The Story of Help Me Grow: Linking Children and Families to Programs and Services

Minnesota Presentation

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December 19, 2013
• Critical Concepts in Early Brain Development
  – Proportional brain growth
  – Neural plasticity
  – Critical periods
  – Sequential development
  – Role of experience
ROLE OF EXPERIENCE

• The human brain has the ability to be shaped by experience

• Experience, in turn, leads to neural changes in the brain
  – birth: 50 trillion synapses
  – 1 year: 1,000 trillion
  – 20 years: 500 trillion

• The remolded brain facilitates the embrace of new experiences
  – and so the process goes on
SERVICE IMPLICATIONS
Early Brain Development

• For optimal effectiveness, services must begin *as early as possible*

• Stimulation during the *first three years* is particularly critical to ensure optimal development
  — “use it or lose it”

• Services must be *comprehensive* and *aligned* with children’s developmental stages and needs
CRITICAL CONCEPTS IN CHILD DEVELOPMENT

Implications for Services

• “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.”
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

• Services should address the needs of all children (e.g., the entire population), recognizing that those in greatest need will likely derive the greatest benefits
  – target at-risk children and families
  – perils of exclusive focus on CYSHCN
Health Care Reform and Equity for Children

- **PREMISE**: Currents reform efforts to achieve health equity for children are well intentioned but misguided
  - The futility of an exclusive focus on the 5%/45%
  - Misperception of treatment/prevention of diseases/disorders
  - Limited influence of medical home on determinants of health
  - Misplaced demands for ROI, cost benefits
THE CONNECTICUT STORY

• Describe a *community-based approach* to enhancing intervention for developmental problems
  – *Help Me Grow*

• Derive implications for *replication* and *dissemination* to other states

*Help Me Grow*

National Center
Hartford, Connecticut
New England’s Rising Star
Hartford, Connecticut
Poor Quality Housing Stock
Children with developmental/behavioral problems are *eluding early detection*

Many *initiatives* exist to provide services to young children, 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
Core Components

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

Structural Requirements

- Organizing Entity
- Statewide Expansion
- Continuous Quality Improvement
"Making the Connection- Help Me Grow The Connecticut Experience"
Child Development Infoline, a specialized call center of United Way 2-1-1, helps families with children who are at risk for or experiencing developmental delays or behavioral health issues find appropriate services.

Care Coordinators provide:

- Assessment of needs & referrals to services
- Education on development, behavior management and programs
- Ongoing developmental monitoring
- Advocacy and follow up
Connecticut's Child Development Infoline
The Gateway to Help and Referrals for Parents, Providers, Pediatric Professionals
1-800-505-7000

Connecticut Birth to Three System
Help Me Grow
Early Childhood Special Education
Children and Youth with Special Health Care Needs

Participating Agencies
Department of Social Services, Children's Trust Fund, Department of Developmental Services, Department of Public Health, Department of Education, United Way of Connecticut
Lessons Learned

• Importance of Language
  – Enhancement-not expansion-of entitlement programs
  – Focus on at-risk children
  – Single point of entry for programs/services

• Value of Strategic Reframing
  – Primary and secondary prevention of emotional problems
  – Frequency of behavioral concerns
  – Connecticut Community KidCare initiative

• Need for Data Collection
  – Strengthening of outreach and care coordination activities
Building the System Together

- **Blending** of financial and administrative resources
- Focus on **at-risk children** typically deemed ineligible for categorical services
- **Low cost** as a consequence of focus on linkage of children and families to existing programs and services
- **Cross-sector collaboration and dialogue** (child health, early care and education, family support)
- Developing **database** (process, outcome indicators)
EVALUATION
Results Based Accountability
(Friedman, 2005)

• Trend data: All performance indicators can fit into any of the following categories…
  – “How much did Help Me Grow do?”
  – “How well is Help Me Grow doing?”
  – “Is anyone better off as a result of utilizing Help Me Grow?”
FIVE PROTECTIVE FACTORS

PARENTAL RESILIENCE

SOCIAL CONNECTIONS

KNOWLEDGE of PARENTING and CHILD DEVELOPMENT

CONCRETE SUPPORT in TIMES of NEED

SOCIAL and EMOTIONAL COMPETENCE of CHILDREN
<table>
<thead>
<tr>
<th>Response to Survey Questions</th>
<th>Parent Responses (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>As a result of my call to Child Development Infoline and the information and services I received:</td>
<td></td>
</tr>
<tr>
<td>I have a better understanding of my child's development.</td>
<td>80%  4%  7%</td>
</tr>
<tr>
<td>I am able to better understand and meet my child’s needs.</td>
<td>79%  2%  5%</td>
</tr>
<tr>
<td>I have a better understanding of services for me and/or my child.</td>
<td>81%  6%  1%</td>
</tr>
<tr>
<td>I am able to access services if I need it.</td>
<td>84%  2%  2%</td>
</tr>
<tr>
<td>There are people who can provide me with assistance when I need it.</td>
<td>87%  1%  4%</td>
</tr>
<tr>
<td>I have people I can talk to for advice and emotional support.</td>
<td>79%  1%  4%</td>
</tr>
<tr>
<td>There is improvement in my family’s day-to-day circumstances.</td>
<td>66%  5%  17%</td>
</tr>
<tr>
<td>My relationship with my child has improved.</td>
<td>71%  2%  27%</td>
</tr>
<tr>
<td>My child’s behavior has improved (e.g., mood, attitude, play, relationships with other children).</td>
<td>45%  1%  32%</td>
</tr>
</tbody>
</table>
The “de-medicalization” of early childhood developmental/behavioral concerns reduces costs and wait-times improving outcomes.
Examples of State Affiliates

- Delaware
  - *Embedding* in state system

- South Carolina
  - Starting in a county and *spreading* to state

- California
  - Large state forming a *HMG consortium*
**HMG National supports affiliate states by:**

- Promoting development and expansion of a national network of states that are building *HMG* systems
- Providing technical assistance to help states implement *HMG*’s core components and structural requirements
- Informing the public discourse on the crucial importance of optimal child development
- Providing tools for implementation

**Affiliate States as of 2013**

- Alabama
- California
- Colorado
- Connecticut
- Delaware
- District of Columbia
- Florida
- Iowa
- Kentucky
- Louisiana
- Massachusetts
- Michigan
- New Jersey
- New York
- Oregon
- South Carolina
- Utah
- Washington
- West Virginia
Policy Implications

• **Systems change** strategy vs. programs/services
• **Cross-sector integration** of child health, early care and education, and family support
  – From medical home to **health neighborhood**
• Focus on **all** children, including those **at risk**
  – Futility of exclusive focus on 5%/45%
• Benefits of a **single portal of entry** to programs and services
• Efficiency of **blending** administrative and financial resources
• Benefits of **linking** to community-based programs/services
• Central importance of **care coordination**
• Critical importance of **data collection**

*Help Me Grow*®
National Center
Lessons Learned Sustainability

• Embedding Strategy
  – Home Visiting Initiative-MCHB, HRSA
  – Project LAUNCH-SAMHSA
  – Race to the Top-US Department of Education & Human Services
  – Strengthening Families-CSSP
  – “Learn the Signs, Act Early” Campaign-CDC
  – Early Childhood Comprehensive Systems
Child Health Services Building Blocks

Desired Outcomes for School Readiness
- Emotional / Social / Cognitive Development
- Physical Health & Development
- Family Capacity and Function

Early Care and Education Programs

Family Support Services

Care Coordination

 Universal Services
(Medical Home)

Selective Services
(Help Me Grow)

Focused Services

Child Health Services
“Effective programs such as HMG are best viewed in the context of comprehensive state systems supporting young children’s healthy development.”