

HELP ME GROW



BUILDING IMPACT

2021 Annual Report





Building Impact

This 2021 Help Me Grow (HMG) report synthesizes information collected between September 1, 2020 through August 31, 2021 from 107 of the 118 HMG systems operating in 28 states and the District of Columbia, and captures:

- The breadth and scope of HMG system implementations and progress since 2020.
- Fidelity to each Core Component of the HMG Model across communities.
- The capacity of HMG to reach children, families, community partners, and child health care providers.
- Novel approaches and system enhancements currently explored by the HMG National Affiliate Network.

A Letter From The Help Me Grow Founding Director

I am excited to welcome you to the 2021 HMG Building Impact Report which synthesizes data collected through our most recent Fidelity Assessment. So many of the findings command our attention and celebration. I will, however, attempt to limit my comments to a few key points, so as to not delay your review of the report itself.

First, and perhaps foremost, the report illustrates the remarkable engagement of our affiliates and systems and their commitment to advancing the HMG Model. Of the 118 HMG systems across the nation, 107 operating within 28 affiliate states and Washington, DC submitted Fidelity Assessment data. This level of engagement is truly outstanding, especially since the data was collected by HMG systems across the National Affiliate Network between September 2020 and August 2021, as the nation struggled to cope with an explosive pandemic.

Findings continue to highlight that for the HMG National Center and affiliates, scale and spread of the HMG Model continues to be “job 1,” as 18 HMG systems advanced in their designated implementation, including 16 of those moving from an installation phase to full implementation of the HMG Model.

HMG’s capacity to address families’ critical needs is illustrated by reports from affiliates across the nation on the Models’ ability to support families dealing with the many impacts of COVID-19. Limited in-person access to medical providers, increased mental health and basic needs, staff turnover and burn-out, limitations on in-person events, and decreases in funding continued to challenge communities as well as HMG systems working to support them. Yet despite these challenges, the National Affiliate Network explored novel approaches and system enhancements and the HMG National Center made progress in 5 strategic growth priorities.

Data continues to inform efforts to strengthen the impact of the HMG Model. Particularly encouraging are such findings as:

- 90% of callers reported that HMG met their needs.
- Over half of the Affiliate Network reported having established goals to leverage HMG to advance racial equity.
- 84% of HMG systems reported regularly sharing their data across external partnerships to create more efficient and effective early childhood systems.

In addition to sharing data from 2021 alone, this report also highlights the Model's impact longitudinally, showcasing data from 2017 through 2021. Over these five years, 550,000 families have been served by HMG Centralized Access Points across the Affiliate Network, 84% of whom reported having their needs met. Further, HMG systems reached over 730,000 families attending HMG-led events and conducted almost 12,000 trainings to child health providers.

Please enjoy reviewing the accomplishments of the HMG National Affiliate Network in this annual report. As always, we welcome your interest and engagement as we partner together to strengthen families to promote children's optimal health, development, and well-being.

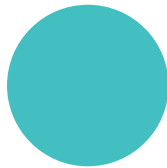
Best wishes,



Paul H. Dworkin, MD

Founding Director, Help Me Grow National Center

The Help Me Grow National Center is a program of the Office for Community Child Health within Connecticut Children's Medical Center.



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About Help Me Grow

THE HELP ME GROW DIFFERENCE

A better future starts with Help Me Grow. By supporting our young children today, we promote healthier and more prosperous communities tomorrow.

AN OPPORTUNITY TO MAXIMIZE CHILDREN'S POTENTIAL

The early years present incredible opportunity to build a strong foundation as the brain rapidly develops during the first five years of life. All children benefit from an organized system of community resources to help them thrive, like health care, quality early learning experiences, healthy nutrition, and parent support. However, when the system is not well organized, it can be difficult for families to access resources for their children and challenging for service providers to connect families to needed supports. This can have long-lasting consequences on children's health and well-being.

HELP ME GROW: A SOLUTION TO HELP YOUNG CHILDREN SHINE

A network of community resources works like a power grid. When the grid functions well, families can plug in to an organized flow of resources and easily access the ones they need. Help Me Grow strengthens the grid by maintaining a current directory of available services and connecting service providers to each other to create an interconnected system. Families benefit as Help Me Grow listens to them, links them to services, and provides ongoing support. Help Me Grow is available to all children, including those whose families may have concerns or simply want to learn more about their child's development.

A VISION FOR A BRIGHTER FUTURE

Thriving communities depend on the well-being of all members. By providing families with equitable access to the resources they need when they need them, Help Me Grow works to ensure we all enjoy more vibrant years ahead.

The Help Me Grow (HMG) Model is the only evidence-based early childhood system model existing nationwide and provides a unique framework to implement comprehensive, cross-sector, coordinated, effective early childhood systems that promote equity and strengthen family resilience and protective factors. Successful implementation of the HMG Model requires communities to identify existing resources, think creatively about how to make the most of opportunities, and build a coalition to work collaboratively toward a shared agenda.

The HMG Model helps states and communities leverage existing resources to advance an integrated, cross-sector system that:

- Promotes the optimal development of all young children.
- Helps identify concerns and needs among families with young children.
- Links families to community-based resources.
- Works in partnership with families by prioritizing parent and caregiver goals for their children's well-being.
- Follows-up with families as well as their service and health care providers to ensure a synergistic approach to support.

All contexts are local, and those unique local circumstances and complexities bear implications for the ways in which HMG is implemented. Across the country, HMG looks and feels different, but the existence and cooperation of four Core Components define the Model:



A **Centralized Access Point** assists families and professionals in connecting children to the network of community resources working to help them thrive.



Family & Community Outreach builds parent and provider understanding of healthy child development, supportive services available to families in the community, and how both are important to improving children's outcomes.



Child Health Care Provider Outreach supports early detection and intervention efforts and connects medical providers to the network of community resources to best support families.



Data Collection supports evaluation, helps identify systemic gaps, bolsters advocacy efforts, and guides quality improvement.

Outreach to families and community-based service providers engages parents and caregivers as partners, as well as constituents of the Centralized Access Point, which provides HMG Care Coordination and support in navigating the landscape of programs and services for families with young children. HMG outreach efforts support providers by enhancing their developmental promotion and early identification activities. When child health providers identify a concern or need, the HMG Centralized Access Point offers a trusted and efficient solution for care coordination, referral, and linkage to services and resources. Additionally, HMG closes the feedback loop with child health care providers, so families are optimally supported, communication is streamlined, redundancies minimized, gaps identified, and children receive what they need, when they need it.

The HMG Model also depends on three Structural Requirements to provide the foundation for effectively building and managing the Core Components of a HMG system over time. Implementation relies on an **Organizing Entity** to provide support, oversight, continuity, and facilitation of collective impact efforts. The efficacy and durability of the HMG Model also hinges on **Continuous System Improvement**, or constant efforts to enhance, refine, and innovate.



About this Report

To understand the national impact of HMG and its effectiveness in advancing comprehensive early childhood system building, the HMG National Center collects data from each system across the HMG National Affiliate Network. Data collected through the HMG Fidelity Assessment enables the National Center to monitor system-level progress in Model implementation, share lessons learned across the National Affiliate Network, and advocate for policy change.

This 2021 HMG Building Impact Report synthesizes data collected through the Fidelity Assessment from 107 of the HMG National Affiliate Network's 118 HMG systems operating within 28 affiliate states and Washington D.C.

Data reported in the HMG 2021 Fidelity Assessment were collected by the National Affiliate Network between September 1, 2020 and August 31, 2021, in order to capture the following:

- **The breadth and scope of HMG system implementation and progress since 2020.**
- **Fidelity to each Core Component of the HMG Model.**
- **The capacity of HMG to reach children, families, community partners, and child health care providers.**
- **Novel approaches and system enhancements currently explored by the National Affiliate Network.**

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Advancements towards the growth goals in 2021 include:

1. Further validate HMG's impact model and measure performance toward equitable outcomes



2. Accelerate National Affiliate Network's ability to use data to achieve community change at the system and state-levels



3. Clearly define how HMG can be used to advance racial equity through the components of targeted universalism



4. Secure robust funding for early childhood systems infrastructure in several key states to build momentum for a parallel national policy and advocacy agenda



5. Pursue 3x growth, emphasizing equitable growth within existing states



Understanding of affiliate efforts in each of these areas, as measured through the annual Fidelity Assessment, provides needed data to benchmark progress and identify areas where we can elevate strong affiliate examples of measuring impact, using data, advancing equity, securing funding, and increasing permeation and coverage in existing communities.

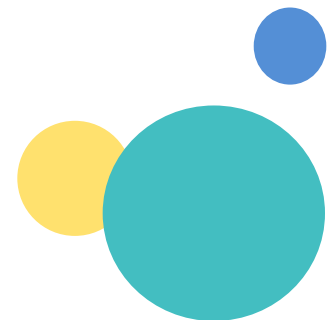


Strategic Growth Progress

To spread awareness of the new strategic growth priorities and plans, the HMG National Center held an informational webinar, highlighted the growth priorities at the Annual HMG Forum, and articulated connections to these goals through current and forthcoming projects, research, and affiliate opportunities. In addition, the HMG National Center is in the process of expanding its team to lead each of these goals and directly engage the Affiliate Network around implementation and progress of the strategic priorities.

Advancements towards the growth goals in 2021 include:

- Introduction of an increased national reporting frequency for the Affiliate Network starting in 2022.
- Creation of Associate Director of Impact and Evaluation position.
- Creation of Associate Director of Advocacy and Community Change position.
- Hosting of national community of practice to support HMG affiliate states pursuing federal ECCS funding.
- Expansion of HMG within existing HMG states: CA, FL, MI, KY, & WA.

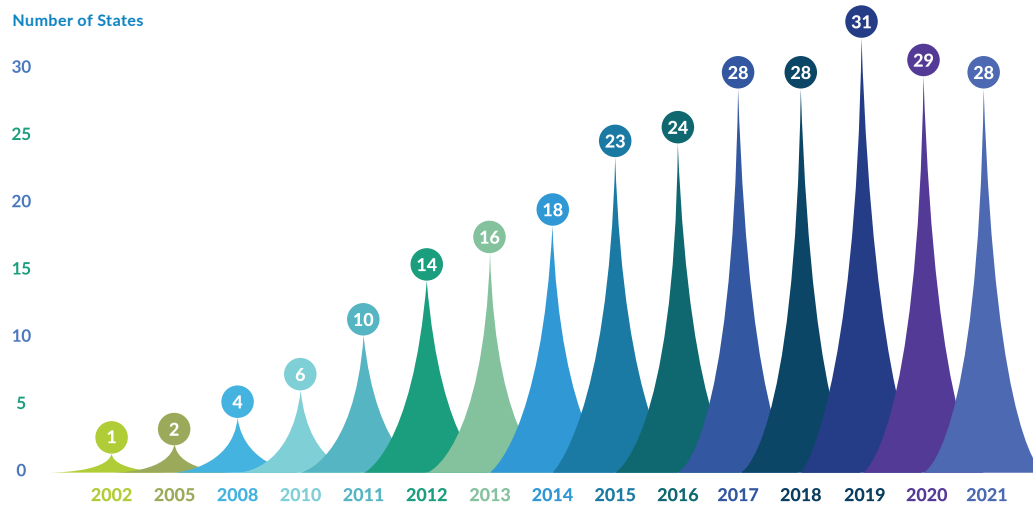


Report Highlights

In 2021, the National Affiliate Network consisted of affiliates in 28 states and the District of Columbia operating 118 HMG systems. Of those, 107 systems submitted data for this report.

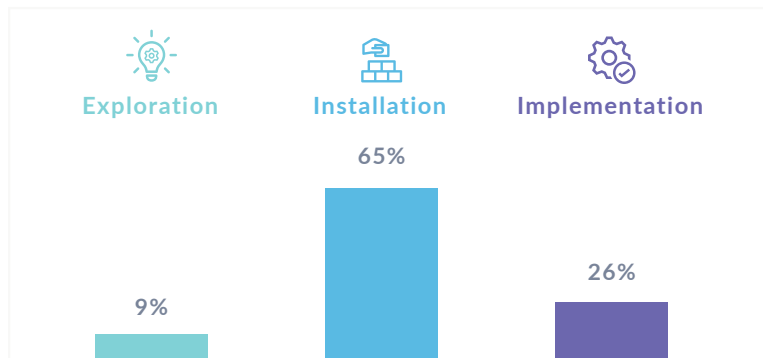
The National Affiliate Network has grown significantly over time, though the number of HMG affiliates trended down between 2019 and 2021. Fluctuation in the number of HMG affiliates may occur as states face challenges in maintaining funding, leadership, and community partnerships.

Number of Affiliate States in the Help Me Grow National Network Over Time










This report reflects 107 of the total 118 HMG systems that reported data in the 2021 Fidelity Assessment.

Model Implementation Status of the Help Me Grow Network, 2021



Throughout the year, HMG systems collect data on the number of interactions between HMG, families, community partners, and health professionals within their local HMG system.

In 2021:

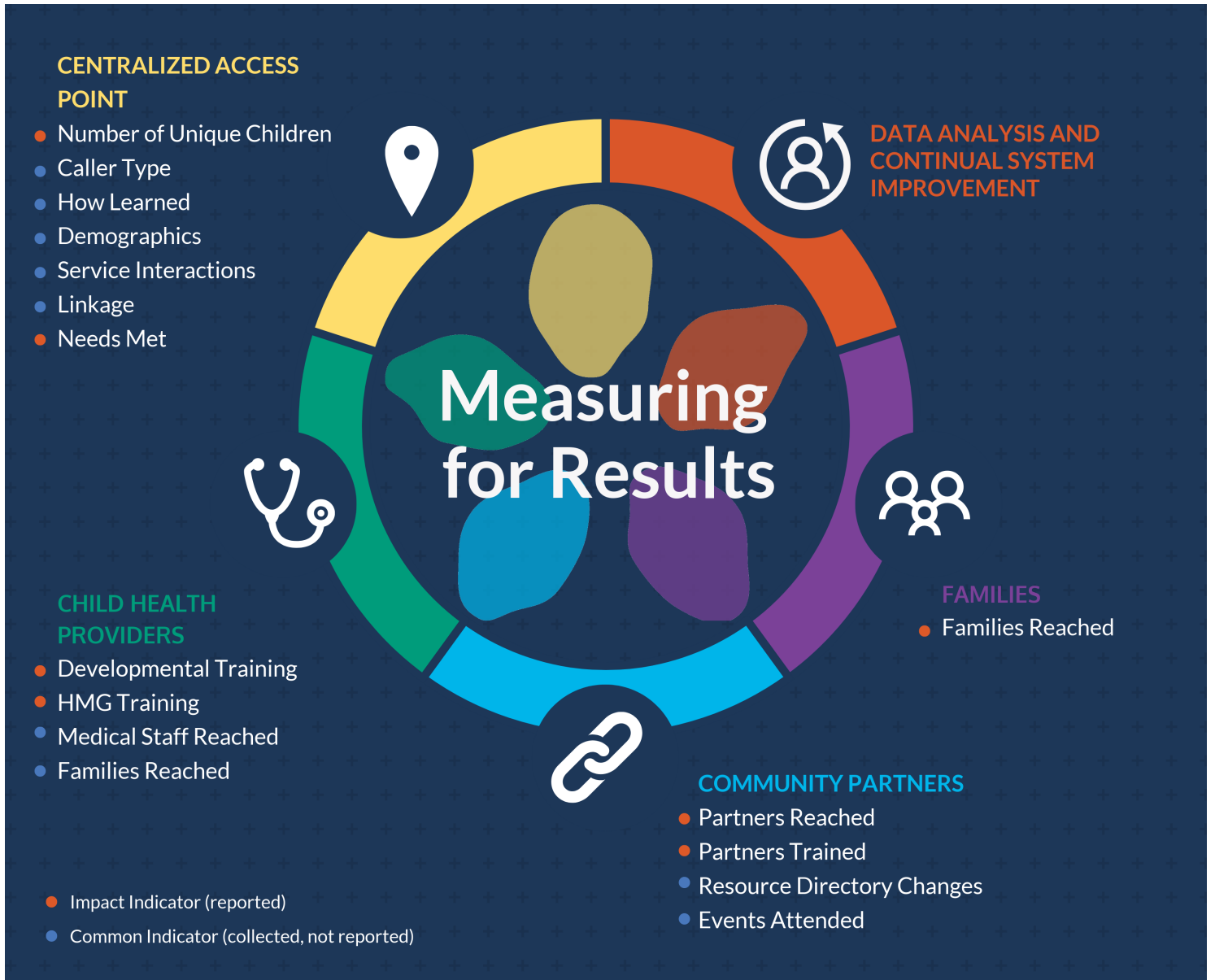
- HMG systems reported **123,626 interactions with children** and families through the Centralized Access Point. 
- Of the families that engaged with the Centralized Access Point, an average of **90% reported that HMG met their identified needs.** 
- HMG systems **reached 335,710 family and community members through events led or coordinated by HMG systems** to promote awareness of child development and/or HMG services. 
- HMG systems reported reaching **39,031 professionals from community-based agencies** through HMG-led events. 
- HMG systems **conducted 2,874 trainings for child health care providers** on the topics of developmental surveillance and screening and the HMG Centralized Access Point as a resource to support referral and linkage. 
- **Thirty-six percent more HMG systems reported using HMG data** to inform community-level change than the year before. 
- **Fifty-seven percent of HMG systems reported having specific goals for advancing racial equity.** 

Evaluating Help Me Grow

Since its inception, the focus of HMG has been to strengthen efforts in support of the early detection of developmental and behavioral concerns, as well as the referral and linkage of such children to services within the broader early childhood system. Isolated initiatives within a system often fail to generate and sustain the large-scale systems change needed to provide optimal benefit to all young children and families. Yet, through an emphasis on comprehensive system-building and alignment with other key early childhood partners, HMG stands at the other end of the spectrum from an isolated initiative – embracing a collective impact approach. Given the vast collective potential among HMG systems across the country, it is imperative that the National Affiliate Network is oriented toward a common agenda. The greater the coordination and alignment across our efforts, the greater the likelihood of addressing the complex and multi-faceted dynamics that limit the impact of comprehensive, effective early childhood systems.

Efforts to ensure alignment include an emphasis on fidelity to the HMG Model across the communities that seek to implement HMG. Fidelity measurement ensures that communities adopt similar approaches in contributing to effective systems that ensure developmental promotion, early detection, referral, and linkage. In addition, HMG embraces the concept of shared measurement - the methods employed to document the impact of HMG systems, as well as communicate and leverage lessons learned – which are essential elements to operate as a movement and strengthen the potential to generate policy change at the local, state, and national-levels.

The HMG measurement framework balances both the need to assess HMG efforts at the local-level while considering the important context that shapes community capacity. This assessment also aims to capture impact at the national-level, bridging together HMG efforts into a single movement. Therefore, the HMG National Center distinguishes between Common Indicators and Impact Indicators to describe metrics that serve unique purposes. Common Indicators are a shared set of metrics among affiliates that are heavily influenced by local variations in HMG systems and which inform local continuous quality improvement, system enhancements, and policy changes. Impact Indicators are a shared set of metrics among affiliates that, in the aggregate, inform the national narrative of HMG. Together, Common and Impact Indicators enable HMG affiliates to monitor progress, share lessons learned across the National Affiliate Network, and advocate for change.



Help Me Grow Implementation

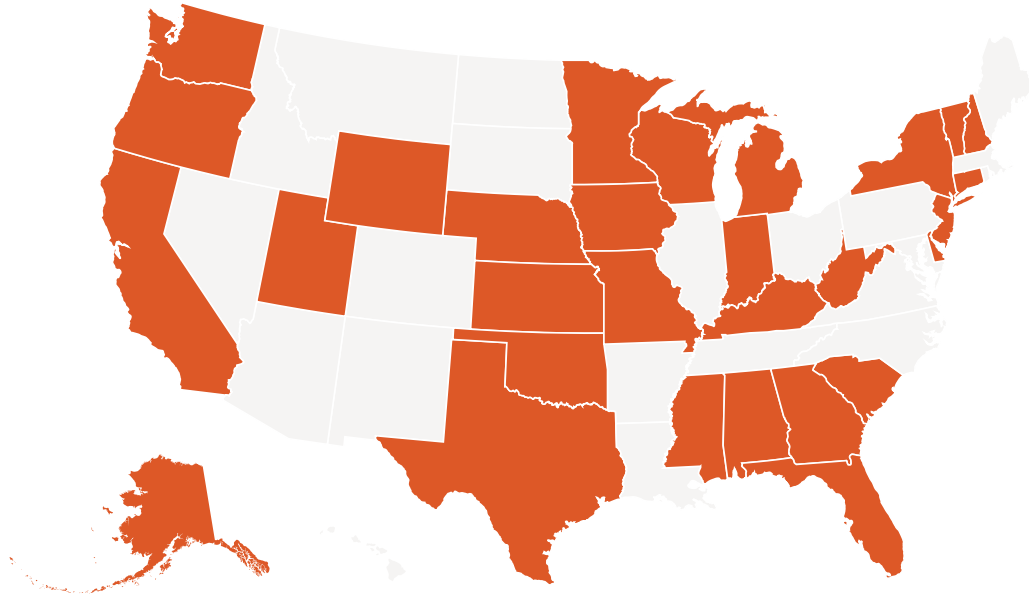
The collective efforts and capacity of HMG are ever-evolving, especially as new affiliates join the National Network. Through the annual Fidelity Assessment, HMG systems provide an update on their implementation progress, specific approaches conducted over the last year, and key process and outcome metrics. This report attempts to capture the breadth and impact of the National Affiliate Network through key findings and lessons learned from the 2021 Fidelity Assessment.

Local HMG Implementation

Communities often explore the HMG Model as a strategy to strengthen their early childhood systems building to ensure developmental promotion, early detection, referral, and linkage to services. The reasons that a particular community may consider implementation of HMG reflect a variety of priorities, including the desire to promote universal developmental surveillance and screening, improve collaboration and coordination among early childhood system stakeholders, improve referral and linkage rates for young children following developmental screening, and expand care coordination capacity across a given system.

The National Affiliate Network

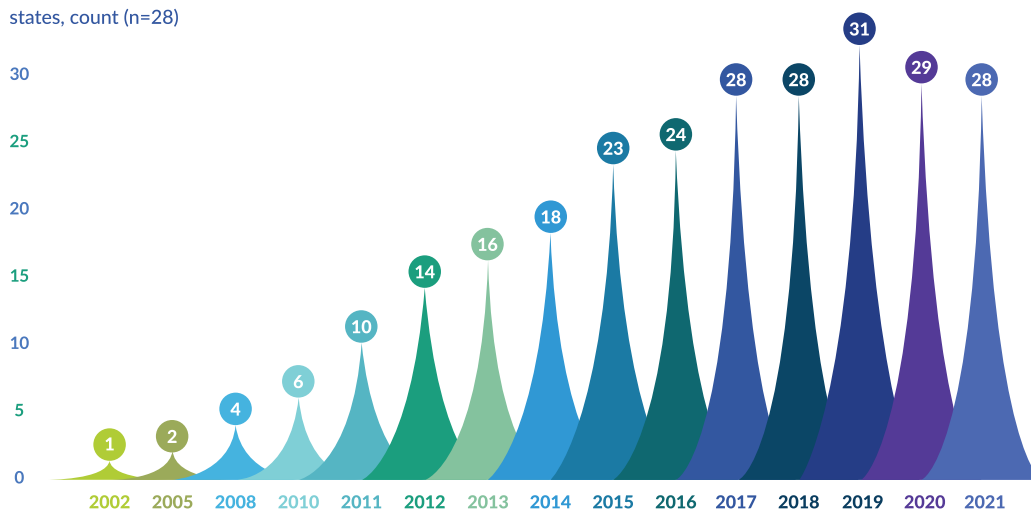
The HMG National Center defines HMG systems at the level of the Centralized Access Point, with unique Centralized Access Points designated as individual systems (for example, individual, county-based HMG systems in a given state). For the purposes of the Fidelity Assessment, HMG systems may also include those not currently operational but exploring implementation of a HMG Centralized Access Point. Of the 107 HMG systems whose data are reflected in this report, 90 are operational and defined as actively moving toward full implementation of the Model.



Network affiliation continues to increase over time, though the number of HMG states trended down between 2019 and 2021. Fluctuation in the number of HMG affiliates may occur as states face challenges in maintaining funding, leadership, and community partnerships.

Number of Affiliate States in the Help Me Grow National Network Over Time




Year of Affiliation: From 2002 to 2021



Fidelity to the Model

The HMG National Center assesses the Affiliate Network to determine the extent to which each system has advanced in Model implementation, using a scale of exploration, installation, implementation, and sustainability. Such stages are generally consistent with those defined in the field of implementation science and signal advancement through a continuum of activities that move a community closer to replication of a defined model.

The Fidelity Assessment measures achievement of HMG's sixteen Key Activities, four associated with each of the four Core Components, to determine classification of implementation progress. To be classified as being in full implementation, systems must be actively conducting all sixteen Key Activities of the HMG Model in their community or state.

 EXPLORATION	 INSTALLATION	 IMPLEMENTATION
Refers to affiliate systems that have implemented none of the four activities (0)	Refers to systems that have implemented between one to three Key Activities (1-3)	Refers to systems that have implemented all four Key Activities for that Core Component of the Model. (4)

HMG systems receive an overall classification based on their Core Component classifications, using the lowest-scoring Core Component as the overall classification.

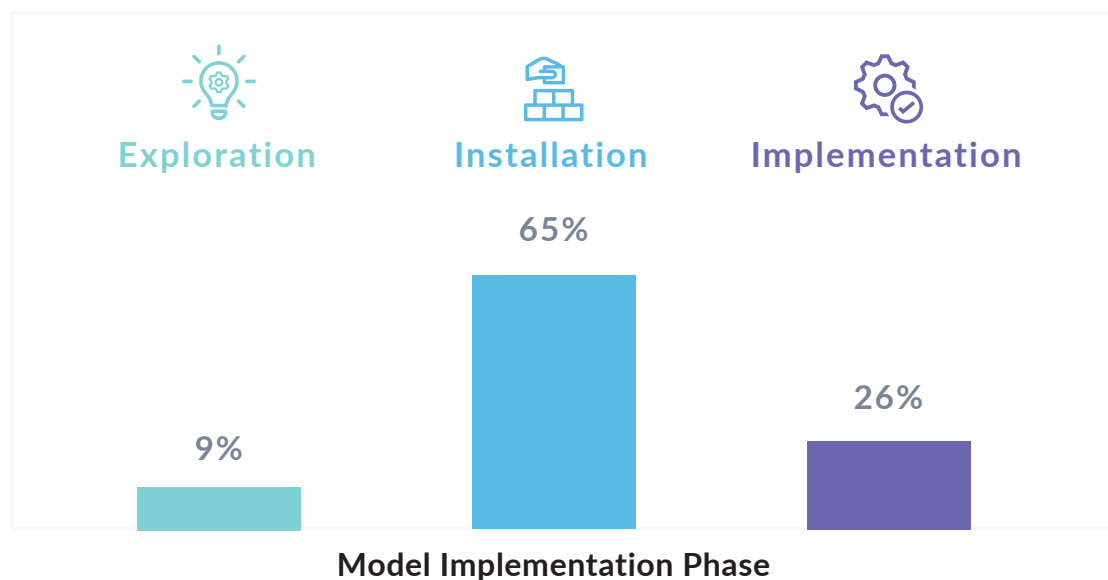


Fidelity to the Help Me Grow Model

MODEL CORE COMPONENT	KEY ACTIVITIES
Centralized Access Point	<ul style="list-style-type: none"> Specialized child development line Linkage and follow-up Researching resources Real-time directory maintenance
Family and Community Outreach	<ul style="list-style-type: none"> Engaged community partners Networking Community events and trainings Marketing
Child Health Care Provider Outreach	<ul style="list-style-type: none"> Physician champion Training on surveillance and screening Training on referral and linkage Closing the feedback loop
Data Collection and Analysis	<ul style="list-style-type: none"> Data monitoring Sharing data across partners Continuous quality improvement Community change through data

In 2021, 9% of the National Affiliate Network was in exploration, 65% in installation, and 26% in full implementation of the HMG Model.

Model Implementation Status of the Help Me Grow Network, 2021



Implementation Progression

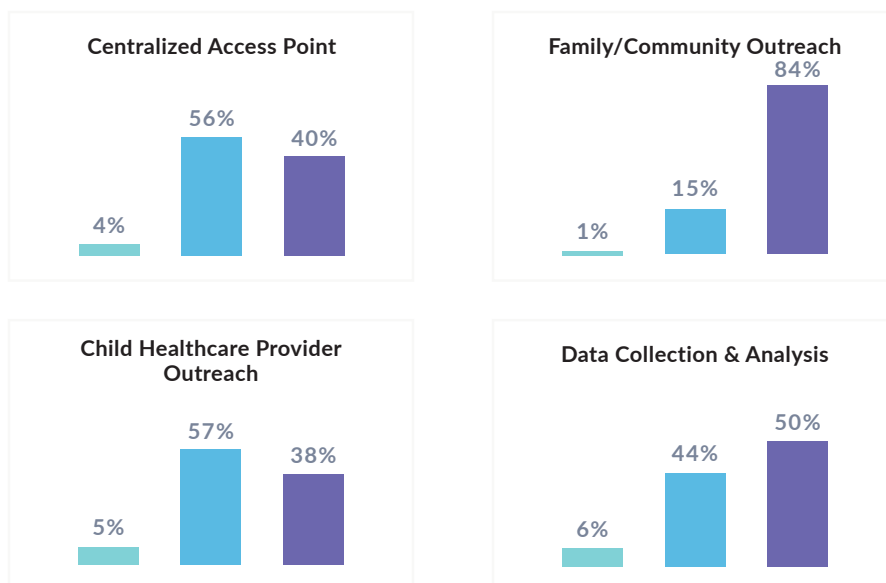
In addition to the 28 HMG systems in full implementation of the Model, **19 systems reported being very close to reaching full implementation, only needing to achieve one or two more Key Activities to be classified as operating in full implementation.** Of this group, the Key Activities most commonly not yet achieved include:

- Closing the feedback loop with child health care providers at least 75% of the time.
- Follow-up with families at least 75% of the time.
- Quarterly maintenance of the HMG Resource Directory.

Implementation of additional Key Activities often takes time, resources, and capacity. In 2021, the HMG National Center identified the Key Activities that were least commonly implemented across the Network the year before (2020). The result of this analysis informed targeted technical assistance offerings, resource development, and focused sessions at the HMG National Forum. In 2021, 18 HMG systems moved forward in Model implementation from the previous year, 16 of which were from installation to implementation.

Across the four Core Components, Family and Community Outreach is the most achieved across the National Affiliate Network, which has been found to be the case for the last five years. In 2021, 84% of HMG systems were in full implementation of this Core Component, which represents a 5% increase from 2020. There was also an increase in achievement of full implementation among the three other Core Components in 2021, including an 11% increase in HMG systems determined to be in full implementation of the HMG Centralized Access Point, an 8% increase in Child Health Care Provider Outreach, and an 11% increase in Data Collection and Analysis.

Model Implementation Status of the Help Me Grow Network, 2021



Few HMG systems maintain a classification of exploration in any Core Component for long. In 2021, Data Collection and Analysis was the Core Component with the most systems in exploration, with 6% of the National Affiliate Network having yet to implement any of its related Key Activities.

The HMG National Center administers the Fidelity Assessment annually, enabling year-to-year comparisons of the National Affiliate Network. However, the denominator of HMG systems shifts from year to year, which is an important consideration when observing comparisons over time.

Notable changes from 2020 to 2021:

- Seven new HMG systems joined the National Affiliate Network through regional expansion within existing HMG affiliate states. States operating multiple HMG systems include: California, Florida, Kentucky, Michigan, New York, Texas and Washington.
- Nineteen HMG systems advanced their overall implementation status, more than double the number of HMG systems that advanced their overall implementation status since the year before.
- The number of individuals reached through HMG events increased 127% over the previous year. This increase is mainly attributed to the virtualization of outreach efforts due to COVID-19 and social distancing policies. The shift to virtual outreach has allowed for more outreach events with less coordination effort and increased attendance without the costs and time of travel. While some COVID-19 precautions have been lifted, HMG systems continue to conduct virtual events in addition to traditional in-person offerings.
- Sixteen HMG systems experienced significant increases in caller interactions as part of their HMG Centralized Access Point. Of these 16 systems, 69% reported interacting with callers two to three times more in 2021 than in the previous year.

Of the sixteen Key Activities of the HMG Model, the following were most commonly achieved across the National Affiliate Network in 2021:

- Utilizing community partnerships
- Marketing
- Reporting HMG data
- Hosting community events and trainings

This year's data suggests the following Key Activities would benefit from further support:





- Closing the feedback loop to child health care providers at least 75% of the time.
- Ensuring follow-up with families at least 75% of the time.
- Conducting trainings for medical providers on screening and surveillance and linkage to HMG.



Centralized Access Point

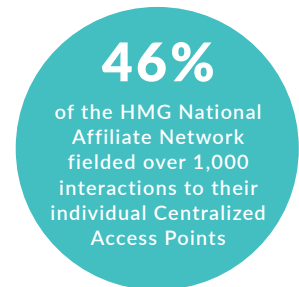
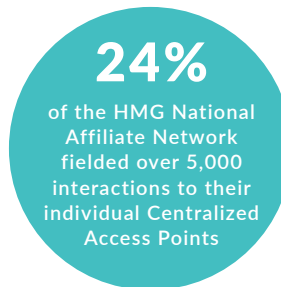
The HMG Centralized Access Point typically takes the form of a call center that serves as a coordinated portal of entry for family members, child health providers, and other professionals seeking information, referrals, follow-up, and ongoing support for children. The Centralized Access Point connects children and their families to needed services through the efforts of HMG Care Coordinators. Care Coordinators work to provide education and support to families around specific developmental or behavioral concerns or questions, help families recognize typical developmental milestones, provide referrals to community-based supports, and follow-up to ensure successful linkages.

FIDELITY TO THE CENTRALIZED ACCESS POINT CORE COMPONENT

 <p>Specialized Child Development Line</p> <p>A specialized child development line distinct from a general call line which can be directly accessed by families and providers</p>	 <p>Linkage and Follow-up</p> <p>Capacity to facilitate connection to a variety of early childhood services and to follow-up with families to ensure successful linkage</p>
 <p>Researching Resources</p> <p>A systematic process to research available resources in the community</p>	 <p>Real Time Directory Maintenance</p> <p>An early childhood resource directory that has the capacity to be maintained and updated at least quarterly</p>

● IMPACT INDICATORS

Number of Unique Interactions, 2021
(12 months)
123,626 Centralized Access Point interactions



Sixteen HMG systems experienced significant increases in caller interactions as part of their HMG Centralized Access Point. Of these 16 systems, 69% reported interacting with callers two to three times more in 2021 than in the previous year.

Needs Met

Compared to the previous year, **28 more HMG systems** were able in 2021 to report the proportion of clients stating that the HMG Centralized Access Point met their needs. Among the 86 HMG systems reporting on this measure, an average of **90%** of callers reported that HMG met their needs.

Affiliate Progress in Implementing Centralized Access Point Activities

ACTIVITY	2020	2021
Specialized child development line	88%	90% ↑
Linkage and follow-up	50%	50%
Researching resources	80%	82% ↑
Real-time directory maintenance	47%	81% ↑



Specialized Child Development Line

Implementation of HMG requires a specialized child development portal of entry, typically through a call line, with the capacity to both address questions and make referrals for topics tied to child development. Activities associated with implementing a specialized line include the identification of an entity to serve as the call center (for example, 2-1-1), capacity to accept calls, designation of a target service population, and accessibility as a resource to families, community-based service staff, and child health providers.

HMG Care Coordination

On average, HMG systems across the National Affiliate Network have three Care Coordinators trained to guide and support interactions within the HMG Centralized Access Point. Compared to 2020, the average number of HMG Care Coordinators across the Affiliate Network decreased by 40%, most likely due to reported staff turnover and the continued impacts of the COVID-19 pandemic. Care coordination capacity continues to vary widely across the HMG Network, ranging from a single .5 full-time equivalent (FTE) for a given HMG system all the way up to 41 FTEs. **In 2021, HMG Care Coordinators maintained an average caseload of approximately 320 families per year which is a 14% increase over 2020. HMG Care Coordinators continue to support families' needs despite being short-staffed.**



Linkage and Follow-Up

Linkage and follow-up is a unique value proposition of the HMG Model and ensures that families are successfully connected to services that are available in their community and meet their specific needs. Beyond connection to local available services, families are supported by HMG Care Coordinators throughout the utilization of the service to ensure that families have no additional needs. The frequency of follow-up is dependent on the unique needs and preference of each family served by the HMG Centralized Access Point.

Eighty-one percent (81%) of HMG systems reported having a formal protocol in place for follow-up with families in order to determine whether services for which referrals were provided by the HMG Centralized Access Point did, in fact, occur. Although frequency of follow-up efforts with families varies across systems, fidelity to the HMG Model requires follow-up with families at least 75% of the time. Historically, the majority of systems across the National Affiliate Network report a 50-75% follow-up rate. While this Key Activity remains one of the lowest achieved across the National Network, this year the HMG National Center observed a promising shift, with a majority of the Affiliate Network reporting a follow-up rate of 75% or more.



Researching Resources

One of the unique elements of HMG is the capacity of the Centralized Access Point to serve as a single portal of entry to the complex landscape of early childhood services and supports in a given community or state. Identification of appropriate supports for children and families is based on a combination of information sources, including needs identified at the time of referral, screening results, family goals or priorities for their child's development, as well as answers to targeted questions embedded in the HMG Care Coordinator workflow. All HMG systems should use a defined procedure to research available resources and connect families to community-based services and programs.



Real-Time Directory Maintenance

Of HMG systems far enough along in their implementation of the Model to have a functional resource directory, the majority report that it serves as a comprehensive, regularly-updated list of services and programs for children and families within the geographic area served by the call center. Maintenance of the HMG resource directory is key to ensuring accuracy and currency, such that the programs, services, and resources included in the list of potential referral sources for callers are up-to-date and comprehensive. HMG systems report utilizing a variety of resource directory technologies, as well as self-developed systems.

In 2021, the frequency of maintenance to each HMG directory varied, with a majority of HMG systems reporting updates made on a weekly or quarterly-basis. Historically, this Key Activity has remained one of the least implemented across the Affiliate Network. **However, the National Affiliate Network reported a 34% increase in the implementation of the HMG resource directory maintenance Key Activity in 2021.**



Affiliate Spotlight

Help Me Grow District of Columbia



CENTRALIZED ACCESS POINT

Affiliate Background Information

Help Me Grow District of Columbia (HMG DC) is a unique, comprehensive, and integrated district-wide system positioned within the District of Columbia's Department of Health Community Health Administration. Joining the HMG National Affiliate Network in 2016, HMG DC is designed to address the need for perinatal support, early identification of developmental and/or behavioral concerns, and appropriate linkage for mothers, children, and their families to community-based services and supports. HMG DC serves all eight wards of the District through its HMG Centralized Access Point, also known as 1-800-MOM-BABY. Historically, the 1-800-MOM-BABY line was used solely for the Healthy Start Program, which provides services, referrals, and support for women, parents, and infants up to 18 months of age. However, the DC Council recognized the need for a centralized hub to serve all DC residents and providers for perinatal support, early detection, and maternal health. Taking a more comprehensive and inclusive approach has resulted in increased collaboration among internal and external partners, referrals, educational opportunities, and visibility of HMG DC within communities.

Help Me Grow District of Columbia's Centralized Access Point

At the start of the Covid-19 pandemic, HMG DC Care Coordinators began to report challenges families were experiencing in receiving medical care due to delays in appointment scheduling and extended waitlists. To help mitigate these barriers, HMG DC's Care Coordinators and outreach team began to identify additional providers with whom to partner throughout the District. This effort was conducted through increased engagement in the District's Pediatric Primary Care groups as well as enhanced collaboration with Managed Care Organizations and local pediatric offices. Through these atypical means of engagement,

HMG DC was able to identify providers that were not already listed in its HMG resource directory. By increasing the number of providers listed in the directory, Care Coordinators were afforded an expanded set of resources to draw from and an improved opportunity to assist families with accessing healthcare appointments and services such as well-child visits, obstetrics visits, behavioral therapy, and autism evaluations.

Help Me Grow District of Columbia Going Forward

In collaboration with the DC Home Visiting Council, HMG DC looks to expand its Centralized Access Point to include implementation of the Home Visitation C-Intake system for referral determination. This emerging partnership will provide a single point of entry for home visiting referrals within the District through utilization of the HMG DC, 1-800-MOM-BABY referral helpline. Through this centralized and coordinated process, HMG DC anticipates increased reach to families, ability to effectively support home visiting programs through enhanced capacity, and system-level coordination. During the pilot phase, HMG DC aims to integrate C-Intake into the existing HMG intake process. Additionally, HMG DC intends to invest in a more comprehensive database that will support enhanced functionality as the District's single referral helpline for perinatal support, maternal health, early childhood development/detection, and home visiting referrals.



Family and Community Outreach

The Family and Community Outreach Core Component is essential to promoting HMG, uptake of its services, advancing knowledge of healthy child development, and providing networking opportunities for both families and community-based service providers. Personnel supporting HMG Family and Community Outreach engage families by participating in and/or leading community meetings, forums, public events, and fairs, as well as helping families learn about child development and the services of HMG. This community presence encourages partnership with HMG and facilitates efforts to gather and update resource directory information. Further, parent engagement is critical to ensuring that the types of services and supports to which HMG Care Coordinators refer families reflect a family-led agenda.

FIDELITY TO THE FAMILY & COMMUNITY OUTREACH CORE COMPONENT



Utilize Community Partners

Identify partners for HMG Family & Community Outreach using criteria established by the HMG National Center



Networking

Facilitate at least two HMG meetings to support networking among programs and agencies



Community Events & Trainings

Provide outreach to increase awareness of HMG at least twice a year



Marketing

Utilize marketing opportunities including social media to promote HMG

● IMPACT INDICATORS

In 2021, the National Affiliate Network reached **335,710** individuals through events led or coordinated by HMG systems to promote awareness of child development and/or HMG services.

HMG systems trained **15,175** non-medical professionals on developmental screening and/or referral and linkage through HMG in 2021.

Affiliate Progress in Implementing Family and Community Outreach Activities

ACTIVITY	2020	2021
Engaged community partners	97%	97%
Networking	84%	88% ↑
Community events & trainings	87%	92% ↑
Marketing	93%	93%



Engaged Community Partners

The HMG Fidelity Assessment asks systems to report community partners (such as organizations, agencies, or initiatives) with which HMG has a relationship extending beyond the inclusion of that service in the resource directory used by the Centralized Access Point.

While the quality, duration, and operationalization of those partnerships vary, HMG systems do engage common sectors as partners in their HMG efforts, including:

- Medical and/or health providers
- Early learning settings
- Health and human service agencies
- Home-visiting agencies
- Family and child advocates
- School districts

In 2021, HMG systems reported reaching **39,031 individuals** (non-families) representing community agencies through a HMG-coordinated or HMG-led event, **which represents a 65% increase from 2020.**

Historically, Family and Community Outreach efforts have been conducted in-person and shifted dramatically due to the COVID-19 pandemic and social distancing policies. While the number of individuals engaged across community agencies, non-medical providers, and families decreased significantly in 2020, **HMG Family and Community Outreach efforts bounced back in 2021 and in some cases HMG's reach exceeded pre-COVID numbers.**



Networking

In 2021, HMG systems across the National Affiliate Network led **1,235 networking meetings** intended to bring together early childhood partners, including early learning providers, family support services, home visiting agencies, child health providers, family advocates, school districts, and all other partners that touch the lives of children and families. This represents a **70% increase in HMG-led networking from 2020.**

In 2021, HMG systems across the National Affiliate Network led **1235** networking meetings intended to bring together early childhood partners; this represents a **70% increase** from 2020.

In 2021, 89% of HMG systems reported utilizing community networking meetings to make initial connections with local organizations, share important updates among partners, and report data about key gaps in the system to highlight and/or potentially work to address important areas of need.



Community Events and Trainings

HMG systems conduct outreach activities such as community events to increase awareness of HMG among families and community-based partners. Families that attend such events receive information and resources promoting strategies to support their children's optimal healthy development as services available through their local HMG Centralized Access Point.

Due to the continued impacts of the COVID-19 pandemic, community outreach activities in 2021 continue to look much different than in pre-pandemic years. HMG systems built upon strategies from 2020 to virtualize much of their in-person outreach efforts in order to stay connected with local partners, families, and children. **Despite the challenges presented by the pandemic, 91% of HMG systems continued to conduct Family & Community Outreach events.** Overall, the National Affiliate Network reached **389,916** individuals through Family and Community Outreach efforts in 2021. This number includes all families, community organization staff, and non-medical providers.



Marketing

HMG systems across the National Network rely on similar methods to promote and market to families, partners, and child health providers. The most common tools to elevate awareness of HMG and advertise its services include community events and trainings, followed closely by use of a HMG website. However, these strategies, as well as use of social media, were reported overall by fewer systems in 2021 than in years past.

Measuring Help Me Grow's Impact

Help Me Grow Reach: As efforts burgeon to implement the HMG National Center's five strategic growth priorities, it becomes increasingly necessary to revise existing and develop new indicators that capture the true impact of the HMG Model on a community, state, and national-level. HMG Family and Community Outreach efforts are an essential form of promotion, education, information, and connection for families with young children and the community partners that plug into the HMG system. Because of this, it is critical that the metrics used to capture this work are inclusive of the many different ways in which HMG systems are carrying out these efforts.

Together, the HMG National Center and Affiliate Network will take a closer look at the existing Impact Indicators and explore any new metrics needed to capture the full breadth and scope of the Family and Community Outreach Core Component. Forthcoming information will be released on this metric and its development



Affiliate Spotlight

Help Me Grow Sacramento County, California



FAMILY AND COMMUNITY OUTREACH

Affiliate Background Information

Sacramento County, California joined the HMG National Affiliate Network in 2017 through the expansion of a successful pilot program, Project SOARS (Screening, Outreach, Assessment and Referral System). This pilot program connected families in homeless shelters, transitional housing, as well as organizations serving high-need communities with family advocates who provided in-person supports such as developmental screenings, referrals, and connections to appropriate resources based on family need and/or screening results. HMG Sacramento is funded by First 5 Sacramento with the Sacramento County Office of Education serving as the organizing entity. Becoming a HMG system allowed for county-wide expansion of the earlier pilot program, as well as engagement with a broader group of partners from the childcare and healthcare sectors. Sacramento County has been able to expand on the partnerships established through HMG Sacramento with the award of an ACES Aware Network of Care grant funded by the California Department of Health Care Services and the California Office of the Surgeon General. This opportunity has allowed HMG Sacramento to diversify its collaborative network of partners, which now includes six sectors: education; early care and learning; justice; public health; healthcare; and social services. Further, this initiative has supported the implementation and use of a bi-directional IT referral platform to expand screening, family navigation, and resources for families to prevent and address the impact of ACEs and toxic stress.

Help Me Grow Sacramento's Family & Community Outreach Efforts

A robust refugee support system has effectuated an influx of refugees relocating to Sacramento. As a result, it was vital for HMG Sacramento to respond quickly to the increasing need for language supports. In keeping with the essence of the HMG Model to leverage and coordinate existing resources, HMG Sacramento developed new relationships

with organizations serving immigrant and refugee populations through information and outreach events as well as presenting at various meetings throughout the county. Clients needing translation services meet with staff from these new partner agencies as well as HMG Sacramento in order to offer effective and culturally proficient and affirming support. HMG staff facilitates screening processes and addresses any questions the client may have, while the interpreter ensures that the client is receiving information in their native language and that all of the client's questions are answered.

Partner agencies are also essential to building the capacity and knowledge of HMG Sacramento staff in regard to cultural customs and traditions, which promotes authentic connection, increased understanding of a family's needs, and support that is offered in ways most meaningful to families. To enhance HMG Family and Community Outreach efforts, HMG Sacramento has successfully brought on three temporary contract employees to serve as translators/interpreters in the languages of Russian, Farsi, Dari, and Arabic. ASQ Screening Tools include English, Spanish, Chinese, and Arabic translations and families now have access to the tool in Russian and Dari as well. HMG Sacramento has also added a Spanish page to its website, which is not only translated, but also includes images that are more representative of clients who speak Spanish. HMG Sacramento also has a full-time bilingual Spanish Family Advocate who offers support to clients.

Help Me Grow Sacramento, Going Forward

HMG Sacramento aims to expand language access by adding information in Russian and Dari (two of the most requested languages) to their website so that clients who speak those languages can learn about developmental screenings and request a screening be conducted in their respective language. In addition, maintaining continuous communication with partner agencies will help to identify where resources are offered in languages other than English and ensure when clients are connected, they are able to access services with language supports. HMG Sacramento envisions recruiting translators and interpreters in other languages such as Hmong, Chinese, and Ukrainian. To further build on this, HMG Sacramento aims to identify culturally-responsive training and embed it within formalized staff training to ensure that HMG Sacramento not only offers inclusive language supports but also approaches clients in a culturally proficient, affirming, and respectful manner.



Child Health Care Provider Outreach

FIDELITY TO THE CHILD HEALTH CARE PROVIDER OUTREACH CORE COMPONENT



Physician Champion

Identification of a physician that advocates for HMG in the broader medical community



Surveillance and Screening

HMG staff conduct targeted outreach to child health care providers through education, trainings, or workshops on effective developmental surveillance and screening



Physician Training

HMG staff conduct targeted outreach to child health care providers through education, trainings, or workshops on referral and linkage through HMG



Feedback Loop

HMG Care Coordinators close the feedback loop by sharing information about screening and/or referral outcomes with referring child health care providers in at least 75% of instances

● IMPACT INDICATORS

In 2021, HMG systems conducted **620 trainings** for child health care providers on the topic of developmental surveillance and screening. Additionally, HMG systems conducted **2,254 trainings** on the topic of the HMG Centralized Access Point as a resource to support referral and linkage.

Affiliate Progress in Implementing Child Care Health Provider Outreach Activities

ACTIVITY	2020	2021
Physician champion	74%	81% ↑
Training on screening and surveillance	48%	69% ↑
Training on referral and linkage	75%	82% ↑
Closing the feedback loop	66%	67% ↑



Physician Champion

A HMG physician champion supports HMG outreach efforts by specifically engaging with the medical community. Often, physician champions directly utilize HMG services for their patient population and support HMG efforts by sharing their experiences with other providers based in other healthcare settings. In 2021, **81% of HMG systems reported identifying a physician champion to bolster their outreach capacity.**



Training Provided through HMG

Typically, HMG Child Health Care Provider Outreach efforts are carried out by a HMG system's organizing entity or by an aligned local or state-level partner that focuses on engagement, training, advocacy, and/or continuing education of child health providers (for example, a local chapter of the American Academy of Pediatrics).

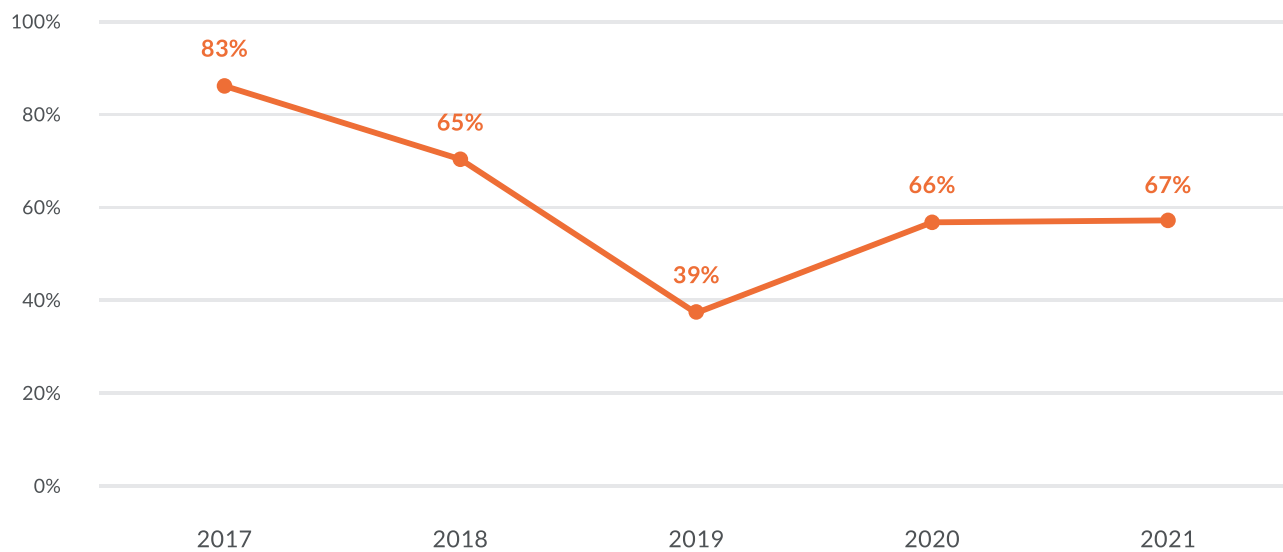
Due to the inability to carry out in-person trainings or meetings with providers as a result of the COVID-19 pandemic in 2020, there was a significant decrease in the number of trainings – related to both developmental screening and referral and linkage - across the HMG National Affiliate Network. Strain on medical providers continued in 2021 due to sustained COVID precautions, as well as an emphasis to re-engage families for routine visits and immunizations. However, HMG systems were able to craft nimble, strategic methods to partner with providers in a virtual format and were able to surpass even pre-pandemic impact. In 2021, HMG systems conducted **20% more** provider trainings on the topic of how best to utilize HMG as a resource to support referral and linkage and nearly matched the number of trainings on the topic of developmental surveillance and screening compared to findings from 2019.



Closing the Feedback Loop

HMG systems seek to follow-up with child health care providers whenever feasible. In some instances, providers may make direct referrals to HMG on behalf of families, in which case HMG closes the loop with providers to share the outcome of the HMG interaction, such as referrals to certain services. Other times, families may receive developmental screening directly through the call center and HMG seeks to close the loop with the child health care provider by sharing, with family permission, screening results.

Percentage of HMG Systems Closing the Feedback Loop with Child Health Care Providers



After observing a steady decline in the number of HMG systems closing the feedback loop with providers at least 75% of the time from 2017-2019, this figure nearly doubled from 2019 to 2020. Approximately 67% of the National Affiliate Network reported achieving this Key Activity in 2021, which is relatively unchanged from 2020.



Affiliate Spotlight

Help Me Grow Austin County, Texas



CHILD HEALTH CARE PROVIDER OUTREACH

Affiliate Background Information

The implementation of Help Me Grow Greater Austin (HMG ATX) resulted from burgeoning community-wide interest in developing a more comprehensive approach to supporting families with young children by connecting them to the right resources and information when they need it. HMG ATX is supported by the United Way for Greater Austin and implemented jointly through the Austin/Travis County Success by Six (SX6) Coalition and United Way's Connect ATX community resource database. Beginning in fall 2020, HMG ATX worked throughout Austin to build new and strengthen existing relationships with early childhood partners providing early care and education, family support, 2-generation approaches, perinatal support, and child development services.

Help Me Grow Austin's Child Health Care Provider Outreach Efforts

While the SX6 Coalition has been able to develop strong partners in many early childhood areas, there has been a gap in bringing pediatric providers to the table. To begin understanding the pediatric landscape inclusive of the needs and assets that currently exist, HMG ATX conducted a Pediatric Landscape Assessment in the summer of 2021. Clinic staff, primarily from Federally Qualified Health Centers (FQHCs), were surveyed via phone to understand their referral processes, including their decision-making and internal procedures for making referrals on behalf of families. Staff interviews included pediatricians and referral coordinators from three FQHCs in Travis County. Survey results demonstrated that there was no uniformity in approach or process by which clinics recommended, received, or reviewed referrals, organized data, connected with parents, or coordinated with partner agencies for referrals. These results provided HMG ATX with a comprehensive view of existing challenges and barriers within the pediatric landscape, as well as potential ways in which the HMG Model could improve referral processes in support of a more effective and efficient experience for families and providers.

Help Me Grow Austin Going Forward

HMG ATX's Pediatric Landscape Assessment indicated significant need to increase structured communication between clinics and service providers by identifying best practices and leveraging easy wins to build trust. HMG ATX is motivated to identify a clinical partner to test a streamlined pediatric referral process with the HMG Centralized Access Point. Through this partnership, HMG ATX hopes to strengthen relationships between related - but often siloed - systems to better support families in accessing supports and advancing the integration of the child medical sector in early childhood system building.



Data Collection & Analysis

Data Collection and Analysis ensures ongoing capacity for continuous system improvement, a key Structural Requirement of HMG. Data are collected through and around Child Health Care Provider Outreach, Family and Community Outreach, and the Centralized Access Point.

The collection of shared set of metrics across the HMG National Affiliate Network advances understanding of our collective impact, informing the national narrative regarding the impact of HMG on children and families across the country. Not all data generated through and about HMG are reported at a national-level; some data are most useful at the local-level, including data that help systems benchmark progress, identify areas of opportunity and systemic gaps, determine potentially advantageous partnerships, and guide strategic quality improvement projects.

FIDELITY TO THE DATA COLLECTION AND ANALYSIS CORE COMPONENT



Reporting

Submit Impact Indicators and local use reports to the HMG National Center



Sharing Data Across Partners

Share HMG-specific data across partners, such as through regular reporting, ad hoc requests, or targeted evaluation projects



Continuous System Improvement

Identify opportunities to conduct quality improvement projects using HMG-specific data



Community Change Through Data

Leverage HMG-specific data, such as identification of systemic barriers, to generate community change

Affiliate Progress in Implementing Data Collection and Analysis Activities

ACTIVITY	2020	2021
Data monitoring	94%	92% ↓
Sharing data across partners	85%	84% ↓
Continuous quality improvement	69%	73% ↑
Community change through data	50%	86% ↑



Data Monitoring

HMG systems frequently engage an evaluation consultant, individual, or organization to engage in ongoing data collection and analysis and to evaluate the impacts of their local HMG implementations. Sixty-nine percent (69%) of HMG systems reported having a designated evaluation partner. Data systems (also known as client tracking systems) utilized by the Centralized Access Point house key client-level information and help facilitate case management.



Sharing Data Across Partners

HMG systems are uniquely positioned to collect, track, and disseminate information about key trends occurring locally for families with young children, such as the most common concerns among families contacting the Centralized Access Point, frequently recommended programs and services, trends in developmental screening results based on population, geographic region, etc., barriers experienced by families in connecting to existing services, and gaps in needed services in the community.

In 2021, 84% of HMG systems reported sharing data amongst their external partners. HMG systems report sharing data most commonly through regular reports, ad hoc requests from partners, and targeted evaluation projects. In addition, HMG systems reported sharing data with new partners as a means to further explain the scope, value, and impact of the HMG Model.



Continuous Quality Improvement

To guide continuous quality improvement efforts, HMG systems rely on data from the Centralized Access Point, as well as data associated with efforts to conduct outreach to families, community-based partners, and child health care providers.

EXAMPLES OF CONTINUOUS QUALITY IMPROVEMENT EFFORTS CONDUCTED BY HMG SYSTEMS IN 2021 INCLUDE:

- Analyzing data reports through an equity lens to identify which populations of children were not being served by HMG and making conscious efforts to identify reasons for disparity and provide targeted outreach.
- Tracking new screenings and families served at regular intervals and internally discussing process improvement opportunities with front line staff.
- Creating a physician outreach plan to connect and re-connect with physicians in the HMG catchment area after noticing decreased engagement due to the COVID-19 pandemic.
- Reviewing school district data to identify zip codes where children are more likely to score lower on kindergarten readiness screeners and utilize findings to strategically locate trainings with childcare providers and parenting programs.

Help Me Grow's Return on Investment

In 2021, The HMG National Center, in partnership with Manatt Health, developed a HMG Return on Investment (ROI) Calculator and HMG Business Case that supports HMG systems in the calculation and articulation of cost savings associated with implementing the HMG Model, including short-term and long-term savings across health care and non-health care sectors. The ROI Calculator allows the ability to modify inputs based on a HMG system's unique circumstances, recognizing variation in local implementation approaches. The ROI materials were informed by input and trial data from a subset of HMG systems and stakeholders, and have demonstrated tangible multi-sector cost-savings associated with various services, including,

- Diversion from unnecessary developmental/behavioral assessments and early intervention (IDEA Part C) evaluations
- Referral to early detection and intervention for child developmental delays
- Positive parenting services and supports
- Home visiting program referrals
- Referral for SNAP/WIC benefits
- Maternal depression screening and treatment
- Early preventative dental care

In 2021, the ROI materials were utilized by 11 HMG systems and demonstrated a variety of cost savings calculations, including short-term as well as long-term savings, with some calculating an ROI upwards of 500%, or approximately \$5 in quantifiable savings for every \$1 invested. The ROI calculator is available to all HMG systems who are operating in full implementation of the HMG Model. This year 17 additional HMG systems across seven states are able to leverage the ROI tools, further contributing to a better understanding of the economic benefit of HMG at the local and state-level.

Affiliate Spotlight

Help Me Grow South Carolina



DATA COLLECTION AND ANALYSIS

Affiliate Background Information

One of the first states to implement the Model, Help Me Grow South Carolina (HMG SC) became an affiliate in late 2008 and launched its HMG Centralized Access Point in 2012. HMG implementation was a natural next step to the state's grant-funded PRIDE (Promoting Resources in Developmental Education) program designed to connect with parents, pediatricians, and early care & education providers on developmental milestones and screening activities.

Dr. Desmond Kelly, a developmental-behavioral pediatrician and HMG SC's Medical Director, was instrumental in bringing HMG to the state and providing a home for the affiliate within Greenville Health System's Children's Hospital. A local family foundation provided two years of startup funds which allowed HMG SC to serve two counties. In the last 10 years, HMG SC has become statewide, built staff capacity, established a strong Data Collection and Analysis Component with the addition of expertise from a local university. In 2020, HMG SC moved to its current home within the South Carolina Infant Mental Health Association. This strategic and intentional alignment creates opportunities for multidisciplinary and cross-sector connections.

Help Me Grow South Carolina's Data Collection & Analysis Efforts

HMG SC is a key partner in identifying the core data to collect and share across early childhood system partners. In 2020, South Carolina was a recipient of the Preschool Development Grant (PDG). Through this grant, the South Carolina Department of Revenue and Fiscal Affairs, home to the South Carolina Health and Human Services Data Warehouse, is partnering with early childhood agencies and partners such as HMG SC to expand the state's Early Childhood Integrated Data System (ECIDS) to incorporate additional data on

children aged birth through 5 years. HMG SC is a new member of the state's ECIDS Data Governance Work Group which launched in January 2022 and helps to inform the details of the early childhood state profile and data dashboard. The partnership between HMG SC and the Department of Revenue and Fiscal Affairs has been a collaborative learning process for both organizations.

To prepare for HMG SC's contribution to the ECIDS, new HMG policies around privacy and consent to use data were developed in partnership with a local university's institutional review board and other state-level partners. In addition, HMG Care Coordinators created new protocols within the HMG Centralized Access Point to ensure appropriate consent was established with families. A visual cue was added to the HMG database to ensure Care Coordinators systematically collect consent during each encounter with a family. Key partners were selected to review each of the data system protocol enhancements and ensure clarity and understanding.

Help Me Grow South Carolina Going Forward

HMG SC intends to directly contribute HMG data to the state's data warehouse as a contributing member to the SC ECIDS.

In addition, HMG SC is exploring the ways in which the state and HMG might leverage data housed within the SC ECIDS to answer questions related to community health, development, and many others. By exploring what early childhood agencies consider most valuable and useful from the data set, the SC ECIDS Data Governance Work Group will identify strategic priorities and next steps.

As a longstanding affiliate in full implementation of the Model, HMG SC was granted access to the HMG Return on Investment (ROI) Calculator in 2021. Results from this tool demonstrated a \$3 return on investment for every \$1 invested in HMG SC. The affiliate plans to pair the results of the HMG ROI Calculator with the knowledge gained from the forthcoming statewide ECIDS. Together, this information will significantly enhance the understanding of the Model's value alongside expanded opportunities for state funding. To continue to move this work forward, HMG SC plans to develop a request for applications for additional agencies within the state that may be interested in accessing HMG data to better understand early childhood needs statewide.



Community Change through Data

Many elements of the HMG Model distinctively position it to provide a systemic view into gaps among existing services and the barriers that families face in accessing them. The role of HMG in linking families to resources that address a spectrum of needs - from basic supports such as food and housing to specialized and targeted services - affords a global understanding of needs among families. As described earlier, building and maintaining a comprehensive early childhood resource directory enables HMG systems to observe key gaps in needed services across the system. HMG systems can also identify and document common barriers that families experience in accessing available services through the relationships established by HMG Care Coordinators and the employed data systems. Such data have the capacity to inform advocacy efforts, as well as programmatic and policy change at the local and state-level.

A variety of contextual barriers may impede the ability for a family to access services including, for example, lack of access to transportation, language barriers, and lengthy wait lists. Communities served by HMG systems stand to benefit from documenting ongoing, objective data regarding the most frequent challenges experienced by families attempting to access support in their local community.

In 2021, 86% of the National Affiliate Network reported leveraging HMG data, including data regarding barriers to access, in order to inform and support advocacy efforts, which represents a 36% increase over the previous year.

HMG systems reported collecting, analyzing, and sharing data regarding barriers faced by families when attempting to access services in order to guide the community in expanding efforts to meet those needs.

To drive data-informed community change, HMG systems reported reviewing data such as:

- HMG Centralized Access Point caller demographics and call volume statistics.
- The reach of HMG Family and Community Outreach efforts.
- Number and nature of community partnerships.
- Aggregate reports on developmental screening results.
- Vaccination and well-child visit completion data.

Help Me Grow's Role in Policy and Community Change

Advancement of HMG's five strategic growth priorities creates a pathway to serving more families and creating sustainable and equitable early childhood systems. One of those goals, Policy and Community Change, focuses on advocacy efforts reinforced by HMG data that facilitate community and state-level changes that directly impact the lives of families with young children.

As a means to pursue this goal the HMG National Center anticipates welcoming an Associate Director of Policy and Community Change in 2022. The Associate Director's leadership will engage the National Affiliate Network in showcasing the existing related efforts by HMG systems, as well as strategizing additional ways in which the HMG Model can be leveraged to make lasting and systemic changes for families with young children.



Affiliate Spotlight

Help Me Grow Maine



POLICY AND COMMUNITY CHANGE

Affiliate Background Information

Maine has been exploring HMG Model implementation since 2013 through meetings hosted by local organizations, site visits from HMG National, and HMG Core Component Work Group planning efforts. Together, local community partners, system advocates, and state policy makers have thoughtfully considered how to build an effective, inclusive, and sustainable HMG system in the state. After years of exploration, Maine has ultimately decided to establish HMG within state infrastructure to serve as backbone support for the Model. This decision has allowed HMG Maine (HMG ME) to ensure statewide coverage, system integration across services, funding, community partnerships, and sustainability over time for this significant work.

Maine officially joined the HMG National Affiliate Network in 2022 and intends to launch a statewide HMG Centralized Access Point open to all state residents. This objective aligns with an initiative from the Maine Children's Cabinet to increase developmental screening and surveillance. An initial pilot to promote the Ages and Stages Online Screening Tool will be conducted in the spring with a full launch in summer 2022. Supported by state-level leadership, these initiatives have been intentionally coordinated in order to build comprehensive systems where children can thrive in safe, healthy, and supportive environments.

Help Me Grow Maine's Efforts to Advance Policy Change

Several evaluations, needs assessments, and taskforces have reviewed various aspects of the prenatal-eight system in Maine, including the Preschool Development Grant Needs Assessment and Strategic Plan, Maternal Child Health Needs Assessment, Children's Behavioral Health System final report, and an evaluation of the Child Development System (Maine's IDEA provider). There is no one solution in improving a complex system, however several resulting recommendations have been integrated into policy initiatives and laws that are transforming Maine's early childhood service system. Most notably, the recommendations

from a recent [Resolve to Improve Access to Early and Periodic Screening, Diagnostic and Treatment Services for Children \(Resolves 2019, Ch66 \(LD 1635\) and 22.M.R.S.A c. 1064](#) have provided the necessary momentum to establish HMG ME in state law, articulate HMG ME responsibilities, and showcase how the Model will be implemented.

Two key initiatives, Maine's Children's Cabinet Early Intervention Workgroup and the Collaborating Partners Advisory Group, have converged to support the planning, development, and implementation of HMG ME through advocacy and state policy.

1. Maine Children's Cabinet plays a vital role in facilitating coordination across state agencies on initiatives and policies that directly improve and promote the healthy development of children and youth residing in Maine and includes members such as the Commissioners of the Departments of Health and Human Services (DHHS), Education (DOE), Labor, Public Safety, and Corrections. The Children's Cabinet Early Intervention Workgroup is comprised of staff from the Maternal and Child Health Division at the Maine CDC, the Office of Child and Family Services (which serves as HMG ME's organizing entity), the Early Learning Team at DOE, Child Development Services, Office of Maine Care Services, and the DHHS Commissioner's Office. The Early Intervention Workgroup provides an opportunity for staff managing early intervention policies and programs to coordinate efficiencies and ensure that young children receive necessary screenings, evaluations, and services to support their healthy development.
2. A newly formed Collaborating Partners Advisory Group has been established to continue expanding on current efforts to increase parent engagement, diversity, equity, and inclusion. Embracing the value of cultural humility within this Advisory Group will influence HMG ME by:
 - o Increasing policy development that is informed by individuals with lived experience.
 - o Promoting practical, accessible, equitable policies for service delivery.
 - o Increasing transparency in how the early childhood system is developed and monitored.
 - o Aligning and consolidating policies for accountability, efficiency, and effectiveness.

Help Me Grow Maine Going Forward

HMG ME will continue strengthening statewide partnerships through active engagement with the Collaborating Partners Advisory Group, Early Childhood Comprehensive Systems Grant leaders, and Early Childhood Integrated Data Systems Grant leaders. HMG ME's goal is to implement care coordination for those who are prenatal to age 8 in order to strengthen and improve linkage across maternal and early childhood systems. Supported by the State of Maine's Children's Cabinet, HMG ME will continue to engage systems and state agencies to partner in innovative ways to promote the health and development of children and youth in Maine through effective policies, partnerships, and funding recommendations that are informed by evidence and real-time data.

Developmental Surveillance and Screening

Developmental monitoring, surveillance, and screening are valuable to the extent to which they are embedded in a comprehensive, effective, efficient early childhood system that advances developmental promotion, early detection, referral, and linkage to services. As such, developmental screening is not explicitly called out within the sixteen Key Activities of the HMG Model. Where, how, and by whom screening occurs within a given HMG system is determined at the local-level. In some systems, screening is conducted by HMG Care Coordinators at the Centralized Access Point and in others, HMG staff in community settings may provide development screening. Some systems leverage the strong screening work conducted by community providers, such as home visitors or child health care providers and HMG staff themselves do not administer screenings. Some HMG systems take a hybrid approach in which some screenings are conducted by HMG staff directly and some are conducted in community. In all cases, HMG systems share the common goals of promoting universal developmental surveillance and early identification of concerns, addressing gaps in screening, avoiding redundant screenings across settings, and consistently connecting the families of children at developmental risk to the Centralized Access Point for referral, linkage, and follow-up to community-based services.

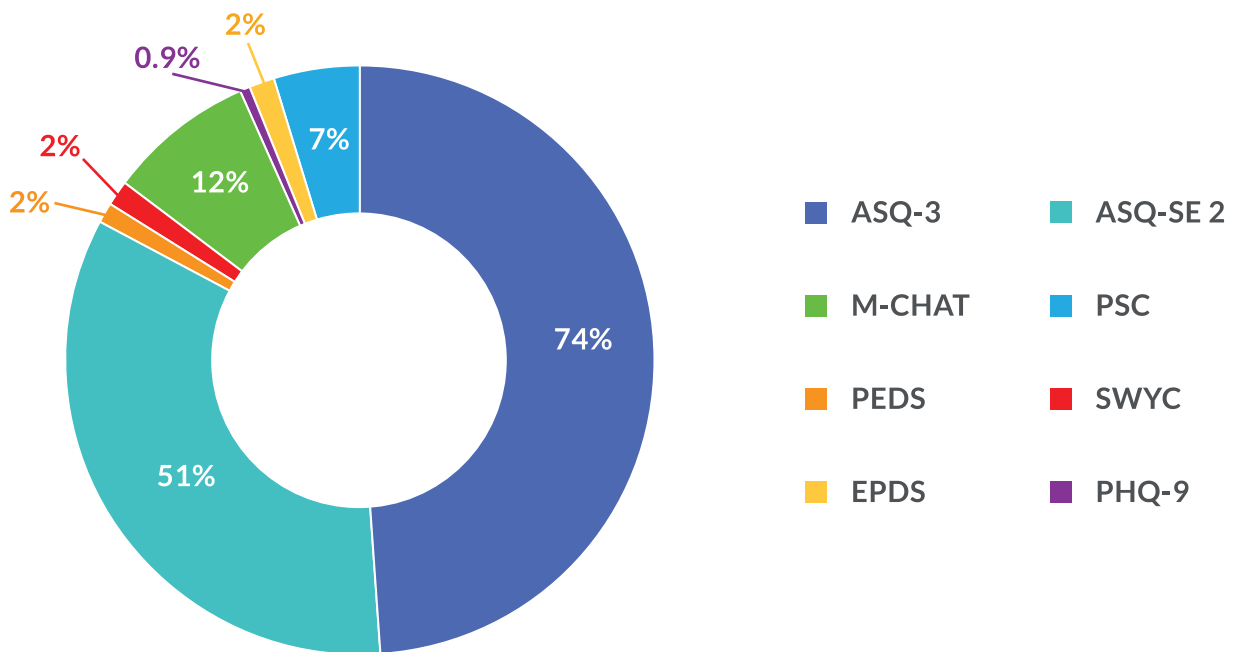
For the majority of HMG systems, Care Coordinators provide screening directly through the Centralized Access Point. A smaller proportion of systems connect families to an online resource for screening. Other methods utilized to promote developmental screening include: connecting families to other agencies; mailing hard copies of screening tools; and embedding screening as part of community outreach events.

Number of children screened by the HMG Centralized Access Point or at Family and Community Outreach events	37, 442
Number of children for whom a screening was conducted by another agency, organization, or provider that was then referred to HMG care coordination, referral, and follow-up	23,172
Number of children screened through an online screening tool or web-based app platform	41,612

Common screening instruments include:

- Ages and Stages Questionnaire (ASQ-3), the Ages and Stages: Social Emotional Questionnaire (ASQ-SE 2);
- Parents' Evaluation of Developmental Status (PEDS);
- Survey of Well-Being of Young Children (SWYC);
- Modified Checklist for Autism in Toddlers (M-CHAT);
- Patient Health Questionnaire (PHQ-9);
- Edinburgh Postnatal Depression Scale (EPDS);
- Pediatric Symptom Checklist (PSC).

Screening Tools most commonly used by the HMG National Affiliate Network



Leveraging the HMG Model to Advance Equity

Targeted universalism is a central principle of the HMG Model, as it seeks to achieve universal outcomes through targeted strategies. HMG is available to all families and also focuses on reaching, serving, and advocating on behalf of families who have historically been marginalized and denied access.

HMG documents, collects, and distributes population-level data that showcase the impacts of social determinants of health on a family as well as their experience navigating the service system. Further, HMG systems strategically collaborate with partners to share data that paint a picture of the direct effects of inequitable policies and practices impacting impacted families of color, immigrant families, and families of lower economic status.

Efforts such as these, including the identification of existing gaps and barriers that prevent equitable access for families, serve to inform strategic targeted strategies. HMG systems are uniquely positioned to identify, advocate for, and carry out such strategies.

Targeted Universalism

Within a targeted universalism framework, an organization or system sets universal goals for all groups concerned. The strategies the organization/system develops to achieve those goals are targeted to different groups—based on how different groups are situated within structures, culture, and across geographies—to obtain the universal goal.

This is accomplished through five steps:

1. Define a universal goal.
2. Measure the overall population.
3. Measure a segment of the population.
4. Understand group-based factors.
5. Implement targeted strategies.

[Citation: Targeted Universalism Policy & Practice Primer, Haas Institute, May 2019](#)

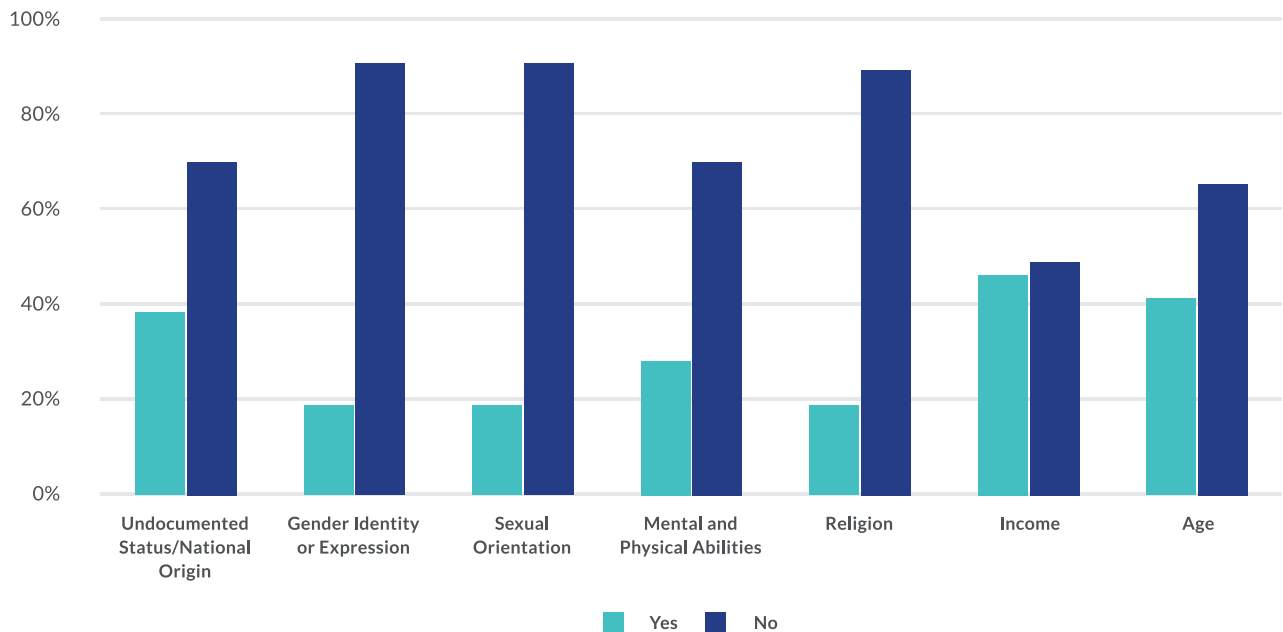
In 2021, **56% of the National Affiliate Network** indicated their state organizing entity has established goals for leveraging HMG to advance racial equity. Similarly, **57% of the National Affiliate Network** reported their HMG system has developed specific goals around racial equity.

The HMG National Center continues to explore ways to best support the National Affiliate Network in advancing equity through the HMG Model. In 2021, HMG systems implemented the following strategies to advance equity in their communities:

- Developed new supports and materials (both verbal and written) in languages beyond English and Spanish.
- Created formal HMG staff positions – combined with targeted hiring strategies - to be fulfilled by parent leaders and/or community members.
- Revised organizational mission and vision statements to include intentional language and action items designed to advance racial equity and social justice.
- Dove deeper into HMG data to identify which families are currently being served by HMG and which are not in order to guide novel, targeted outreach strategies.

When asked about the existence of other equity goals related to characteristics such as age, religion, disability, economic status, sexual orientation, gender identity, and undocumented status/national origin, responses varied. The majority of HMG systems indicated not having established these types of goals. Those that responded affirmatively reported adopting goals specific to equitably serving families of all income levels, age, and documentation status. Additionally, many HMG systems focus on language as a critical factor in developing equity-oriented goals and strategies.

Percentage of HMG Systems with Existing Goals Related to Various Variables of Equity



Affiliate Spotlight

Help Me Grow Alaska



ADVANCING EQUITY

Affiliate Background Information

One of Alaska's greatest challenges is the fragmented nature of its systems of care for children, in particular, the early childhood population. Alaska has a coordinated governance structure that spans across two departments, Health and Education. However, the state lacks the organization needed to effectuate a common vision, oversight, management, and accountability of Alaska's early childhood system and funding streams, including the ability to report to stakeholders in a meaningful way. These challenges are compounded by vast geography and varied infrastructure connecting the state.

The All Alaska Pediatric Partnership (A2P2) was selected as the organizing entity for HMG Alaska (HMG AK) through a multi-year planning process led by the Alaska Division of Public Health and was supported by findings from the HMG National Center's Early Childhood Network Mapping project. This project employed the use of social network analysis that determined A2P2 was best positioned to serve as HMG organizing entity due to its history of collaboration and bridging health care systems in Alaska. Extensive interviews, surveys, and mapping of stakeholder agencies demonstrated that the HMG Model is appropriate for Alaska and advances services and supports not already available through existing programs.

HMG AK initially launched January 2018 in three demonstration regions: Norton Sound; Kodiak; and the Matanuska-Susitna Valleys, which were the active place-based communities for the state's Early Childhood Comprehensive System efforts at the time. Almost immediately, the HMG Centralized Access Point began receiving calls outside of these pre-defined geographic regions, indicating a strong need to expand the system statewide.

Effects of the COVID-19 pandemic resulted in increased requests for educational and outreach support. In response, comprehensive outreach from HMG AK - rooted in relationship and trust-building - led to a surge of incoming calls to the Centralized Access Point. Serving as a valued and effective support to community has positioned HMG AK well in efforts to seek increased financial support to continue strengthening the system's

infrastructure both internally under A2P2 as well as through external partnerships and collaborations.

Help Me Grow Alaska's Efforts to Advance Equity

As HMG AK's Centralized Access Point call volume increased, emerging data demonstrated that the majority of calls were incoming from urban communities, rather than rural ones. To promote equity of access for all families in the state, HMG AK has spearheaded a new partnership with the Alaska Division of Public Health, in order to more effectively connect local early childhood efforts at the community-level.

The Alaska Early Childhood Network (ECN) began in 2020 as a partnership effort co-led by HMG AK and the Early Childhood Comprehensive Systems (ECCS) program of the State of Alaska, Division of Public Health. The ECN brings together leads of local early childhood coalitions and child-focused groups for the purposes of networking, resource sharing, didactic training, and to ensure that data and lessons learned from the state's initial ECCS work are maintained and shared equitably among all Alaskan communities. The ECN has hosted monthly virtual meetings to provide diverse statewide participation and foster deeper connection and communication amongst those working in the field of early childhood.

HMG AK engages in ongoing outreach to rural and often underserved communities in Alaska to invite their participation in the ECN. With all original members hailing from rural communities, the ECN currently has 12 official member communities with the hope of expanding to 20 in 2022. Topics of discussion are chosen in response to needs identified by community members and have included: coalition building and sustaining; developmental screening; family engagement; advocacy; community needs assessments; medical provider outreach; HMG AK resource and referral; as well as data access and use to support funding opportunities.

One-on-one community interviews and a pilot stipend program have raised visibility and understanding of the unique challenges and needs faced by individual communities, efforts of emerging community leaders on behalf of children and families, and how the ECN can support members in creating locally-relevant solutions.

HMG AK has partnered with Alaska's Learn the Signs. Act Early Team and several local communities to adapt and translate Learn the Signs. Act Early materials. This community-centered effort is directed by the input of families who illuminate limitations and weaknesses of widely available child development communication tools and how they can better represent community.

Help Me Grow Alaska Going Forward

HMG AK will utilize the relationships and information cultivated through the ECN to bolster capacity within ECN communities, as well as adapt the wider HMG AK system to better serve families and providers.

An emerging topic of discussion among ECN members is the development of best practices related to building and sustaining healthy early childhood coalitions. Advancing equity in community representation has been foundational to these efforts, with an emphasis on the inclusion of diverse partnerships that include, but are not limited to family members with lived experience, the medical community, tribal partnerships, business, local government, school districts, and service providers.

ECN members are responsible for serving as local HMG AK Community Champions. This strengthens local community outreach and adds to the efficacy of HMG AK staff who benefit from the intentional connection to local communities around the state that vary in many respects, including in culture, language, service access, and infrastructure.

HMG AK is also committed to leveraging data and information from ECN communities and sharing appropriately through the strategic work of A2P2 in order to advance statewide systems-level partnerships, early childhood governance work, and advocacy for equitable access to health and community-based services.

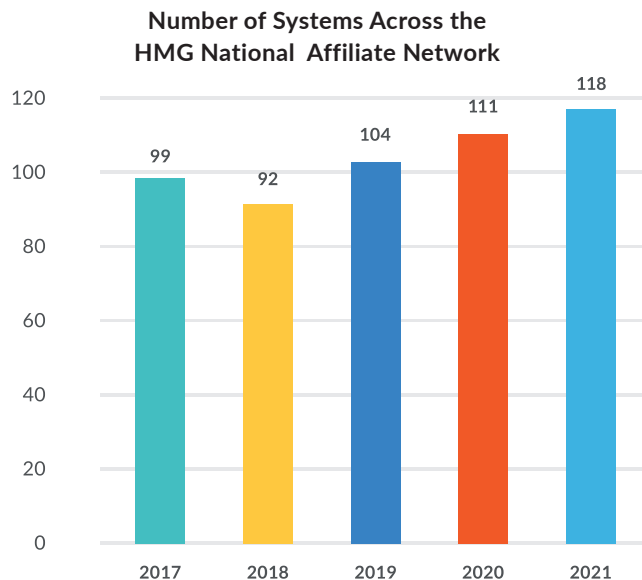
Help Me Grow Over Time

In 2018, the HMG National Center administered the first Fidelity Assessment to the existing 28 states and 99 HMG systems to measure HMG impact and implementation for the year of 2017. Five years later, the HMG National Center is positioned to begin reviewing longitudinal data from the Affiliate Network. The following metrics highlight the continuous growth and impact of the HMG Model across the country from 2017 to 2021.

The Growth of the HMG National Affiliate Network

Expanding HMG to achieve full potential can happen in three main ways:

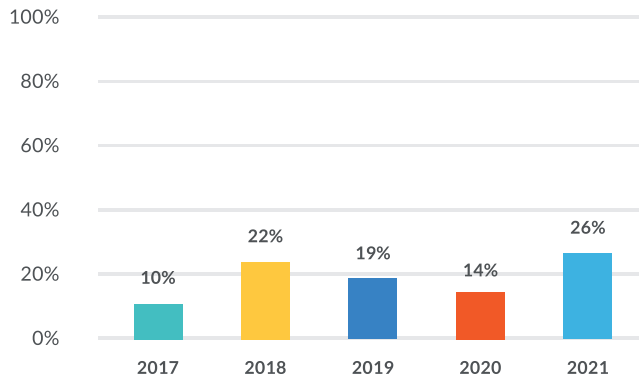
1. New states can join the National Affiliate Network.
2. New systems can begin implementing the Model within existing affiliate states to spread coverage to new communities.
3. Increased awareness and uptake by more families within an existing system.



New System Implementation

The number of communities implementing the HMG Model has steadily increased since the start of measurement. **The National Affiliate Network's largest increase in new HMG systems took place between 2018 and 2019.**

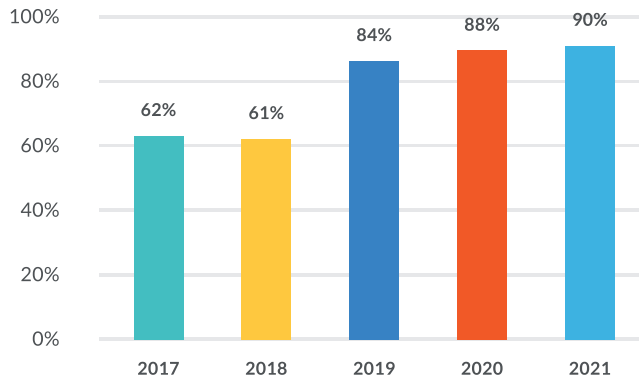
Percent of HMG Systems in Full Implementation



Achievement of Model Implementation

HMG systems in full implementation are defined by the achievement of all 16 Key Activities of the Model. **Across all five years of measurement, the majority of the HMG National Affiliate Network has been classified in the installation phase, though the number of systems advancing to full implementation of the Model has increased significantly since initial measurement.**

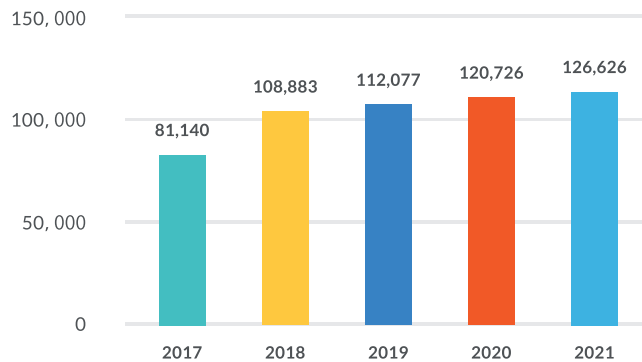
Percent of Systems With an Active HMG Centralized Access Point



Operational Call Centers

There has been a steady increase in the HMG National Affiliate Network’s establishment of active HMG Centralized Access Points, each equipped with a specialized child development line and HMG Care Coordinators trained to assist families’ needs.

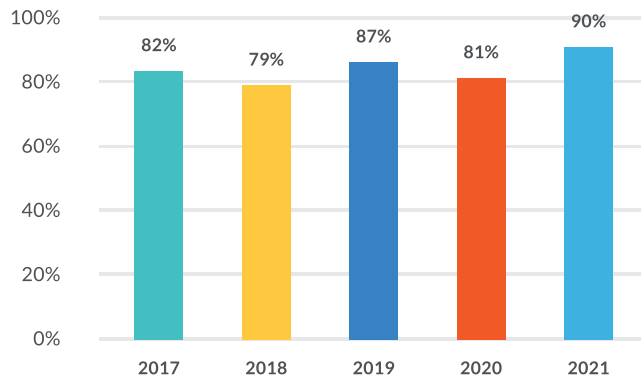
Number of interactions with children and families through HMG Centralized Access Points



Unique Interactions

As more systems emerged and the Affiliate Network advanced in its Model implementation efforts, the number of families through HMG Centralized Access Points has steadily increased. **Collectively, HMG systems reported roughly 550,000 interactions with families and children through HMG Centralized Access Point interactions over the last five years.**

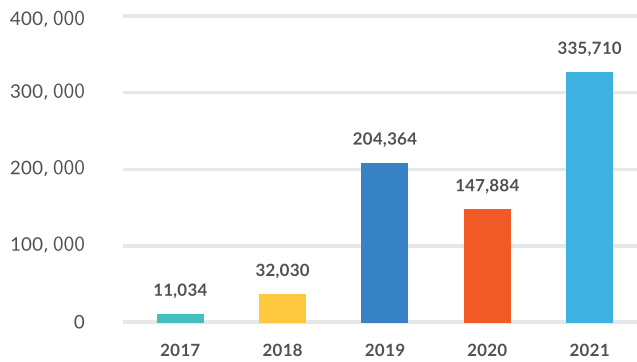
Percent of Families Reporting Needs Met by the HMG Centralized Access Point



Needs Met

HMG systems connect families to existing services in the community and while unable to directly ensure the quality and impact of services rendered, HMG is able to control the quality, efficiency, and effectiveness of its own work directly interacting with families. **Over the last five years, families interacting with HMG Centralized Access Points across the country have reported an average of 84% needs met.**

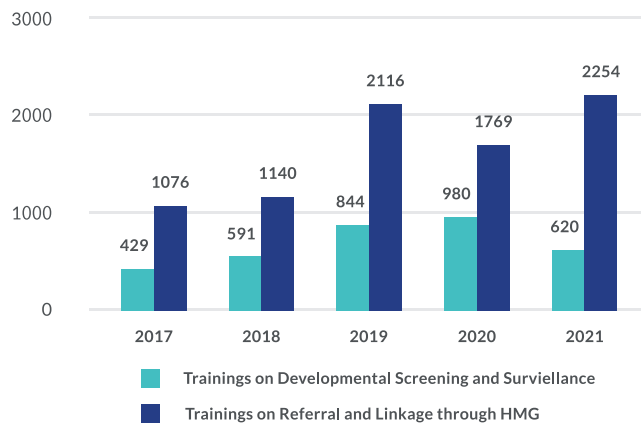
Families Reached through HMG Led Events



Family and Community Outreach Efforts

The number of individuals reached through HMG-led events has seen significant advancement not only in sheer number reached but in strategies and efforts to connect with families in person, virtually, and through social media. **Over the last five years, HMG systems have reported serving 731,022 individuals at HMG-led or coordinated events in the community.**

Child Health Care Provider Trainings Conducted by HMG



Child Health Care Provider Trainings

Over the course of the last five years, HMG systems have conducted 3,454 trainings on developmental screening and surveillance and 8,365 trainings on how best to utilize HMG as a resource to support referral and linkage. **In total, HMG systems conducted 11,819 trainings to child health providers and other medical professionals.**

Measuring the Help Me Grow Model Moving Forward

In the fall of 2021, the HMG National Center developed the HMG Mini Assessment, a reporting tool designed to capture impact data for a select set of HMG Impact Indicators more frequently throughout the year. While the National Affiliate Network will continue to participate in the Annual Fidelity Assessment to determine implementation status and capture annual impact as demonstrated in this report, the HMG Mini Assessment will allow for more timely and readily available data to support funding and affiliate opportunities and better advocate for HMG on a national and federal-level.

In addition to increased reporting frequency, the HMG National Center convened a group of HMG Implementation Experts and affiliate leads to review and revise existing metrics captured in the HMG Mini Assessments, as well as co-develop additional metrics to better articulate HMG's engagement with families and unique value to early childhood system-building. Moving forward, the Impact Indicator known as Unique Interactions (reported within the Centralized Access Point section of this report) will be discontinued. Starting in 2022, HMG systems will report on Total Families Served, Total Children Served, and Total Centralized Access Point Activities, which serve to represent the full scope and impact of the HMG Centralized Access Point. Future HMG Building Impact reports will be used to track and communicate this shift.





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