



AGENDA ITEM: 14
DATE OF MEETING: April 24, 2014
ACTION: _____
INFORMATION: _____X_____

FIRST 5 COUNTY COMMISSION INVESTMENTS IN EARLY INTERVENTION SYSTEMS

SUMMARY

First 5 county commissions will present on their investments in early intervention systems. At the county level, there is a focus on building integrated systems of screening, assessment, referral, and treatment, with screening in pediatric settings playing a central role. First 5 county commissions are playing a key role in building and maintaining the "hub" or central point of contact for all parts of the system. Many of the local efforts align with state and federal initiatives including the Maternal, Infant, and Early Childhood Home Visiting Program (MIECHV) authorized by the Affordable Care Act and the Race to the Top-Early Learning Challenge (RTT-ELC) grant.

BACKGROUND

Overview of Early Intervention

Early childhood is a time of immense physical, cognitive, and social-emotional growth, when children are rapidly acquiring new skills and are reaching important developmental milestones. Even among typically developing children, there is often wide variation in the timing of when these early milestones are achieved. For as many as 12 to 17 percent of all children, the normal course of development is affected by some form of delay or disability that is significant enough to impact how they learn and grow. The optimal time to detect and address these concerns is early in life when children's brains are still forming and are most receptive to intervention.

Early detection and follow-up access to effective intervention and treatment services can vastly improve developmental outcomes for children with special needs and prevent further progression of delays. Early intervention also can reduce the need for more intensive or longer-term treatment, resulting in cost-savings to individual families and to the public health and educational systems serving them.

While the benefits of routine screening and early intervention are widely known, the service environments which address children's early developmental needs are often fragmented, under-resourced, and lacking in capacity to routinely monitor children's development, detect issues or concerns early on, or successfully link families with appropriate, evidence-based care. As a consequence, the majority of underlying delays

or disabilities in children remain undiagnosed until children reach school age, when eligibility for services is more restricted and the optimal window for intervention has begun to close.

A strategic priority embraced by First 5 county commissions has been to build networks of services and support which promote children's healthy development and more effectively meet the needs of children with special behavioral or developmental needs. As defined in First 5 California's Annual Report Appendices, children with special needs are those "identified with disabilities, health, or mental health conditions requiring early intervention, special education services, or other specialized services and supports" or those "without identified conditions, but requiring specialized services, supports, or monitoring."

History of Investments and Partnerships

Critical to California's investments in early childhood was the 1998 approval of Proposition 10 by voters, which provided ongoing funds for early childhood efforts for children, ages prenatal through five, through the First 5 California Children and Families Commission (First 5 California) and the 58 county commissions.

Investments are focused primarily on efforts to ensure young children enter school healthy and ready to learn. Since its creation, First 5 California and most First 5 county commissions have championed and invested in early identification and linkages to developmental and behavioral supports and services for children and their families. In 2005, First 5 California and First 5 county commissions launched the Special Needs Project (SNP) in 10 counties to screen young children for developmental concerns and improve service utilization for children with disabilities and other special needs.

Efforts Today

First 5 California's current efforts include the development and implementation of a comprehensive system of resources designed to benefit children, teachers, and parents through its Child, Parent, and Teacher Signature programs. These research-based programs integrate social-emotional development, high quality early education, and parent outreach, information, and engagement to ensure children's success in school.

In addition, First 5 California is a co-lead agency, along with the California Department of Education, of California's RTT-ELC grant's State Implementation Team. The RTT-ELC Quality Rating and Improvement System (QRIS) includes both developmental and health screening as a requirement. RTT-ELC also is leveraging various screening efforts across the state, including *Help Me Grow*[™] (HMG) (see attachment) and the California Home

Visiting Program, in order to increase the number of children receiving screening and follow-up. RTT-ELC funds are providing training for RTT-ELC Regional Leadership Consortia (Consortia) members in all 16 counties, mainly led by First 5 county commissions, to attend train-the-trainer sessions on the Ages and Stages Questionnaire (ASQ) and ASQ-Social Emotional screening tools. This training not only will increase access to screening, but includes a component on providing follow-up and appropriate referrals specific to the resources in each participating county.

Last year, over 90 percent of county commissions invested nearly \$34 million in local Proposition 10 resources to screen, assess, refer, and provide intervention services for young children. Statewide, 50 county commissions are integrating developmental screening into their early education, family support, and child health programs. Funded partners include school districts and early childhood providers, county public health and social service agencies, family resource centers, and regional centers. As tobacco tax resources decline, counties are looking to create integrated systems of screening, assessment, referral, and treatment, with screening in pediatric settings playing a central role. However, First 5 county commissions will continue to play a key role in building and maintaining the "hub" or central point of contact for all parts of the system.

Help Me Grow Initiative

Initiated as a pilot on 1998, HMG is a national effort connecting children at risk for developmental and behavioral issues by providing a comprehensive, statewide, coordinated system for early identification and referral to services. Since 2011, efforts have been underway to replicate HMG across California counties and to establish HMG as a critical component of California's efforts to ensure children's optimal development is supported by early identification and linkage to services and supports.

In 2005, with the launch of *HMG* Orange County, California became the second state (after Connecticut) to implement *HMG*. Through the support of the Kellogg Foundation, California became a *HMG* replication state in 2011 and developed a consortium comprised of Orange, Alameda, and Fresno counties, in collaboration with California Project LAUNCH, to implement *HMG* across the state. These three counties are currently implementing activities to incorporate the four core components of *HMG* within their counties. In December 2012, *HMG* California extended an invitation to counties and/or the RTT-ELC Consortia interested in *HMG* to participate in a learning community.

The four core components of a comprehensive *HMG* system are:

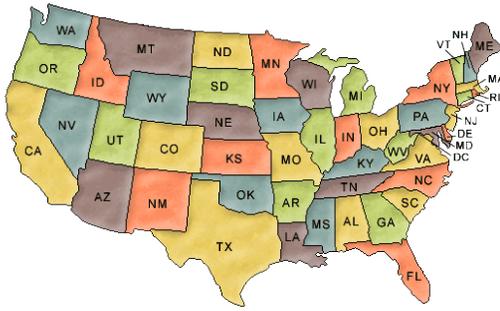
- 1) ***Centralized telephone access point*** for connecting children and their

families to services and care coordination.

- 2) **Community outreach** to promote the use of *HMG* and provide networking opportunities among families and service providers.
- 3) **Child health care provider outreach** to support early detection and intervention.
- 4) **Data collection and analysis** to understand all aspects of the *HMG* system, including identification of gaps and barriers.

ATTACHMENT

- A. Help Me Grow Affiliate States



Help Me Grow Affiliate States

California



Our System

In 2005, with the launch of *Help Me Grow* Orange County, California became the second state beyond Connecticut to implement *Help Me Grow*. Through the support of the Kellogg Foundation, California became a *Help Me Grow* replication state in 2011 and developed a consortium comprised of Orange, Alameda and Fresno counties, in collaboration with California Project LAUNCH, to implement *HMG* across the state. The vision of *HMG* CA is that **all children in California achieve their optimal development and are supported by a system of developmental and behavioral resources in their communities.**

In December 2012, *Help Me Grow* California created a Learning Community of counties and/or regional consortia interested in *HMG* to engage and cultivate counties and regions interested in becoming *HMG* affiliates. To date, eighteen counties participate and are represented by stakeholder groups such as early childhood, mental health, special education, early intervention and health. *HMG* California is in the process of expanding the Learning Community.

In 2013, *HMG* California developed an affiliation application process for Learning Community counties interested in adopting the *Help Me Grow* model. To date, four new counties have submitted applications and have been approved as affiliates: Ventura, Solano, San Francisco and San Joaquin. Additional counties are in the process of preparing applications for submissions.

In 2013, as a result of participating in the *Help Me Grow* National Replication Project, *HMG* California embarked on the development of a business plan to support expansion of *HMG* across the state and establish a state-level infrastructure to support *HMG* affiliates. As a result, *HMG* CA will focus on the following four key roles to achieve its mission **to grow and sustain the *Help Me Grow* model in California by cultivating and supporting *HMG* county affiliates, demonstrating the impact of the *Help Me Grow* model and serving as a statewide voice for systems and services that promote early childhood development:**

1. Provide Support to *HMG* County Affiliates
2. Promote Sustainability and Growth of *HMG* Model
3. Support the Collection and Analysis of Data Statewide
4. Conduct Advocacy & Policy Activities

Through these activities, *HMG*-CA will serve as a statewide organizing entity that guides the development of local affiliates across the state; ensures effective implementation and fidelity to the *HMG* model; provides leadership on state

Affiliate since 2011

Program Manager

Patsy Hampton,
Project Director
WestEd Center for
Prevention and Early Intervention
phampton@wested.org
916-799-3211
916-492-4002 (fax)

Organization

California Project LAUNCH
(staffed by WestEd CPEI)
in collaboration with
First 5 organizations in
Alameda, Orange & Fresno
Counties

Organizing Entity

California Statewide
Screening Collaborative

Website

In development

policy issues; and ensures that *HMG* is embedded in efforts to strengthen early childhood systems across the State. *HMG* California is currently seeking funding to implement the activities outlined in the Business Plan.

How Our State's Strengths Helped Build *Help Me Grow* California

Critical to California's investments in early childhood was the 1998 approval of Proposition 10 by voters, which provided ongoing funds for early childhood efforts for children, ages birth to five, through the First 5 California Commission (First 5 CA) and 58 county commissions. Since its creation, First 5 CA and most First 5 County Commissions have championed and invested in early identification and linkages to developmental and behavioral supports and services for children and their families. First 5 is a key partner in each of the Learning Community counties. Each of our eight local *HMG* affiliates benefit from direct involvement and/or financial support from their First 5 County Commissions.

The *Help Me Grow* system has been gaining recognition across California as a successful system for early identification, referral and care coordination of children at risk for developmental and behavioral problems. As a result, *HMG* CA has been involved in the planning, named as a promising practice or has been incorporated into program planning for the following state initiatives:

- **The California Home Visiting Program (CHVP)** – *HMG* CA has been identified as a key partner in the planning and implementation of CHVP, and will be included in its service and referral network at the local level.
- **Race to the Top – Early Learning Challenge** – California's work in this area focuses on improving early learning and development through addressing the health, behavioral and developmental needs of children with high needs to improve school readiness. *HMG* CA was cited as a promising practice in the State's application.
- **California's Early Childhood Comprehensive Systems: Building Health Through Integration (ECCS) federal grant program** - ECCS will build on the existing cross agency system-change efforts led by the California Home Visiting Program, First 5 Association, California Project LAUNCH, *Help Me Grow*, and Strengthening Families. ECCS will support efforts of select *HMG* counties to engage in cross-sector early identification and follow-up activities relating to mitigating toxic stress and trauma in infancy and early childhood.
- **California Statewide Screening Collaborative (SSC)** – *HMG* CA serves as a key partner on this collaborative designed to enhance state capacity to promote and deliver effective and well-coordinated health, developmental and early mental health screenings throughout California.
- **Project LAUNCH** – A federally funded grant program administered by the Department of Public Health/Maternal Child and Adolescent Health that aims to improve the systems that serve young children and address their physical, emotional, social, cognitive and behavioral growth. *HMG* CA serves as a strategy to promote system coordination, early identification and linkage to services through care coordination.
- **California's 2013 Comprehensive Early Learning Plan (CCELP)** – Developed by the Child Development Division, California Department of Education (CDE), this plan outlines the critical components of an early learning system for children, birth to five, that ensures children have the knowledge and skills to achieve long-term success and points to *HMG* as essential elements for any successful system.

How Our State's Strengths Are Incorporated into Our Model

Orange County, as an early adopter, serves as a mentor for our local implementation. The counties share their skills and experiences to support one another in their adoption of the *HMG* model. Our affiliate counties have built on their existing collaborations, strategies and programs to solidify the core components of *HMG* and our Learning Community has served as a forum for counties to learn from each other. State and local partnerships have been explored to build statewide spread. Among the 18 counties that comprise our affiliates and Learning Community, 8 are also implementing MIECHV, 10 are part of the RTT-ELC, and 5 are implementing both MIECHV and RTT-ELC.

Lessons Learned: Successes

- Our Learning Community has been a successful approach for counties to deepen their understanding of the *Help Me Grow* approach through site visits, one-on-one conversations and groups discussions on each of the core components.
- As a way to acknowledge the need to collect common data, a Data Workgroup was developed to identify common data indicators for *HMG* California, based on the *HMG* National data indicators.
- Through our affiliate application process, counties are able to articulate plans to expand existing early identification, linkage and coordination systems through the adoption of the *HMG* model.

Lessons Learned: Challenges

- Funding for state-level coordination of the *HMG* effort is challenging and we continue to seek opportunities through new initiatives. The lack of a full-time coordinator has direct impact on our ability to fully support the Learning Community, new affiliate counties and the spread of the approach throughout the state.
- We lack statewide data that would support the case for a *Help Me Grow* system and/or inform how to strengthen efforts in our state.
- While *Help Me Grow* has been incorporated into plans for state-level initiatives, this integration has not necessarily trickled down to the county level and we continue to lack regular funding streams to support implementation of the system at a local level, beyond the First 5 funding stream
- There is a pervasive belief at state and local levels that *HMG* equals developmental screening. This is likely related to efforts across the state to promote and support developmental screening but changing the understanding of and discourse around *HMG* remains a challenge.