

Children's Cabinet

April 26, 2022

Agenda

- Welcome and Introductions (2 min)
- Vote on adoption of March meeting minutes (2 min)
- Healthy Tomorrows Presentation (20 min)
- RI Pre-K Presentation (10 min)
- ECCE Strategic Plan Feedback Update (5 min)
- Public Comment (15 min)
- Adjournment



ADVANCING INTEGRATED HEALTHCARE

Healthy Tomorrows Project Spotlight

Children's Cabinet Meeting 4/26/22

Sara Remington, Family Home Visiting Program Manager, RIDOH

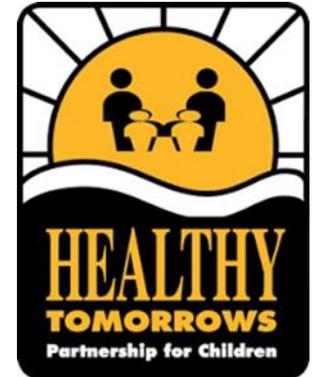
Susanne Campbell, RN, MS, PCMH-CCE Senior Program Administrator

Care Transformation Collaborative of RI

Healthy Tomorrows (HRSA & AAP Funded)

The goals of this project include ensuring that PCMH-Kids practices and Family Visiting (FV) programs:

- have the tools, data and work flows needed to integrate care coordination
- acquire knowledge, skills and relationships for integrating care coordination through participation in a year-long Learning Collaborative
- develop and implement strategies to support family engagement in primary care and FV programs
- Integrated Care Coordination activities continue after the period of federal funding ends.



Learning Collaborative Cohort 1

- Family Consultants (2)
- Family Visiting
 - Meeting Street
 - Blackstone Valley Community Action Program (BVCAP)
- Pediatric Practices
 - Hasbro Pediatric Primary Care
 - Providence Community Health Center - Central



Hasbro Children's Hospital
The Pediatric Division of Rhode Island Hospital
A Lifespan Partner

All for one.



What are we trying to do?

Improve communication and coordination between pediatricians and family visitors.

FV and Practice Feedback from Baseline Survey

FV

- Desire to share more information about services provided
- Need for standardized process for working and communicating with pediatric practices

Practice

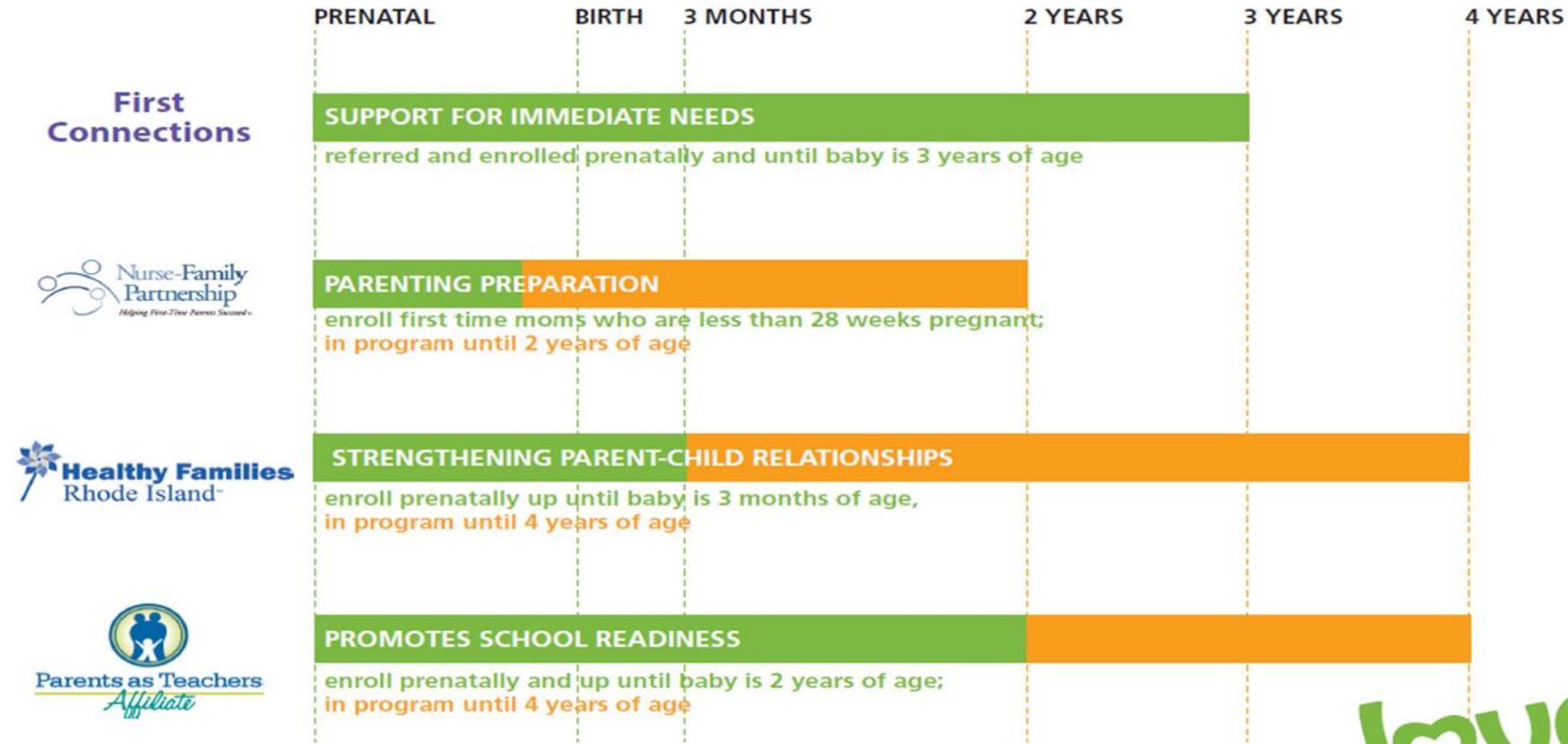
- Desire to obtain more knowledge about FV
- Understanding of how to make referrals to FV and coordinate care

Overview of Family Visiting Program (FV)

- Long-term, evidence-based family visiting provides support from pregnancy through the early years of a child's life
- First Connections (short-term, part of child-find entity system)
- All are voluntary, home-based service during pregnancy through early childhood and, administered by the Rhode Island Department of Health (RIDOH) in partnership with agencies statewide

In Rhode Island, RIDOH offers:





This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under D89MC28279 Affordable Care Act- Maternal, Infant and Early Childhood Home Visiting Program \$9,272,115.00. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

Learning Collaborative

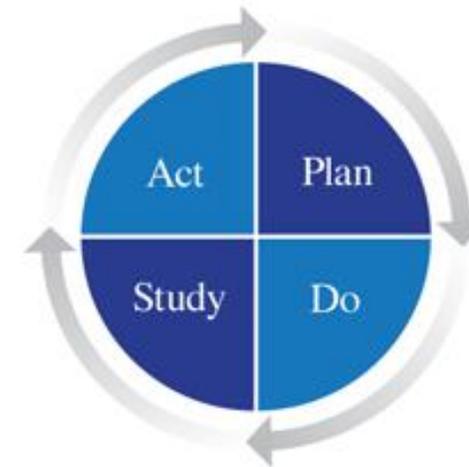
Pre and Post Survey



Monthly Team Meetings
Case Conferencing

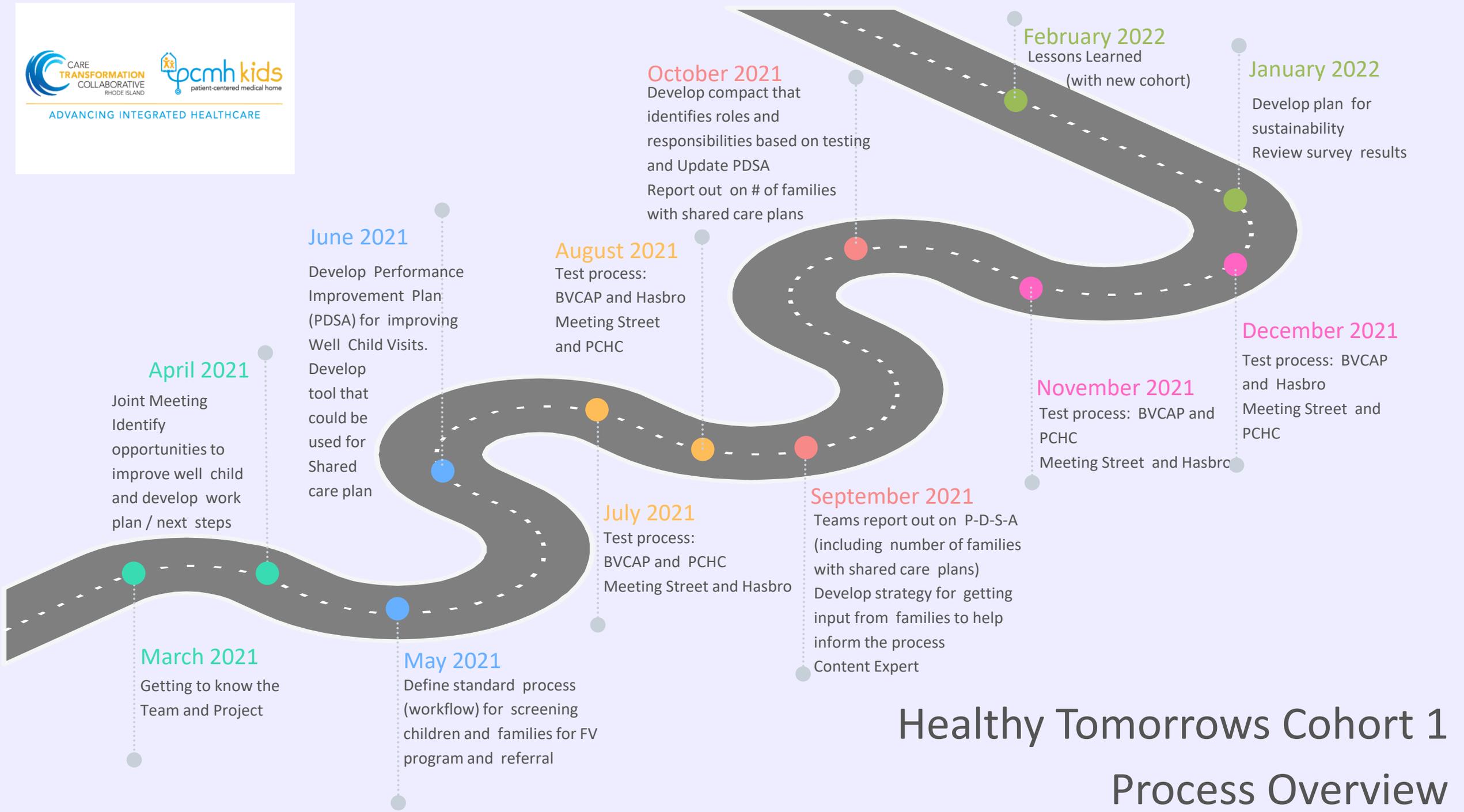


Quality Improvement
Practice Facilitation



KIDSNET FV Report





March 2021

Getting to know the Team and Project

April 2021

Joint Meeting Identify opportunities to improve well child and develop work plan / next steps

June 2021

Develop Performance Improvement Plan (PDSA) for improving Well Child Visits. Develop tool that could be used for Shared care plan

May 2021

Define standard process (workflow) for screening children and families for FV program and referral

July 2021

Test process: BVCAP and PCHC Meeting Street and Hasbro

August 2021

Test process: BVCAP and Hasbro Meeting Street and PCHC

October 2021

Develop compact that identifies roles and responsibilities based on testing and Update PDSA Report out on # of families with shared care plans

September 2021

Teams report out on P-D-S-A (including number of families with shared care plans) Develop strategy for getting input from families to help inform the process Content Expert

February 2022

Lessons Learned (with new cohort)

January 2022

Develop plan for sustainability Review survey results

December 2021

Test process: BVCAP and Hasbro Meeting Street and PCHC

November 2021

Test process: BVCAP and PCHC Meeting Street and Hasbro

**Healthy Tomorrows Cohort 1
Process Overview**

Lessons Learned

“It is a good idea to set up the case conferences early on as they are how we got "the biggest bang for our buck" in this work as a program.”



Importance of being nimble
Intentional relationship building (trust) takes committed time

“Would love to work more on family engagement.”



Words matter; focused on families needing support instead of defining families as high risk



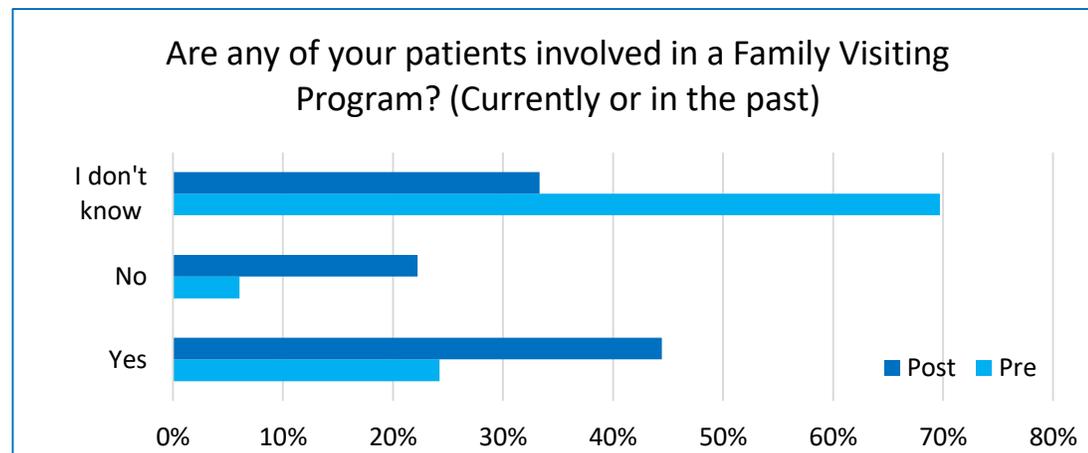
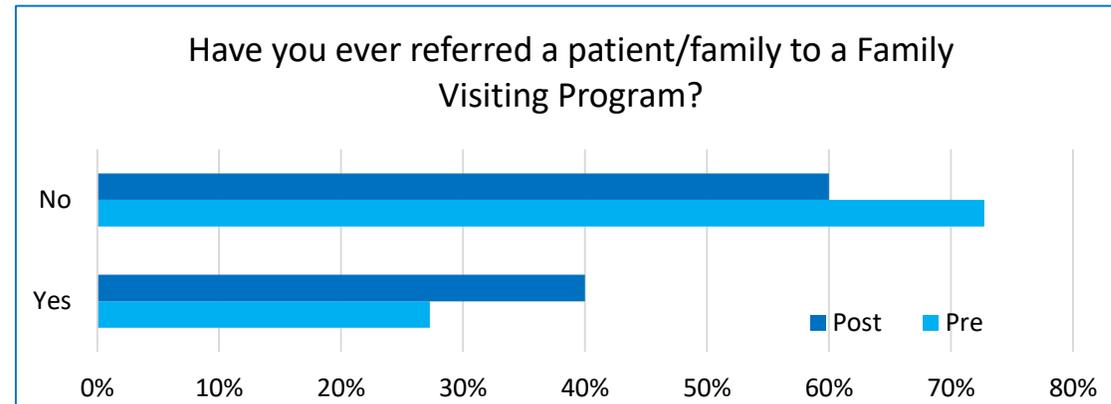
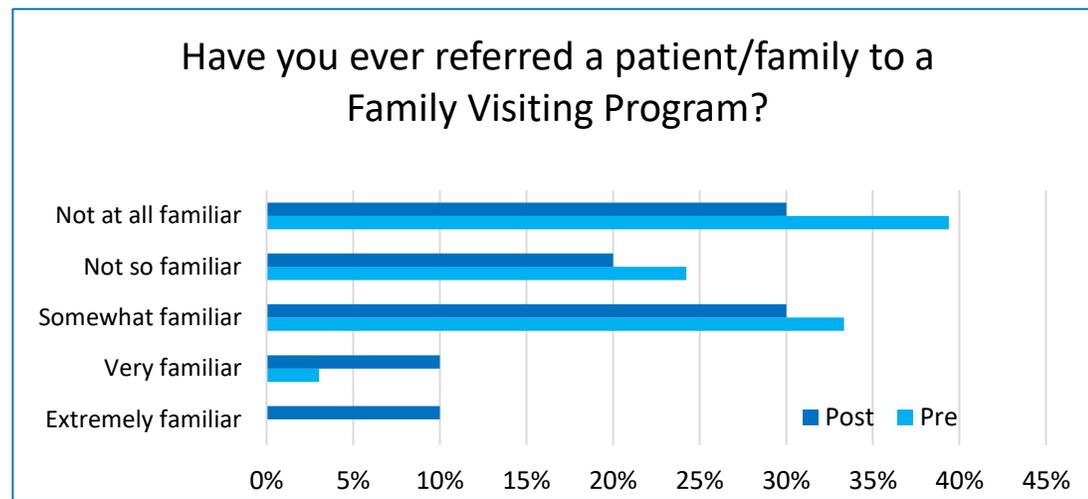
*Hasbro Resident and Faculty Survey

Successes to Carry Forward

- Family Consultant/Parent Leader Voice
- Case conferencing – relationship building
- KIDSNET Practice Report
- Continued Opportunity for joint learning
 - Pediatrician and FV relationship
- CTC-RI participation in Family Council
- Continued opportunity to expand funding sources and partners to improve population health and community clinical linkages
- Collaborative agreement

Increasing Knowledge about Family Visiting at Hasbro

Post Survey of residents and faculty:
[Hasbro Pediatric Primary Care and Family Visiting Programs - Responses | SurveyMonkey](#)



FV Outcomes

Data from October 1, 2020 – September 30, 2021

- % of children enrolled in family visiting that received their most recent AAP recommended well child visit (Birth through 36 months) = 80% (↑ of 6% over previous reporting period)
 - During the reporting period, Meeting Street HFA and BVCAP HFAs data were 86.6%
- % of infants enrolled in family visiting that are always placed on their back to sleep, without bed sharing and soft bedding (Birth through six months) = 56.2% (↑ of 10% over previous reporting period)

Provisional data for Q1, October 1, 2021 – December 31, 2021:

% of children enrolled in family visiting that received their most recent AAP recommended well child visit (Birth through 36 months)

- BVCAP HFA = 84%
- MS HFA = 92%

Improving Referrals to Family Visiting at PCHC - Central

Year	Aug	Sep	Oct	Nov	Dec	Jan (2022)	Total
2021	5	6	4	4	1	7	27
2020	1		5		1		7

Next Steps:

- With new EMR, may be able to integrate referral form.
- Having a centralized referral team that handles referrals to family visiting could streamline the process, including coordinating collaboration and providing more visual information in the EMR.
- Review frequency of meetings – may switch to bi-monthly
- Run reports of patients who may benefit from family visiting

Success Story

Impact & Spread

- Health Equity CQI Project
- BVCHC & BVCAP
- Children's Friend

Next Steps

Intervention Year 2

- 2 additional practices and FV
 - EBCAP Pediatrics
 - EBCAP HFA
 - Coastal Narragansett
 - PAT Westerly School Department
- Cohort 1 will switch partners
- Additional funding from Tufts
- New parent consultant



Hasbro Children's Hospital
The Pediatric Division of Rhode Island Hospital
A Lifespan Partner

All for one.



love
that
baby



Meeting Street

BV  CAP



east bay community
action program



Parents as Teachers.
Affiliate



Questions?

Stay Safe and Healthy



RHODE
ISLAND

RI Pre-K Update

What is RI Pre-K?

RI Pre-K is a tuition free, inclusive high-quality standards-based program, built on the existing early childhood education infrastructure.

- RI Pre-K programs serve children who are **4 years of age by September 1st** of the current year, prior to entering Kindergarten, who live in the community where the Pre-K is located.
- RI Pre-K uses a **mixed delivery system** that includes public schools, Head Start programs, and community-based childcare programs with coordinated recruitment efforts.
- RI is recognized as a national Pre-K leader because RIDE requires and supports all RI Pre-K classrooms to achieve the same high-quality standards and **achieve Comprehensive Early Childhood Education (CECE) regardless of setting**.

This includes:

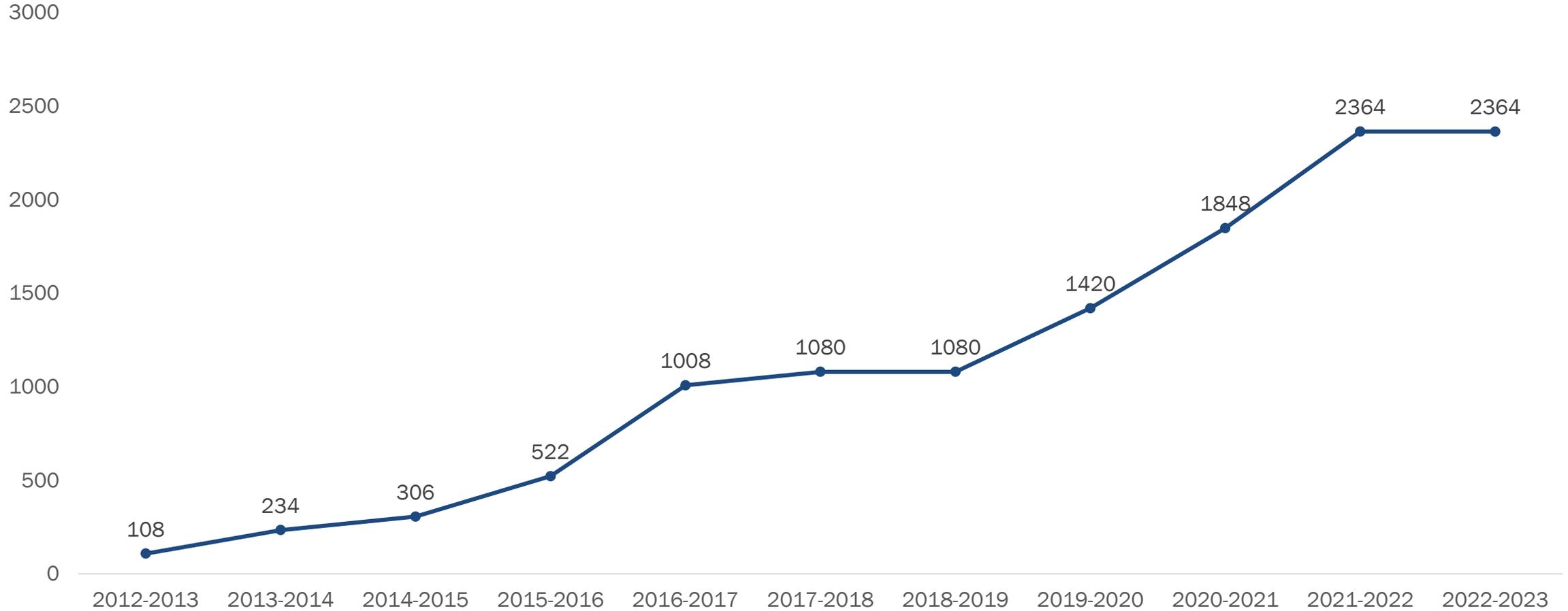
- Bachelor-degree teacher
- 6-hours a day, 180 days a year
- High-quality, RIDE-endorsed curriculum
- Participation in all PDTA activities
- Participation in all RIDE monitoring activities

RI Pre-K is nationally recognized for quality and for commitment to continuing expansion.

- National Institute for Early Education Research (NIEER) 2020-2021 Pre-K Yearbook (released April 26, 2022):
 - Rhode Island Pre-K meets all 10 quality criteria for high-quality Pre-K
 - RI is one of only a few states to meet all 10 quality criteria
 - RI is #31 in access to Pre-K for four year olds
 - RI is one of only a few states to have continued expansion of Pre-K during the pandemic

RI has been expanding the high-quality RI Pre-K since 2011. This year, we are maintaining all existing seats to reach 23% of 4-year olds.

RI Pre-K Expansion By Year



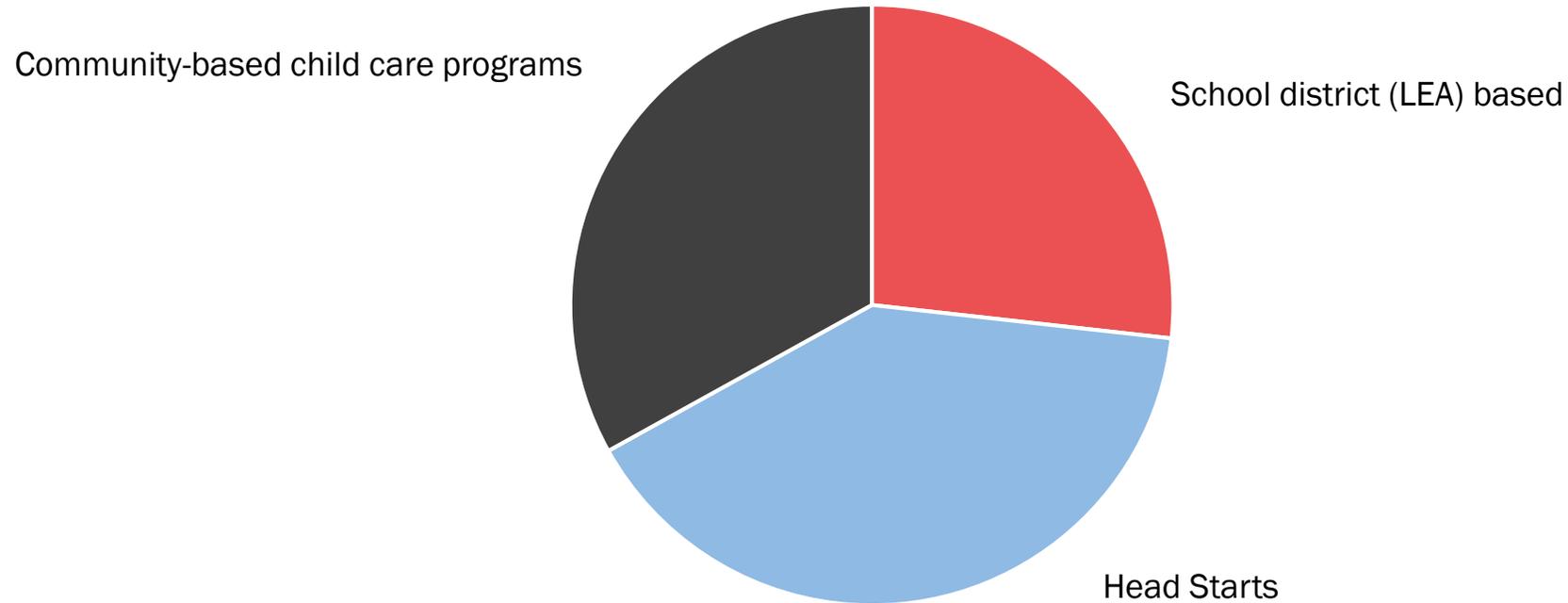
Building on the existing B-5 System

- Last year, RI introduced new ways for Head Start, Community-Based, and LEA early learning providers to open RI Pre-K classrooms by building on existing programming.
- The goal of the new RI Pre-K service models is to include partners who are ready to provide high-quality Pre-K, some of whom are funded through another state or federal agency, to ensure a wide variety of options for families, and to be mindful of market saturation.
- In order to be considered high-quality and part of the universal Pre-K goal, programs must meet the definition of RI Pre-K and can expand through the new service models.

RI Pre-K is delivered across many settings, strengthening the entire birth through age five system.

RI Pre-K and the Mixed Delivery System

RI Pre-K Classrooms by Setting



RI Pre-K is funded by a mixed of funding streams. After the 2022-2023 school year, additional funds will be needed to maintain and expand the program.

Funding overview

Fund Source	Amount for SY22-23	Notes
Pre-K Categorical Funds	\$14,850,000	
Preschool Development Grant Funds - Direct Seats	\$4,000,000	<i>Grant funds end after SY22-23</i>
Governor's Emergency Education Relief Funds	\$1,000,000	<i>Grant funds end after SY22-23</i>
CRRSA CCDBG Direct Award Funds	\$650,000	<i>Grant funds end after SY22-23</i>

The lottery is open! Families can apply through July 6.

Who can apply?

- Children who are age 4 by September 1, 2022
- Reside in one of the following communities: Bristol-Warren, Central Falls, Coventry, Cranston, East Providence, Johnston, Lincoln, Middletown, Newport, North Kingstown, North Providence, Pawtucket, Providence, South Kingstown, Warwick, Westerly, West Warwick, and Woonsocket.

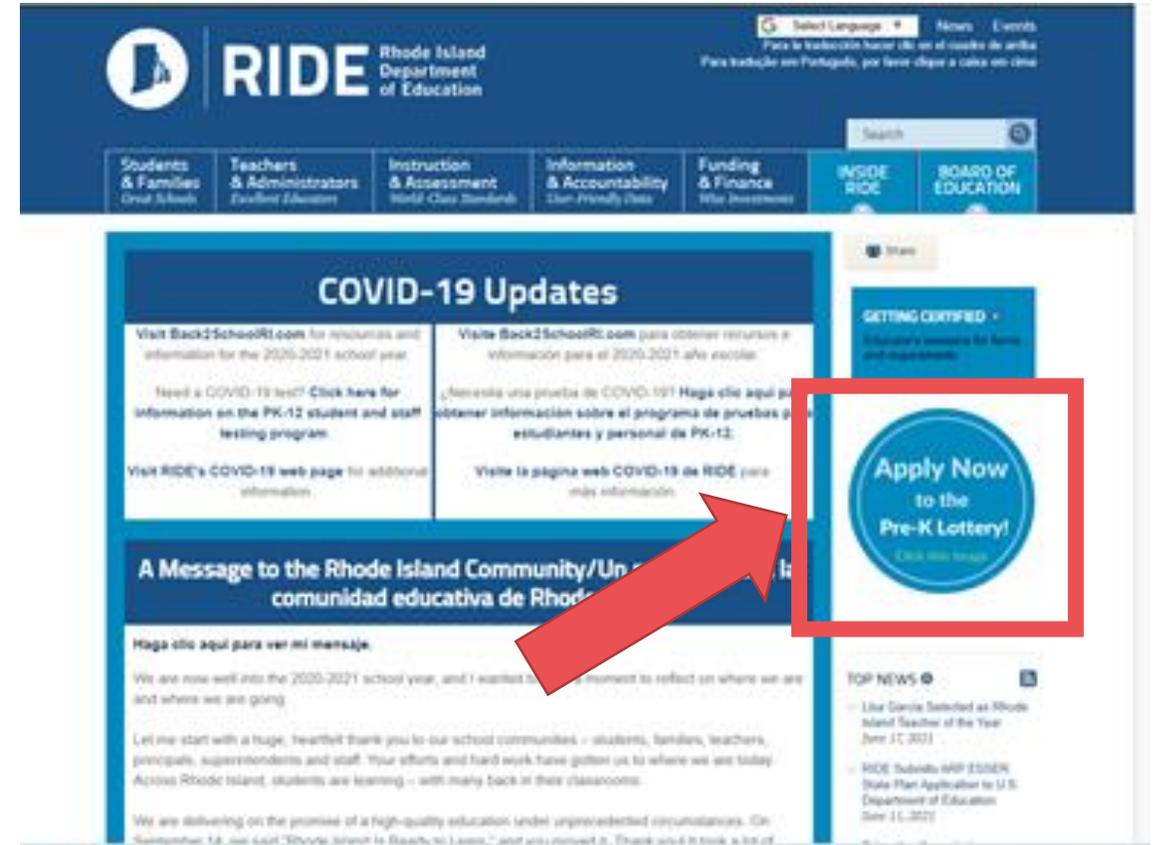
Getting the word out

- Email blast to all families who signed up to receive notifications
- RI Pre-K programs implement programmatic recruitment plans
- Ad campaign will launch soon on social media in both English and Spanish

APPLY HERE: <http://www3.ride.ri.gov/pklottery>

RI Pre-K – Community Marketing Support

- This is a free, 6 hour day, 180 days, in-person high-quality Pre-K program.
- This year’s cohort of children attended school in person and are ready to take on Kindergarten!
- Talk to your neighbors, friends, co-workers and professional networks.
- Drive parents with eligible children to the RIDE homepage to apply on-line.
- Share across all social media, professional, and personal networks by retweeting the RIDE Pre-K social media posts
- If you work in an environment that families visit, have a few paper applications at front desk. They can be returned to any RI Pre-K program and will be entered for the family.



ECCE Strategic Plan Feedback Update

Feedback on the ECCE Strategic Plan

Overview

- Discussion at the Early Learning Council Meeting
- Online survey open for 3 weeks – we received 5 unique responses
- Coordinated feedback letter from the Head Start Association

Feedback by Objective Area – High Level Themes



Section	Comment
Objective 1	<ul style="list-style-type: none">• Incorporate more specific language regarding national frameworks, models, and guidelines that are driving activities (for example, that the Infant/Toddler model is based on the Early Head Start Child Care Partnership model)• More intentionally draw the linkages between ECCE Plan and the Whole Family Approach to Jobs• Emphasize focus on economic wellbeing for early educators• Discuss equity in funding and investments, such as varying amount of funds provided based on community to meet true community needs
Objective 2	<ul style="list-style-type: none">• Incorporate family economic security, wellbeing, and support• Workforce diversity• Increased CCAP income eligibility• Increased integration of FV with early learning
Objective 3	<ul style="list-style-type: none">• Discuss K transitions and universal screening tools to support transitions• Increase emphasis on family engagement within Pre-K planning activities• Equitable funding for communities based on need• Continued emphasis on the mixed delivery system

Feedback by Objective Area – High Level Themes (cont.)



Section	Comment
Objective 4	<ul style="list-style-type: none">• Improved sustainable funding would make a huge difference.• Explicitly state equity as a principle for funding decisions
Objective 5	<ul style="list-style-type: none">• Increase specificity on what types of decisions are being made• Evaluate whether data systems used are the most easily accessible and navigable for the staff collecting and entering data.

Next steps

- Review all feedback received
- Incorporate edits into the strategic plan
- Finalize plan & share at upcoming Children's Cabinet meeting

Public Comment

