



Council on Children and Families

NYS ECCS IMPACT

New York State Early Childhood Comprehensive Systems

NYS Early Childhood Advisory Council

September 28, 2017

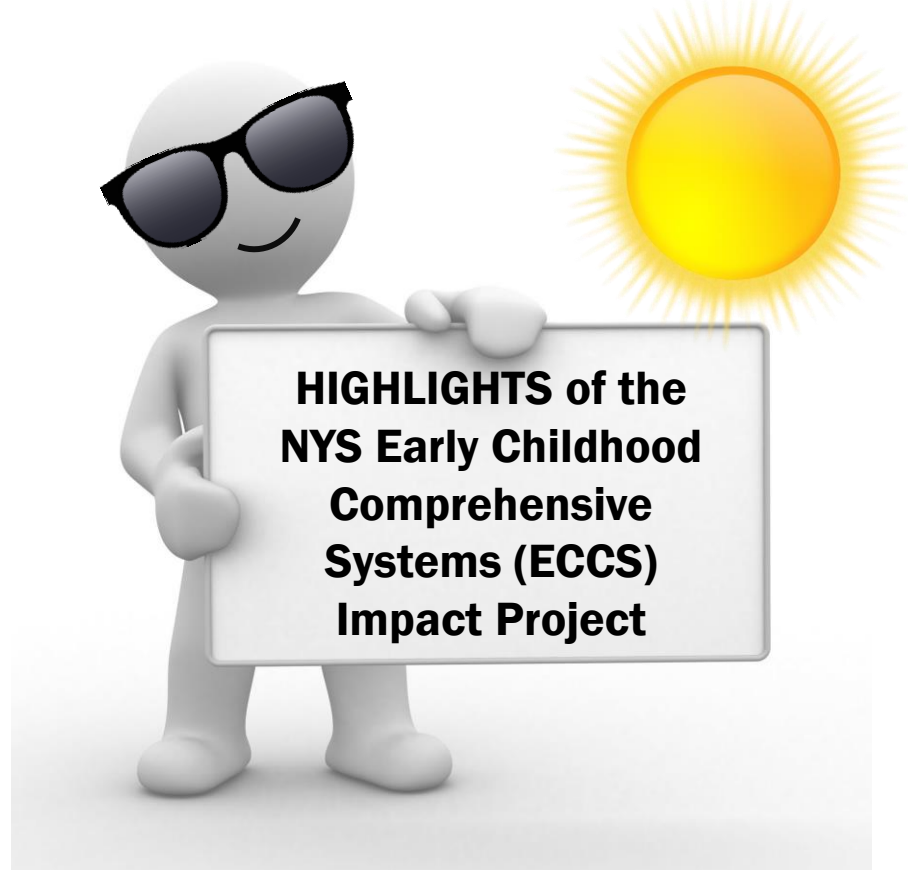
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TODAY'S AGENDA

- ECCS background
- 5 year AIM
- Building our CoIIN
- Primary drivers
- Translating the aims
- Community Updates
- State Alignment
- How You Can Help
- Challenges
- Plans for Year 2



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ECCS BACKGROUND

The NYS Council on Children and Families and grantees in 11 other states have been awarded the Early Childhood Comprehensive Systems (ECCS) Impact grant. This 5 year grant from the Health Resources and Services Administration, Maternal and Child Health Bureau seeks to enhance early childhood systems building and demonstrate improved outcomes in population-based children's developmental health and family well-being using a Collaborative Innovation and Improvement Network (ColIN) approach.



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Increase awareness, coaching and training about child development and the importance of and utilization of developmental screening **and follow-up** among early childhood professionals

E

Use a **CoIIN approach** to **improve outcomes** in population-based children's developmental health and family well-being indicators by working across systems and across sectors with a common goal

C

Recognize **social determinants of health** as barriers to healthy early development and school readiness especially for low income children and work to reduce health inequities in screening, service referral and access

C

Strengthen leadership in continuous quality improvement, develop two-generational approaches and test innovative systems change ideas

S

Promoting **family and community** approaches to support **early developmental and school success** for young children



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But, what is our goal?



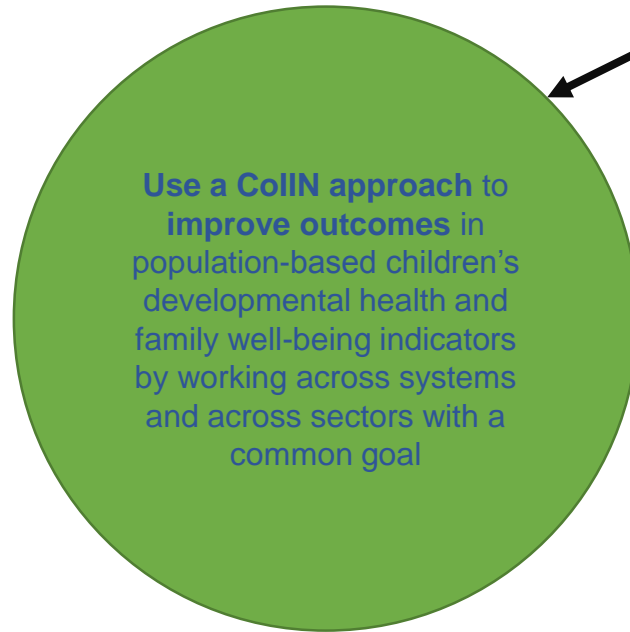
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NYS ECCS 5 YEAR AIM



Achieve a 25% increase in age-appropriate developmental skills of 3 year old children by 2021

Collaborative
Improvement and
Innovation
Network (ColIN)



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BUILDING THE ECCS CoIIN

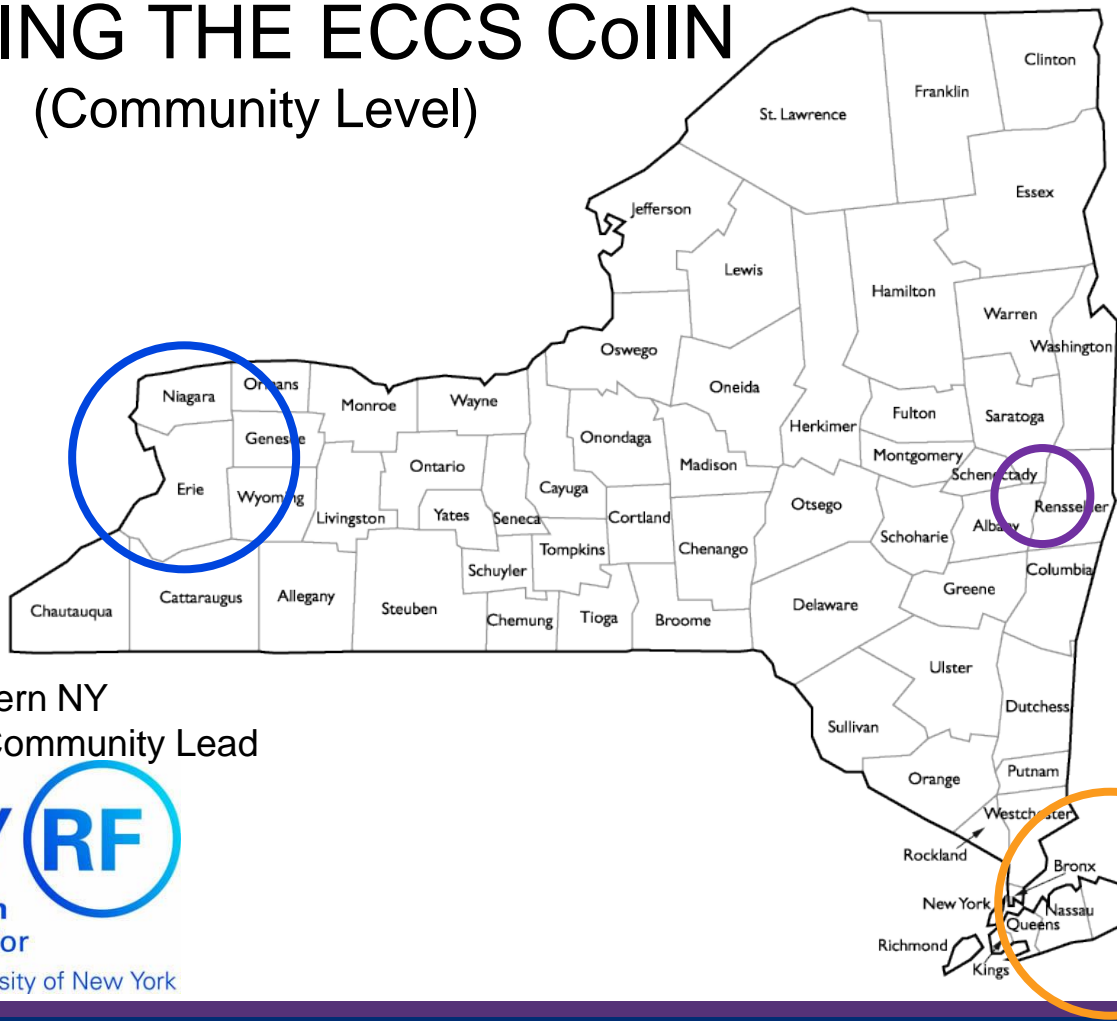
(FEDERAL LEVEL)



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BUILDING THE ECCS CoIN

(Community Level)



NYS Lead



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Nassau County
Place Based Community Lead



Western NY

Place Based Community Lead



The Research
Foundation for

The State University of New York

Nassau County ECCS CoIN Place-Based Community

- **Docs for Tots**
 - **Liz Isakson, MD, FAAP**, Executive Director
 - **Melissa Passarelli, MS**, Director of Programs



Docs for Tots is a non-profit, non-partisan organization led by pediatricians to promote practices, policies, and investments that will enable young children to thrive.

Docs for Tots creates linkages between doctors, policymakers, early childhood practitioners, and other stakeholders to ensure that children grow up healthy. Their focus is on the youngest children and their families, from prenatal to children age five.



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Western NY ECCS CoIN Place-Based Community

- **The SUNY Research Foundation at the University of Buffalo Jacobs School of Medicine**
- **Dennis Kuo, MD, MHS**, Division Chief of General Pediatrics at the University of Buffalo Jacobs School of Medicine and the Medical Director of Primary Care Services at Women and Children's Hospital of Buffalo
- **Anna Hays, MD**, Clinical Assistant Professor, the University of Buffalo Jacobs School of Medicine



University at Buffalo
The State University of New York



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BUILDING THE ECCS CoIN

(STATE LEVEL)



New York Early Childhood Professional Development Institute
Developing Adults Working with Developing Children

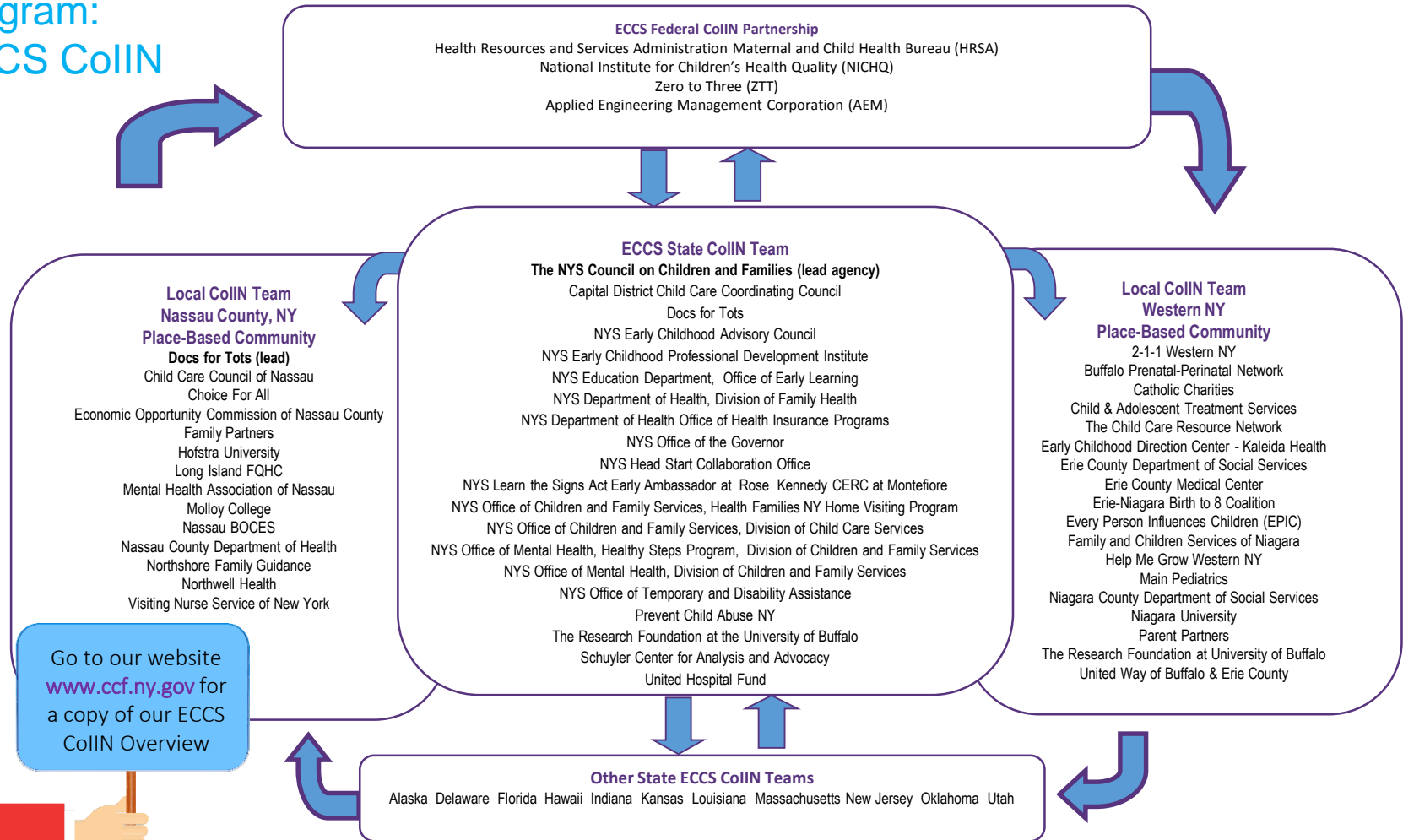


New York State Head Start Collaboration Office

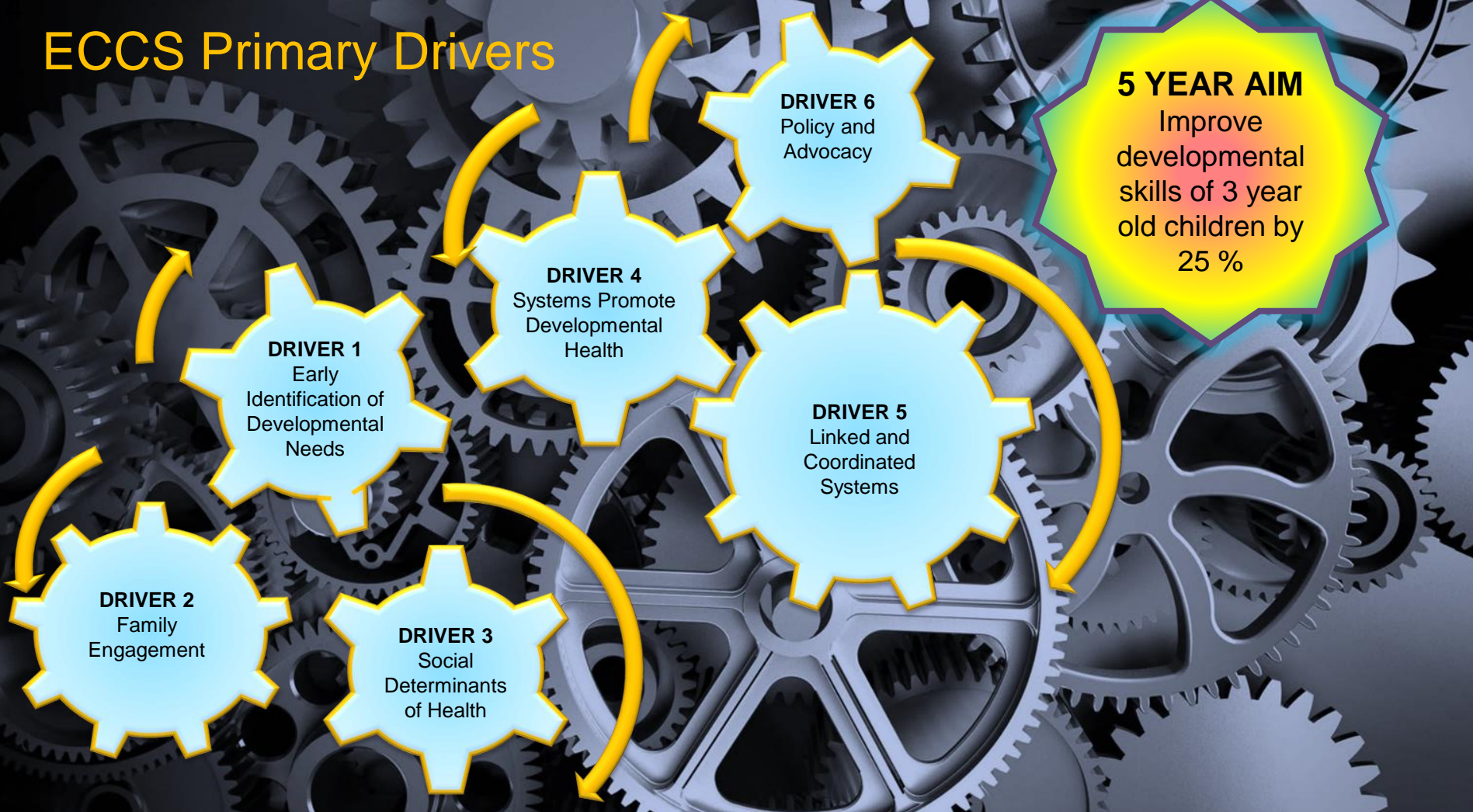


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Diagram: ECCS CoIIN



ECCS Primary Drivers





**KEEP
CALM
AND
SET NEW
AIMS**

25%

relative increase in
children birth through age
3 that are achieving age
appropriate developmental
health in all 5
developmental domains

**ANNUAL INDICATOR
DRIVER 1**

15%

relative increase in the
proportion of family members
of children birth through age
3 that report reading, telling
stories, and/or singing songs
with their child daily

**ANNUAL INDICATOR
DRIVER 2**

15%

relative increase in the
proportion of primary
caregivers reporting
improved social support

**BIANNUAL INDICATOR
DRIVER 2**

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)

ANNUAL INDICATOR

10%

relative increase in the
proportion of families
successfully connected to
one or more services that
address social
determinants of health

**BIANNUAL INDICATOR
DRIVER 3**

20%

relative increase in the
proportion of identified
partners that report
improved data processes
for CoLIN reporting

**ANNUAL INDICATOR
DRIVER 5**



30%

relative increase in the
number of new or updated
policies that support
developmental and
relational health promotion

**BIANNUAL INDICATOR
DRIVER 6**

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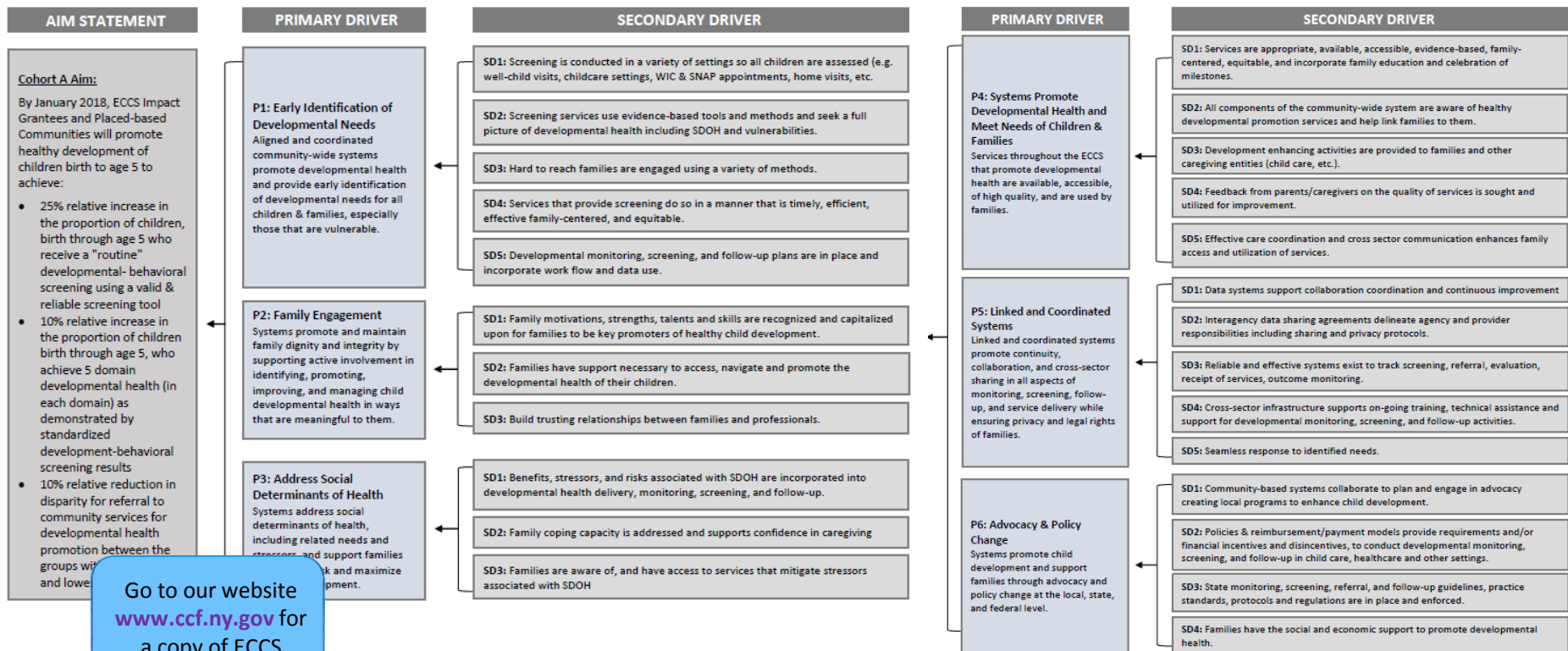


TIME FOR

ACTION

TRANSLATING THE AIMS

Driver Diagram



Go to our website
www.ccf.ny.gov for
 a copy of ECCS
 Driver Diagram!

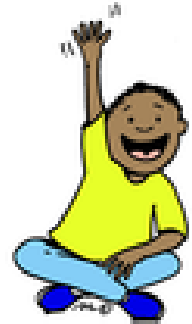


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Secondary Drivers	Change Ideas
S1. Data systems support collaboration, coordination, and continuous improvement	1a. Use swim-lane diagrams and system mapping to identify gaps in linkages between ECCS entities and programs 1b. Develop a data system for tracking developmental screenings completed across various settings 1c. Develop a data system for tracking referrals, acceptance of referrals, and receipt of services. 1d. Standardize data documentation and reporting across ECCS 1e. Utilize uniform statewide referral form 1f. Develop a central intake system to link families to multiple types of services and reduce duplication 1g. Your team's ideas:
S2. Interagency data sharing agreements delineate agency and provider responsibilities including sharing and privacy protocols	2a. Create cross-system agreements to share Quality Improvement data while using protections available (i.e. protection of QI data under HIPAA and Federal regulations) 2b. Ensure data sharing agreements are in place and include necessary elements 2c. Consider minimum data sets to define and capture data elements including outcomes 2c. Your team's ideas:
S3. Reliable and effective systems exist to track referral, evaluation, receipt of services, and outcome monitoring	3a. Create and harmonize data sources to allow sharing of information 3b. Develop uniform release of information forms for families to agree to exchange of information between service providers 3c. Your team's ideas:
S4. Cross-sector infrastructure supports on-going training, technical assistance, and support	4a. Create processes, systems, and resources to support data capture, use, and analysis across service providers

Questions?

Have I lost anyone?



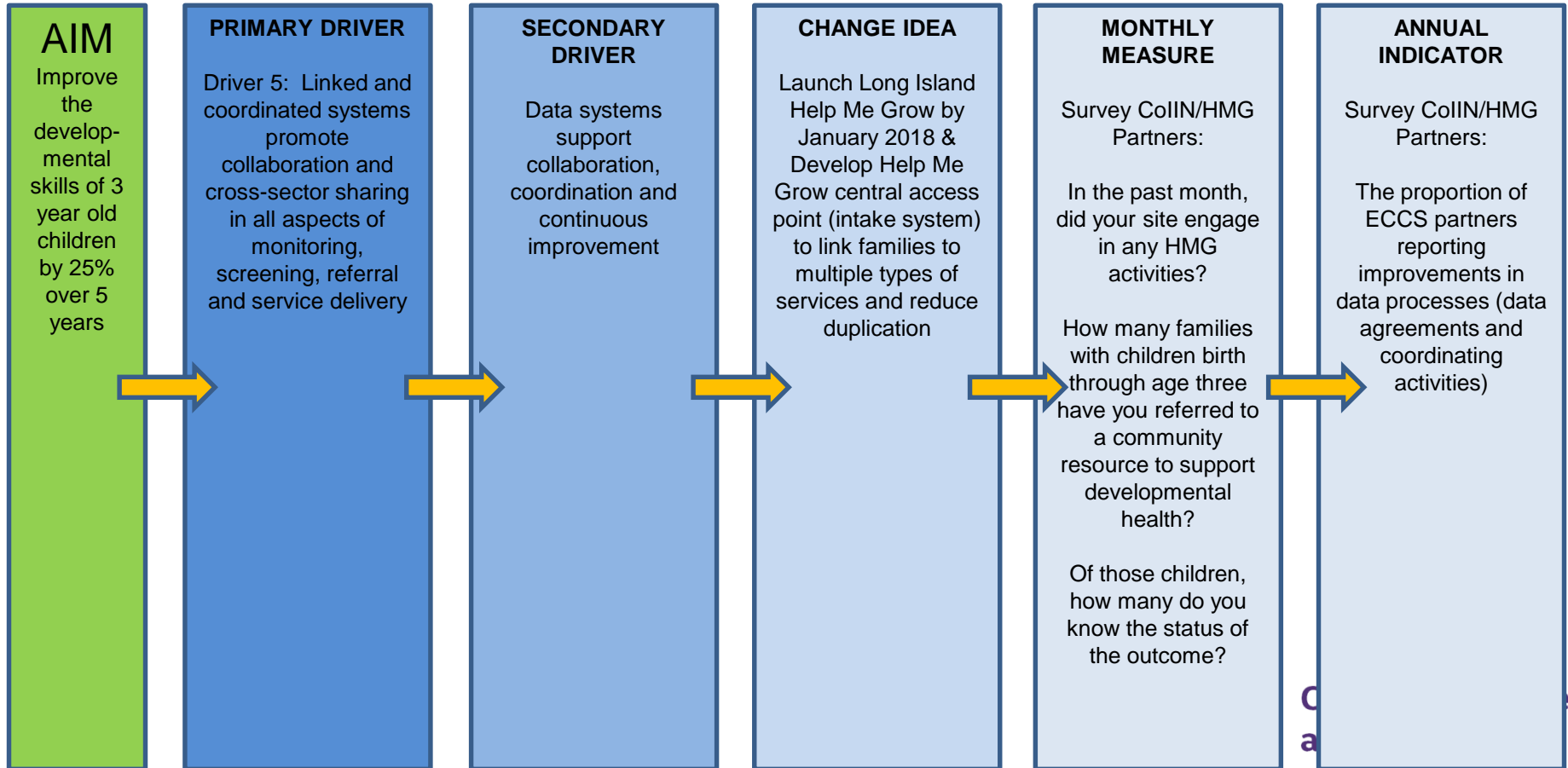


10/2/2017



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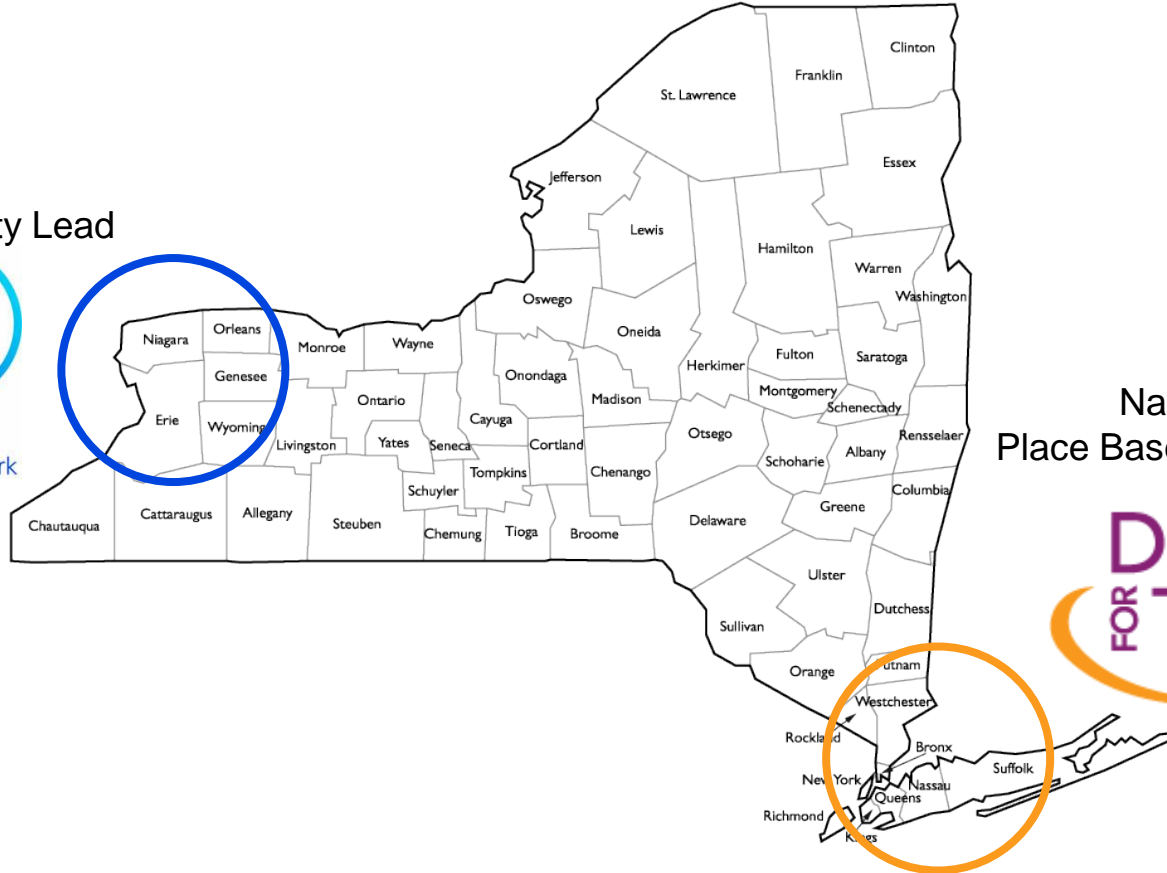
Action Process



PLACE BASED COMMUNITY UPDATES

Western NY

Place Based Community Lead



Nassau County
Place Based Community Lead



Nassau ECCS

ECCS 5 Year Goal:

- Improve developmental skills of 3 year olds by 25% over 5 years

Help Me Grow Long Island 5 Year Goal:

- Improve developmental outcomes of children 0-5 on Long Island

Accomplishments:

- Built a local cross sector team, including a “Family Partner Advisory Team”
- Divided the Help Me Grow – Long Island Leadership Team into four work groups to plan for the structure of HMG-LI
 - Prepare for January 2018 launch
- Partnering with local sites to improve developmental health promotion and screening in our focus communities
 - WIC Baby Showers (Westbury and Roosevelt)
 - Roosevelt Community Block Party
 - Health Fairs (Westbury and Roosevelt)

Next Steps:

- Finalize and move forward with HMG-LI structure for January 2018 launch (***Driver 5: Linked and Coordinated Systems***)
- Work with Nassau Infant Toddler Specialist to identify and train select child care sites in Westbury to perform developmental screening (***Driver 1: Early detection***)
- Have Family Partners do peer-to-peer outreach about developmental health promotion and screening (***Driver 2: Family engagement***)



Western NY ECCS

Driver Focus

- Driver 1- Early Identification
- Driver 2- Family Engagement

Population

- Testing in 5-6 pediatric practices in Erie and Niagara counties using a human centered design process to address screening, referral and follow-up including family engagement

Next Steps

- Designate an improvement team that includes families, medical and education
- Select and train practice teams
- Discover and design (mapping the system and testing change ideas)

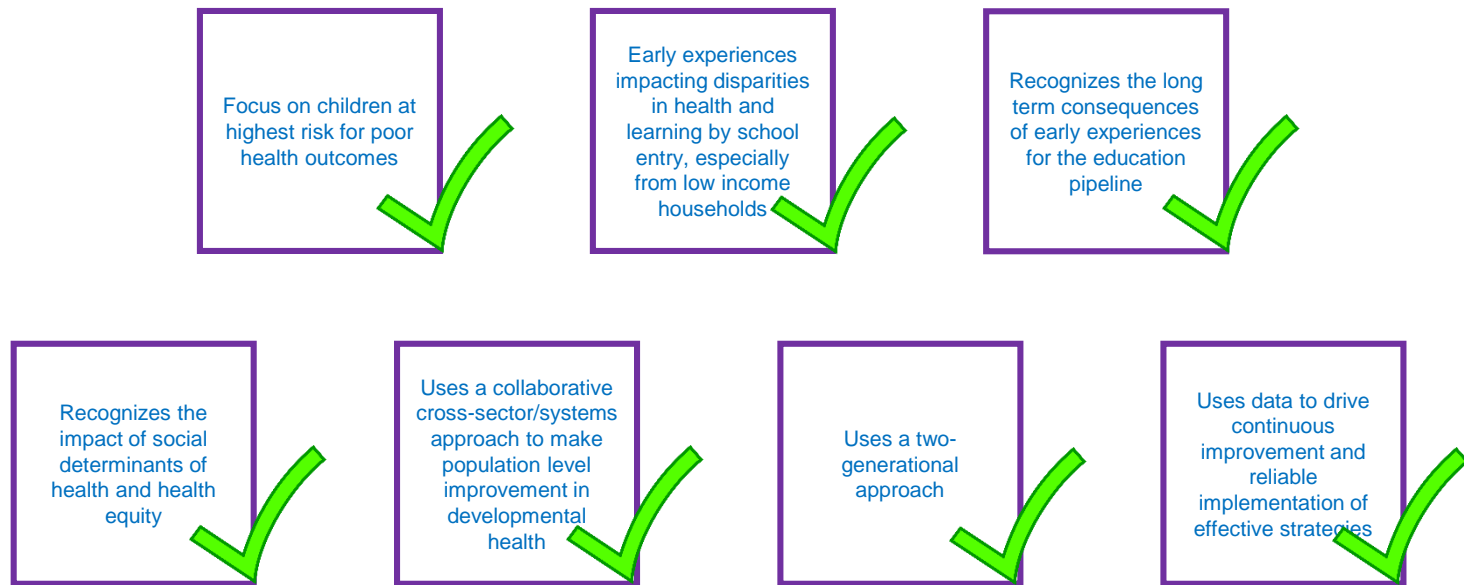
Alignment with New York State Initiatives



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DRIVER 1 Early Identification	DRIVER 2 Family Engagement	DRIVER 3 Social Determinants	DRIVER 4 Promotion of Developmental Health	DRIVER 5 Linked and Coordinated Systems	DRIVER 6 Policy and Advocacy
Healthy Children: -Promote universal developmental screening Support strategies to increase developmental screening and referral in primary care settings	Strong Families: -Focus state efforts on effectively engaging and increasing parent voice in state policies and programs	Strong Families: -Develop a system for providing comprehensive home visiting for families	Strong Families: -Increase awareness of parenting education -Increase accessibility -Promote parent understanding and QUALITYstarsNY	Early Learning: -Align the current set of early care and education programs to be come an integrated system for children birth to age 8 -Increase the ability of communities to respond to the needs of children and families -Increase community awareness of early learning opportunities	Healthy Children: -Participate in stakeholder meetings to promote Medicaid and other health policy to support universal developmental and maternal depression screening -Engage in stakeholder meetings to advance policy directives to support developmental screening in early care
	Healthy Children: -Promote celebration of milestones and positive parenting as key areas of parent education	Healthy Children: -Increase partnerships that advance key outcomes for children and address social determinants of health -Support maternal depression screening in primary care settings and co-located behavioral health strategies	Healthy Children: -Advance statewide Pyramid Model training on social emotional development and advance IMH endorsement	Coordinated and Responsive Systems: -Address opportunities across agencies to support a coordinated and responsive system of supports for families	Early Learning: -Explore ways the state can promote and support community efforts to build coalitions, collect data and implement programming.
			Early Learning: -Promote the use of NY Early Learning Framework -Ensure professional and development programs prepare early childhood practitioners -Support developmentally appropriate practice in programs birth to 2		Coordinated and Responsive Systems: -Maximize early childhood program funding to increase access for early childhood services
NYS ECCS Alignment with the ECAC			Coordinated and Responsive Systems: -Develop and implement a public engagement campaign to inform and obtain the support of leaders for early childhood initiatives -Increase awareness of all child-serving professionals of the resources available for children in the community		Coordinated and Responsive Systems: -Provide support to statewide initiatives designed to support communities in developing and implementing strategies to improve services for children and families

ECCS Alignment with the First 1000 Days on Medicaid



Big Picture: We're here for the same reasons!

ECCS Alignment with the First 1000 Days on Medicaid

1. Continue our connection with Medicaid to share our successes – outcomes
2. We may be able to test the recommendations set forth by the First 1000 Days- created an infrastructure in two communities with the will and capacity to measure them.
3. Data driven process – conducting PDSA cycles in pediatric offices, attending to social determinants of health and measuring the success of our community collaborative – sharing with Medicaid what success looks like for families when there is a coordinated and responsive system.



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EARLY CARE



- Screen, support and refer children to services and engage parents
- Engage legally exempt providers
- Refer families to community support

PHYSICIANS



- Engage prenatal care providers
- Continue to collectively problem solve challenges around screening and referral
- Increase knowledge of and provide resources for children with delays or may be at risk for delays
- Provide families anticipatory guidance and celebration of milestones during well baby visits

HOME VISITING



- Connect home visitors to pediatricians, obstetricians and early care providers
- Increase community awareness of home visiting programs

PARENT EDUCATORS



- Continue to discuss ways to engage families and strengthen partnership with families
- Understand family identification of community assets
- Support families whose children don't qualify for early intervention and children who are at risk for delays

EARLY INTERVENTION



- Ensure families are receiving evaluation and services when needed **(work with pediatricians to ensure awareness of their local EI)**
- Ensure connection with pediatricians **(work closely with local EIOs to ensure referral and services)**
- Act as a resource for families who don't qualify for early intervention

SOCIAL SERVICES



- Integrate developmental monitoring and health promotion into social services
- Modify, support and leverage existing programs that might support resource coordination and sustained support for families

MEDICAID



- First 1000 Days Initiative participation!
- Continue to inform Medicaid of challenges pediatricians are identifying at the community level around billing for developmental screening and ability to access community level data
- Continue discussions around how value based payments are connected to our work

PARTNERS



- Are there state or local initiatives that we should connect with?
- Are there partners we should engage?
- Are there funding opportunities that can further support developmental health promotion?

Challenges

Developing a
statewide ECCS
message

NYS does not have
an integrated
statewide ECDS

Operationalizing data
collection

Integrating social
determinants of
health and health
equity into the work

Engaging families!

Different billing
practices among
pediatricians and
electronic medical
records

Understanding
community assets
and service access

Closing referral gap

Aligning HMG
implementation with
ECCS framework

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Improvements

Developing a statewide ECCS message

NYS does not have an integrated statewide ECDS

Operationalizing data collection

Integrating social determinants of health and health equity into the work

Engaging families!
Docs for Tots in Nassau county has connected several active family partners to support their local ECCS initiative

Different billing practices among pediatricians and electronic medical records
1000 Days Initiative
PDSA cycles in development at FQHCs in Nassau County

Understanding community assets and service access
SURVEYS to families and providers

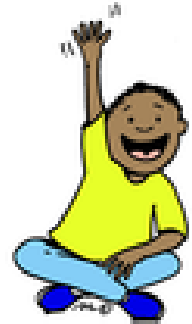
Closing referral gap
SURVEYS to families and providers

Aligning HMG implementation with ECCS framework

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Questions?

Comments? Thoughts?



Plans for Year 2

- PARTNER Tool
- Solidifying statewide messaging
- Surveying families and providers
- Establishing outreach/awareness campaign with families and providers (e.x. using the LTSAE materials or Talking is Teaching)
- Pyramid Model training with Long Island early care providers
- Establishing referral and follow-up processes in medical practices
- Implementing Central Access Point for HMG-LI - continuing to work with HMG WNY and HMG National
- Presenting at local and statewide conferences



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Contact Us

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