Community Systems Overview

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with
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Early Childhood Vision

- Our vision as a state is for every child to enter kindergarten safe, healthy, eager to learn, and ready to succeed in a rigorous, developmentally appropriate K-12 curriculum.
Community Systems

- An early childhood comprehensive system is defined as an organized, purposeful partnership of interrelated and interdependent agencies/organizations representing health, mental health, social services, families and caregivers, and early childhood education to develop seamless systems of care for children from birth through kindergarten entry.

- The purpose of these systems is to help children grow up healthy and ready to learn by addressing their physical, emotional and social health in a broad-based and coordinated way.
Why a Systems Building Approach?

BUILD Initiative video:
https://www.youtube.com/watch?v=th4jBTtaxhI
Typical Programmatic Approach to Community Change

Program or Intervention → Policy/Practice Change Individual Skill or Behavior Change → Improved Population Outcome

Expand Quality Early Learning → Improve Children’s Academic & Social Skills → Children Ready for School

Parenting Training → Improve Parenting Skills → Children Ready for School
What do Community Problems Really Look Like?

Foster-Fishman, et al., 2007
**Solely a Program Focus**

- Isolated, uncoordinated efforts
- "My client" mindset
- Emphasis on addressing immediate needs, not solving entrenched problems
- Program improvement and expansion
- Isolated learning

**Adding a Systems Focus**

- Interdependent and interconnected
- "Our children" and "our partner" mindset
- Emphasis on solving entrenched problems by targeting root causes
- System transformation
- Shared feedback and learning
## Community Systems:
### Alignment with Children’s Cabinet

<table>
<thead>
<tr>
<th><strong>Children’s Cabinet</strong></th>
<th><strong>Community Systems</strong></th>
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<tbody>
<tr>
<td>Work at the intersection of health and human services</td>
<td>Connect health, human services, and other support services</td>
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<td>Ensure that we are focusing on children holistically</td>
<td>Create a comprehensive system to serve holistic needs of children and families</td>
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<td>Ensure that we are making data-driven decisions</td>
<td>Align and link data from multiple sectors to understand and improve outcomes</td>
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<td>Hold ourselves accountable in a public forum</td>
<td>Build a feedback loop between communities and state agencies</td>
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<td>Eliminate bureaucracy, where possible, and streamline decision-making</td>
<td>Improve access to services and transitions between services</td>
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Effective community systems include coordination and smooth transitions among the following sectors and agencies:

- **Early Childhood Education** (DHS, Head Start, ISBE)
- **Early Intervention and Special Education** (DHS, ISBE)
- **Families and Caregivers**
- **Health** (DHS, Healthy Start, HFS, IDPH)
- **Home Visiting** (DHS, Head Start, ISBE)
- **K-12 Education** (ISBE)
- **Mental Health** (DHS, HFS, IDPH)
- **Social Services** (DCFS, DHS, IDPH)
- **Workforce Development** (DHS, IBHE, ICCB)
Birth to Five programs and funding streams are complex

Legend:
Federal Funds
State Funds
Blended Funds

U.S. Department of Health and Human Services

IL Department of Human Services
- Head Start/Early Head Start
  - Child Care Assistance Program
  - Early Intervention
  - Better Birth Outcomes
  - Family Case Management
  - Healthy Families, Parents Too Soon
  - High Risk Infant Follow Up
  - MIECHV Program
  - Migrant and Seasonal Head Start
  - Perinatal Depression
  - RTT-ELC
  - Refugee and Immigrant Services
  - SNAP
  - TANF
  - Teen Parent Services
  - WIC (USDA funded)

IL Department of Public Health
- Children with Special Health Care Needs
- Family Planning/Title X Family Planning
- Genetics/Newborn Metabolic Screening
- Immunizations
- Lead Program
- Newborn Hearing Screening
- Subsequent Pregnancy Project

IL Department of Human Services
- Early Childhood Block Grant (Preschool for All & Prevention Initiative)
- Preschool Development Grant
- Title I
- CACFP/School lunch (USDA)

IL Department of Child and Family Services
- All Kids
- Medicaid
- Moms and Babies
- Child Protective Services
- Early Childhood Project
- Licensing
- Office of School Readiness

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Schools and Community-Based Programs

Children and Families
Illinois EC infrastructure is complex:

- IL State Board of Education
  - Regional Offices of Education (35 + 3 ISCs)
    - Local School Districts:
      - Early Childhood (0-3, 3-5)
      - K-12
  - Local Programs:
    - Child care assistance program

- IL Dept of Human Services
  - CCR&R's (16)
    - Local Programs:
      - Child care
      - Child care assistance program
  - Child and Family Connections (25)
    - Local Programs:
      - Developmental professionals and services
  - DHS Regions (5)
    - Local Offices & Programs:
      - Family case management
      - Medical assistance
      - SNAP
      - TANF
      - WIC
      - Various DHS-funded services

- IL Dept of Public Health
  - IDPH Regions (7)
    - Health Depts and Local Programs:
      - Children with Spec Health Care Needs
      - Family Planning
      - Genetics/Newborn Metabolic Screening
      - Immunizations
      - Lead Program
      - Newborn Hearing Screening
      - Subsequent Pregnancy Project

- IL Dept of Child and Family Services
  - DCFS Regions (3)
    - Local Programs:
      - Child care licensing
      - Child Protective Services
      - Early Childhood Project
      - Office of School Readiness

Local community collaborations work across sectors

Child and Family Outcomes
Why **Local** Cross-Sector Collaboration?

- Each community has a **unique combination of services**
- Each community provider may have a **different spin on services** offered
- Connect families with multiple needs to **comprehensive services**
- Develop a **continuous stream of services** from prenatal to school age (with smooth transitions from prenatal to 0-3, 0-3 to 3-5, 3-5 to kindergarten)
- **Increase cost-effectiveness and efficiencies** and **reduce duplication of effort**, through shared mechanisms like coordinated intake and referral

**Improved child and family outcomes**
Role of **Regional Entities**

- Regional entities can **combine sector-specific data** and expertise to **holistically assess regional needs** and work together to plan high-quality services that address families’ comprehensive needs.

- Regional entities have the ear of local programs and are well-positioned to:
  - **Send a unified message** to local programs about collaboration and comprehensive services.
  - **Align trainings and supports** to local programs to reflect shared priorities.
  - **Elevate local barriers and concerns** to state agencies.

- **Improved child and family outcomes**
Role of State Agencies

- **Develop a unified message** to local programs about collaboration, comprehensive services, and serving the holistic needs of families and children.
  - Send this unified message vertically throughout each agency
- Share data across systems to **monitor progress on shared outcomes** and to **improve systems**.
- Problem-solve across state agencies and complex funding sources to **eliminate barriers** to family enrollment, quality improvement, and/or program collaboration.

- **Improved child and family outcomes**
Goal: Improved outcomes for children and families through effective community systems

Families
- Enroll their children (as needed and desired) in continuous high quality services from prenatal to third grade, are engaged in positive development of their children, are included in decision-making, and inform state and local policy.

Service Providers
- Ensure that all children (especially those with very high needs) receive effective services, collaborate with each other to offer continuous high quality services from prenatal to third grade, engage families in decision-making, and inform state and local policy.

Community Collaborations
- Ensure that all children (especially those with very high needs) receive effective services, work across sectors to support continuous high quality services from prenatal to third grade, build capacity for collective impact, and lead local systems change.

STATE SUPPORTS
- Support and build capacity of collaborations to obtain and use data, develop the workforce, and increase family engagement; involve regional level partners in collective impact; facilitate the feedback loops between communities and state and state leaders to align systems.

State Leaders
- Develop an effective cross-sector state system that assures continuous high quality services from prenatal to third grade; align funding streams, data systems, communications, policies, and procedures; practice and support collective impact; and incorporate family and provider feedback.

Illinois Vision:
Every child enters kindergarten safe, healthy, eager to learn, and ready to succeed.
Illinois Community Collaborations include:

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>State Agency</th>
<th>Type of Collaboration</th>
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<tr>
<td>State</td>
<td>DHS</td>
<td>All Our Kids (AOK) Networks</td>
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<td>DOE, State</td>
<td>DHS</td>
<td>Local Interagency Councils (LICs)</td>
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<td>HRSA</td>
<td>DHS</td>
<td>MIECHV Collaborations</td>
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<td>DOE</td>
<td>DHS</td>
<td>RTT-ELC Innovation Zones</td>
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<tr>
<td>ACF</td>
<td>DHS*</td>
<td>Early Head Start-Child Care Partnerships</td>
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<tr>
<td>HRSA</td>
<td>None</td>
<td>Healthy Start Community Action Networks (CANs)</td>
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<tr>
<td>Private and/or local funders</td>
<td>None</td>
<td>Various organically-grown collaborations (e.g. Collaboration for Early Childhood, SPARK)</td>
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Theory of Change

State level supports
• Capacity-building on collaboration skills and systems strategies
• Data
• Family engagement
• Policy feedback loop
• Messaging
• Neutral convener

Increased capacity of community collaborations
• **How we work together**
  • Examples:
    • Inclusion of diverse sectors/providers
    • Use of data to inform priorities and strategies
    • Development of shared agenda
    • Adoption of action learning cycles

Increased systemic strategies
• **What we do together**
  • Examples:
    • Alignment of birth to third grade programs
    • Continuous stream/pipeline of comprehensive services
    • Coordinated intake or referral systems
    • Targeted outreach to and enrollment of priority populations

Improved outcomes
• **Intermediate:**
  Improved local systems
• **Long-Term:**
  Improved child and family outcomes
Example: All Our Kids (AOK) Early Childhood Networks

State level supports
- Professional development, coaching and TA on Network governance, strategic planning, collaboration and leadership development
- Facilitated peer learning networks
- Monthly coordinator teleconferences and three in-person statewide meetings
- ABLe Change training and coaching

Increased capacity of community collaborations
- Four core areas:
  - Shared Agenda
  - Collaborative Leadership and Engagement
  - Continual Learning and Adaptive Action
  - Network Infrastructure

Increased systemic strategies
- Early Identification
- Public Information and Education
- Information and Referral
- Coordination of Care
- Service Needs and Utilization
- Workforce Training and Development
- State and Local Policy

Improved outcomes
- System Impacts:
  - Access
  - Quality
  - Equity
  - Capacity
  - Satisfaction
- Child / Family:
  - Babies are born healthy
  - Children maintain physical and emotional health and well being
  - Children enter school ready to learn
  - Parent are leaders in their families and communities
Example: Rockford MIECHV collaboration

**State level supports**
- Facilitated peer learning networks
- Data system for home visiting and coordinated intake
- Monthly Continuous Quality Improvement (CQI) calls
- Capacity-building and technical assistance, including Infant Mental Health Consultation

**Increased capacity of community collaborations**
- Increased partnerships with local health care providers and other service providers

**Increased systemic strategies**
- Coordinated intake and shared intake forms for 0-3 programs
- “Pipeline” from WIC to 0-3 home visiting

**IMPROVED OUTCOMES**
- 100% MIECHV mothers attended recommended # prenatal visits
- 100% MIECHV children received recommended # well-child visits
- 100% MIECHV families were screened for needed services
- 70% of MIECHV families increased their household income
- 100% MIECHV children received recommended # well-child visits
- 100% MIECHV families were screened for needed services
- 70% of MIECHV families increased their household income
Example: Innovation Zones

**State level supports**
- Set clear expectations, vision
- Train on models and methods
- Provide data analysis and guidance
- Facilitate peer learning networks
- Coach leaders as they implement
- Sponsor professional development
- Elevate system obstacles to decision makers

**Increased capacity of community collaborations**
- More diverse perspectives are engaged
- More systemic thinking and design thinking is used
- Changes are implemented using small wins
- Quick adaptations are made through continuous learning cycles and feedback loops

**Increased systemic strategies**
- Child level: Increased enrollment of children from priority populations using “pipeline” approaches
- Program level: Improved program quality (ExceleRate) using communities of practice and mentors
- Community level: Collaborations routinely use active learning cycles to solve emerging or new problems using system change

**IMPROVED OUTCOMES**
- Full enrollment in school-based early learning programs in two Chicago community areas
- 500+ children screened in one downstate community
- 1,300+ children entered in outreach database
- Parents engaged across continuum
Questions?

Visit www.PartnerPlanAct.org

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