to services, as well as systemic issues and trends that families experience in attempting to utilize existing services. HMG Care Coordinators help with developmental screening-related activities, including administration, scoring, sharing results, and linking families to appropriate services based on interpretation of screening results.

**HMG Care Coordinators** 

On average, HMG systems across the National Affiliate Network have five Care Coordinators trained to guide and support interactions within the HMG Centralized Access Point. Care Coordination capacity varies widely across the National Network, ranging from .5 full-time equivalent (FTE) to 41 FTEs. HMG Care Coordinators maintain an average caseload of approximately 280 families per year.

### Help Me Grow Response to the COVID-19 Pandemic

From the onset of the COVID-19 pandemic, half of all HMG systems across the country experienced an increase in call volume from families in their communities. In order to mobilize and meet the needs of the families with young children, HMG systems expanded the capacity of their Centralized Access Points to field more calls and link families to services that could support them during both the immediate nationwide shutdown and long-term.

In a HMG National Center survey administered in April 2020, 50% of the HMG National Affiliate Network reported an increase in their Centralized Access Point call volume. While most HMG systems utilized existing staff to support the increased need from the community, 28% of HMG systems reported hiring additional Care Coordinators and training volunteers to support the increase in number of calls from families and their needs.

Linkage and follow-up is a unique value proposition of the HMG Model and ensures that families are successfully connected to services that are available in their community and meet their specific needs. Beyond connection to local and available services, families are supported by HMG Care Coordinators throughout the utilization of the service to ensure that successful connections are made and that families' needs are met. The frequency of follow-up is dependent on the unique needs and preference of each family served by the HMG Centralized Access Point.

Eighty percent (80%) of HMG systems reported having a formal protocol in place for follow-up with the majority of families in order to determine whether services and referrals provided by the Centralized Access Point did, in fact, occur. Although, frequency of follow-up efforts with families served varies among affiliates and continues to be a challenge for approximately half of the National Affiliate Network. Fidelity to the HMG Model requires follow-up with families at least 75% of the time. While each HMG system builds toward this goal, a majority of the National Network currently reports rates ranging from 50-75% for follow-up with families.

Linkage and follow-up remains one of the HMG Model's Key Activities achieved by the lowest number of systems across the National Network. It is imperative that focused attention be paid to this activity in the coming year in order to identify and disseminate effective strategies that maximize follow-up.



### **Researching Resources**

One of the unique elements of HMG is the capacity of the Centralized Access Point to serve as a single portal of entry to the complex landscape of early childhood services and supports in a given community or state. Identifying the most appropriate supports for children and families is based on a combination of information sources, including needs identified at the time of referral, screening results, input from families, as well as answers to targeted questions embedded in the Care Coordinator workflow. All HMG systems should use a defined procedure to research available resources and connect families to community-based services and programs.

- The majority of HMG systems report using a resource database to research applicable resources for families based on need.
- A subset of HMG systems reported specific procedures to identify appropriate resources in a systematic and consistent manner, including taxonomy codes for resources, triage protocols, decision trees, talking points, eligibility criteria, and/or navigation pointers.

### Help Me Grow Response to the COVID-19 Pandemic

With an increase in calls to the Centralized Access Point during the height of the COVID-19 pandemic, HMG systems mobilized to assess the impact of the crisis on existing resources within their communities and the emergence of new resources to support family needs. The increased need in communities reemphasized the importance of maintaining an up-to-date and responsive HMG resource directory.

Across the country, HMG systems reported families reaching out to their local HMG call line for information on basic needs including but not limited to: food, clothing, diapers, formula, and housing.

In a HMG National Center survey administered first in April 2020 and again in December 2020, HMG affiliates reported strategies deployed to ensure their HMG resource directories were updated with resources emerging to mitigate the impacts of COVID-19:

- Utilizing community coalition meetings to identify emerging resources offered through partners as well as removing services that are no longer available due to COVID-19, loss of funding, or other circumstances
- Outreach to existing resources to identify which services remained available and which pivoted to a virtual format
- Expanding resource directory to include educational and childcare resources
- Expanding resource directory database to include community services dedicated to essential baby needs and community sponsored food sources



### **Real-Time Directory Maintenance**

Resource directory maintenance is key to ensuring accuracy and currency, such that that the programs, services, and resources included in the list of potential referral sources for callers are up-to-date and comprehensive. Affiliates report implementing a variety of resource directory technologies, as well as self-developed systems. In 2020, the frequency of maintenance to each HMG directory varied, with a majority of HMG affiliates reporting that they update their resource directory on an annual basis.

Of HMG affiliates far enough along in their implementation to have a functional resource directory, the majority report that it serves as a comprehensive, regularly updated list of services and programs for children and families within the geographic area served by the call center. While real-time maintenance to the resource directory is among the Key Activities least accomplished across the National Network, the achievement of this Key Activity did increase eight percent (8%) from 2019-2020, with 47% of systems now reporting formal updates to their HMG directories on a quarterly - or more frequent - basis.

### Affiliate Highlight

# **Help Me Grow North Texas**



### **Affiliate Background Information**

The backbone agency for HMG North Texas is My Health My Resources of Tarrant County, a local mental health authority. However, five additional leadership agencies devote time, staff, funding, and/or support to make the efforts of HMG North Texas possible, including Tarrant County Public Health, The Early Learning Alliance of Tarrant County, ChildCareGroup, United Way of Metropolitan Dallas, and TexProtects. The larger collaborative represents agencies over the 18-county service area and includes members from childcare, local Independent School Districts, mental health, health care, child welfare, home visiting, advocacy, early childhood professional development, libraries, workforce boards, and philanthropy.

In the summer of 2019, HMG North Texas launched in Tarrant County as the first Help Me Grow system in the state of Texas. Supported by the Pritzker Children's Initiative, local early childhood leaders were already working on a cross-sector developmental screening initiative and connection to the larger national network of the National Collaborative for Infants and Toddlers (NCIT). Through that network, Tarrant County learned of the Help Me Grow Model. The Model built upon the strong foundation that was already in place, was evidence based, allowed for local customization based on needs and context, and filled in some of the gaps that were present. The biggest gap that needed to be addressed was a central place for families and providers to access resources and supports.

As Help Me Grow launched in Tarrant County, there was growing interest from surrounding counties to join into the efforts to create a region-wide early childhood system. In August of 2020, 11 additional counties joined HMG North Texas. In January 2021, Dallas and Collin counties officially affiliated with HMG North Texas. By the end of 2021, four additional counties will join HMG North Texas making it an 18-county collaborative that spans the entire North Texas region.

### Help Me Grow North Texas Centralized Access Point

Over course of 2020, HMG North Texas served over 680 families across 18 counties. The Centralized Access and Navigation team expanded to 12 Family Navigators (i.e. HMG Care Coordinators) since originally launching March 2020. The Centralized Access Point accepted referrals through a variety of partnerships including health care and educational providers, community events, and home visitation programs. Social determinants of health and developmental screenings were offered with the assistance of a Family Navigator in addition to online caregiver screening portals; results were reviewed with caregivers to better determine appropriate resource needs for children. The directory of resources through the FINDconnectTM database selected by HMG North Texas Navigation Team offered families immediate options during COVID-19 and inclement weather crisis situations. Family Navigators tailored their services around the needs of the community at any given moment during the pandemic by providing information on testing sites and local food bank distributions during the COVID-19 outbreak. Additionally, they responded through calls and text messaging to all families who were currently enrolled in HMG North Texas during the week of major power outages and water shortages in Texas, and informed families of state warming sites and location access to basic needs. The Centralized Access and Navigation Team has focused their efforts over the past year through active engagement families, listening to the unique needs of individual families, and providing coaching encouragement to help the family become more resourceful and supported within the community.

### Help Me Grow North Texas Going Forward

The HMG North Texas Centralized Access Point will be focusing on the expansion of additional outreach efforts, which includes Dallas and surrounding counties. Additionally, HMG North Texas plans to implement on-site navigation to provide more face-to-face support as community providers and various programs continue to partner with HMG North Texas. The FINDconnectTM enrollment and resource directory database will continue to be refined and updated as technology enhancements enhance the user experience for families are projected for 2021. The Centralized Access Point and the Marketing Committee are engaging in strategic planning to increase rural county referrals through direct outreach as well as to expand outreach to diverse populations in both rural and urban areas.



# **Family and Community Outreach**

Family & Community Outreach is essential to promoting the use of HMG and providing networking opportunities among families and community-based service providers. Personnel supporting HMG Family & Community Outreach work to engage families by participating in and/or leading community meetings, forums, public events, fairs, as well as helping families learn about child development and the role of HMG. This community presence encourages support for the HMG system and facilitates efforts to gather and update information to embed in the resource directory of the Centralized Access Point. Further, parent engagement is critical to ensuring that the types of services and supports to which HMG Care Coordinators refer families reflect a family-led agenda.

#### FIDELITY TO THE FAMILY & COMMUNITY OUTREACH CORE COMPONENT



#### **Utilize Community Partners**

Identify partners for HMG Family & Community Outreach using criteria established by the HMG National Center



### Networking

Facilitate at least two HMG meetings to support networking among programs and agencies



#### **Community Events & Trainings**

Provide outreach to increase awareness of HMG at least twice a year



#### Marketing

Utilize marketing opportunities including social media to promote HMG



### **IMPACT INDICATORS**

In 2020, the National Affiliate Network reached 147,884 individuals through events led or coordinated by HMG systems to promote awareness of child development and/or HMG.

HMG systems trained 27,766 non-medical professionals on developmental screening and/or referral and linkage through HMG in 2020

### Affiliate Progress in Implementing Family and Community Outreach Activities

ACTIVITY	2019	2020
Engaged community partners	96%	97% ↑
Networking	89%	84% ↓
Community events & trainings	93%	87% ↓
Marketing	92%	93% †



### **Engaged Community Partners**

For the purposes of the Fidelity Assessment, HMG systems are asked to report community partners (such as organizations, agencies, or initiatives) with which HMG has a relationship extending beyond the inclusion of that service in the resource directory used by the Centralized Access Point.

While the quality, duration, and operationalization of those partnerships vary, HMG systems do engage common sectors as partners in their HMG efforts, including:

- Medical and/or health providers
- Early learning settings
- Health and human service agencies
- Home-visiting agencies
- Family and child advocates
- School districts

In 2020, HMG affiliates reported reaching 23,615 individuals (non-families) representing community agencies through a HMG-coordinated or HMG-led event.

Family & Community Outreach efforts, as they have been historically conducted across the HMG National Affiliate Network, were forced to make a drastic shift over the course of 2020 due to the COVID-19 pandemic and the mandated shut down of in-person activities and events. While data from the 2020 Fidelity Assessment show a significant decrease in the number of individuals engaged across community agencies, non-medical providers, and families, HMG systems across the country deployed innovative strategies to remain in contact with families and community partners.

### Help Me Grow Response to the COVID-19 Pandemic

With an increased call volume to the HMG Centralized Access Points across the country, HMG systems also reported a shift in the needs of families from the traditional nature of calls. An increased need for essential items like food, income, housing, and educational resources for children now learning from home became the prevalent reasons for families to call their local HMG.

Made possible by The JPB Foundation, the HMG National Center was honored to allocate financial resources to eleven HMG systems, supporting the provision of emergency infant and toddler basic needs in response to the COVID-19 pandemic for families with young children directly impacted by the physical and economic impacts of the crisis. While the pandemic continued, HMG systems deployed the infrastructure built to support the Model in order to identify changes to existing resources commonly accessed by families through HMG, and to scan the community for emerging services being made available to the community to offset the devastating effects of virus and the shutdown. The financial resources made available by The JPB Foundation allowed for eleven HMG systems to support the immediate basic needs of families with infants and toddlers in their communities and support critical community-based services and partnerships through their HMG.

Through this initiative, over 2.6 million resources to support the health and development of infants and toddlers were distributed to approximately 33,000 families by HMG systems and their community-based partners.



### **Networking**

In 2020, HMG systems across the National Affiliate Network led **729 networking meetings** intended to bring together early childhood partners, including early learning providers, family support services, home visiting agencies, child health providers, family advocates, school districts, and all other partners who touch the lives of children and families. This represents a **14% increase in HMG-led networking** from **2019**.

In 2020, 55 percent of HMG systems reported utilizing community networking meetings to make initial connections with local organizations, share important updates among partners, and report data about key gaps in the system to highlight and potentially work to address important areas of need.



### **Community Events and Trainings**

HHMG affiliates conduct outreach activities such as community events to increase awareness of HMG among community partners and families. Families that attend such events receive information and resources promoting strategies to support their children's optimal healthy development as well as how to utilize their local HMG Centralized Access Point to connect with services in their area.

Due to the pandemic, community outreach activities in 2020 looked much different than they did in previous years. HMG systems were tasked with virtualizing much of their in-person outreach efforts in order to stay connected with local partners, families, and children. Despite the challenges presented by the COVID-19 pandemic, 87% of HMG systems continued to conduct Family & Community Outreach events.



### Marketing

HMG affiliates rely on common methods to market their HMG system to families, partners, and child health providers. The most common tools to elevate awareness of HMG and advertise its services include community events and trainings, followed closely by use of a HMG website. While community events and websites remain the most prevalent outreach and engagement approaches, these strategies, as well as use of social media, were reported by fewer systems in 2020 than in years past.

## Affiliate Highlight

# **Help Me Grow Delaware**



### **Affiliate Background Information**

Delaware's Help Me Grow system is supported by the Maternal Child Health Bureau of the Division of Public Health under the responsibility of the Early Childhood Comprehensive Systems (ECCS) Program. Delaware joined the Help Me Grow National Affiliate Network in the later part of 2011 and launched its Help Me Grow system in 2012. The launch included all four Core Components of the Model – a Centralized Access Point with Delaware 2-1-1 (HMG/2-1-1); Child Health Care Provider Outreach, which launched the use of the Parents' Evaluation of Developmental Status (PEDS) validated Instrument as the preferred tool in the health care setting; Family & Community Outreach; and Data Collection & Analysis.

For Delaware, developmental health promotion in 2012 was essential and on the heels of legislative action to improve the state's low ranking related to screening rates of children aged 10 months and older – the state ranked 49th in the country. With the passing of legislation in 2009 that provided coverage for developmental screening, and the appropriation of state funds to increase developmental screening, three years later HMG Delaware was able to support the implementation of the PEDS tool free of charge to physicians and provide technical assistance to physician practices using the tool. This improved Delaware's ranking in subsequent reports.

Delaware is currently in full implementation of the Help Me Grow Model, an accomplishment made possible through a range of critical partnerships with the school system, higher education, early childhood, managed care; Children's Museum; state programs; behavioral health; early intervention, non-profits; community programs, and more.

### Help Me Grow Delaware Family & Community Outreach Efforts

At the outset of implementation, HMG Delaware initially began Family & Community Outreach efforts by building the leadership skills of parents through an eight-week training curriculum held on evenings or weekends. Building off of this Champions for Young Children program, HMG Delaware introduced Books, Balls, and Blocks (BBB) events where these

trained parents utilized their leadership skills to engage other parents while learning about developmental screening and milestones. Leveraging the leadership skills of the Champions for Young Children and a volunteer base from AmeriCorps Public Allies, and other high schools, HMG Delaware was able to hold more than eight in-person BBB events in the northern part of the state. Participants had the opportunity to visit 10 interactive stations with their children – each interactive station represented a developmental domain or milestone, and provided an opportunity for parents to play with their children and also learn tools/aids that were critical in enhancing or improving their child's development. Parents in attendance also had the opportunity to complete an Ages and Stages Questionnaire (ASQ) while their children were engaging at the interactive stations. HMG Delaware's goal at the end of 2019 was to organize face-to-face BBB events in the southern part of the state, which is a more rural and predominantly Latinx population. Plans to hold six BBB events in libraries

in southern Delaware came to a halt in early 2020 due to the COVID-19 pandemic.

Prior PEDS and ASQ data had indicated an overall delay in gross/fine motor skills, problem solving and communication in children statewide. HMG Delaware decided to organize virtual BBB events that focus on those three domains for specific age groups – 12 to 23 months and 24 to 36 months. At virtual BBB events, facilitators encourage adults to play with children in guided, age-appropriate play, with a limited number of participants (not more than 20) to ensure one-on-one engagement by the children, parents, and facilitator. Materials for each session are mailed to registrants ahead of time and families have the opportunity to earn rewards for attendance, completing an evaluation, or recommending a friend for an upcoming session.

### Help Me Grow Delaware Going Forward

HMG Delaware is currently planning BBB events that seek to partner with the Hispanic population. The curriculum will be translated into Spanish and facilitation will be conducted by a Spanish speaker. HMG Delaware also plans on bringing value to the parent voice by assuring more leadership opportunities that would build parent confidence and capacity to advocate for children at the state, local and even national levels. The affiliate also plans to compensate for time and effort spent while addressing childcare and transportation needs. Peer-to-Peer interactions will be a strategy in addition to leveraging family engagement efforts made by other programs and coalitions, such as the Fatherhood Coalition in order improve diversity. HMG Delaware will increase marketing of Books Balls and Blocks events through the **Delaware Thrives website**.



Child Health Care Providers are uniquely positioned to identify children who are at risk for adverse developmental outcomes. They have near universal access to young children and provide ongoing monitoring of developmental status during well-child visits that include developmental promotion and early identification through periodic developmental surveillance and screening. However, due to the structure and requirements of the well child visit, child health care providers often face challenges in identifying early signs of developmental or behavioral concerns. Even when needs are recognized, keeping comprehensive and updated information on community-facing services is difficult and ensuring successful connection to those programs is time-consuming. Further, only a subset of children with developmental delays or those who are at risk for developmental delays will qualify for early intervention and early childhood special education services, which often prompts a "wait and see" approach among child health care providers.

The HMG Model implements strategic outreach to Child Health Care Providers through office-based training sessions, which frequently include the implementation of American Board of Pediatrics Maintenance of Certification Quality Improvement projects. These Child Health Care Provider Outreach efforts advance education around developmental promotion, motivate physicians to conduct systematic surveillance and validated screening of young children, and encourage providers to leverage HMG as a resource for their patients by recommending families access the Centralized Access Point as a support. In this way, the Centralized Access Point serves as a care coordination arm for busy pediatric primary care practices when providers identify concerns and, in so doing, HMG partners with pediatricians to ensure effective linkage to appropriate programs and services.

#### FIDELITY TO THE CHILD HEALTH CARE PROVIDER OUTREACH CORE COMPONENT



2020

#### **Physician Champion**

Identification of a physician that advocates for HMG in the broader medical community  $\,$ 



#### Surveillance and Screening

HMG staff conduct targeted outreach to child health care providers through education, trainings, or workshops on effective developmental surveillance and screening



#### **Physician Training**

HMG staff conduct targeted outreach to child health care providers through education, trainings, or workshops on referral and linkage through HMG



#### Feedback Loop

HMG Care Coordinators close the feedback loop by sharing information about screening and/or referral outcomes with referring child health care providers in at least 75% of instances



### **IMPACT INDICATORS**

In 2020, HMG systems conducted **980 trainings** for child health care providers on the topic of developmental surveillance and screening. Affiliates conducted **1,769 trainings** on the topic of the HMG Centralized Access Point as a resource to support referral and linkage.

### Affiliate Progress in Implementing Child Health Provider Outreach Activities

ACTIVITY	2019	2020
Physician champion	82%	74% ↓
Training on screening and surveillance	51%	48% ↓
Training on referral and linkage	53%	75% ↑
Closing the feedback loop	39%	66% †



### **Physician Champion**

The physician champion in a HMG system serves to support HMG outreach efforts by specifically engaging with the medical community. Often, physician champions directly utilize HMG services for their patient population and support HMG efforts by sharing their experiences with other providers based in other healthcare settings. In 2020, 74% of HMG affiliates reported identifying a physician champion to bolster their outreach capacity. With an increase in newly established HMG systems across the National Affiliate Network, the HMG National Center expected this percentage to decrease in this reporting year. Identifying a physician champion has proven to be a key activity that takes time, education, and relationship building at the outset of HMG system building.



### **Training Provided through HMG**

Typically, HMG Child Health Care Provider Outreach efforts are carried out by a HMG system's organizing entity or by an aligned local or state level partner (i.e. Local chapters of the American Academy of Pediatrics) that focuses on engagement, training, advocacy, and/or continuing education of child health providers.

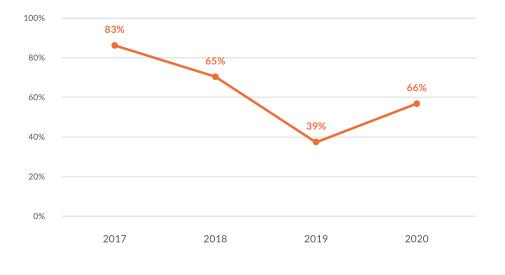
Due to the inability to carry out in-person trainings or meeting with providers as a result of the COVID-19 pandemic in 2020, there was a significant decrease in the number of trainings - both in developmental screening, as well as referral and linkage - across the HMG National Affiliate Network. As with other HMG Key Activities, HMG systems were required to pivot their traditional in-person physician outreach and training efforts, many of which transitioned to virtual offerings to maintain open communication between physicians, families, and HMG systems.



### **Closing the Feedback Loop**

HMG affiliates seek to follow-up with child health care providers whenever feasible. In some instances, providers may make direct referrals to HMG on behalf of families, in which case HMG closes the loop with providers to share the outcome of the HMG interaction, such as referrals to certain services. Other times, families may receive developmental screening directly through the call center and HMG seeks to close the loop with the child health care provider by sharing, with family permission, screening results.

Percentage of HMG Systems Closing the Feedback Loop with Child Health Providers



From 2017-2019, the Help Me Grow National Center observed a steady decline in the number of HMG systems reporting closing the feedback loop with providers at a minimum of 75% of the time. In 2017, 83% of HMG systems successfully closed the loop with child health providers. In 2018, this percentage decreased to 65%, and in 2019, only 39% of HMG affiliates reported closing the feedback loop.

However, in 2020, the number of HMG systems successfully closing the feedback loop with physicians doubled. Although approximately 66% of HMG systems achieve this Key Activity at the recommended frequency, this increase highlights an important shift in the trend of years past.

The HMG National Affiliate Network has been vocal about the challenges to closing the feedback loop with child health care providers. The HMG National Center continues to identify strategies and resources to support HMG systems in achieving this Key Activity of the HMG Model. Strategies over the course of 2019-2020 included: a featured session of Child Health Provider Outreach at the 2020 Annual HMG Forum, improved explanation and questions regarding the HMG feedback loop on the 2020 Fidelity Assessment, and the recruitment of HMG Implementation Experts to support the National Network in developing strategies aimed at provider outreach and relationships.

### Help Me Grow Response to the COVID-19 Pandemic

The systematic feedback loop to child health providers is a critical activity of the HMG Model that helps promote the holistic care of families with young children through ensuring that critical information is funneled comprehensively between both families and the providers serving them. During the onset of the COVID-19 pandemic, when the medical home was spread thin and family medical needs increased, HMG systems across the National Affiliate Network were particularly well-positioned to support providers and families in need through the HMG feedback loop.

In a HMG National Center survey administered in December 2020, 85% of reporting HMG systems stated that their HMG feedback loop was maintained as normal or even strengthened as a response to provider and family needs exacerbated by the COVID-19 pandemic.



### **Affiliate Highlight**

# **Help Me Grow Washington**



### **Affiliate Background Information**

Washington State initiated early exploration of the Help Me Grow Model more than 10 years ago. WithinReach became the state affiliate in 2010 and focused early efforts on the infrastructure for the Coordinated Access Point and HMG Care Coordination services, as well as an accessible online ASQ pathway and developmental promotion resources for parents and providers. Over the last decade, expanded partnerships across the early childhood landscape in Washington have led to significant growth and enthusiasm for HMG across the state. In 2019, HMG Washington launched a sub-affiliate network, beginning in one region (Pierce County); since then, the network has grown to four sub-affiliates advancing local implementation of the HMG Model's Core Components. A tri-leadership core team comprised of WithinReach, Washington Communities for Children, and the Department of Children, Youth, and Families, share the organizing entity functions for HMG Washington. In 2020, the core team collaborated to launch state and regional-level action teams to foster strong state and local connection in the spread and scale of the system. The growing HMG Washington network has contributed to broader reach and valuable innovations rooted in community voice.

### Help Me Grow Washington Child Health Provider Outreach Efforts

In spring of 2020, WithinReach, the Washington Chapter of the American Academy of Pediatrics (WCAAP), and the Washington State Department of Health (DOH) collaborated on developing a communications toolkit and campaign to boost immunization rates in the state called "Stay Healthy, Stay Safe, Stay Vaccinated!" The toolkit, which is housed on WithinReach's ImmunityCommunityWA.org website, was shared with pediatric residents who were mobilized by WCAAP. The residents delivered flyers to community organizations across the state, specifically those that worked with underserved populations and communities of color. The flyers were translated into nine languages (English, Spanish, Chinese (Simplified), Somali, Amharic, Tigrinya, Russian, Ukrainian, and Vietnamese). Later, the residents followed up with those same organizations to share the entire promotional toolkit, which included messaging, images, and sample social media posts that would increase the reach of the

campaign. While provider outreach normally means outreach to providers, this was a great opportunity for rising pediatric leaders in Washington to raise awareness and develop relationships with community organizations. WithinReach also utilized its longstanding Immunization Action Coalition of WA members to disseminate messaging to this network of public and private sector immunization partners. Advertisements were published in local parenting magazines and promoted social media posts were shared in English and Spanish.

### Help Me Grow Washington Going Forward

With the completion and success of the "Stay Safe, Stay Healthy, Stay Vaccinated!" campaign, the partnership then developed a "Vax to School" campaign that would expand the messaging to include school-age children. Beginning in February 2021, the goal was to use the messaging and relationship building developed through the original campaign to motivate families to get their kids caught up with their vaccinations, especially with the onset of in-person learning and school sports restarting. This campaign included the WCAAP residents, working again with providers, to promote the messaging and the toolkit. In this phase of the campaign, WithinReach partnered with local health jurisdictions in Snohomish and King County to promote the campaign. Currently, there are sponsored social media posts in King, Snohomish, and Pierce Counties as well as public service announcements in different languages playing on the radio across the state.

With our growing commitment to explore more statewide child health provider partnerships, HMG Washington recently submitted a joint proposal with the Department of Health for the Early Childhood Comprehensive Systems grant that will expand statewide health provider engagement for HMG Washington. This funding, if accepted, will support more partnership-building and further integration of closed-loop referral pathways between providers and the Statewide Coordinated Access Point.



Data collection and analysis ensure ongoing capacity for continuous system improvement, a key structural requirement of HMG. Data is collected throughout all components of the HMG system, including child health provider outreach, family and community outreach, and within the centralized access point.

HMG affiliates collect data associated with the Model's Core Components: Child Health Care Provider Outreach, Family & Community Outreach, and Centralized Access Point. The collection of a set of shared metrics across the HMG National Affiliate Network advances understanding of collective impact, informing the national narrative regarding the impact of HMG on children and families across the country. The collection of locally-sourced metrics enable HMG affiliates to benchmark progress, identify areas of opportunity and systemic gaps, determine potentially advantageous partnerships, and guide strategic quality improvement projects.

### FIDELITY TO THE DATA COLLECTION AND ANALYSIS CORE COMPONENT



#### Reporting

Submit Impact Indicators and local use reports to the HMG National Center



#### **Sharing Data Across Partners**

Share HMG-specific data across partners, such as through regular reporting, ad hoc requests, or targeted evaluation projects



#### **Continuous System Improvement**

Identify opportunities to conduct quality improvement projects using HMG-specific data



### **Community Change Through Data**

Leverage HMG-specific data, such as identification of systemic barriers, to generate community change

### Affiliate Progress in Implementing Data Collection and Analysis Activities

ACTIVITY	2019	2020
Data monitoring	91%	94% 1
Sharing data across partners	61%	85% 🕇
Continuous quality improvement	74%	69% ↓
Community change through data	55%	50% ↓



2020

### **Data Monitoring**

HMG affiliates frequently engage an evaluation consultant, individual, or organization to provide evaluation support to HMG and promote the system's capacity to engage in ongoing data collection and analysis and to evaluate the impacts of their local implementations of HMG. Seventy percent (70%) of HMG systems reported having a designated evaluation partner, representing a continued increase in this type of partnership over the last two years. Data systems (also known as client tracking systems) within the Centralized Access Point assist HMG systems in documenting and monitoring client-level information. They also provide alerts for HMG Care Coordinators prompting follow-up with families to ensure services provided by HMG were sufficient and met their needs.



### **Sharing Data Across Partners**

HMG systems are uniquely positioned to collect, track, and disseminate information about key trends occurring locally for families with young children, such as the most common concerns among families contacting the Centralized Access Point, frequently recommended programs and services, trends in developmental screening results based on population, geographic region, etc., barriers experienced by families in connecting to existing services, and gaps in needed services in the community.

2020 BUILDING IMPACT 2020

In 2020, 85% of affiliates reported sharing their data amongst their external partners, which is a roughly 20% increase from the previous year. HMG systems report sharing data most commonly through regular reports, ad hoc requests from partners, and targeted evaluation projects. In addition, HMG systems reported sharing data with new partners as a means to further explain the scope, value, and impact of the HMG Model.

### Help Me Grow Response to the COVID-19 Pandemic

Over the course of the COVID-19 pandemic, HMG affiliates have worked to maintain and strengthen the Key Activities of the HMG Model to better support families and partners. As the challenges of the pandemic continued and evolved, HMG affiliates swiftly aligned with new partners and community-based efforts to directly support families and meet their needs. Through these newly established partnerships and the strengthening of existing collaborations, new data sharing opportunities have begun to emerge amongst community partners at both a local and state-levels.

In a HMG National Center survey conducted in December of 2020, many reporting HMG systems described new data sharing opportunities resulting from new collaborations and initiatives intending to meet the needs of families and community partners during the COVID-19 pandemic. Emerging opportunities included:

- Capturing data related to basic needs among families
- Conducing a needs assessment among HMG and child health provider communities
- Tracking ASQ screenings when administered online or through telehealth appointments
- Monitoring aggregate numbers of prenatal referrals from providers due to COVID-19 exposure



### **Continuous Quality Improvement**

To guide continuous quality improvement efforts, HMG affiliates rely on data from the Centralized Access Point, as well as data associated with efforts to conduct outreach to families, community-based partners, and child health care providers.

**BUILDING IMPACT** 

## EXAMPLES OF CONTINUOUS QUALITY IMPROVEMENT EFFORTS CONDUCTED BY HMG AFFILIATES IN 2020 INCLUDE:

- Tracking the percentage of referrals coming from targeted zip codes to intentionally adjust outreach efforts to reach those most vulnerable
- Procedural changes across the partner organizations supporting HMG Centralized Access Points to ensure families are being routed to HMG Care Coordinators and resources
- Monitoring child health care provider referrals & conducting screening review to determine the number of physician referrals and screens completed by HMG Care Coordinators and through iPads at Pediatric locations
- To support efforts to examine the HMG's success and challenges around health equity, instituting procedural changes to collection of demographic data in order to collect more reliable, robust data related to race and ethnicity
- Utilizing Point of Entry fields with HMG databases to track rates of referrals over time to monitor referrals to the HMG Centralized Access Point by home visiting programs on a county and state-level



### **Community Change through Data**

As described earlier, building and maintaining a comprehensive early childhood resource directory enables HMG systems to observe key gaps in needed services across the system. HMG affiliates can also identify and document common barriers that families experience in accessing available services. Such data has the capacity to inform advocacy efforts as well as programmatic and policy change at the local and state-level.

A variety of contextual barriers may impede family capacity to access services, including, for example, lack of access to transportation, language barriers, and lengthy wait lists for certain services. Communities served by HMG systems stand to benefit from documenting ongoing, objective data regarding the most frequent barriers experienced by families in their local community.

In 2020, half of the National Network reported leveraging HMG data, including data specific to barriers, in order to inform and support advocacy efforts. The role of HMG in linking families to resources to address a spectrum of needs - from basic supports such as food and housing to specialized, targeted services - means that over time, HMG can provide a systemic view into gaps in available services and barriers that families face in accessing them when they do existing services.

## EXAMPLES OF THE WAYS IN WHICH HMG SYSTEMS ARE LEVERAGING DATA RELATED TO GAPS AND BARRIERS IN 2020 INCLUDED:

- Expanding on existing partnerships to meet the increasing demand for essential baby items, specifically diapers, as a result of the COVID-19 pandemic
- Providing targeted support to families living in food deserts through partnerships with Women, Infants, and Children (WIC) and local foodbanks
- Utilizing data on barriers to accessing prenatal care in order to institute organization-wide changes and invest in prenatal services for the future
- Improving referral processes for families to ensure connection to needed services
- Providing targeted support to families without internet access or technology to ensure telehealth opportunities
   can be utilized

Affiliate Highlight

# Help Me Grow Florida



### **Affiliate Background Information**

HMG Florida became an affiliate of the HMG National Affiliate Network in 2012 with a pilot in two diverse counties. Since its inception, HMG Florida has expanded its service area to reach more families across the state. Today, the affiliate serves 37 counties through 13 local affiliate sites. The majority of funds supporting HMG Florida are legislatively appropriated annually to the Florida Office of Early Learning (part of the Florida Department of Education). The Children's Forum serves as the State Coordinating Office for HMG through a contract with the Office of Early Learning.

The Centralized Access Point for HMG Florida is the statewide 2–1–1 system that serves as an effective, single point of access to community resources. The State Coordinating Office executes sub-affiliate contracts and provides technical assistance and professional development to local affiliates around implementation of the Model's four Core Components. Technical assistance often includes the development and procurement of outreach materials, helping sub-affiliates work through challenges they may face in their local HMG efforts, and guiding them through new initiatives and state-level projects. The State Coordinating Office also engages in efforts to expand the HMG Model across the state, including developing and fostering state-level relationships that sub-affiliates can draw down upon and leverage in their own local implementations.

### Help Me Grow Florida Data Collection and Analysis Efforts

HMG Florida uses an online data collection portal called the System for Tracking Access to Referrals (STAR). STAR has been customized to meet the needs of Florida, including the use of multiple sites so that each sub-affiliate has separate access to the system. STAR enables easy data gathering, including child and family demographics, developmental concerns, screening scores, referrals, care coordination, and outreach.

HMG Florida has remained committed to discovering and implementing promising initiatives and maintains a central focus on data collection and impact assessment. Most recently, HMG Florida has navigated two new opportunities: a pilot project with Reach Out and Read (ROR) and a grant through the Centers for Disease Control and Prevention (CDC) and the Association of University Centers on Disabilities (AUCD).

Leveraging its partnership with ROR as well as the Miami-Dade Family Learning Partnership, HMG Florida implemented a pilot project devoted to enhancing health care provider partnerships and children's literacy. This opportunity offers a platform for the state to examine health care provider partnerships and the strength of linkage and referral. Early enough in their implementation of the Model that they had not yet secured a HMG Physician Champion, the Early Learning Coalition of Lake County sub-affiliate was selected to participate in the pilot. In an effort to increase the number of children and families served in Lake County, HMG Florida and ROR conducted outreach to health care providers promoting each program. In addition to ROR's data collection on the number of provider well-child visits and the number of children's books disseminated, HMG Florida will collect data through the STAR system. Data collected by Help Me Grow for this project include: screenings completed, referrals from health care providers, and referrals to services for families. Once the pilot is completed, the data will be examined to determine the success of the project and next steps for widespread implementation. The pilot has already shown some promise in building sustainable healthcare provider partnerships by engaging a HMG Physician Champion in Lake County.

The other opportunity HMG Florida embarked on in 2020 was a grant through the CDC and AUCD to support COVID-19 recovery and strengthen resilience skills, behaviors, and resources for children, families, and communities through the Act Early Network. Through this grant, HMG Florida has implemented a new event called "HMG on the Go," and launched a virtual milestone checklist feature through the HMG Florida website. "HMG on the Go" events are drive-through events that allow communities to provide much needed resources for families while maintaining CDC health and safety precautions during the COVID-19 pandemic. The virtual milestone checklist gives families a quick, easy to use option to check their child's development, which is especially beneficial for busy caregivers who need virtual options now more than ever. Data collected by HMG Florida for this grant will help evaluate the intended program activities and outcomes and will be shared with the Act Early Network. Multiple data points will be collected throughout the project, with a focus on increasing the percentage of children successfully connected to services. Connecting families to the food, health, and housing resources they need will help mitigate the pandemic's harmful impacts. HMG Florida looks forward to continuing grant activities well after the grant is completed in order to support the state in COVID-19 recovery.

### Help Me Grow Florida Going Forward

2020

HMG Florida recently invested in an economic impact study conducted by Florida State University Center for Economic Forecasting and Analysis to make the business case for increasing funding to allow statewide HMG implementation. This study showed that every dollar invested in HMG Florida returns \$7.62 to the state's economy yielding a total economic impact of \$11.6 million in sales, revenues, income, employment, and lifetime earnings. Even more compelling, it is projected that the total economic impact could rise to \$17.1 million if HMG Florida were implemented statewide in all 67 counties.

These opportunities allow HMG Florida to strengthen collaboration with the medical community, improve child literacy, increase resiliency skills, and enhance data collection. HMG Florida will continue to explore and evaluate innovative strategies using data analysis. Future efforts include using data to assist with alleviating the pandemic's harmful effects on children and families and to inform racial equity efforts statewide.

# **Developmental Surveillance** and **Screening**

Within the HMG Model, either Care Coordinators at the Centralized Access Point or HMG staff in community settings may provide development screening. Community providers, such as home visitors or child health care providers, may also conduct such screenings, all with the shared goals of promoting universal developmental surveillance and early identification of concerns, avoiding redundant screenings across settings, and consistently connecting the families of children at developmental risk to the Centralized Access Point for referral, linkage, and follow-up to community-based services.

HMG affiliates share a focus on supporting developmental surveillance and screening by addressing key gaps in developmental surveillance and screening across their local systems. Thus, they adopt a wide variety of context-dependent strategies in support of this goal.

For the majority of HMG affiliates, Care Coordinators provide screening directly through the Centralized Access Point. A smaller proportion of affiliates connect families to an online resource for screening. Other methods utilized to promote developmental screening include: connecting families to other agencies; mailing hard copies of screening tools; and embedding screening as part of community outreach events.

In the 2020 Fidelity Assessment, a series of optional questions related to screening were created for affiliates interested in sharing how screening is currently conducted within their HMG or amongst HMG partners.

Count of children screened by HMG	37, 442
Count of children with a screening conducted by another agency, organizations, or provider that was then referred to HMG	23,172
Count of children screened through online screening tool or web-based app platform	41,612

#### Common screening instruments include:

- Ages and Stages Questionnaire (ASQ-3) to support developmental screening, the Ages and Stages: Social Emotional Questionnaire (ASQ-SE 2)
- Parents' Evaluation of Developmental Status (PEDS)
- Survey of Well-Being of Young Children (SWYC)
- Modified Checklist for Autism in Toddlers (M-CHAT)
- Patient Health Questionnaire (PHQ-9)
- Edinburgh Postnatal Depression Scale (EPDS)
- Pediatric Symptom Checklist (PSC)



### **SMART Aims**

HMG National Center first implemented SMART Aims in 2017 as a strategy to both capture and promote strategic planning efforts across the National Affiliate Network. Within the Fidelity Assessment, HMG systems identify a goal that is Specific, Measurable, Achievable, Realistic, and Time-Bound in an effort to document and measure progress against important programmatic aims.

In 2020, affiliates shared examples of the progress they made on their 2019 SMART Aims, which they set as part of last year's Fidelity Assessment. Such progress included:

- Increasing provider outreach to drive referrals to HMG Centralized Access Points
- Launching the HMG Centralized Access Point
- Increasing the proportion of referred families who are successfully linked to supports and services
- Increasing the number of ASQ screening assessments completed by Care Coordinators at the HMG Centralized Access Point

Of the HMG systems who set a 2020 SMART Aim related to outreach events and hiring additional staff to support HMG efforts, many reported the impact of COVID-19 on the ability to be within close proximity of families and communities members, as well as the financial ramifications of the pandemic, effecting the ability to achieve their SMART Aim for the year. Inversely, HMG affiliates more frequently reported achieving their goal for the year when their SMART Aims were tethered to the Centralized Access Point, such as aims to launch the Centralized Access Point, increase call volume, and expand services offered through the Centralized Access Point.

In 2020, HMG systems reported a variety of SMART Aims designed to advance their local implantation. Reported target areas that affiliates will work toward over the course of 2021 year include:

- Increase screenings conducted by HMG
- Increase capacity and understanding to accurately track referral and linkage
- Increase child health provider outreach inclusive of trainings and partnerships to ensure that more families can be connected to services needed
- Develop or enhance Care Coordination protocols and processes
- Increase the number of calls to the HMG Centralized Access Point

# **System Enhancements** and Future Trends

Affiliates that have fully implemented the entirety of the HMG Model can offer valuable lessons that can help improve operations and promote sustainability of efforts across the National Affiliate Network.

In 2018, the HMG National Center developed and administered a complementing assessment to the annual Fidelity Assessment in order to assess strategies and approaches used to support sustainability of HMG among those affiliates that had successfully reached full implementation to the HMG Model. The Sustainability Assessment serves as an abbreviated measure of fidelity and further expands on novel factors and trends believed to play a role in HMG sustainability, such as funding, emerging technology, and successful partnerships.

In 2020, 12 HMG systems in 7 affiliate states completed the HMG Sustainability Assessment. Further, in 2020, longstanding affiliates from this same cohort that had attained full implementation along with several other rigorous criteria related to HMG Model implementation were identified and invited to participate in a research study. This study served to identify practices common to 'positive deviants' across the HMG National Affiliate Network, pointing to common attributes and approaches that should inform early childhood system building efforts, as well as to specific activities and technical assistance areas upon which the HMG National Center might focus.

Over the summer of 2020, 34 semi-structured interviews across seven communities illuminated strategies common to sites with sustained HMG efforts, specific to domains such as characteristics of individuals, characteristics of the HMG Model, outer context, inner setting, and process. The Consolidated Framework for Implementation Research (CFIR) served as a guiding framework to solicit thoughts and experiences from participants about HMG Model implementation. Ultimately, the study provided insight into common themes related to implementation practices, including informing a definition of 'sustainability', building off key constructs identified by study participants:

Diversified Funding (more than one dedicated funding stream to support HMG efforts)

HMG Recognition ('stamp of approval' from specific state and/or national bodies)

Routinization of HMG (degree to which HMG is known to and used by a substantive proportion of potential sectors/partners in a community; establishing clear and standardized internal service protocols that can be maintained and refined over time)

Reach (maximizing the volume of families reached through HMG), and

Withstanding Turnover (investing in succession planning and developing clear protocols and training plans to easily and effectively on-board new staff)

The study led to the development of several key recommendations that will guide the efforts of the HMG National Center, in conjunction with efforts to advance core strategic priorities, over the coming year:

- Selecting and/or revisiting the HMG backbone organization with specific attention to: availability
  of in-kind resources, alignment in mission and scope, as well as backbone culture and reputation
  within the community
- Selecting and/or providing targeted training to HMG leadership to promote qualities such as ingenuity and relationship-building
- Identifying and pursuing critical opportunities to promote the national brand and evidence

  base of the HMG Model, as well as leveraging peer-to-peer opportunities available through the

  National Affiliate Network
- Creating or expanding the **inventory of messaging approaches and materials** that are used with different audiences and for different purposes and evaluating the impact of those approaches
- Building capacity to assess and document critical metrics and measures that inform community knowledge of early childhood system function and impact in addition to speaking to the specific impact of HMG in contributing to positive child and family-level outcomes
- Creating or expanding the inventory of approaches to maximize awareness of and buy-in toward HMG, including engaging community partners (non-traditional and naysayers especially) in implementation, enlisting ambassadors of the HMG message, and retaining dedicated advisory/leadership groups
- Defining and measuring progress toward sustainability, including particular attention to five constructs: 1) the diversification of funding sources, 2) the degree to which HMG is known to and used by a substantive proportion of potential sectors/partners in a community, 3) pursuit of state- and national recognition of HMG, 4) maximizing the volume of families reached through HMG, and 5) establishing comprehensive processes and training materials to ensure ongoing staff development and to minimize onboarding time at times of staff growth and turnover

### **Trends We're Watching**



#### **Centralized Access Point**

HMG systems across the country are continuously evaluating the mechanisms used to reach families and provide effective support. Technology remains a key strategy to increase efficiency and effectiveness within and by the Centralized Access Point, including through new apps and platforms that expand access for parent engagement. Text messaging, specifically, has emerged as a tool in which HMG affiliates are investing to maximize family engagement in a convenient and accessible way. Exploration around two-way communication between HMG and families has been expressed by HMG affiliates as an area of interest as well.



### **Outreach Efforts**

Over 2020, many affiliates embraced new ways of strengthening their engagement of families and
pivoting to virtual approaches for historically in-person HMG offerings such as Books, Blocks, and
Balls events and parent support groups. While this shift is directly related to the COVID-19 pandemic
and the preclusion from hosting in-person events, examination of these efforts should continue
to assess how technology can be leveraged to support more families even once social distancing
restrictions are obsolete.

In 2020, the HMG National Center conducted a work group dedicated to engaging affiliates in a dialogue that will advance HMG Centralized Access Point efforts across the National Affiliate Network.

The HMG National Center and partners at the Childhood Prosperity Lab facilitated the HMG Centralized Access Point work group. Representatives from nine HMG systems participated in the work group:

Alaska

Long Island, NY

Los Angeles, CA

North Texas

Indiana

Orange County, CA

South Carolina

Utah

Western New York

The Alliance for Information and Referral Systems (AIRS) also participated in the work group, providing insight, support, and resources related to the establishment, implementation, and maintenance of information and referral systems.

Work group participants explored a number of themes related to the implementation, evaluation, and sustainability of the Centralized Access Point, including:

- The role and function of the Centralized Access Point within the community
- How the Centralized Access Point supports developmental promotion, referral, and linkage
- How the Centralized Access Point supports data collection, evidence, and evaluation of HMG systems
- Strategies to support work flow as well as roles and responsibilities of various team members
- The role of technology and how technology is leveraged to support
- The management and delineation of work flow, roles, and responsibilities

2020 BUILDING IMPACT

## **Conclusion**

This report summarizes the breadth and scope of HMG implementation across the country. As of 2020, communities in 29 states are leveraging the four HMG Model Core Components to ensure their capacity to advance developmental promotion, early detection of developmental or behavioral concerns, as well as referral and linkage to helpful services. Ultimately, the information presented in this report provides needed context about Model implementation in order to conduct and interpret future assessments regarding the impact of HMG. Only by continuing to strengthen our knowledge of HMG and working in partnership with the HMG National Affiliate Network will we be successful at taking on the critically important challenges to young children's health and development.



