By July 31, 2021 ECCS Impact Grantees and Place-Based Communities will promote healthy development of children ages birth through age 3 to achieve:

- 25% relative increase in children birth through age 3 that are achieving age appropriate developmental health in all 5 developmental domains
- 15% relative decrease in disparity among children birth through age 3 that are achieving age appropriate developmental health in all 5 developmental domains (Select one: age, gender, poverty, or race)
- 15% relative increase in the proportion of family members of children birth through age 3 that report they read, told stories, and/or sang songs with their child daily
- 15% relative increase in the proportion of primary caregivers reporting improved social support
- 10% relative increase in the proportion of families successfully connected to one or more services to address social determinants of health (SDOH)
- 20% relative increase in the proportion of identified partners that report improved data processes for CoIIN reporting
- 30% relative increase in the number of new or updated policies that support developmental and relational health promotion

### AIM STATEMENT

### PRIMARY DRIVER

<table>
<thead>
<tr>
<th>SD1: Screening is conducted in a variety of settings so all children are assessed (e.g. well-child visits, childcare settings, WIC &amp; SNAP appointments, home visits, etc.)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SD2: Screening services use evidence-based tools and methods and seek a full picture of developmental health including SDOH and vulnerabilities.</td>
</tr>
<tr>
<td>SD3: Hard to reach families are engaged using a variety of methods.</td>
</tr>
<tr>
<td>SD4: Services that provide screening do so in a manner that is timely, efficient, effective family-centered, and equitable.</td>
</tr>
<tr>
<td>SD5: Developmental monitoring, screening, and follow-up plans are in place and incorporate work flow and data use.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SD1: Family motivations, strengths, talents and skills are recognized and capitalized upon for families to be key promoters of healthy child development.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SD2: Families have support necessary to access, navigate and promote the developmental health of their children.</td>
</tr>
<tr>
<td>SD3: Build trusting relationships between families and professionals.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>SD1: Benefits, stressors, and risks associated with SDOH are incorporated into developmental health delivery, monitoring, screening, and follow-up.</th>
</tr>
</thead>
<tbody>
<tr>
<td>SD2: Family coping capacity is addressed and supports confidence in caregiving</td>
</tr>
<tr>
<td>SD3: Families are aware of, and have access to services that mitigate stressors associated with SDOH</td>
</tr>
</tbody>
</table>

### SECONDARY DRIVER
### AIM STATEMENT

By July 31, 2021 ECCS Impact Grantees and Place-Based Communities will promote healthy development of children ages birth through age 3 to achieve:

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### PRIMARY DRIVER

#### P4: Systems Promote Developmental Health and Meet Needs of Children & Families

Services throughout the ECCS that promote developmental health are available, accessible, of high quality, and are used by families.

#### P5: Linked and Coordinated Systems

Linked and coordinated systems promote continuity, collaboration, and cross-sector sharing in all aspects of monitoring, screening, follow-up, and service delivery while ensuring privacy and legal rights of families.

#### P6: Advocacy & Policy Change

Systems promote child development and support families through advocacy and policy change at the local, state, and federal level.

### SECONDARY DRIVER

#### SD1: Services are appropriate, available, accessible, evidence-based, family-centered, equitable, and incorporate family education and celebration of milestones.

#### SD2: All components of the community-wide system are aware of healthy developmental promotion services and help link families to them.

#### SD3: Development enhancing activities are provided to families and other caregiving entities (child care, etc.).

#### SD4: Feedback from parents/caregivers on the quality of services is sought and utilized for improvement.

#### SD5: Effective care coordination and cross sector communication enhances family access and utilization of services.

#### SD1: Data systems support collaboration coordination and continuous improvement

#### SD2: Interagency data sharing agreements delineate agency and provider responsibilities including sharing and privacy protocols.

#### SD3: Reliable and effective systems exist to track screening, referral, evaluation, receipt of services, outcome monitoring.

#### SD4: Cross-sector infrastructure supports on-going training, technical assistance and support for developmental monitoring, screening, and follow-up activities.

#### SD5: Seamless response to identified needs.

#### SD1: Community-based systems collaborate to plan and engage in advocacy creating local programs to enhance child development.

#### SD2: Policies & reimbursement/payment models provide requirements and/or financial incentives and disincentives, to conduct developmental monitoring, screening, and follow-up in child care, healthcare and other settings.

#### SD3: State monitoring, screening, referral, and follow-up guidelines, practice standards, protocols and regulations are in place and enforced.

#### SD4: Families have the social and economic support to promote developmental health.