Nevada In-State Learning Institute

July 28, 2021

National **MCH** Workforce Development Center

Advancing Health Transformation

A Call to Acknowledgement and Honor

- Acknowledgment is a simple, powerful way of showing respect.
- It is a step toward correcting the stories and practices that erase Indigenous people's history, culture.
- It is a move towards inviting and honoring the truth.
- Truth and acknowledgment are critical to building mutual respect and connection across all barriers of heritage and difference.
- We begin this effort by acknowledging what has been buried by honoring the truth.

***Adapted from Honoring Native Land, US Department of Arts and Culture and Race to Equity**

Every community owes its existence and vitality to generations from around the world who contributed their hopes, dreams, and energy to making the history that led to this moment.

Some were brought here against their will.

Some were drawn to leave their distant homes in hope of a better life.

Some have lived on this land for more generations than can be counted.

We are standing on the ancestral lands of the First Nations people,

<u>including the Washoe Tribe</u>.

We pay respects to their elders past and present.

We honor and pay respect to our ancestors who helped to build this county, state and nation.

Please take a moment to consider the many legacies of violence, displacement, migration, and settlement that bring us together here today.

Agenda

Welcome & Overview

Finding Your Path Forward

System Support Tools to Support Complex Collaborations

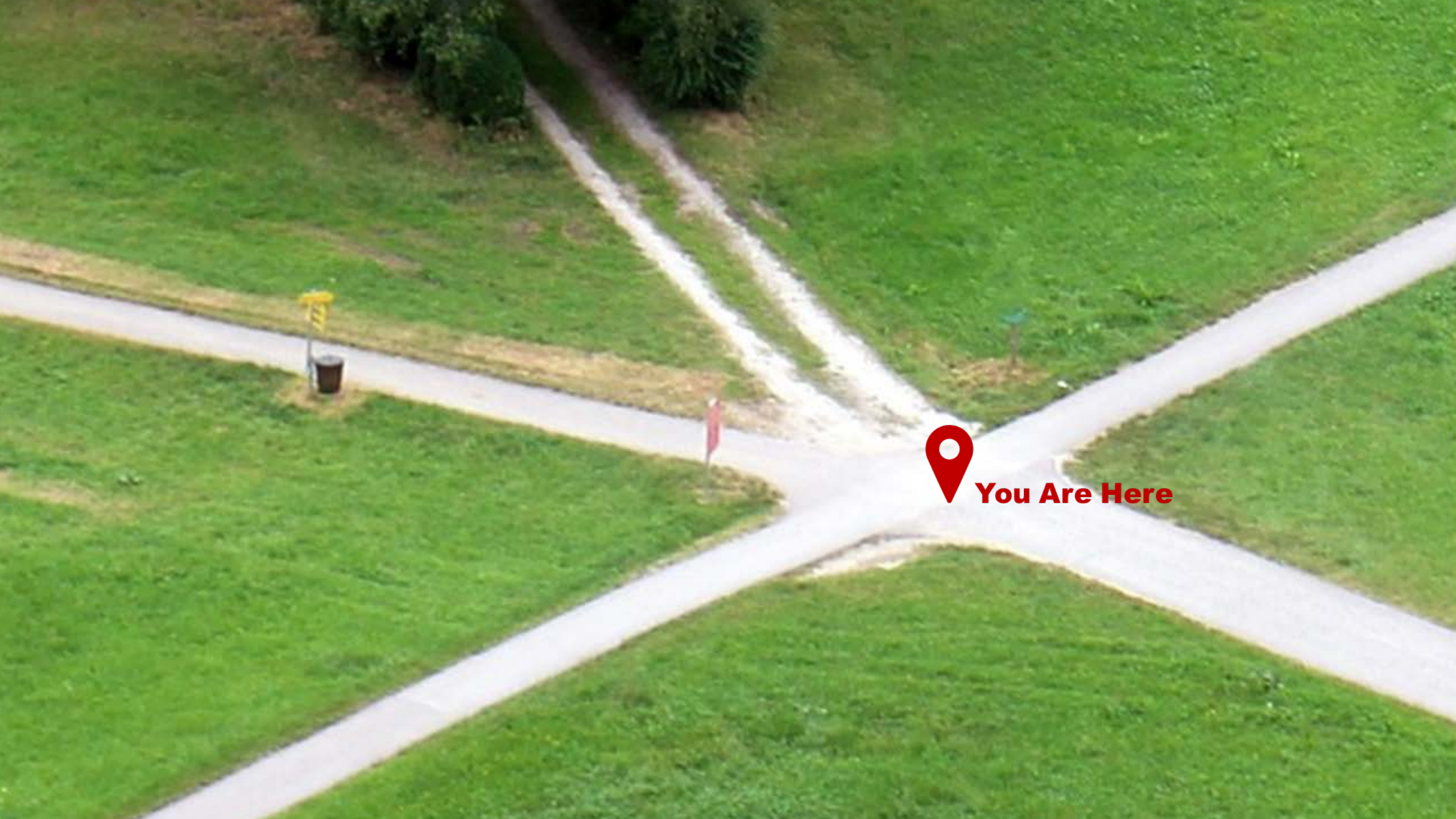
Evidence-Based Strategies for Building and Sustaining Momentum

Icebreaker

Finding Your Path Forward

Oscar Fleming

National MCH Workforce Development Center
Advancing Health Transformation

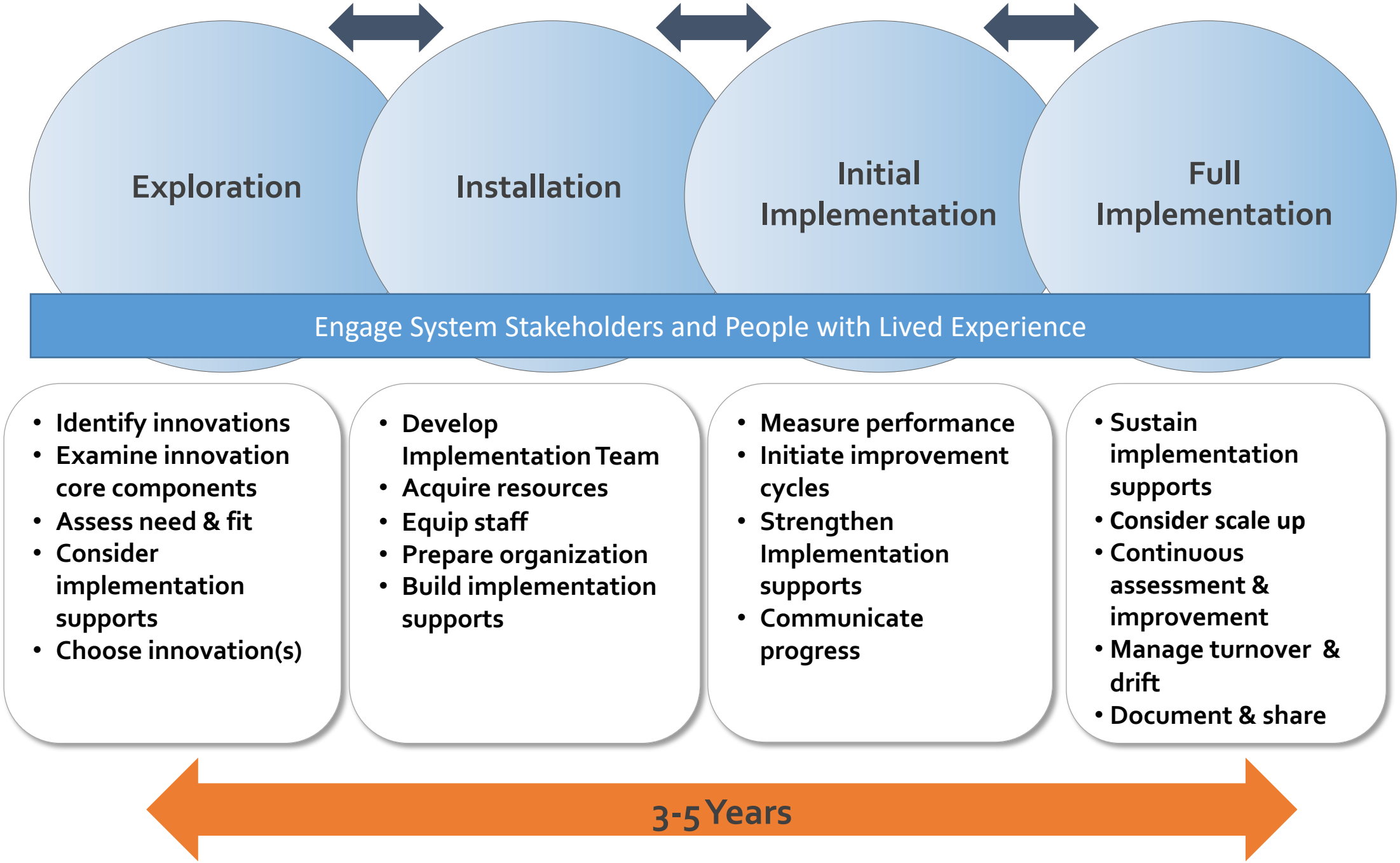

You Are Here

Learning Objectives

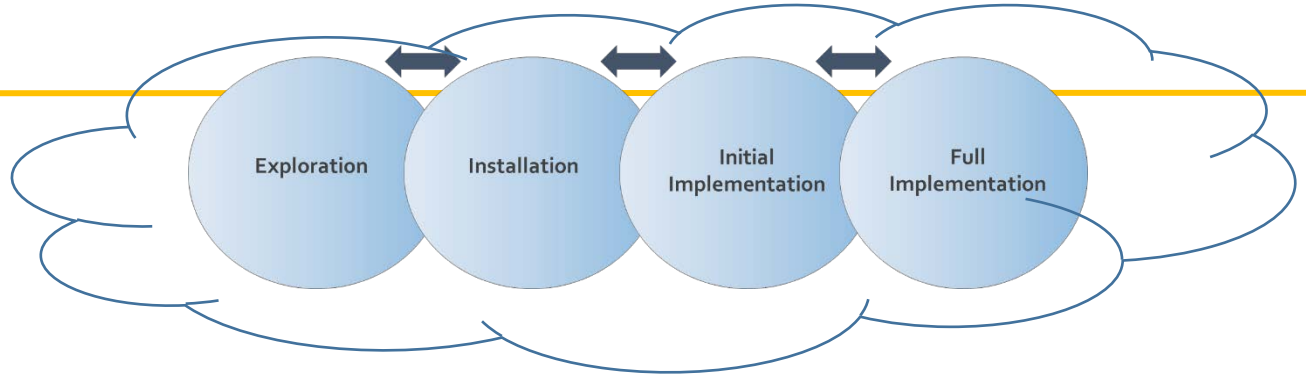
- Review the active implementation stages
- Discuss sources of innovations and evidence
- Explore tools for evidence-based decision making & implementation

Photo by Nick Fewings on Unsplash

Change takes time…


Exploration
Installation
Initial Implementation
Full Implementation
Engage System Stakeholders and People with Lived Experience
• Identify innovations
• Examine innovation core components
• Assess need & fit
• Consider implementation supports
• Choose innovation(s)
• Develop Implementation Team
• Acquire resources
• Equip staff
• Prepare organization
• Build implementation supports
• Measure performance
• Initiate improvement cycles
• Strengthen Implementation supports
• Communicate progress
• Sustain implementation supports
• Consider scale up
• Continuous assessment & improvement
• Manage turnover & drift
• Document & share
3-5 Years

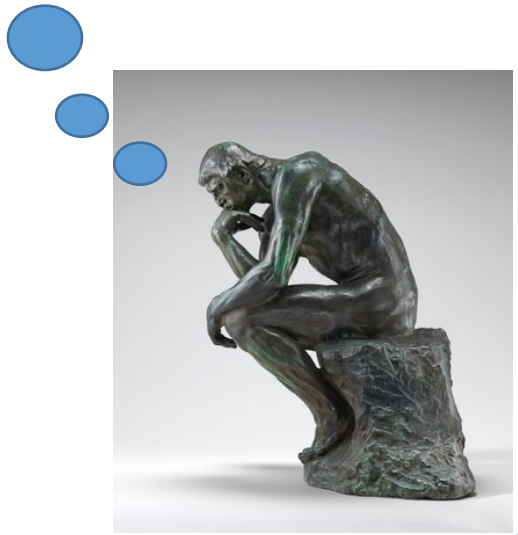
Individual Reflection



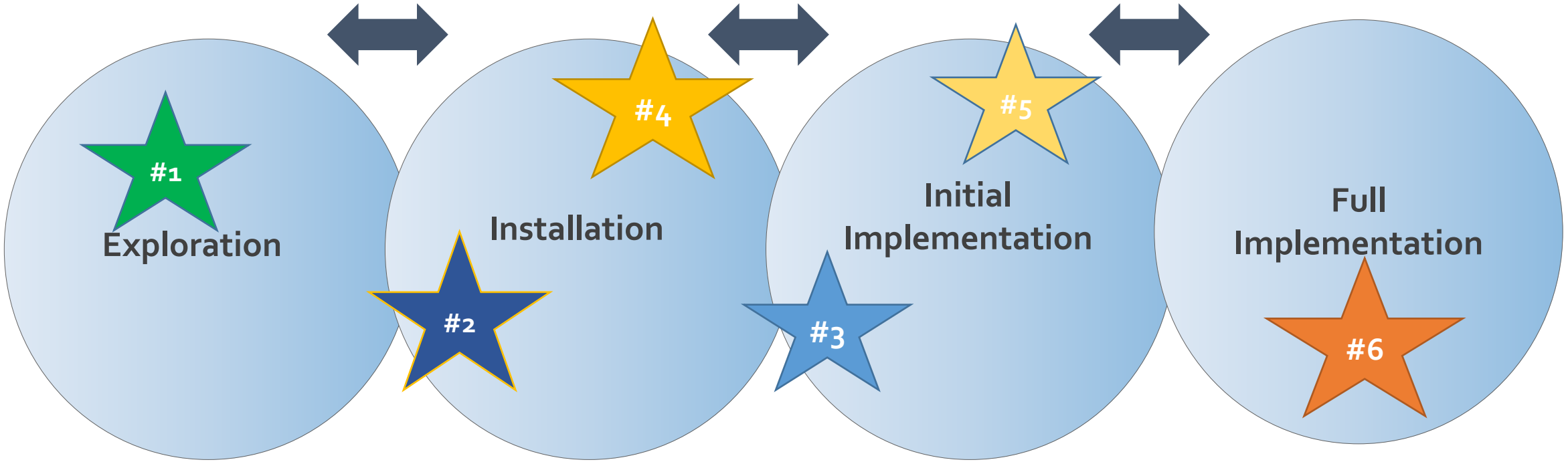
Think about an innovation with which you are involved…

- **What stage is the project in?**

2 minutes

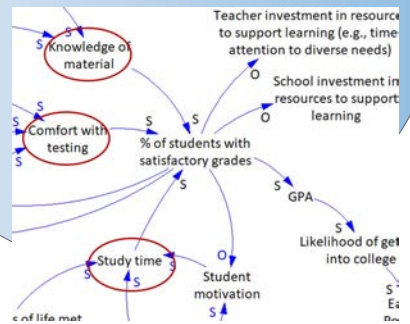


Stage Based Support



Stage Based Support

Exploration



Installation

Initial Implementation

Full Implementation

Tool Time!

Key Driver Diagram

Hexagon Tool

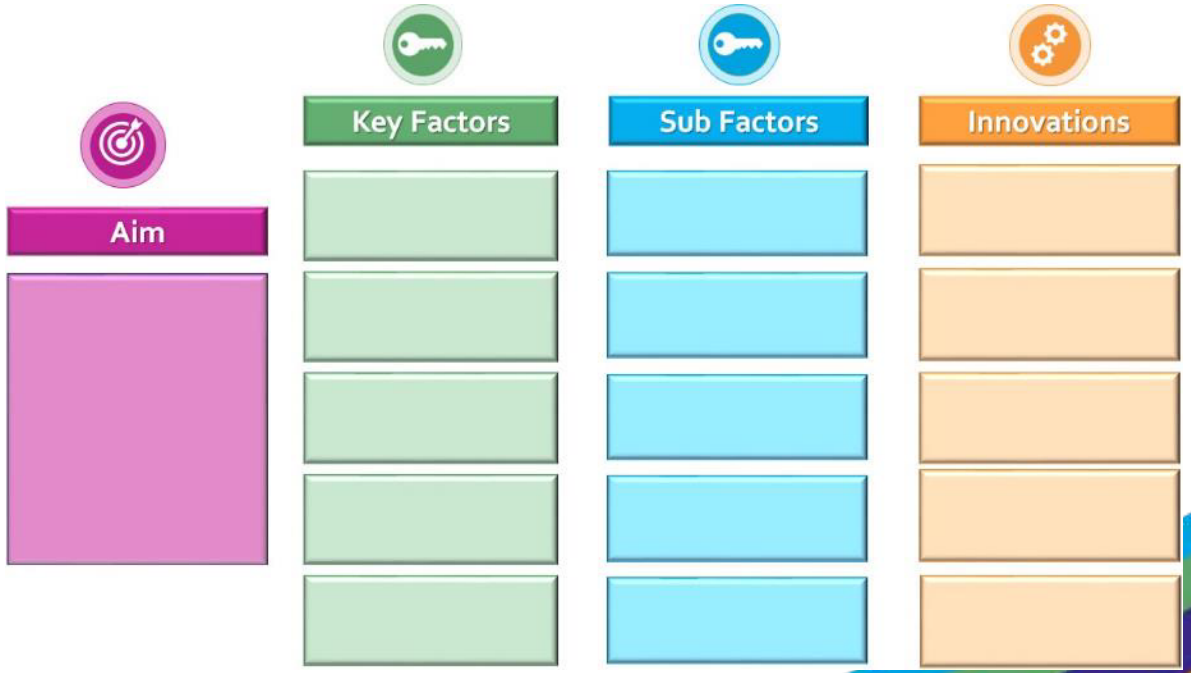
Tool: Key Driver Diagram

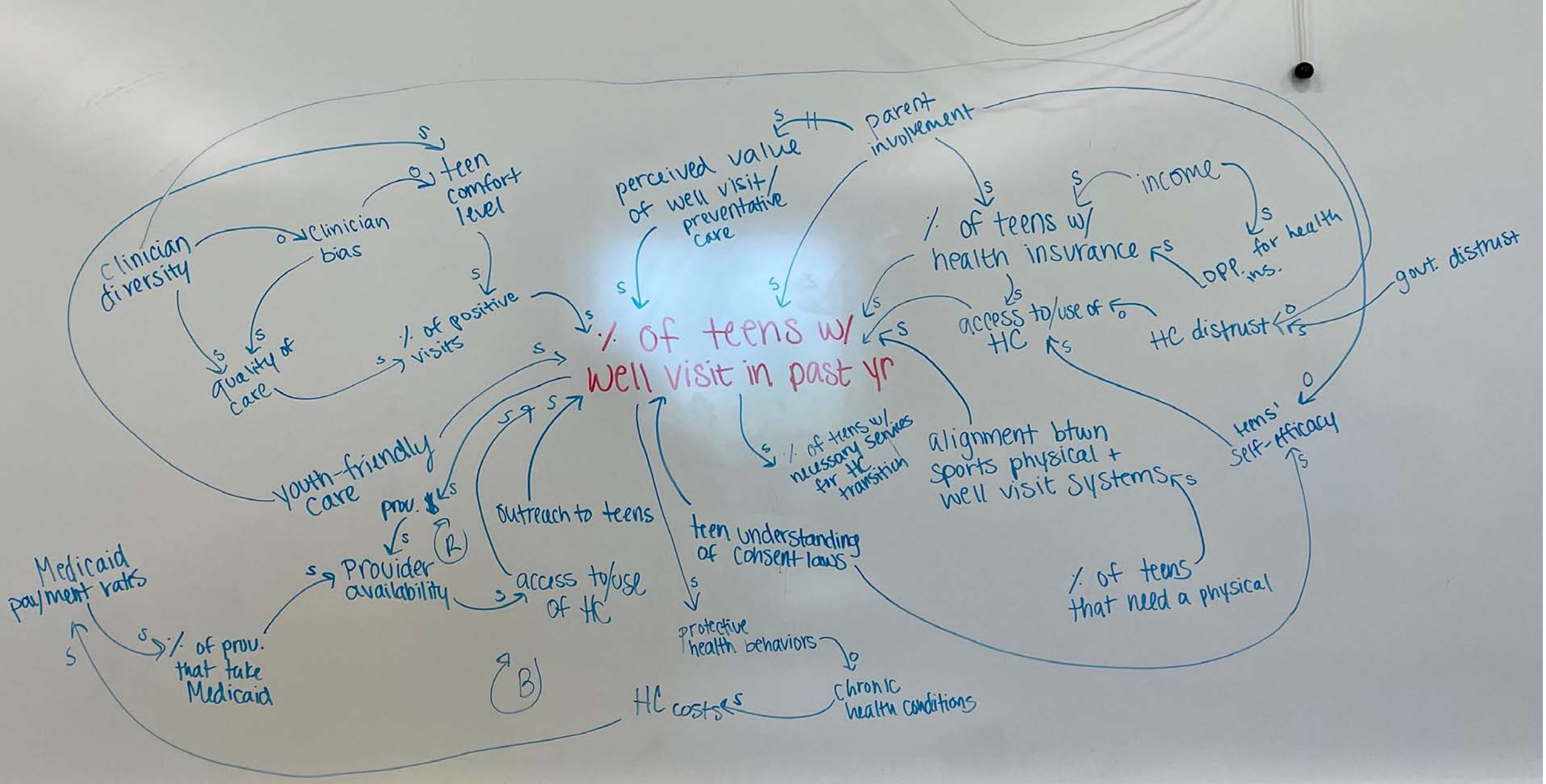
What:

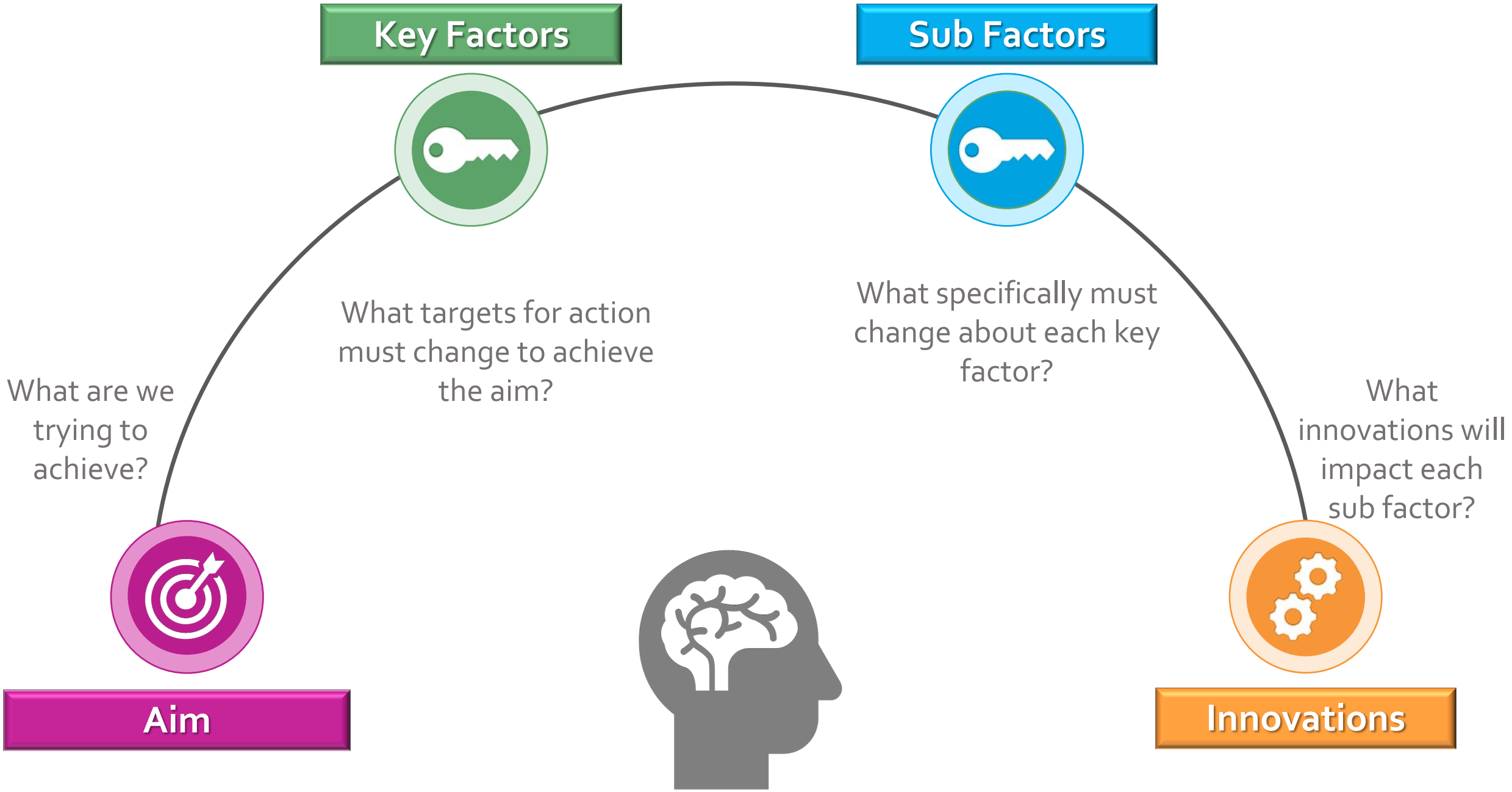
- Visual summary of the overall strategy to address your challenge

Purpose:

- Shows multiple paths of change
- Identify scope & areas of influence
- Prioritize areas of focus
- Communicates the ‘big picture’




% of teens w/ well visit in past yr
perceived value of well visit/ preventative care
parent involvement
% of teens w/ health insurance
income
opp. for health ins.
access to/use of HC
HC distrust
govt. distrust
teens' self-efficacy
alignment btwn sports physical + well visit systems
% of teens that need a physical
% of teens w/ necessary services for HC transition
teen understanding of consent laws
protective health behaviors
chronic health conditions
HC costs
Clinician diversity
Clinician bias
teen comfort level
quality of care
% of positive visits
youth-friendly care
prov. $
Provider availability
access to/use of HC
outreach to teens
Medicaid payment rates
% of prov. that take Medicaid
B
R


Key Factors
Sub Factors
What targets for action must change to achieve the aim?
What specifically must change about each key factor?
What are we trying to achieve?
What innovations will impact each sub factor?
Aim
Innovations

Aim

What are we trying to achieve?

We aim to improve…

% of Adolescents with a well visit in last year

Aim

What are we trying to achieve?

Key Factors

What targets for action must change to achieve the aim

We aim to improve…

% of Adolescents with a well vest in last year

Key Factor #1
Access to Healthcare

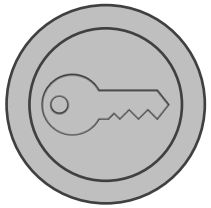
Key Factor #2
Perceived value of well care

Key Factor #3
Medicaid Reimb. Rates

Aim

What are we trying to achieve?

Key Factors



What targets for action must change to achieve the aim

Sub Factors

What specifically must change about each key factor?

We aim to improve…

% of Adolescents with a well vest in last year

Key Factor #1
Access to Healthcare

- **Teen self efficacy**
- **Heath care Trust**
- **Clinician diversity**

Key Factor #2

Key Factor #3

Aim

What are we trying to achieve?

Key Factors

What targets for action must change to achieve the aim

Sub Factors

What specifically must change about each key factor?

Innovation

What **changes/ strategies** will impact each sub factor?

We aim to improve…

Key Factor #1
Access to Healthcare

- **Teen self efficacy**
- **Trust in heath care**
- **Clinician diversity**

Key Factor #2

- **Sub Factors**
- **Sub Factors**

Key Factor #3

- **Sub Factors**
- **Sub Factors**

Innovation #1

Innovation #2

Innovation #3

Innovation #4

Funding Alignment, Evaluation, & Partner Diversity

State Level

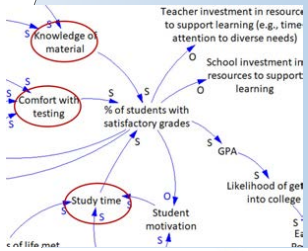
- Co-design and share the KDD
- Identify & fund priorities
- Invest in evaluation capacity
- Evaluate Impact
- Adjust portfolio
- Revise the KDD

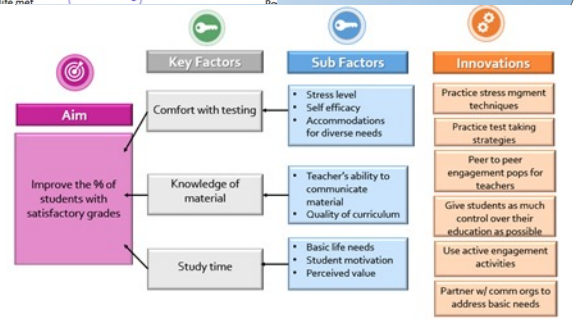
Partner Level

- Identify shared priorities
- Develop aligned approaches
- Adapt for local fit
- Measure and improve
- Demonstrate impact

Stage Based Support

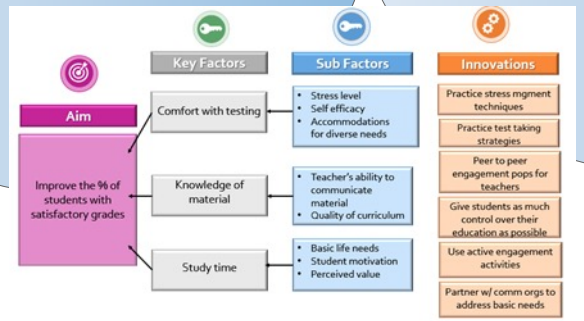
Exploration





Installation

Initial Implementation



Full Implementation

Group Reflection

How could you use the key driver diagram to support collaborative work with partners? When?

Think, Pair, Share

Identifying What “Works”

Innovation

What **changes/ strategies** will impact each sub factor?

Innovation #1

Innovation #2

Innovation #3

Innovation #4

- Community-defined evidence/ community’s vision of success
- Documented evidence/information
  - Research/literature, what’s working for folks in other states/sectors, etc.
- Community practitioner’s expertise

Community-Defined Evidence

Community-defined evidence is a set of practices that communities have used and found to yield positive results as determined by **community consensus** over time. These practices may or may not have been measured empirically but have **reached a level of acceptance by the community**.

Discover What's Out There

innovation hub
AMCHP | Explore. Build. Share.

Child TRENDS

sahrc
State Adolescent Health Resource Center

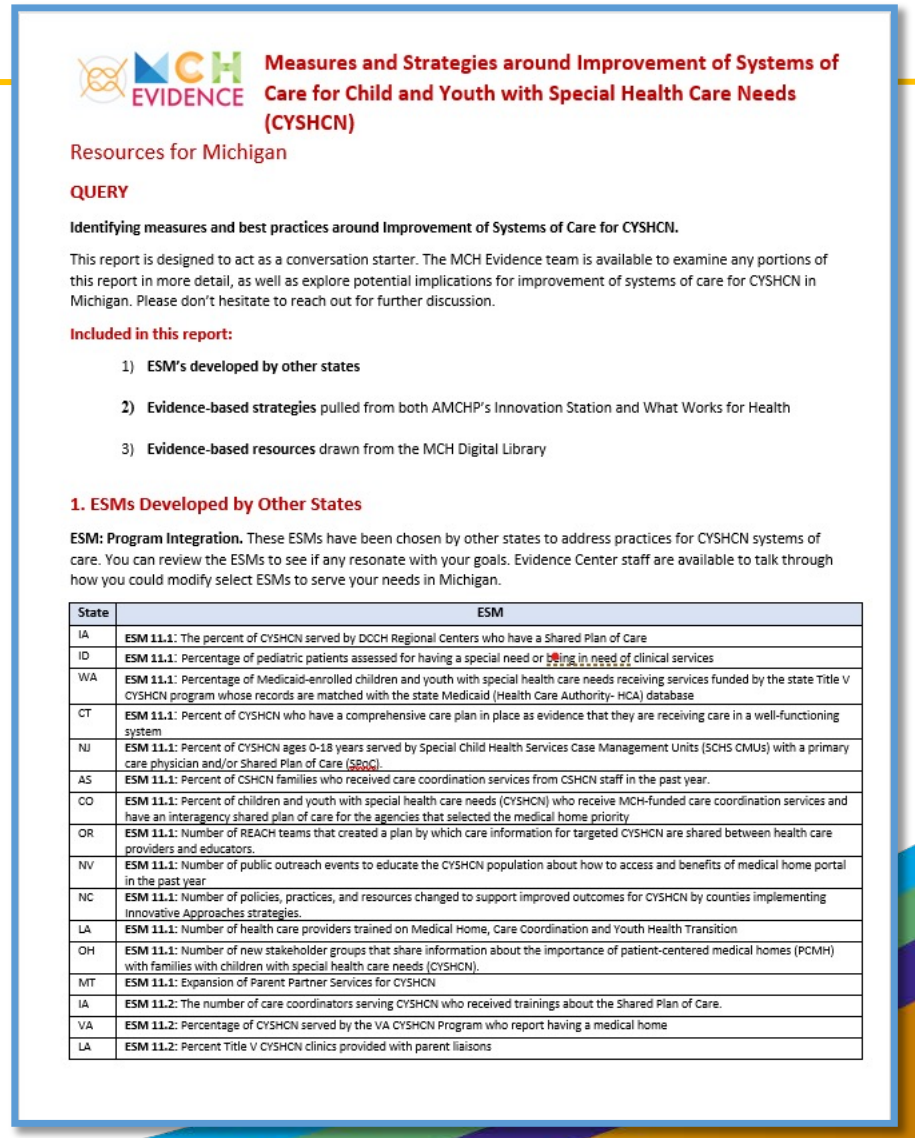
NAHIC
National Adolescent and Young Adult Health Information Center
UCSF

NIPN
national improvement Partnership Network

MCH EVIDENCE

Evidence Reports

- Customized report in specific topic area(s)
- Includes other state ESMs relevant to project work
- Effective practices working in other states relevant to project work
- Resources from the MCH Digital Library relevant to project work



MCH EVIDENCE

Measures and Strategies around Improvement of Systems of Care for Child and Youth with Special Health Care Needs (CYSHCN)

Resources for Michigan

QUERY

Identifying measures and best practices around Improvement of Systems of Care for CYSHCN.

This report is designed to act as a conversation starter. The MCH Evidence team is available to examine any portions of this report in more detail, as well as explore potential implications for improvement of systems of care for CYSHCN in Michigan. Please don't hesitate to reach out for further discussion.

Included in this report:

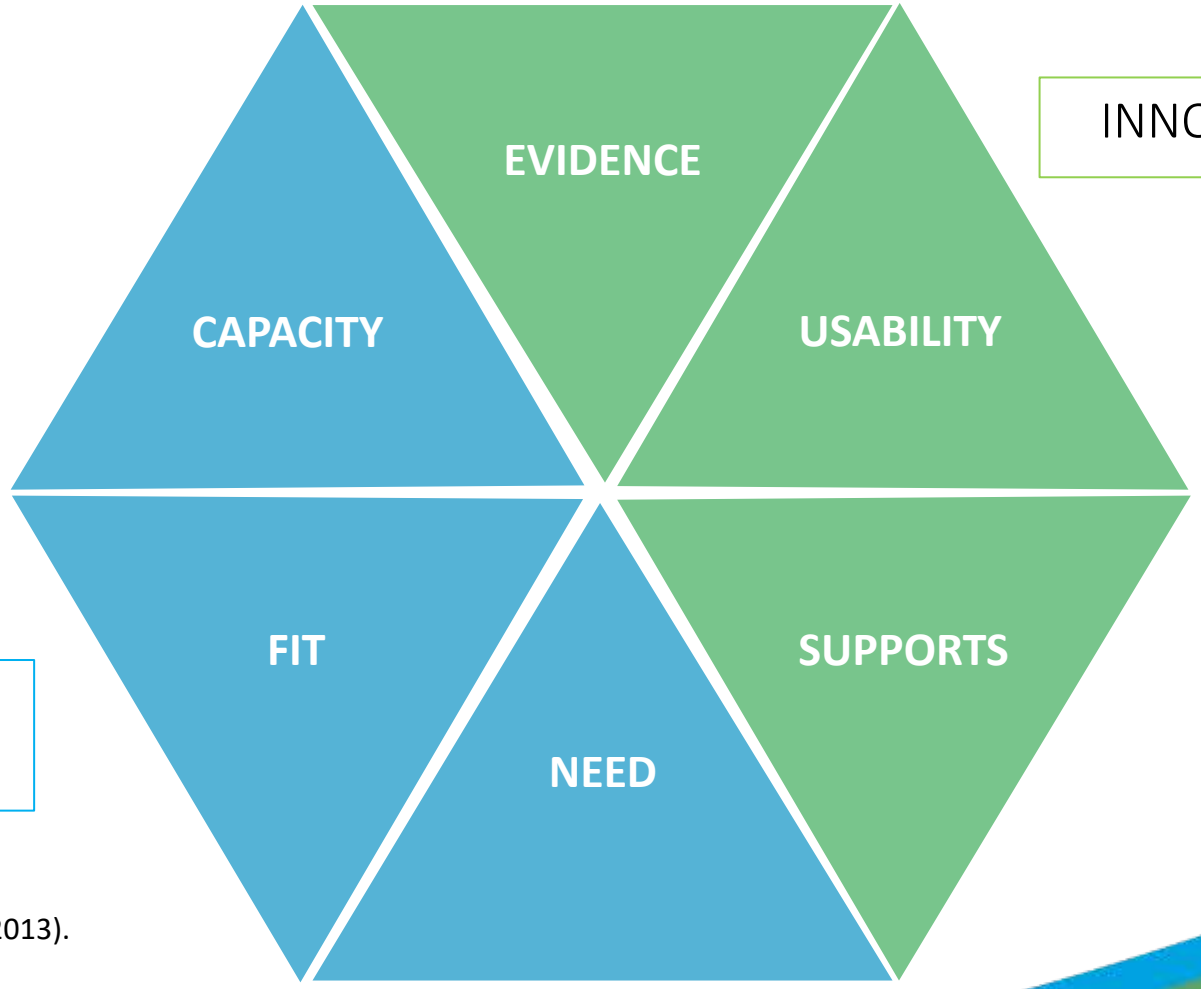
1) **ESM's developed by other states**
2) **Evidence-based strategies** pulled from both AMCHP's Innovation Station and What Works for Health
3) **Evidence-based resources** drawn from the MCH Digital Library

1. ESMs Developed by Other States

ESM: Program Integration. These ESMs have been chosen by other states to address practices for CYSHCN systems of care. You can review the ESMs to see if any resonate with your goals. Evidence Center staff are available to talk through how you could modify select ESMs to serve your needs in Michigan.

State	ESM
IA	**ESM 11.1:** The percent of CYSHCN served by DCCH Regional Centers who have a Shared Plan of Care
ID	**ESM 11.1:** Percentage of pediatric patients assessed for having a special need or being in need of clinical services
WA	**ESM 11.1:** Percentage of Medicaid-enrolled children and youth with special health care needs receiving services funded by the state Title V CYSHCN program whose records are matched with the state Medicaid (Health Care Authority- HCA) database
CT	**ESM 11.1:** Percent of CYSHCN who have a comprehensive care plan in place as evidence that they are receiving care in a well-functioning system
NJ	**ESM 11.1:** Percent of CYSHCN ages 0-18 years served by Special Child Health Services Case Management Units (SCHS CMUs) with a primary care physician and/or Shared Plan of Care (SPoC).
AS	**ESM 11.1:** Percent of CSHCN families who received care coordination services from CSHCN staff in the past year.
CO	**ESM 11.1:** Percent of children and youth with special health care needs (CYSHCN) who receive MCH-funded care coordination services and have an interagency shared plan of care for the agencies that selected the medical home priority
OR	**ESM 11.1:** Number of REACH teams that created a plan by which care information for targeted CYSHCN are shared between health care providers and educators.
NV	**ESM 11.1:** Number of public outreach events to educate the CYSHCN population about how to access and benefits of medical home portal in the past year
NC	**ESM 11.1:** Number of policies, practices, and resources changed to support improved outcomes for CYSHCN by counties implementing Innovative Approaches strategies.
LA	**ESM 11.1:** Number of health care providers trained on Medical Home, Care Coordination and Youth Health Transition
OH	**ESM 11.1:** Number of new stakeholder groups that share information about the importance of patient-centered medical homes (PCMH) with families with children with special health care needs (CYSHCN).
MT	**ESM 11.1:** Expansion of Parent Partner Services for CYSHCN
IA	**ESM 11.2:** The number of care coordinators serving CYSHCN who received trainings about the Shared Plan of Care.
VA	**ESM 11.2:** Percentage of CYSHCN served by the VA CYSHCN Program who report having a medical home
LA	**ESM 11.2:** Percent Title V CYSHCN clinics provided with parent liaisons

Tool: The Hexagon

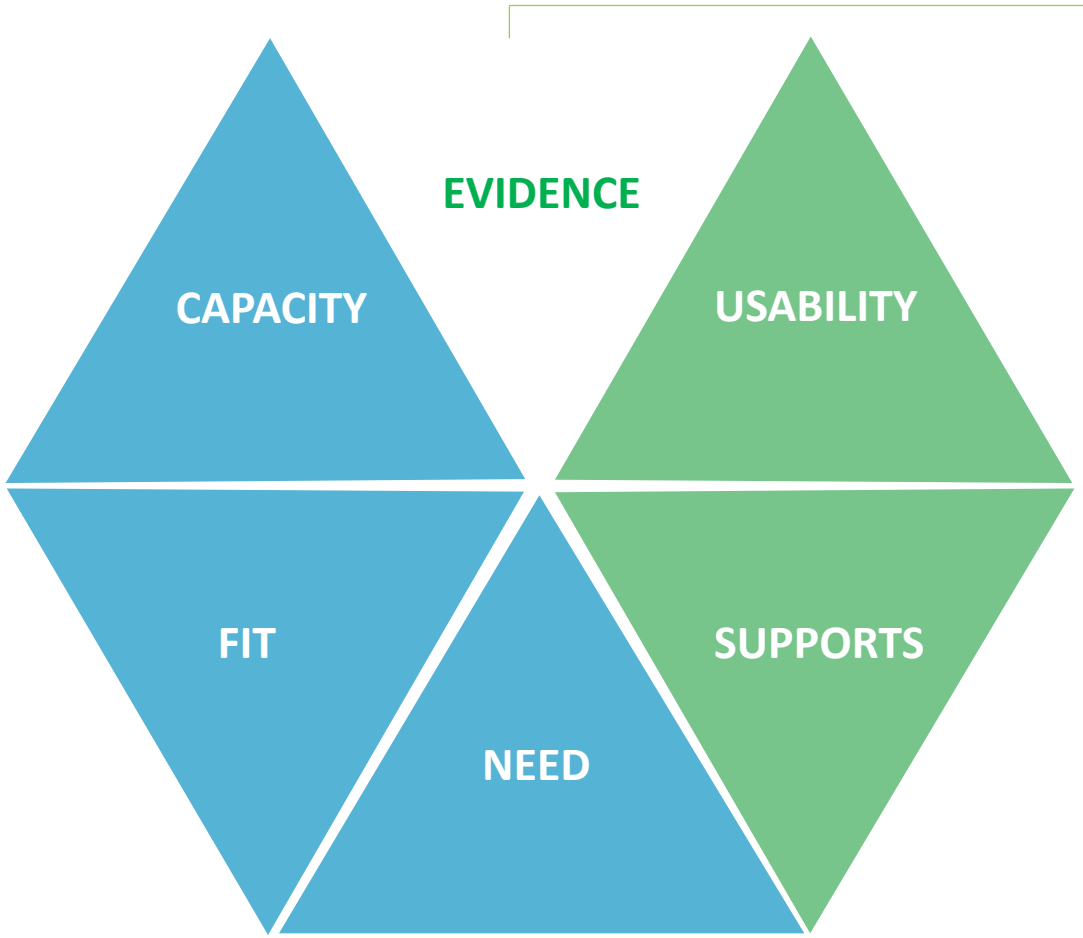


INNOVATION INDICATORS

IMPLEMENTING SITE INDICATORS

Adapted from Blase, K., Kiser, L. and Van Dyke, M. (2013).

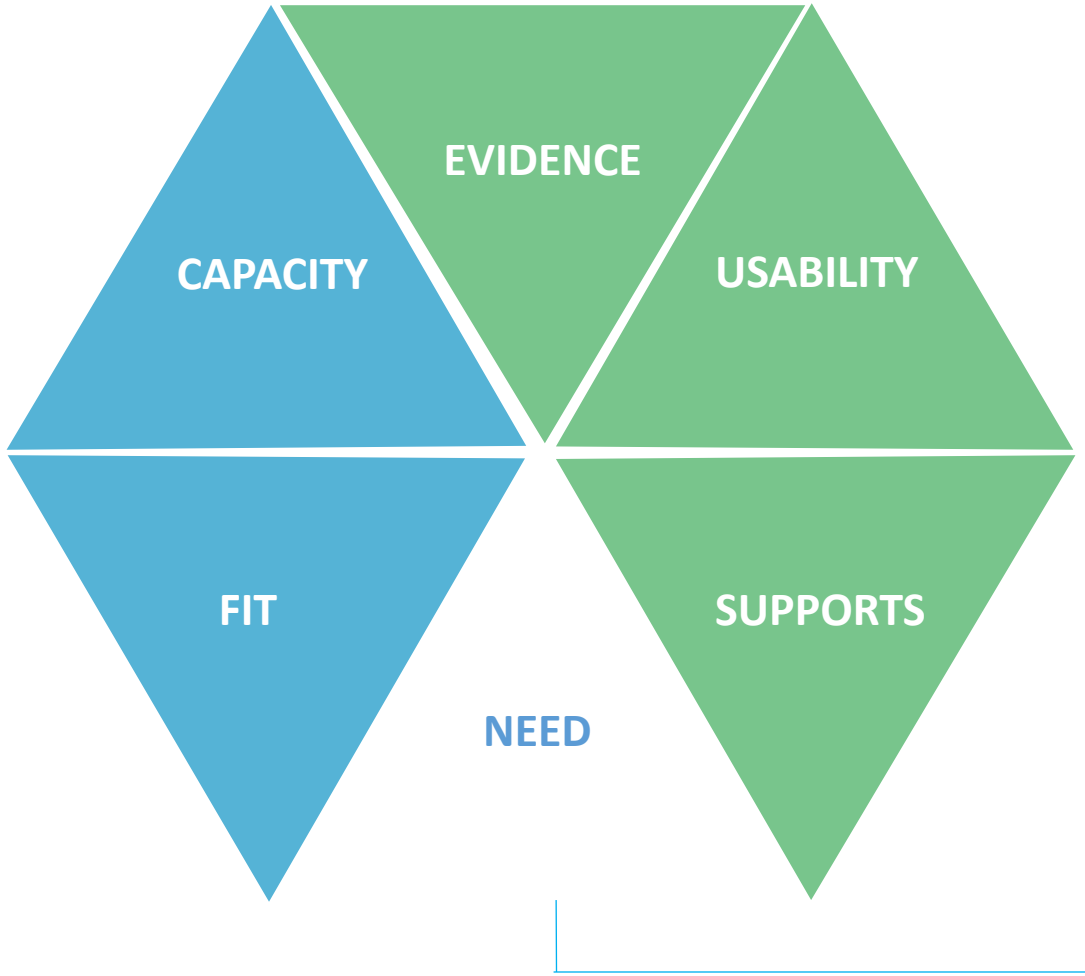
Innovation Indicators



EVIDENCE

- Strength of evidence
- Number of studies
  - Context
  - Diverse cultural groups
- Efficacy or Effectiveness
- Outcomes – Is it worth it?

Implementing Site Indicators



NEED

- Target population identified
- Disaggregated data indicating population needs
- Community perceptions of need
- Addresses service or system gaps

Using the Hexagon

NIRN | NATIONAL IMPLEMENTATION RESEARCH NETWORK

Facilitator(s):	Today's Date:
Individuals Participating in the Assessment:	Practice(s) Being Assessed:

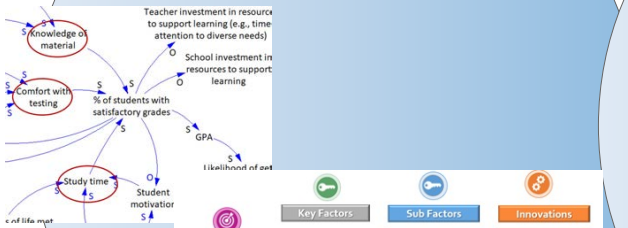
Identify the practice to be assessed. Write the numerical rating that best describe each component below.

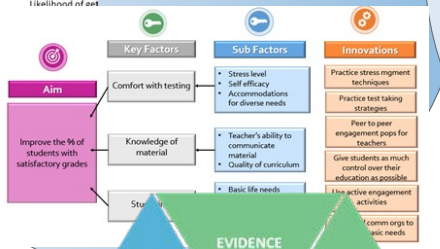
		PRACTICE 1	PRACTICE 2	PRACTICE 3
PRACTICE	EVIDENCE			
	SUPPORTS			
	USABILITY			
GRANTEE	NEED			
	FIT			
	CAPACITY			

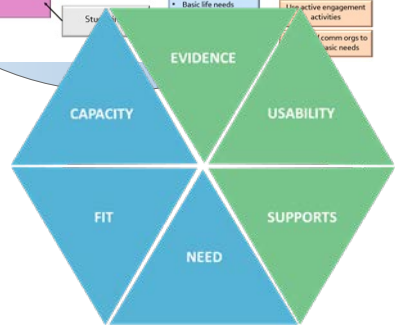
©2018 NIRN

Stage Based Support

Exploration

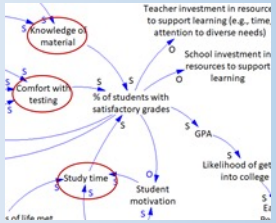


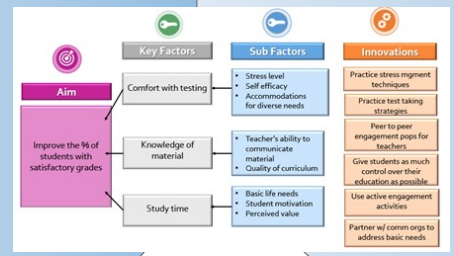


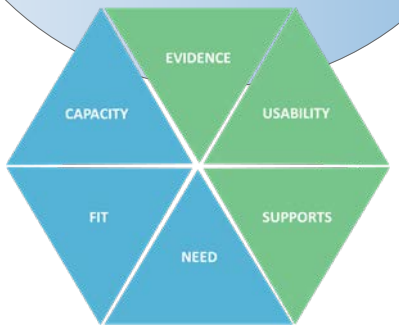


Installation

Initial Implementation







Full Implementation

Group Reflection

How could you apply the Hexagon in your context?

What would it take to introduce the Hexagon?

Group chat

Break

Using System Support Mapping to Build Connections and Strengthen MCH Systems

Jess Cohen

Source: System support mapping was developed by the National MCH Workforce Development Center at the University of North Carolina at Chapel Hill. Used by permission. Contact Kristen Hassmiller Lich for more information (klich@unc.edu).

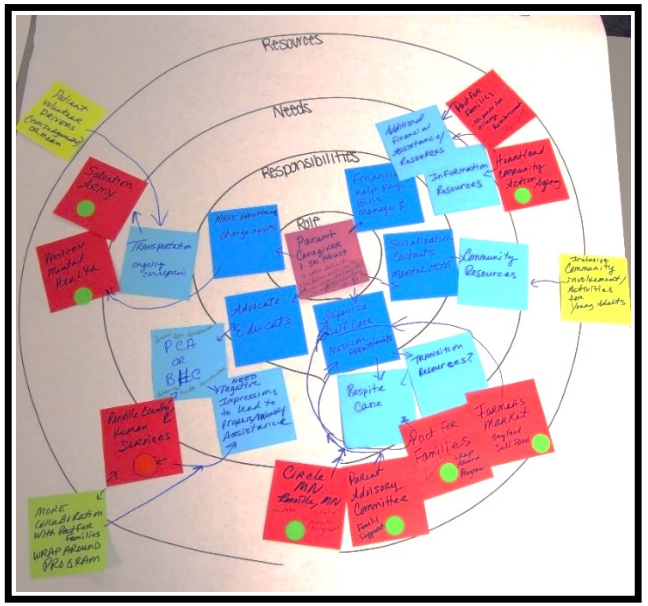
National MCH Workforce Development Center
Advancing Health Transformation

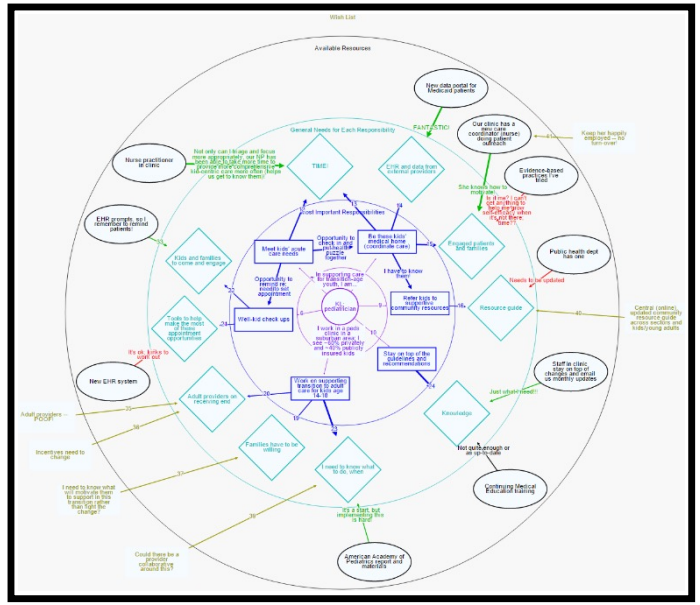
Learning Objectives

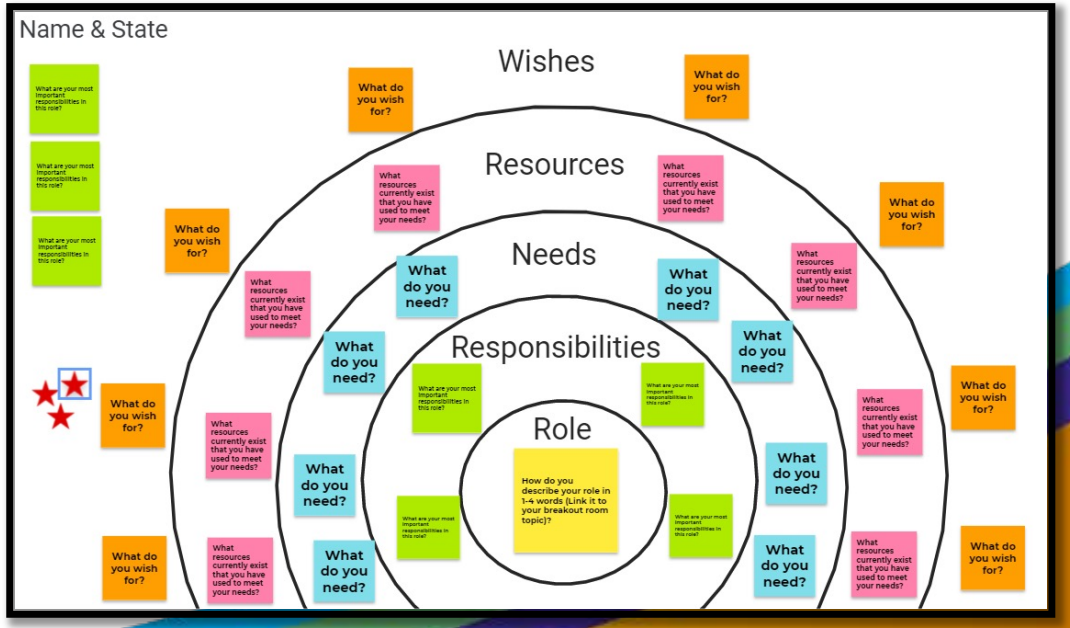
- Introduce a systems thinking tool to help clarify roles in a system
- Build a System Support Map to communicate your experience with an MCH system
- Develop peer learning and connection through sharing of maps

What is a system support map?

- An individual-level diagram of roles, responsibilities, needs, resources, and wishes
- Together SSMs illustrate existing capacity and relationships in a given system







What are the benefits of SSM?

- Better understand an individual within a system and how they can be better supported
- Identify areas for improvement
- Identify gaps and reduce duplication
- Build stronger systems and organizations

When is SSM useful?

- When systems are large, fragmented
- When many stakeholders contribute to outcomes within a system
- When a group wants to understand the roles or contributions of several partners in a complex or dynamic system
- When we want to hear the voice or perspective of the 'end-user'

What to do before we begin?

Think about the system you want to map

Examples:

- Statewide developmental screening programs
- MCH / CYSHCN family and youth engagement efforts
- Title V communication and dissemination work
- Doula or breastfeeding support systems
- COVID-19 response
- Maternal/women's health
- Children's health/CYSHCN
- Data-driven improvement work in MCH

What to do before we begin?

Think about your role in that system

Examples:

- Data manager for the developmental screening system
- Supervisor for a specific division/department
- Coordinator for CYSHCN program
- Liaison to youth advisory committee
- Family or community member/the voice of lived experience for …
- Therapist for ….
- Etc.

ROLE
RESPONSIBILITY
NEED
RESOURCE
WISH

SSM Example

Wishes
Resources
Needs
Responsibilities
Role
What is your role/identity at the intersection of EITC & Public Health?
What do you wish for?
What resources currently exist that you have used to meet your needs?
What do you need?

Building your own SSM

As a group:

- Decide your specific system of focus

Individually:

- Define your role (not necessarily job title!)
- Put in 4 top responsibilities
- Complete needs, resources and wishes for at least one responsibility
- Continue as time allows
- Consult the SSM handout for more detailed instructions if needed

Sharing your map

Questions to consider:

1. What similarities or differences do you see across maps?
2. How supported do you feel within the system? What do you need to feel more supported?
3. Who else might it be helpful to do this activity/have this conversation with? What seems appealing or confusing about this method?

SSM References & Resources

- **System Support Maps in 5 Minutes** – Video from the National MCH Workforce Development Center: https://media.sph.unc.edu/adobe/mch_ole/Workforce_Development/system_support/
- Calancie, L., Margolis, L., Chall, S. A., Mullenix, A., Chaudhry, A., Hassmiller Lich, K. **System Support Mapping: A Novel Systems Thinking Tool Applied to Assess the Needs of Maternal and Child Health Title V Professionals and Their Partners.** J Public Health Manag Pract. (Feb 2019). [Selected excerpts on next slide]
- **An in-depth discussion of the theory and methodology of System Support Mapping is available on Dr. Hassmiller Lich's webpage: https://kristenlich.web.unc.edu/system-support-mapping/**
- Hassmiller Lich, K., Chall, S., Werthmeier, A., Collins, S., Jarvis, M., & Cilenti, D. (2015). **AMCHP virtual training for family scholars: Documenting support systems with families of CYSHCN to inform individual and community level improvement efforts** [PowerPoint slides]. https://slideplayer.com/slide/4503080/

Lunch

Evidence-Based Strategies for Building and Sustaining Momentum

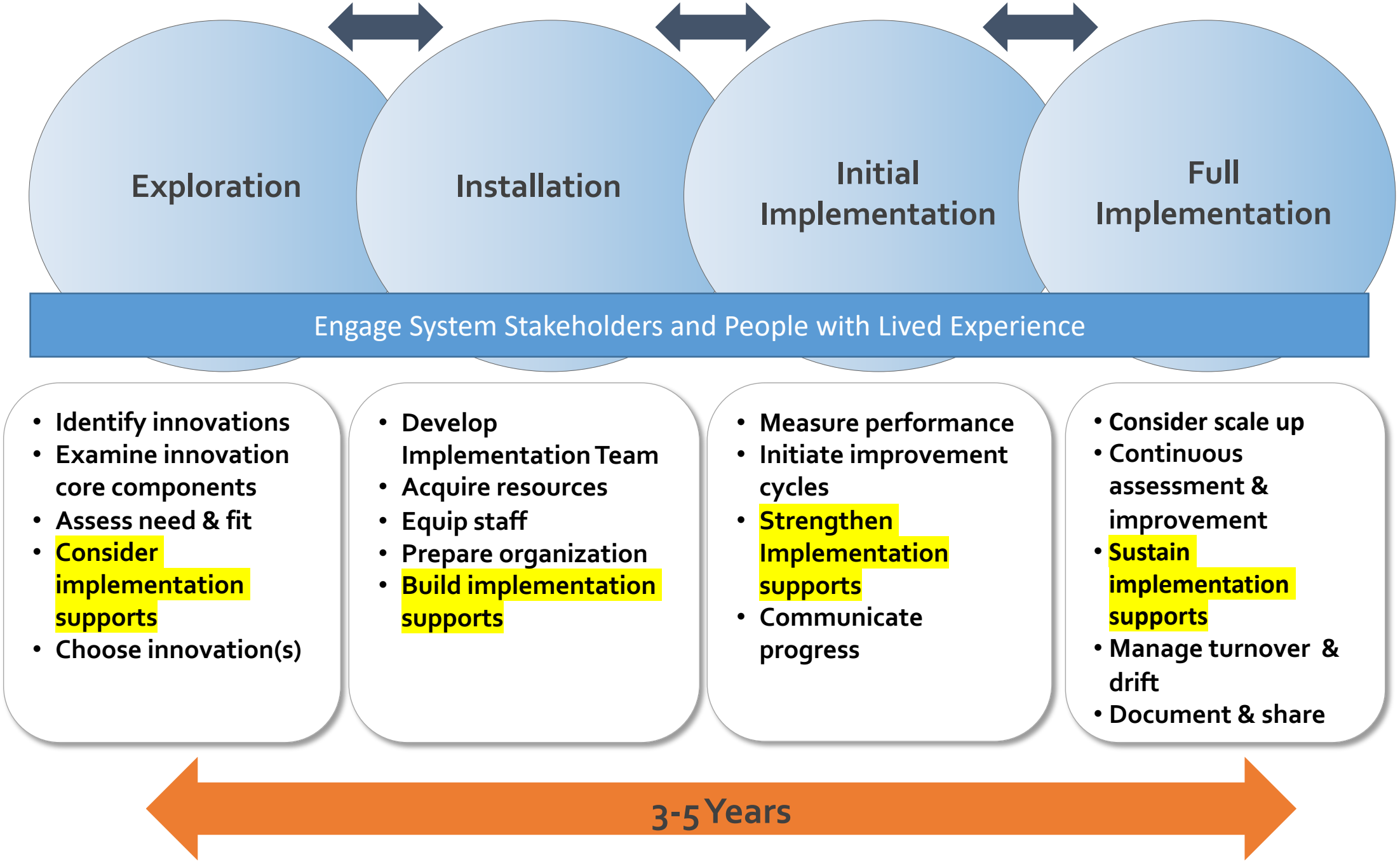
National **MCH** Workforce Development Center

Advancing Health Transformation

Learning Objectives

- Understand implementation supports
- Apply the Implementation Support Checklist to identify opportunities to strengthen evidence-based decision making and implementation

Miracles Required?


Exploration
Installation
Initial Implementation
Full Implementation
Engage System Stakeholders and People with Lived Experience
• Identify innovations
• Examine innovation core components
• Assess need & fit
• Consider implementation supports
• Choose innovation(s)
• Develop Implementation Team
• Acquire resources
• Equip staff
• Prepare organization
• Build implementation supports
• Measure performance
• Initiate improvement cycles
• Strengthen Implementation supports
• Communicate progress
• Consider scale up
• Continuous assessment & improvement
• Sustain implementation supports
• Manage turnover & drift
• Document & share
3-5 Years

Please say hello to Asha.

Asha was recently hired to support adolescent health & transition innovations.

What does Asha need to be successful?

Supports for Asha

- Competency Supports
- Organizational Supports
- Leadership Supports

Competency Supports

Selection

Training

Coaching

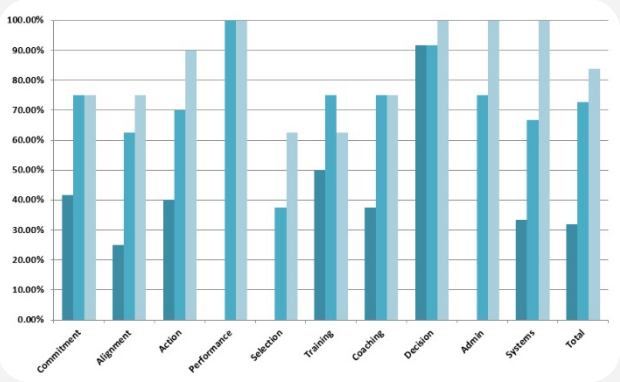
Fidelity/Performance Assessment

System Support Maps & Implementation Supports

What kind of Competency Drivers did you identify on your System Support Maps?

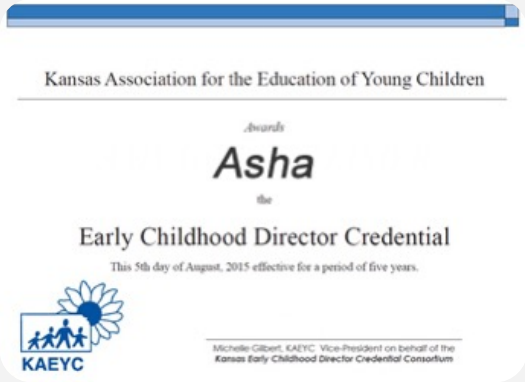
Organizational Supports

Decision Support Data Systems



Facilitative Administration

Systems Intervention


Kansas Association for the Education of Young Children

Awards

Asha

the

Early Childhood Director Credential

This 5th day of August, 2015 effective for a period of five years.

KAEYC

Michelle Gilbert, KAEYC Vice-President on behalf of the *Kansas Early Childhood Director Credential Consortium*

Ohio Department of Education

State of Ohio

DEPARTMENT OF EDUCATION

LICENSE TO OPERATE

License Number: [Number protected]

Building Name: Educational Bldg

Fiscal Agent/Diocese: Educational Bldg

Building Address: Cincinnati, OH

Program Name: Educational Building

Superintendent/CAO: [Name protected]

County: Hamilton

Licensed Program	Issued Date	Expiration Date	Capacity
Preschool	04/28/2011	04/28/2013	30
SACC	04/28/2011	04/28/2013	32

This license has been issued in accordance with requirements of state law and is subject to revocation or suspension for cause and is not transferable without consent of licensor.

To report any concerns, complaints, and/or violations, call (614) 466-0224 or the Department Ombudsperson at (877) 644-6338.

Superintendent of Public Instruction

This license and the most current compliance report must be displayed in a conspicuous place on the premises.

What kind of Organizational Drivers did you identify on your System Support Maps?

Leadership Supports

Multilevel Engagement

Continuous Communication

Sustained attention

Adaptive Strategies

Implementation Supports Checklist

Training – How does training build staff competency to implement the practice?

Program leaders and managers…		
Rating	**Action**	**Notes**
	1. Skill-based training is secured for relevant staff (e.g., training integrate opportunities for practice and feedback)	
	2. Training data are used to develop competency and improve training	

Activity: Implementation Supports Checklist

- Each team should choose a specific support (e.g., coaching; 1 min.).

- Individually answer the checklist questions for the selected support in the context of your project. (2 min)

- As a group, discuss your answers & capture ideas for action. (7 min.)

Teams Build the Supports

Reflections and Wrap-Up