“OH GOLLY, I DON’T WANT TO GIVE UP…”

Putting The “Why” Into Early Childhood System Building

Laura Kender
Chief of Child and Family Services
My Health My Resources of Tarrant County
IDEA Fiscal Forum - May 9, 2023
“Oh golly, I don’t want to give up... I learn every time I see a new baby and every time I talk to a parent.”

- T. Berry Brazelton, MD (age 95)
Creating Opportunities

Opening Doors

**Who** is your Mentor?

**Who** do you Mentor?

**Why** are you Here?

**What** is your Why?

Simon Sinek

**What** is your Story?

“Data is a story without the tears.”
My Mentor: T. Berry Brazelton, MD

- Opened doors for parents and empowered them to be active participants in their child’s care
- Opened doors (windows) into infant attachment leading efforts that contributed to 3-month maternity leave
- Opened doors for families of children with disabilities offering support through Public Law 99-457
- Helped all of us to understand the plight of children living in poverty and systemic impact
“Oh golly, I don’t want to give up… I learn every time I see a new baby and every time I talk to a parent.”

- T. Berry Brazelton, MD (age 95)
Storytelling ~ The Beginning

ONCE
upon a time...

LUBBOCK STATE SCHOOL
Storytelling ~ The Middle

A Tale of Two Programs

Lubbock ISD
Every Child Every Day
Contract # 782

Tarrant
MHMRT
We Change Lives
Contract # 4,344
Data Without The Tears

What do parents tell us?

"N O T H I N G A B O U T U S
W I T H O U T U S"

International Disability Alliance

What have we learned?
What Parents Know

Quality of parenting has long-term impacts

Beginning at birth

57% of parents said this begins at 3 months or older

50% of parents said this begins at 6 months or older

Source:
Tuning In: Parents of Young Children Tell Us What They Think, Know and Need is a comprehensive research undertaking by ZERO TO THREE and the Bezos Family Foundation, 2015.
What Parents Know

The brain develops most rapidly during the first 3 years

over 34% of parents said this happens in the 3 to 5 year age range

Source: Tuning In: Parents of Young Children Tell Us What They Think, Know and Need is a comprehensive research undertaking by ZERO TO THREE and the Bezos Family Foundation, 2016
What Parents Know

Talking to children develops language skills

Starting at birth

34% of parents believe that benefits of talking begin at a year old or later

Source: Tuning In: Parents of Young Children Tell Us What They Think, Know and Need is a comprehensive research undertaking by ZERO TO THREE and the Bezos Family Foundation, 2016.
What Parents Know

Reading to children benefits language development from 6 months of age.

45% of parents say the benefits start at 2 years or older.

Source: Tuning In: Parents of Young Children Tell Us What They Think, Know and Need is a comprehensive research undertaking by ZERO TO THREE and the Bezos Family Foundation, 2016.
What Parents Know

Parents with greater knowledge of child development provide more stimulating and supportive home environments for their children.

Children of parents with greater knowledge of child development have...
- higher IQ test scores by age 3
- fewer behavioral problems by age 3

Source:
What Parents Know

Children develop the ability to share and take turns

**Between ages 3 and 4**

43% of parents think children can do this
**before age 2**

71% of parents believe children have this ability
**before age 3**

Source:
Tuning In: Parents of Young Children Tell Us What They Think, Know and Need is a comprehensive research undertaking by ZERO TO THREE and the Bezos Family Foundation, 2015.
What Parents Know

Children begin to develop the ability to control the urge to do something forbidden between ages 3 and 4.

- 36% of parents think that children younger than 2 can resist these impulses.
- 56% of parents said this happens before age 3.

Source: Tuning In: Parents of Young Children Tell Us What They Think, Know and Need is a comprehensive research undertaking by ZERO TO THREE and the Bezos Family Foundation, 2016.
What Parents Know

Children can feel sadness and fear beginning around **3-5 months of age**

42% of parents say **1 year or older**

59% believe this begins at **6 months or older**

Source: Tuning In: Parents of Young Children Tell Us What They Think, Know and Need is a comprehensive research undertaking by ZERO TO THREE and the Bezos Family Foundation, 2016.
Brain development can be affected by violence or shouting in the home from 6 months of age. 47% of parents said this happens at 1 year or older.
Parents in poverty face significant stress.

85% of parents above the poverty line provide responsive care compared to only 74% of low-income parents.

~9% of people below the poverty line experience serious psychological distress.

Only 1% of people at or above 400% of the poverty line suffered the same.

Poverty-related stress can affect the quality of parenting and home environments.

Source:
The Father Factor

Children without a father at home face serious risks

- 4 times greater risk of poverty
- 7 times greater risk of teen pregnancy
- 2 times greater risk of infant mortality
- 2 times as likely to drop out of high school

Source:
https://www.fatherhood.org
The Father Factor

Greater Father involvement improves children’s academic outcomes

Children with involved fathers are more motivated to try hard in school.

Children with involved fathers have more positive attitudes and participate in school more.

Father involvement improves children’s behavioral and emotional outcomes

Children with involved fathers have fewer conduct problems.

Children with involved fathers have less anxiety.

Sources:
The Father Factor

The number of children with a father in prison has grown by 79% since 1991.

Youths in father-absent households have significantly higher odds of incarceration.

Fathers are returning to their families without the skills they need to be involved, responsible, and committed fathers.

Source: https://www/jstellmon.com
The Father Factor

Depressed fathers are less likely to **read to their young children**

Depressed fathers are more likely to **spank their children**

Children with a depressed father have **lower vocabulary and other language scores**

Depressed fathers are less likely to **engage in responsive parenting behaviors**

Sources:
The Childcare Conundrum

Families rely on informal referrals for child care.

Almost half of those who use in-home care use a friend or neighbor.

Friends and neighbors are usually the source of referral for center-based care.

Working mothers struggle to afford the child care they need.

Average child care expenditures increased by 26 percent from 2005 to 2011.

Employed, poor mothers spent more than one-third of their income on child care.

Source:
https://scholars.unh.edu/cgi/viewcontent.cgi?article=1194&context=carsey
The Childcare Conundrum

Low income parents want to work, but lack child care

15 to 40% of parents formerly on welfare have left a job because of child care problems

Most working mothers have irregular schedules or non-standard hours

39% work different hours from one day to another

40% work different hours from one week to another

56% work evenings, nights, or weekends

Source:
The Pediatric Setting

Many doctors use scientifically questionable methods to identify developmental delays.

38% say they can identify delays without using a formal screening instrument.

Only about 50% say they use a validated screening instrument as part of their routine practice with children younger than age 3.

Many doctors do not feel competent to treat or refer for developmental delays.

Only 60% feel confident they can manage developmental delays.

Only 59% believe there are resources in the community to help.

Source:
The Pediatric Setting

Most children do not receive necessary developmental screening and surveillance.

Only 50% of parents say that they have completed a screening for concerns and milestones.

Only 37% of parents say a health care professional asked them about their concerns about their child’s development.

The children most at-risk for delays are least likely to receive needed screening.

Only 16% of parents with a high school education received a screening compared to 38% with a college degree.

Only 23% of parents in poverty received screening compared to 37% of wealthier parents.

What did we learn?

- Knowledge of child development and parenting
- Social connections ➔ relationships
- Parental resilience ➔ bouncing back
- Support ➔ concrete support in times of need (childcare; healthcare)
- Communication ➔ social and emotional competence of children

Be Strong Families / Strengthening Families
Applying Science to Policy and Practice

Support Responsive Relationships

Reduce Sources of Stress

Strengthen Core Skills

Children
Healthy Development & Educational Achievement

Adults
Responsive Caregiving & Economic Stability

www.developingchild.harvard.edu
Protective factors (such as having consistent, caring relationships) and access to coordinated health care can provide a buffer to offset the negative consequences of toxic stress, leading children to reach "healthy" trajectories.

Service Implications - Child Development Concepts

• Treatment programs and services must be comprehensive, multidisciplinary, and address the multiple factors that facilitate and hinder children’s optimal development.
  ▪ Benefits of strengthening protective factors

• Services should address the needs of all children (e.g., entire population), recognizing that those in greatest need will likely derive the greatest benefits
  ▪ Expand target to vulnerable children & families
  ▪ Perils of exclusive focus on children with complex medical conditions
Shared Assumptions

- Children with developmental / behavioral problems are **eluding early detection**
- Many **initiatives exist** to provide services to young children and their families
- A **gap exists** between child health and child development / early childhood education programs
- Children and their families would benefit from a **coordinated, region-wide system** of early detection, intervention for children at developmental risk

HELPMEGROWNATIONAL.ORG
An Opportunity to Maximize Young Children’s Potential

The early years present incredible opportunity to build a strong foundation as the brain rapidly develops during the first 5 years of life. All children benefit from an organized system of community resources to help them thrive, such as:

- healthcare,
- quality early learning experiences,
- healthy nutrition, and
- parent support.

However, when the system is not well organized, it can be challenging for families to access the resources their children need, which can have long-lasting consequences on health and well-being.

HELPMEGROWNATIONAL.ORG
What would an Early Childhood System look like?

How does IDEA Part C lead the way?

**ECI of North Central Texas**

**Community of Practice**

**Mission & Key Principles**

**For Providing Early Intervention Services in Natural Environments**

**MISSION**

Part C early intervention builds upon and provides supports and resources to assist family members and caregivers to enhance children’s learning and development through everyday learning opportunities.

**KEY PRINCIPLES**

1. Infants and toddlers learn best through everyday experiences and interactions with familiar people in familiar contexts.

2. All families, with the necessary supports and resources, can enhance their children’s learning and development.

3. The primary role of a service provider in early intervention is to work with and support family members and caregivers in children’s lives.

4. The early intervention process, from initial contacts through transition, must be dynamic and individualized to reflect the child’s and family member’s preferences, learning styles, and cultural beliefs.

5. IFSP outcomes must be functional and based on children’s and families’ needs and family-identified priorities.

6. The family’s priorities, needs, and interests are addressed most appropriately by a primary provider who represents and receives team and community support.

7. Interventions with young children and family members must be based on explicit principles, validated practices, best available research, and relevant laws and regulations.

https://www.dec-sped.org/communities-of-practice
“The most effective long-term strategy appears to be the development of a comprehensive, coordinated, community-wide approach focused on preventing low- and medium-risk families from becoming high-risk, as well as providing intensive services to those who already have reached a high-risk status.”

“What if our goal for child health services is not ‘merely’ to treat or even prevent childhood diseases and disorders, but is also to promote children’s optimal healthy development?”
Let’s Take A Journey…

- **Early Learning Alliance (ELA)** leadership focuses on infants & toddlers
- **ECI CAC** renamed: Early Childhood Wellness Council
- **ELA** launched developmental screening workgroup
- **MHMR** initiates first HealthySteps evidence-based program in Texas
- **Tarrant County** selected as a national model for early education
- The Infant & Toddler Developmental Screening Initiative (ITDSI) launched Family Connects in Tarrant County
- **City of Fort Worth** selected for NCIT grant

**2015**
- **PROJECT LAUNCH** 3 sites in Texas
- **Texas Department of Family & Protective Services grant**

**2016**
- **Healthy Outcomes through H.O.P.E.S.** Prevention & Early Support
- **NACo**

**2017**
- **Tarrant County** selected for county NCIT grant, expanding ELA’s work group to include new community partner

**2018**
- **Help Me Grow** affiliate in Texas

**2019**
- **NLC (National League of Cities)**


Texas Department of State Health Services became an affiliate of Help Me Grow Texas.

Help Me Grow Regional Family Advisory Council was established in 2021.

MHMR’s Early Childhood Services and Behavioral Health Youth Services merged to form the Child & Family Services division (serving prenatal up to age 18).

Help Me Thrive was founded with Mental Health Connection of Tarrant County as the organizing entity in 2022.

MHMR awarded a 4-year grant to implement Pediatric Mental Health Care Access program.

MHMR awarded a 4-year grant to expand Help Me Grow / Help Me Thrive. MHMR was one of 6 awardees in the U.S.
Early Childhood Intervention

ECI is a statewide program for families with children birth through 3, with developmental delays, disabilities or medical diagnoses that may affect development.

- Behavioral Intervention
- Speech & Language Therapy
- Physical & Occupation Therapy
- Family Coaching / Education
- Case Management
- Social Work
- Specialized Skills Training
- Nutrition & Feeding
- Assistive Technology

- Counseling
- Health Services
- Audiology / Hearing
- Nursing
- Translation / Interpretation
- Transition to services at age 3

Funding:
- Texas Health & Human Services (HHS) contract - State General Revenue - Federal IDEA Part C - Temporary Assistance for Needy Families (TANF)
- Program’s locally collected funds (Medicaid, private insurance & Family Cost Share)
Project LAUNCH (Linking Actions for Unmet Needs in Children’s Healthcare)

- Birth up to 8 years
- Developmental Screenings
- Family Strengthening
- Social-Emotional
- Mental Health Consultations
- Workforce Development

Funding:
- Texas Department of State Health Services grant - Substance Abuse and Mental Health Services Administration (SAMHSA) and Texas Institute for Excellence in Mental Health (TIEMH)
Early Childhood Wellness Council (ECWC)
- The ECWC links to existing coalitions supporting HOPES & LAUNCH
- Members of partner agencies & supporting coalitions are added to the Early Childhood Services Community Advisory Committee (ECS CAC)
- Current membership is maintained, including various representatives
- The ECWC subcommittee meets more frequently to provide guidance and direction to HOPES & LAUNCH

Awareness & Prevention
- Birth up to age 6
- Central Referral Line
- HOPES Website
- SEEK (Safe Environment for Every Kid)
- Ages & Stages Questionnaires (ASQ)
- Professional Development & Endorsement
- Primary Messaging
- Support & Training

Direct Support & Intervention
**Team 1**
- Family has 2 or more risk factors; child is 0-6
- Needs assistance with child development skills

**Team 2**
- Family has 2 or more risk factors; child is 0-6
- Expressing stress due to child’s illness or delay, does not qualify for ECI

**Team 3**
- Family has 2 or more risk factors; child is 0-6
- Resides in specified geographic area; living in homelessness; or member of refugee community

Funding:
- Texas Department of Family and Protective Services grant - State General Revenue
Using Parent Cafés to Empower Families

• Interact & share challenges with other parents
• Get ideas & learn new resources and skills
• Build protective factors
• Develop friendships & support from other parents
• Realize the essential role they play as a parent
• Time for reflection
• Opportunity for a little break

Funding:

- Texas Department of State Health Services - Linking Actions for Unmet Needs in Children’s Health (LAUNCH) - Substance Abuse & Mental Health Services Administration (SAMHSA)
- Texas Department of Family & Protective Services - State General Revenue
Infant & Early Childhood Mental Health Consultation

Accessible Mental Health
Brings Mental Health supports into natural settings where young children are

Capacity Building
Builds the capacity of child and family providers to create nurturing environments where you children thrive

Child Outcomes
Young children succeed in learning and relationships

Funding:
- Texas Department of State Health Services - Linking Actions for Unmet Needs in Children’s Health (LAUNCH) - Substance Abuse & Mental Health Services Administration (SAMHSA)
- Texas Health & Human Services - SAMHSA - Center for Mental Health Services
- Texas Department of Family & Protective Services - Healthy Outcomes through Prevention & Early Support (HOPES)
- Local Funds and Foundations
HealthySteps is an evidence-based, interdisciplinary pediatric primary care program to promote positive parenting and healthy development for babies & toddlers.

Funding:
- Texas Department of State Health Services
- Texas Department of Family & Protective Services
- Pritzker Children’s Foundation
- Local Funds and Foundations
- County Funds
Family Connects

Helping all families regardless of income or background

Visits are scheduled around 3 weeks after a baby’s birth

NO COST TO RECIPIENTS

Eligible recipients will not be charged

REGISTERED NURSES

All visits are made by highly trained nurses

ASSESS & CONNECT

Assess mother and baby’s physical health status & social determinants of health; Connect to applicable community resources

Funding:
- Texas Department of State Health Services (DSHS)
- Texas Department of Family & Protective Services (DFPS)
- Pritzker Children’s Foundation
- Local Funds and Foundations
- County Funds
Still... Something was missing

Typical Referrals
- Trauma
- Attention-Deficit/Hyperactivity Disorder (ADHD)
- Challenging behaviors
- Developmental delays past age 3
- Autism past age 3

Intense Intervention ▶ Team 2 & 3

Very Little ▶ Team 1
- Universal
- Prevention
All Texas children are born healthy and have equitable access to health and early learning supports in their homes and their communities.

Early childhood systems are aligned, coordinated, and well-funded to ensure young children and their families are healthy and thriving.

Funding:
- Pritzker Children’s Foundation
- Local Funds and Foundations
Committed to **advancing policies and programs** that ensure every child from birth to age three has the support they need for a strong start in life.

With **support** from national organizations, states and communities are creating and strengthening effective **policies and programs** - and sharing what works - to support the healthy development of **infants and toddlers**.

**Funding:**
- Pritzker Children’s Initiative
Why Screen?

- Developmental Monitoring
- Developmental Surveillance
- Developmental Screening
- Early Identification
- Celebrate Milestones
- Engage Families
- Improve Outcomes
- Adverse Childhood Experiences (ACEs) often manifest with developmental concerns
- Intervention services to address ACEs
Check-ups & Developmental Screenings for Young Texas

Managed Care Region: Tarrant
Children Enrolled in STAR Medicaid

52% Children under age 3 who were screened for developmental, social, and behavioral delays in the 12 months before their 1st, 2nd, or 3rd birthday
48% = statewide average 2017

96% Children ages 12-24 months who had a primary care visit in the last year
96% = statewide average 2017

96% Children ages 25 months-6 years who had a primary care visit in the last year
94% = statewide average 2017
CDC’s “Learn the Signs. Act Early.” Program

- Encourages parents & providers to learn the signs of healthy development
- Monitors every child’s early development
- Take actions when there is a concern

Free materials for families & providers
Ambassadors partner with:

- Childcare centers
- Home visiting programs
- Early Childhood Intervention (ECI) programs
- Title V - Maternal and Child Health
- Help Me Grow (HMG)
- Early Head Start / Head Start
- School districts
- Medical / Pediatric offices or hospitals
- Women, Infants, and Children (WIC) clinics

Funding:
- Association of University Centers on Disabilities (AUCD)
- Centers for Disease Control and Prevention (CDC)
- Texas Department of State Health Services - Title V Maternal and Child Health
- Texas Department of Family & Protective Services
- Texas Health & Human Services - Early Childhood Intervention (ECI)
- Pritzker Children’s Foundation
- County Funds
Deputy Ambassadors

- 12 different agencies developed the Deputy Ambassador program to expand the reach of LTSAE across Texas
- Recruited and trained Deputy Ambassadors from both state organizations and local direct services programs
- Technical assistance was provided to develop and implement their workplans
- Deputy Ambassadors have successfully:
  - Shared materials at community events, resource fairs, conferences, and coalitions
  - Partnered with other agencies to distribute materials and post to their websites
  - Incorporated materials within family education activities
  - The Texas Department of Family and Protective Services - Prevention and Early Intervention (DFPS PEI) is incorporating materials within their grantees’ projects and has offered to fund future work
  - HMG North Texas integrated materials within all Early Childhood Intervention (ECI) teams across North Texas

Funding:
- Texas Department of State Health Services - Title V Maternal and Child Health
- Pritzker Children’s Foundation
- County Funds
Continuous System Improvement

Organizing Entity

CENTRALIZED ACCESS POINT

FAMILY & COMMUNITY OUTREACH

DATA COLLECTION & ANALYSIS

PROVIDER SUPPORT & TRAINING

Scale and Spread

The System Model
Building a **Help Me Grow** System

- Building the Infrastructure
- Building the System
- Sustaining the System
Building a ‘Help Me Grow’ System

Building the Infrastructure

- Select an Organizing Entity / Structural Requirement
- Designate a Program Manager
- Identify & Recruit Leadership Team Members (ongoing)
- Create a Leadership Team
- Coordinate a Help Me Grow National Site Visit & Host a Community Meeting
  Depending on your state's needs, this step may take place earlier in the process.

Building the System

Develop & Implement the Core Components

- Centralized Telephone Access
- Child Health Provider Outreach
- Community & Family Outreach
- Data Collection & Analysis

Sustaining the System

Establish Sustainable Funding (ongoing)
  This work may begin earlier in the process.

Develop & Implement a Plan for Statewide Expansion / Structural Requirement
  It is advisable to start developing a vision for statewide expansion early in the process.

Develop Continuous Quality Improvement / Structural Requirement

HELPMEGROWNATIONAL.ORG
State / Regional Leadership Structure

Help Me Grow North Texas Leadership Team

Help Me Grow North Texas Regional / State Coordinator

Help Me Grow Regional / State Community Liaison

Help Me Grow National

Texas Implementation Sites

Implementation Sites

Help Me Grow National

Department of State Health Services

Department of Family & Protective Services (DFPS) Prevention & Early Intervention (PEI) HOPES

MHMR Tarrant County

Early Childhood Wellness Council

Tarrant Co. Public Health

Joint Committees

MHMR Tarrant County

Early Learning Alliance

Early Childhood Wellness Council

Tarrant Co. Public Health

United Way Dallas County

HOPES Advisory Committee

TexProtects

Coalition

Joint Committees

FINDconnect
Centralized Access
Outreach
Evaluation
Navigators are experienced child development and community support specialists

For families with children up to age 6
Summary and Mission Statement: Help Me Grow North Texas (HMGNTX) is a support network of community resources for pregnant individuals and families with children ages 0 to 6. To support optimal child development, HMGNTX links families to child development information and community programs that meet the presented needs of the family as a whole. HMGNTX promotes a healthier and more prosperous community by providing families with equitable access to the resources they need when they need them.

Inputs
- Early childhood collaborative network and partnerships via the Early Learning Alliance and the Early Childhood Wellness Council of My Health My Resources of Tarrant County (MHMR)
- An evidence-based national model that requires a centralized access point, family engagement, provider and physician outreach and training, and data collection

Organizing Entity: MHMR
Funding (Pritzker Children’s Initiative, Tarrant County Title V, Medicaid, state, federal, and local grants)
Technical Assistance and resources from the HMG National Network
HMG Texas statewide coordination
Navigation through technological solutions: NTX Kids, HMGNTX, EINDConnect, AGQ, Enterprise, HMGNTX
Cross-sector collaborative sub-committees of Help Me Grow champions

Activities
- Centralized Access & Navigation / Provider Connections (CAP)
  - Continuous evaluation and customization of EINDconnect
  - Build Knowledge Base through API connections, providers, data agreements
  - Expand community navigation system and community-wide
- Marketing & Community Outreach / Scale & Spread
  - Develop and implement strategic outreach plan for targeted audiences
  - Incorporate plans for scale & spread strategy
- Family Engagement
  - Embrace parent leaders in core development and implementation of HMGNTX
  - Build capacity for increasing protective factors through purposeful family events
  - Partner with organizations to gather input from parents to drive outcomes
- Provider Support & Training
  - Identify and implement strategies for cross-sector provider support
  - Engage providers via self-identified levels of involvement with HMGNTX
  - Provide training, coaching, membership
- Data Collection & Analysis
  - Identify and create data collection strategies for evaluating the efficacy of HMGNTX and its strategies
  - Utilize RBA data
  - Create and publish evaluation results, utilize data to identify gaps, modify, and inform

Outputs
- # of views and engagements for all outlets (social media, website, ads)
- # of unique interactions with HMGNTX CAP
- # of children developmentally screened
- # of referrals to HMGNTX from physicians, child care providers, social services agencies, etc.

Outcomes
- Increase families’ knowledge of developmental milestones and the importance of early identification
- Increase families’ awareness of HMGNTX
- Decrease the average age of identification of developmental delays and referrals
- Address areas of service gaps and barriers decrease barriers for families to access services in NTX
- Increase in the number of children who are developmentally on track
- Increase awareness of, access to, and utilization of community programs, resources, and training events
- Increased developmental promotion among trainees
- Increase use of HMGNTX’s offerings by providers (Levels of Partnership)
- Increase communication for providers across sectors to better facilitate service linkages for families
- Help Me Grow framework is scaled and spread across the state
- Increase parent leader presence in the design and decision-making of the community system

Impact
- No matter where families are seeking help, they can easily get what they need
- Protective factors are maximized; risk factors are minimized
- Social Determinants of Health are improved
- Young children grow up happy, healthy, and ready to learn
- The community-at-large supports child and family wellbeing, benefitting all of North Texas
- Early childhood providers promote and nurture children’s optimal development through high quality care
- Stakeholders work collaboratively across sectors to better serve families and young children
- Young children across Texas have increased access to supports and services that nurture their development
- Parent voices are elevated and integrated in the community system

Racial Equity: Across all of our efforts we bring our work to focus through the lens of racial equity and targeted interventions—addressing social, environmental, behavioral, and environmental factors as we advance universal approaches that target those most vulnerable. (Dr. Dorhout, 2019: Help Me Grow National)
5 Subcommittees:

- Centralized Access Point
- Marketing & Outreach
- Family Engagement
- Provider Support & Training
- Data Collection & Analysis

Cross-sector co-chairs from healthcare, childcare, and child-serving providers

Leadership meets monthly; Larger stakeholder group meets quarterly
Centralized Access Point

• 18 North Texas counties
• MHMR Tarrant, United Way of Metropolitan Dallas, and Child Care Group
• 844-NTX-KIDS
• Launched March 2020
• 2-1-1 & community connections
• 21 Family Navigators (experienced child development and community support specialists):
  - Conduct ASQ-3 and ASQ:SE
  - Answer pregnancy, parenting & child development questions
  - Connect families to community resources & supports
  - Make community referrals
  - Initiate ECI referrals (pilot)
Centralized Access Point (continued)

Data Points (April 2020 - February 2023)

- 450 average calls received per month
- 22,000+ referrals made
- 11,000+ family enrollments
- 1,200 average open cases per month for follow-ups made at 2, 4, and 8 months
- 81% of calls complete both ASQ-3 & ASQ:SE
Family & Community Outreach

Family Engagement Subcommittee

• Added 7 Family Partners for voice & leadership
• Pritzker grant to fund new strategies
• Subcontract with National Center for Family Learning for compensation, training, technical assistance, translation & interpretation
• Developing a regional Family Advisory Council
• Coordinating with other state and local family-run organizations

Promote on-going developmental activities and developmental monitoring - celebrate milestones and engage families through community outreach
Provider Support & Training

- HealthySteps Specialists working in pediatric & family practice clinics
- Family Connects Nurses operating in 6 hospitals
- ASQ workgroup expanding regional developmental monitoring & screenings
- “Learn The Signs. Act Early.” print materials distributed to clinics, childcares, and cross-sector providers
- “Mom to Mom” support group for post-partum depression
- Physician Panel: OB/GYN, developmental pediatrics, child/adolescent psychiatrist and expanding to include nurses and other medical providers
- Early Care and Education Committee: incorporates monitoring & screening into quality expectations in partnership with the Early Learning Alliance

Promote on-going developmental surveillance, assess determinants of health, and parental depression - support families prenatal and postpartum
Provider Support & Training (continued)

- Infant & Early Childhood Mental Health Consultation: supporting childcare and home-visiting providers
- “Act Early: Supporting Families through Developmental Screening and Referral Processes”: a learning series in partnership between Help Me Grow North Texas, First3Years, and Brazelton Touchpoints Center
- Teachable: free online professional development workshops for parents and providers
- Family Connects outreach for OB/GYN offices & clinics
- Strategize with school districts on engaging Education Service Centers and other educational agencies
- Assess depression and Social Determinants of Health in Centering Pregnancy
- Abide Clinic: partnership with United Way for Family Connects to serve women of color for pre- and post-natal care
Data Collection & Analysis

- Results-Based Accountability process and Turn the Curve sessions taking place in all core model components to assess gaps in services
- Evaluation data and metrics maintained on individual evidence-based programs
- Analysis of each program and its metrics/evaluation components to align and reflect on outcomes
- Work with national partners on alignment of outcome measures/data requirements
- Utilize screening, referral, and follow-up data to identify gaps in services for addressing parental depression, substance use; make recommendations for tiered levels of support
Data Collection & Analysis (continued)

- Monitor referrals for early care and education with anticipated family engagement and education, resulting in higher demands for high-quality childcare.
- Analyze current home-visiting programs and match to needs identified through screening data.
- Determine through Child Find data if the utilization of universal screenings is a value to Part B and Part C programs through enhancement of higher-quality referrals.
- Conducting Family Impact Surveys for families calling Help Me Grow to assess level of satisfaction and support to the family.
Tots to Teens and in BeTweens

Funding:

- Texas Department of Family & Protective Services
- Texas Health & Human Services - Early Childhood Intervention (ECI)
- Texas Department of State Health Services - Title V Maternal and Child Health
- Pritzker Children’s Foundation

Help Me Thrive
North Texas
Ages 6 up to 18
1-844-NTX-TEEN

Funding:

- Health Resources & Services Administration (HRSA)
- Substance Abuse & Mental Health Services Administration (SAMHSA)
- County - American Rescue Plan Act (ARPA)
- Local Funds and Foundations
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<tr>
<th>Promotion</th>
<th>Prevention</th>
<th>Intervention</th>
<th>Crisis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Universal Healthcare Integration</td>
<td>Universal Screenning / Physical / Mental Well-Being</td>
<td>Help Me Grow -and- Help Me Thrive</td>
<td>YES Waiver / Intensive Wrap Around Services</td>
</tr>
<tr>
<td>School / Child Care Center Enrichment</td>
<td>Navigation - SDOH Screening - Developmental Screening</td>
<td>Help Me Grow -and- Help Me Thrive</td>
<td>Crisis Assess Center</td>
</tr>
<tr>
<td>Trauma-Informed System</td>
<td>Outreach / Marketing</td>
<td>Help Me Grow -and- Help Me Thrive</td>
<td>Residential Treatment Center</td>
</tr>
</tbody>
</table>
STRATEGIC PLAN 2022–2023

Mission: Empower and strengthen families

Vision: Through connections and trusting relationships, we support families and children in reaching their hopes and dreams

Values: We CARE • Connect • Access • Resources • Empower

Guiding Principles:
- Trust-Based Relational Intervention (TBRI®)
- National Family Support Network (NFSN)


<table>
<thead>
<tr>
<th>Centralized Access &amp; Navigation</th>
<th>Family &amp; Youth Engagement</th>
<th>Provider Support &amp; Training</th>
<th>Data Evaluation &amp; Outcomes</th>
<th>Organizing Entity</th>
<th>Seals &amp; Spread</th>
<th>Continuous Quality Improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Link HMT navigation and HMG</td>
<td>Family and youth voice guide team</td>
<td>All staff trained on NFSN and TBRI</td>
<td>Reports available to staff</td>
<td>Create HMT with Mental Health Connection</td>
<td>Collaborative programs with partner agencies</td>
<td>Ensure fidelity with evidence-based practices</td>
</tr>
<tr>
<td>Specialized assessment teams and navigation in community</td>
<td>Groups for all ages</td>
<td>Staff support through teaming/supervision</td>
<td>Use data to identify gaps in services</td>
<td>Enhance timely business practices</td>
<td>Align marketing with HMG and HMT</td>
<td>Systemwide TBRI®</td>
</tr>
<tr>
<td>Assist families with accessing benefits</td>
<td>Family leadership council expanded for all ages</td>
<td>Create internship recruitment and supervision</td>
<td>Ensure all available revenue is billed and secured</td>
<td>Address gaps in services with innovation</td>
<td>Encourage partner participation in HMT/HMG</td>
<td>NFSN guiding principles operate as foundation</td>
</tr>
<tr>
<td>Timely scheduling and entry into services</td>
<td>Youth Advisory Council</td>
<td>Mental Health Consultation for all LPHAs (MH)</td>
<td>Enhance focus on meeting outcomes</td>
<td>Family friendly facilities</td>
<td>Community alignment includes inter/intra agency</td>
<td>Embrace CARF, CCBHC, NCQA best practices</td>
</tr>
<tr>
<td>Crisis Response Team for schools</td>
<td>Review plan with families regularly</td>
<td>Cross-train within division</td>
<td>Utilize audit results to improve practices</td>
<td>Fiscal mapping and braiding of funds</td>
<td>Participate in local, state, national partnerships</td>
<td>Honor commitments with funders</td>
</tr>
<tr>
<td>Continuous feedback loop/updating resources</td>
<td>Utilize motivational interviewing and coaching</td>
<td>HealthySteps Learning Collaborative</td>
<td>Electronic Health Record (EHR) enhancements</td>
<td>Create HMG/HMT alignment</td>
<td>Regional Family Connects</td>
<td>Efficacy; Effectiveness; Efficiency</td>
</tr>
</tbody>
</table>
## Continuum of Services:
### Comprehensive Services for all Families, Children and Youth

<table>
<thead>
<tr>
<th>Integrate full continuum of services: (promotion, prevention, intervention, crisis support) into community settings</th>
<th>Create Complex Treatment and Diagnostic Team (Arena Assessment, Mentoring, ABA)</th>
<th>Healthy Outcomes through Prevention &amp; Early Support (HOPES) program eligibility enhanced to include intensive intervention</th>
<th>Create additional partner opportunities for protecting youth in trafficking program</th>
</tr>
</thead>
<tbody>
<tr>
<td>Create opportunities that strengthen the family through providing services in naturally occurring routines and environments</td>
<td>Expand crisis respite opportunities in partnership with community (varied levels of acuity needs)</td>
<td>Expand perinatal and postpartum depression supports and services</td>
<td>Clinical integration of behavioral healthcare support with community primary medical providers/school nurses</td>
</tr>
<tr>
<td>Education strategies are individualized and in partnership with schools (AVID, least restrictive, teaming)</td>
<td>Utilize primary service approach to teaming with coaching/consultation</td>
<td>Strengthen case management focusing on Social Determinants of Health (SDOH)</td>
<td>Create Family Connects North Texas regional sub-system in partnership with community</td>
</tr>
</tbody>
</table>
Child & Family Services

Child & Family Connections
- Prenatal up to 6 years

Early Childhood Intervention
- Birth up to 3 years

Specialized Services
- Birth through 17 years

Youth
- 6 through 17 years
The Philosophy is an approach based upon a set of core values and principles that in turn offer the foundation for service systems and the services provided.

Infrastructure includes governance structure and processes; financing for a wide range of services and supports; formal and informal partnerships among child-serving agencies, providers, families, and youth; provider networks; and the system’s capacity for planning, evaluation, workforce development, and quality improvement.

Services & Supports include the specific interventions with children, youth, and families at the service delivery level that are consistent with the system of care values and principles.
Core Values

System of Care Values are...

- Family-driven & Youth-guided
- Community-based
- Culturally & Linguistically Competent
10 GUIDING PRINCIPLES

1. Access to array of services - cross-sector
2. Individual service plan
3. Least restrictive, natural environment
4. Full participation of families / caregivers
5. Integrated and coordinated services
6. Case management and navigation
7. Early identification and intervention
8. Smooth transitions
9. Rights protected / advocacy
10. Equitable services / responsive to cultural differences
SAMHSA System of Care Grant

**Purpose:** Help Me Grow (HMG) / Help Me Thrive (HMT) System of Care is to establish an expanded system of comprehensive, coordinated, and community-based services that are family-centered, trauma-informed, and evidence-based.

**Evidence-Based Practices:**
- Trust-Based Relationship Intervention (TBRI®)
- Nurturing Parenting Program
- Parent Cafés and Youth Cafés

**Services:** Navigation and parenting groups

**Development:** Family Resource Center (Ellis County)
Health Resources & Services Administration (HRSA) Grant

Help Me Grow & Help Me Thrive

Pediatric Mental Health Care Access

New Area Expansion / Expansion +

9/30/2022 to 6/30/2026
Crossover Services

- Help Me Grow / Help Me Thrive
- Perinatal Connections
- Family Support Coaching
- Infant & Early Childhood Mental Health Consultation (IECMHC)
- Help Me Grow / Help Me Thrive
- Help Me Grow / Help Me Thrive
- Perinatal Connections
- Help Me Grow
- Infant & Early Childhood Mental Health Consultation (IECMHC)
- Fort Worth ISD / Help Me Thrive Navigation

SAMHSA System of Care
Texas Department of Family & Protective Services - Healthy Outcomes through Prevention & Early Support (HOPES)
American Rescue Plan Act (ARPA)
Philanthropic Funding
Texas Department of State Health Services - Title V; Pritzker
SAMHSA
ARPA / Elementary & Secondary School Emergency Relief (ESSER)
The Power of Union is Strength

Crabs

Ants

Penguins

https://youtu.be/jop2I5u2F3U
Cross-System Approach

Data Collection & Analysis

Centralized Access Point

Marketing & Outreach

Family & Community Outreach

Provider Support & Training

Stakeholder Group
We still have much...
• To Learn
• To Do
• To Hope For

Thank you for being on this journey with me!
ANY QUESTIONS?

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