

Q&A Session for Building Blocks For Kids: Creating Intervention Systems That Support Young Children's Healthy Development

May 6, 2009

Stephanie Jernstedt - 12:19 pm

Q: What does early start mean?

Tana Ebbole:

I am assuming this is what does early start mean, for us this means getting as far ahead on the curve as possible to do primary prevention and when that fails early intervention for issues that will impact a poor birth outcome, children being abused or neglected and children not on their developmental trajectory or social emotional wellness.

Pat Stanislaski:

The Early Start Program refers to federal legislation ensuring that early intervention services to infants and toddlers with disabilities and their families are provided in a coordinated, family-centered network. Infants and toddlers from birth to 36 months are the ones usually eligible for services. They are eligible if they have a developmental delay in either cognitive, communication, social or emotional, adaptive, or physical and motor development including vision and hearing; or have established risk conditions of known etiology, with a high probability of resulting in delayed development; or are at high risk of having a substantial developmental disability due to a combination of risk factors. Intervention services vary from state to state.

Sandra Silva - 12:23 pm

Q: How was systems change defined?

Tana Ebbole:

In PBC we do not define it as systems change; rather it requires a change in how agencies and people work to work effectively in a system of care. What we mean when we say a system of care it means not just that folks (agencies and services) know about each other but that they have formal and structured connections. So for example in our maternal child health system, Health Beginnings, we have 12 different agencies making

up the system (we have blended multiple funding streams to do so) the outreach agencies are working on the ground in communities with our poorest birth outcomes and child outcomes to educated, recruit and engage the community and the residents in ensuring all pregnant women access prenatal care and early and continuously and ask for the health screening to help them ensure they access all the supports they want and need for a good birth outcome. All prenatal health screens are sent to an “entry agency” who them engages the family and helps them to connect to the supports and payor sources. The supports are specific and organized, they include, prenatal care, WIC, smoking cessation, depression screening and intervention, Nurse Family Partnership (first time low income) Healthy Families (at risk of child abuse) parenting, phone support, etc. The entry agencies job is to engage both the new mother and new father (even if not married) the referrals from the entry agency are the only way families can access more costly programs and programs that provide complex services for pregnant women and if they need access to child care or after school scholarships. All of the programs in the Healthy Beginnings system ride on one data system so that mother Mary has one chart that all the services operate off of so she is not repeating her story.

Pat Stanislaski:

In Pat’s presentation, it is defined as “doing things differently from how they have always been done” In NJ, state entities are beginning to work more closely and collaboratively on issues they all share. Previously, departments have worked in a more “silo-type” atmosphere.

Allison Landy - 12:23 pm

Q: I'm interested in more details as to how the 100M is broken down among programs/administration/targets/etc. Is that possible to get?

Elliot Regenstein:

Assuming you're referring to the \$100 million in the Head Start Act for state advisory councils, we don't know. The Department of Health & Human Services has yet to issue any guidance about how the money will be distributed, or what efforts states will be able to count in their match. Now that Secretary Sebelius has been confirmed we expect progress on this front shortly, but as of now nobody is sure how the \$100 million will be distributed.

Mary Schweizer - 12:25 pm

Q: Both Pat and Tana discussed after school programs. Could either presenter share some evidence-based programs which are being implemented successfully?

Tana Ebbole:

I do not and we have looked, at this time our goal is creating a quality after school system by creating an afterschool Quality Improvement System similar in concept to what is being done in early care and education. If you find some let me know.

Pat Stanislaski:

We have scattered program around our state; some using EB programs others not. Lion's Quest, The Search Institute's 40 Assets and "I Can Problem Solve" are others being used in NJ.

Julie Spielberger:

There is a growing body of research that indicates the important elements needed in a high quality after-school programs to have a positive impact on children, which includes such things as a positive relationships between adults and children in the program, a physically and psychologically safe environment, appropriate supervision and structure; opportunities for children to make choices, etc. There are several excellent resources for learning more about what makes a high quality program, including the Harvard Family Research Project, the Promising Practices Network, and the National Institute on Out-of-School Time (as well as the Chapin Hall website).

Allison Landy - 12:26 pm

Q: What does FLKRS stand for on the Tana Ebbole handout? Is this a standardized (norm-referenced) assessment and is it comprehensive?

Julie Spielberger:

It stands for Florida Kindergarten Readiness Screen and includes items that assess both academic and social-emotional readiness.

Susan Schwartz - 12:26 pm

Q: In our county, we have agencies that provide excellent services for children/moms prenatal to three; however, their collaboration is informal. We are working to set up formal/institutional collaboration and a triage approach to services.

Tana Ebbole:

Exactly, that is what the Health Beginnings System of Care is for PBC. You can feel free to contact me and will be glad to share how we have done this and the lessons learned and learning.

Christin Smith - 12:27 pm

Q: How do we find out if there are Children's Services Council's/ State Advisory Councils in our state and how to gather information about these?

Elliot Regenstein:

The National Governor's Association has some information about state advisory councils on-line.

<http://www.nga.org/portal/site/nga/menuitem.1f41d49be2d3d33eacdcbbeb501010a0/?vgnextoid=d4928cc156de1010VgnVCM1000001a01010aRCRD>)

In many states, information about the Council will be available on the state website, on one or more of the following pages: the governor, the health & human services agency, the education agency, or a dedicated early childhood agency if one exists.

Susan Schwartz - 12:29 pm

Q: add on to previous comment - what suggestions do you have for an effective location for the coordinator? What qualities are most helpful in the person serving as coordinator?

Tana Ebbole:

This is a complicated question and one that you will have to decide based on your community; I would say these are considerations,

- *The coordinator needs to be independent from any agency in the system*
- *They cannot be an employed by an agency providing direct services*
- *They need to have good people skills and data skills*
- *They need strong systems and management skills*
- *They need to have a carrot and a stick*
- *They need to believe in and have clarity of the bottom line big goals and how the system is designed to achieve the goal(s) no more than 3*
- *They need to understand how each service or program supports achieving the goal (I would advise doing a theory of change and logic model for the system)*
- *Strong ego, mature and able to lead from behind*

This is, from our experience the hardest position to fill.

Lisa Gonsalves - 12:31 pm

Q: What are effective methods in outreach to parents in order to serve their children, when service stigma stands in their way?

Tana Ebbole:

This is a hard one and one we keep working on, we are increasingly renaming and approaching some of our work in a social marketing strategy. You may want to look into Community Voices in Lynchburg , Va.

Pat Stanislaski:

Our Family Success Centers in NJ have done an outstanding job in reaching the families we serve. I really believe that the Standards I spoke of are a main reason for that success. Programs that are family-centered, easily accessible, respectful of parents, of cultures and of individuals do not have the stigma issues others programs experience. I also believe that “universal programming” – aimed at everyone is a great help in lessening stigma issues for parents.

Adrienne Lewis - 12:33 pm

Q: How can a provider in a particular state find out who is on the state advisory council? Does each state have one?

Elliot Regenstein:

States are required to have advisory councils, but not all states have created or populated their councils yet. It may be possible to find out more about your state's council on the state web site. In many states, information about the Council will be available on the state website, on one or more of the following pages: the governor, the health & human services agency, the education agency, or a dedicated early childhood agency if one exists. The National Governor's Association also has some information about state advisory councils on-line.

<http://www.nga.org/portal/site/nga/menuitem.1f41d49be2d3d33eacdcbbeb501010a0/?vgnextoid=d4928cc156de1010VgnVCM1000001a01010aRCRD>

Juanona Brewster - 12:35 pm

Q: Can the systems tracking and impact be duplicated on a state level (Illinois) in the same way that it has been done on a county level? Assuming yes, what kind of timeline might we anticipate for positive impact?

Elliot Regestein:

The State Advisory Council is required to develop recommendations for a comprehensive early learning data system, but states have a long way to go to develop better systems tracking at the state level. Some examples of state data tracking are available on NGA's website.

<http://www.nga.org/portal/site/nga/menuitem.9123e83a1f6786440ddcbeeb501010a0/?vgnextoid=a69bb43dc10ca110VgnVCM1000001a01010aRCRD>

Federal money may well be available to support this work, either through the state advisory councils funding or through Department of Education IES grants. Still, it will likely be at least a few years before a critical mass of states have fully operational systems.

Julie Spielberger:

I would agree that the states and local communities have a ways to go on this, but there is increasing recognition of the importance of data systems. Please also see this document on the Build website for more information:

<http://www.buildinitiative.org/files/SLDSandEarlyChildhoodARRAFundingOpPaper.pdf>

Judie Murphy - 12:35 pm

Q: what do they mean by nativity?

Julie Spielberger

It refers to place of birth; in our study, more than half of the mothers in our sample are non-native, meaning they were born outside the United States.

Phyllis Frank - 12:35 pm

Q: Birth-3 programs usually provide year round service. 3-5 education programs jump to 19th C school calendar. Do measure impact of loss when service has a built in hiatus as summer learning loss?

Tana Ebbole:

We have worked in our county to ensure they are year round 3 to 5 and not on school year.

Louisa Higgins - 12:38 pm

Q: I'm interested in how the ECCS initiative has- or has not- influenced systems building efforts in NJ and FL

Pat Stanislaski:

In NJ, our ECCS initiative has helped to bring the players together and has resulted in people communicating with each other around mutual issues, accomplishments and barriers. For many, it has been the first time many of them have ever worked together as a team. We have applied for grants together, have designed a statewide portal of information for early childhood and have been able to share our experience and our expertise among our team members.

Penny Hatcher - 12:38 pm

Q: Question for any presenter. What do you perceive as the role of the child and mother's primary care provider in early childhood?

Pat Stanislaski:

I am a bit uncertain of what this question is asking. If it refers to the child care provider, it is clear that through our Strengthening Families through Early Care & Education grant, the role of that provider has expanded. In our state (NJ) we have 168 centers statewide participating in this program. In each one, the goal is for the center to become a resource not only for the child but for the parents as well.

jean oneil - 12:40 pm

Q: What has been/can be done to reach young, first-time families with the benefits of participation?

Tana Ebbole:

We are finding word of mouth and targeted social marketing is critical and making sure of the messaging by doing focus groups on any of the messaging as we have found time and time again what we thought was great when we did the focus groups with the target we were wrong.

Pat Stanislaski:

In our NJ Strengthening Families programs across the state, young families are the primary target.

Elliot Regenstein:

In Illinois, we've learned a lot about the importance of outreach to parents and programs about enrollment. In fact, Catalyst Chicago recently devoted an entire issue to addressing this concern. It's available on-line at <http://www.catalyst-chicago.org> (in the box on the left click "Download Issue"), and provides some lessons about the challenges we've faced in Illinois.

Julie Spielberger:

This is challenging, although research on home visiting programs indicates that families are more likely to engage in a program if they are contacted before the birth of the child.

Janice Carter - 12:39 pm

Q: How are the mental health needs of children factored into the system of care in Palm Beach or other places? I see this missing.

Tana Ebbole:

The screening in the early care settings and in naturally occurring environments include the ASQ-SE we then work with our mental health system to provide the supports the family/child need. We have however found that in our community the parent child bonding, infant mental health and family work is very limited so we have and continue to a lot of professional development in these areas.

Richard Speigman - 12:44 pm

Q: What types of agencies have proven to be most hesitant to collaborate, or most defensive?

Tana Ebbole:

Those that feel most underfunded and under "siege" as they are in a protection defend mode.

Elliot Regenstein:

We've seen it really varies from place to place – there is no blanket rule as to which kinds of agencies will collaborate and which will not. A lot of it comes down to relationships, as you might imagine.

Julie Spielberger:

I would agree that there is a lot of variability, e.g., in some communities, it can be difficult to partner with schools, while in others, it is easy. As Elliot says, it is a matter of relationships, but making certain that partners to recognize that institutions vary in their cultures and practices, and for any collaboration to work, there must be clear goals and a clear delineation of roles and responsibilities.

Patty Jacquez - 12:45 pm

Q: What tool do you use to screen form S/E?

Tana Ebbole:

ASQ SE for initial Screening.

Lisa Gonsalves - 12:46 pm

Q: How can we better reach the "hard to reach" parents in order to provide services to the children who need them?

Tana Ebbole:

This is a hard one and one we keep working on, we are increasingly renaming and approaching some of our work in a social marketing strategy. You may want to look into Community Voices in Lynchburg, Va. We are finding word of mouth and targeted social marketing is critical and making sure of the messaging by doing focus groups on any of the messaging as we have found time and time again what we thought was great when we did the focus groups with the target we were wrong.

Elliot Regenstein:

In Illinois, we actually set up a work group devoted to hard-to-reach families. Catalyst Chicago recently devoted an entire issue to this concern, which is available on-line at <http://www.catalyst-chicago.org> (in the box on the left click "Download Issue"). We're far from fully mastering the issue, but we feel like we're making some real progress.

Dulce Maria del Rio-Pineda - 12:47 pm

Q: How do you include serving pregnant women and their families to promote and ensure earliest impact to children development?

Tana Ebbole:

We use the data on the consequences of poor birth outcomes.

Julie Spielberger:

I'm not quite sure of the meaning of the question, but many home visiting programs start prenatally to help prepare families for the birth of the child, and then continue to visit and provide support after the child's birth.

Carla Keener - 12:48 pm

Q: How have you used other leveraging streams (e.g., EPSDT) to enhance services for children 0-5?

Tana Ebbole:

We have brought all the funding streams and systems together in a formal structure. So for example Early Steps (IDEA part C) they have families that find them on their own, unfortunately not the low income and high risk families, so we have a system in which our outreach and entry agency when they have worked with a family and think that they need to go to Early Steps they make that referral and Early Steps in on our data system for referral and linkage, this is really important as FL opted only to support established conditions and not at risk so we have to work back and forth between the systems. So if Early Steps screen a child and they are determined at risk and not eligible for their service they then are tied into the entry agency to help the family get to the right service.

ashley lanfer - 12:56 pm

Q: Research tells us there is a large group of working families who would benefit more from supplemental income as opposed to a program run by professionals on their behalf. Any experience with these tradeoffs?

Tana Ebbole:

No, but have thought about this and am not sure that that is true for all of our families, you are raising a big and important question around poverty and it's insidious devastation. I would like to have a fuller national dialogue of this.

Kathleen Goodhand - 12:57 pm

Q: Tana talked about changing the way the professionals "talk" to parents. Listening and asking questions of parents as opposed to telling them. Is there training they provide workers/professionals to support this change? Can she share resource/info?

Tana Ebbole:

*Yes, two training areas: Touch Points Training on joining and engaging Parents Through the Touch Points Center in Boston
Through AHA! Ruby Payne's training on the Culture of Poverty (a bit controversial but our folks find it to be helpful)*

darcy lowell - 1:03 pm

Q: Can we have more information about the federal law that was referenced with regard to the State Advisory Councils. How would one find out about the HHS funding?

Elliot Regenstein:

The Administration for Children and Families website (<http://eclkc.ohs.acf.hhs.gov/hslc>) includes the statutory language creating the State Advisory Councils, and updates on plans for federal funding.
