

ECCS Collaborating Partner Advisory Group

Meeting #1

May 3, 2022

11:00 – 1:00

Attendees:

Abdulkarim Said, DHHS Community Care Coordinator
Amy Belisle, DHHS Commissioner's Office
Angie Bellefleur, Office of Child and Family Services, Help Me Grow
Anna Cyr, CDC, ECCS, Parent Leadership Liaison?
Anne Marie van Hengel, MD, PQC4ME
Ashley Olen, CDC, ECCS
Carrie Woodcock, Maine Parent Federation
Hibo Omar, New Mainers Public Health Initiative
Jamie Michaud, Child Development Services
Joni Sprague, Educare, Maine State Parent Ambassadors
Katherine Johnston, Gov. Office of Policy Innovation and the Future
Katie Alberico, Midcoast Hospital Nurse, Perinatal Coordinator
Lori Jewell, Child Welfare Houlton Band of Maliseets
Maggie Jansson, MaineMOM Coordinator Midcoast
Mary Milam, MMC Center for Quality Improvement
Melissa Harding, Parent Ambassador
Nancy Cronin, Maine Developmental Disabilities Council
Pam LaHaye, Maine Children's Trust
Rajel Hippler, Parent Ambassador
Rita Furlow, Maine Children's Alliance
Ruby Parker, Maine Resilience Building Network
Sally DelGreco, Consultant
Sarah Austin, Perinatal outreach Coordinator
Selam Runyon-Baruch, New Mainers Public Health Initiative
Stacey LaFlamme, Maine CDC, ECCS
Sue Mackey Andrews, Helping Hands with Heart
Sue Powers, MeCAP and ACAP
Tammy Hatch, Public Health Nursing
Tracye Fortin, Educare Central Maine and KVCAP
Travis Bryant, Adoptive Families of Maine and Kinship Program

Intro and Overview

- Reminder of DHHS and Children's Cabinet goals for young children
- Reminder of ECCS goals and objectives (could insert this PPT slide)
- Shared map of P-3 assets
- Why CPAG? No more working in silos; lived experience is experience; a collaborative opportunity to support programs like Help Me Grow, ASQ Online, and Cradle Me;

- Participants introduced themselves – see organizations in attendee list

Collaboration and Adaptive Leadership Presentation

- Discussed principles of collaboration including mutual benefit, shared learning/values, bringing layers of expertise and experience, respecting differences, encouraging participation, intentionality, commitment (to work, team, collaboration), shared action.
- We will be focusing on adaptive work instead of technical work. The problem/solution are complex. Responsibility is shared, solutions require innovation, requires diversity.
- Brainstorming session about group norms:
 - “Say the thing” – don’t be afraid
 - Remember history but don’t dwell in it
 - Have dialogue vs. debate
 - Be ready to share and learn
 - Listen
 - Assume good intent
 - There are no stupid questions
 - Remember we are still human
 - Give grace to ourselves and each other
 - Everyone has something to bring to the table, accept uniqueness and similarities
 - Invite people into the conversation, “what do you think?”
 - Take care of yourself
 - There are many ways to engage – reach out via email if that is more comfortable
 - Share back – set parameters around how we share information with each other and beyond this group
 - Acknowledge that we are all emerging from the trauma of the pandemic and life changes that may change perspectives
 - Give space to the minorities in the collaborative, amplify those voices (including following up after the meeting to round out perspective/fill in the gaps)
- Will bring up the group norms at the beginning of the next meeting
- Ask of the group: whose voices aren’t in this group? Please bring them to the table. (e.g. Grandfamilies – the Kinship Program will help)

Break

Mentimeter Activity – What are the biggest challenges or barriers families face when accessing P-3 services in Maine?

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Mentimeter

Understanding eligibility for programs

Income guidelines

Provider availability

Awareness

waitlists

Not being referred/connected with services they may be eligible for

Strict early intervention eligibility criteria.

Transportation

Many different forms to fill out rather than just one to determine eligibility

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What are the biggest challenges or barriers families face when accessing P-3 services in Maine?

Mentimeter

Housing / transportation/food insecurity.

Care Coordination

Insurance providers

Misunderstanding/unawareness of eligibility criteria

Lack of care coordination and one central access point.

staffing issues

I think the biggest barrier I personally have encountered is the services my son has needed. They originally diagnosed him in school and were wrong. It took us 2 years to find the right diagnosis and are still struggling for services in school.

Awareness, what, how, who, and where?

Not having choice around childcare provider affordability, availability, quality

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What are the biggest challenges or barriers families face when accessing P-3 services in Maine?

Mentimeter

Lack of agency cross collaboration.

Over income for services

Not knowing the importance of receiving early intervention

Lack of coordination of programs at the regional/local level

Personnel shortages, wages and changing depth of family needs and complexities.

For immigrants and refugees community to access early childhood screen Not having culturally and linguistically tailored services social determinants of health

Eligibility

Lack of local resources for families that are coordinated

being sent out of state for specialists

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What are the biggest challenges or barriers families face when accessing P-3 services in Maine?

Mentimeter

Competing priorities

Lack of resources to immigrants and refugees lead organizations

Turnover of service provider - impacts relationship

No single door of access

Program staff are not aware of other programs and the availability or eligibility for those program - lack of cross training

Multiple programs with different eligibility and a lack of coordination between them

Need one stop and point of access for families at the local/regional level

Parents are not the central focus

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Some examples:

- Lack of care coordination
- Staffing issues
- Over income for services but still needing support
- Culturally relevant services
- Eligibility – misunderstanding, lack of awareness, too many forms
- Lack of cross-agency collaboration
- No single access point

Discussion of Challenges and Barriers of P-3 Systems

- Providers don't understand what's available themselves. It's hard to make recommendations if they don't know where to go. Do they go to 211? The social worker on their floor?
 - What works is when one person takes control of the referral or patient management.
- When working with an interpreter, a lot gets lost in translation.
- Cases get open and closed, parents have to start from square 1 a lot of the time if they don't engage soon enough. The current methods don't work for all parents.
- Care coordination piece – providers don't know all the systems of care. They might think it's working but it isn't from the parent perspective. Medical providers don't know schools, school providers don't know medical or state systems. There are so many systems of care but people only know their own. The only people who know all the true systems of care are the parents, and it takes many, many years. Need true care coordination model across systems – not just within each system of care.
- Discussions among providers about who is at risk – this needs to be broadened, anyone can be at risk. Midwives and OBs should be more aware of what is out there.
- Transportation – not many options for parents getting their kids to care and services. Need a more holistic picture of family needs.

Discussion of Strengths and Assets of P-3 Systems

WHAT ARE THE STRENGTHS IN THE P-3 SUPPORTS AND ASSETS IN MAINE?

Mentimeter

Please share the strengths and/or assets of the P-3 systems in Maine.

Many wonderful programs across the state to support children and families

1) Willingness of folks to collaborate and put families first. 2) Legislative and Governor support for EC. 3) Because we are small, we are creative and take risks!

Maine's size promotes the ability to know many of the people doing wonderful work

The power of parent's voices is finally being valued

lived experience of parents helping other parents.

Stronger focus in mental health in children

Cross-department collaborations between DOE and DHHS have shown success

Supporting the client to meet needs Finding solutions ?

Ability to fill out forms online and submit them online

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Please share the strengths and/or assets of the P-3 systems in Maine.

Wonderful programs across the state like Educare, Family Futures Downeast, ECCP

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- Willingness to collaborate
- Legislative and Governor support for early childhood
- The voice of parents is finally being valued
- We are small so we can be creative and take risks
- We are small so we can know the many people doing this work
- Ability to fill out forms and submit online
- Variety of supports to meet individualized needs
- Stronger focus on mental health in children

Discussion: where is success/early success that we can build on?

- Collaboration between DOE and DHHS – more collaboration across departments since the pandemic enabled by virtual meetings.
 - CDS EI program is right on the front page of POSC
 - CDS was added to Cradle ME
 - Significant increase in children birth to 1 referred to CDS and enrolled
- It was not a lot of work to step out of the silos once we did it. Don't need to be an expert, just need to know the right people to connect with/who to reach out to.
- So much more room for parent engagement in the last year, they are finally really being listened to.
 - Push back, office of special education programs has given guidance to DOE about including parents/improving parent engagement. So far only on very specific projects and age groups. Want them to broaden their approach.
 - Legislation to improve CDS became such a power struggle that parents became lost in that process.
 - Parent engagement is not happening statewide. The seeds have been planted... but you can't just go up to parents and have them engage without giving them tools. You're putting them in a room with a bunch of professionals with letters after their name and they get overwhelmed. It's like we're checking the box on parents without giving them the tools.
- New Mainer parents don't see the reason to miss work to meet with the professionals that are helping their young children. These people have degrees, but you have a degree in your own child. Parents don't understand that they also need to be there with their child with the expert.
- There is a lot of negativity in EI meetings. Need to focus on the strengths, excite the parents, get them involved.
- Value parents' time and use it as effectively as possible.
- A lot has to do with the comfort level of the parents. We're given tools and expected to roll with it. If we could have more of a Parent Ambassador program, you'd see more parents stepping out and saying "I'm noticing this problem, how do we fix it?"
- Are there families falling through the cracks because they don't have access to technology? (one yes) Have families benefited from telehealth?
 - Broadband and transportation are limited in rural communities
 - Internet access and devices can be tricky
 - Telehealth has also saved lives and parent time
 - For grandfamilies, kinship families, technology can be a challenge. Struggled to meet training requirements for foster care because it's all virtual now. Also heard positive feedback about not needing to travel.
 - How well have we leveraged libraries?
- Stronger focus on mental health and children. Strength and still a challenge.
 - Mental health capacity is a huge challenge right now
 - Need more mental health supports in schools
 - Mental health providers are filled to capacity – don't have people to refer out to
 - "Mental health and wait lists should not be in the same sentence"

- State of Maryland has used public libraries to connect with parents as part of their early learning grant

Survey: <https://www.surveymonkey.com/r/M9VJ885>

- Want to find more opportunities to engage over time

Please provide feedback on how to improve the CradleME form: <https://cradleme.org/>

Next Meeting on August 2, 11-1