Healthy Start CoIIN Town Hall:
HS CoIIN 2014-2019: Reflections and Insights for the next HS CoIN

March 21, 2019

EPIC

Supporting communities to give every child a Healthy Start.

Healthy Start EPIC Center

Agenda

Welcoming Remarks	Division of Healthy Start and Perinatal Services (DHSPS)
Introduction: *Purpose and Focus Areas of CoIIN* *Purpose of CoIIN Assessment*	
Methodology of Assessment	HS CoIIN Co-Chairs
Findings: *Successes and Opportunities for Strengthening*	
Insights for the Next CoIN	
Q/A and Discussion	All

Welcoming Remarks DHSPS and HS COIIN Presenter Introduction

CDR Mary Emanuele
Senior Public Health Analyst
Division of Healthy Start and Perinatal Services
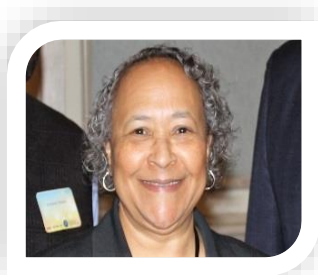
Dianne Browne
Project Director
Camden Healthy Start
Southern New Jersey
Perinatal Cooperative

Lisa M. Matthews
MomsFirst Project Director
Cleveland Department of Public Health

Taking the pulse on engagement

Poll:

Did you attend any of the following HS CoIIN-hosted webinars? (check all that apply)

- ❑ Screening Tool Launch, 1/11/16
- ❑ Joint HS, HV, IM CoIINs, 4/16/16
- ❑ HS Lessons Learned Town Hall, 5/16/17
- ❑ HS Lessons Learned Town Hall, 7/20/17
- ❑ Sustainability and Transition Planning, 1/17/19
- ❑ None

Purpose of the HS CoIIN

- The HS CoIIN is a partnership of Healthy Start grantees dedicated to strengthening Healthy Start services and systems.

- The HS CoIIN functions as an Expert Panel on behalf of Healthy Start Grantees.

- 5-year grant cycle, 2014-2019

Building a Stronger Healthy Start Program Through Standardization

Identify components of the Healthy Start Program for standardizing across the HS community.

→

Promote implementation of the standardized components across the HS community.

Why standardize Healthy Start?

- Provides a consistent, predictable, and replicable experience for Healthy Start participants designed to achieve positive health outcomes.
- Based on "the best we know today"
- Foundation for improvement

HS CoIIN Priorities Progress

|	2015	2016	2017	2018	2019
Identified Standardization as Priority	■				
Developed Screening Tools		■■■■■■■■			
Data Collection and Reporting		■■■			
CM/CC		■■■	■■		■■
Lessons Learned from the Field			■■		
Screening Tool Review				■■	
Sustainability and Transition Planning Tools					■■
CoIIN Assessment					■■

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HS CollN Assessment

Purpose

To assess and document the effectiveness of the HS CoIIN's internal operations and the impact of the CoIIN on members and other stakeholders:

- key factors that contribute to the CoIIN's success and challenges;

- group process in developing lessons learned and insights for the future HS CoIN; and

- strengths and accomplishments of the HS CoIIN.

Assessment Methodology

Data Sources Informed Each Other
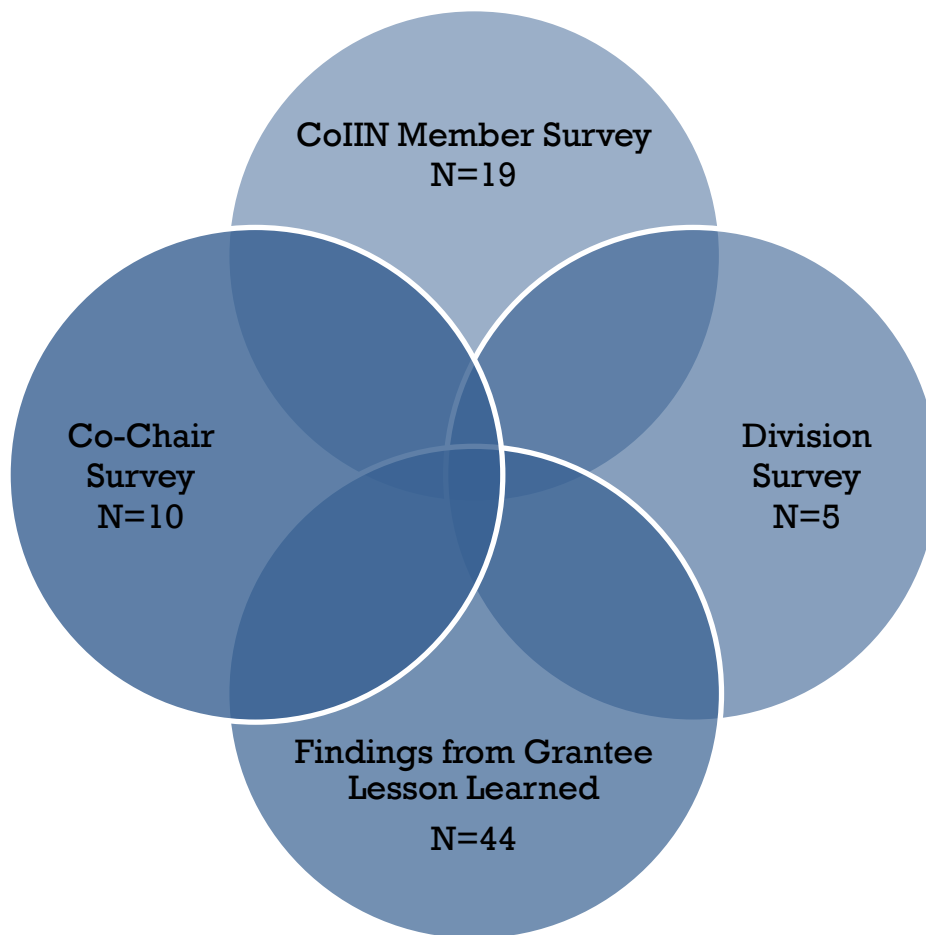
Framework

Explore the various dimensions of success across the domains of group development:

- Relationship: the quality of the connections between the people engaged in the work

- Process: how the work or tasks are carried out

- Results: goal or task accomplished

Data Analysis

- **Reviewed quantitative questions:**
  - Combined the top ratings (ie: strongly agree and agree);
  - Data points about group dynamics include various points in time.

- **Reviewed qualitative data:**
  - Conducted a thematic for each area and summarized as patterns grouped together.

- **Organized quantitative and qualitative data around the topic areas of the survey (ie: management and support of the HS CoIIN).**

- **Findings were synthesized across data sources.**

Let's Check-In

Poll:

How well do you agree with the following statement: The HS CoIIN has been influential on my organization's work.

❑ Strongly agree
❑ Agree
❑ Somewhat agree
❑ Disagree
❑ Strongly disagree
❑ Not sure

Findings: Successes and Opportunities for Strengthening

Group Dynamics

How would you rate the group dynamics? (n=19)
Weighted average; 5-point scale

Members were able to communicate among themselves as necessary	4.47
Use of member resources	3.84
Involvement/participation	3.53
Mutual trust and confidence	4.16
Open communication	4.26

Purpose, Goals, Strategies, Roles/Responsibilities

Overall: How would you rate the following areas for the HS CoIIN? (n=19)
Weighted average; 5-point scale

Satisfied with the way the CoIIN has implemented its plans.	4.32
Shared understanding of members' roles and responsibilities: members, Co-Chairs and EPIC Team.	4.32
In agreement on strategies to address purpose and/or goals (i.e., screening tool development, group contracting with select vendors, CM/CC).	4.11
General agreement with purpose and/or goals.	4.26
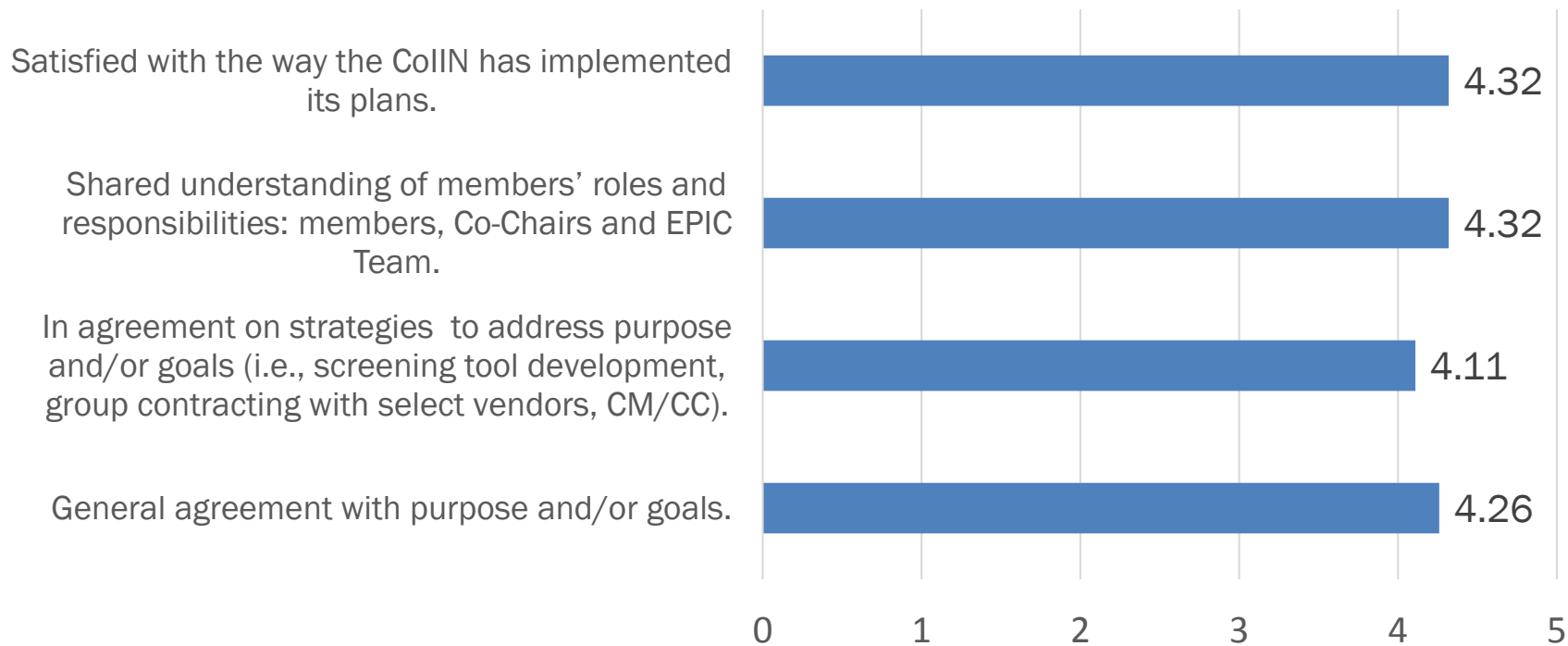
Efficiency and Effectiveness

How would you rate the efficiency and effectiveness of the HS CoIIN? (n=19)
Weighted average; 5-point scale

Effective email communication among EPIC/CoIIN team, CoIIN leadership and members was effective	4.63
Effective quorum and consensus process	4.42
Members were involved in the decision-making	4.53
CoIIN had credibility within your organization's leadership	4.21
CoIIN effectively used data, research findings, and information to guide its strategies	4.32
CoIIN used members' time efficiently	4.16
CoIIN used members' time effectively	4.16
Clear rules of operation	4.42

Most Significant Achievement of HS ColIN

What do you think has been the most significant achievement of the HS ColIN, and Why?

(n=19)

- Screening Tools
  - Revision: easier for grantees to do their work
  - Unify projects and aid in national evaluation
- Sustainability
- Standardizing Data Collection
  - Improved cross-program evaluation
  - Set expectations and aligned programs
- Working with HRSA/Bureau-Communication
  - Garnered respect of Division

Standardization Priority

How would you characterize the HS CoIIN's priority of standardization as it related to the Division's overall vision?
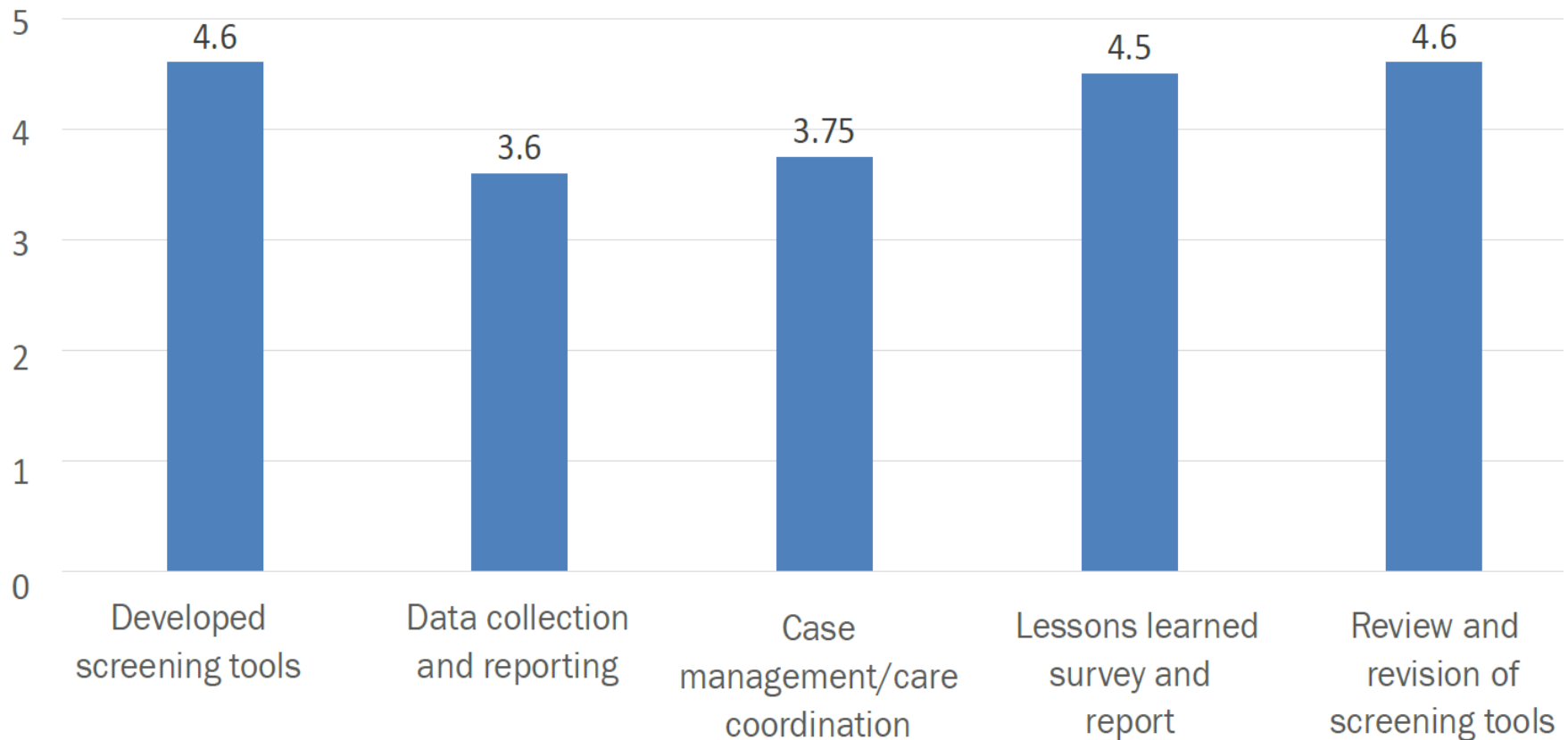
In Alignment = 100%

Additional Comments:

The assistance offered by HS CoIIN Leadership helped in crafting the client data collection forms.   The on the ground experience of the HS CoIIN members helped to create documents that fully capture all components of phases of the Healthy Start client experience.

HS CoIIN Initiatives

To what extent did these HS CoIIN initiatives help shape the Healthy Start program (weighted average)? (n=5)

Bar chart values:
- Developed screening tools: 4.6
- Data collection and reporting: 3.6
- Case management/care coordination: 3.75
- Lessons learned survey and report: 4.5
- Review and revision of screening tools: 4.6

HS CoIIN Achievement

Is there something you would have liked the HS CoIIN to do that was not done? (n=5)	
Yes	20%
No	80%

- I think it would be beneficial to see the HS CoIIN members interact with HS Programs in their region more actively, and to support the use of protocols and tools as outlined by HRSA.

- The vision I have for the HS CoIIN is as the go to resource for information that all grantees seek to bounce ideas off or provide information on ways to improve all aspects of their program.
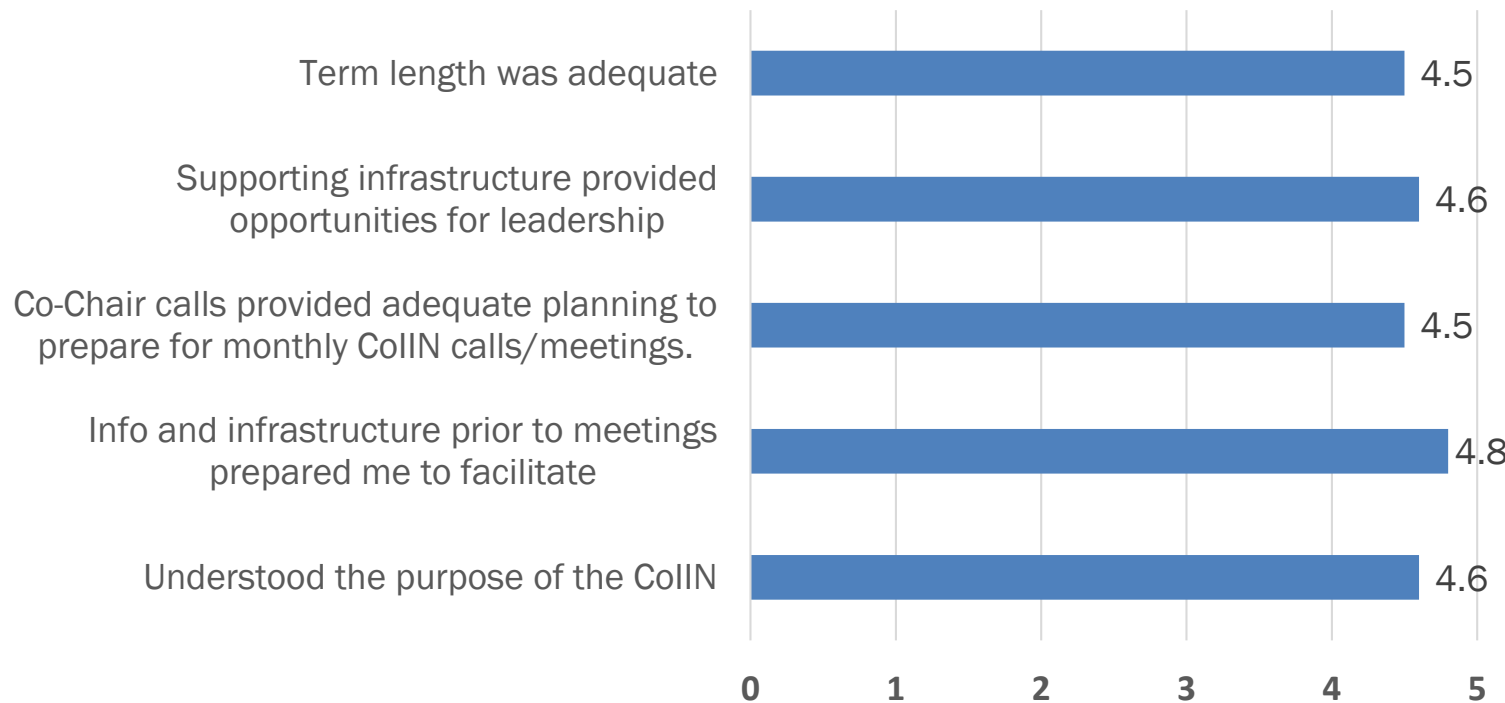
HS Community:
What's Working, What Could Be Improved

What's Working (n=49)	Areas to Improve (n=50)
Structure and Process=16	Better Dissemination=11
Membership Diversity=9	Feedback Mechanisms=7
Responsiveness=8	More Diverse Composition=6
Ongoing Communication=7	Structure and Process=5
Size=3	Output=2
JSI Coordination/Support Role=3	Program Participants=1
Output=2	Size=1
Trust=2	
Expertise and Knowledgebase=2	

Purpose, Structure and Process

How would you respond to the following statements? (n=10)
Weighted average 4.5 out of 5-point scale

Statement	Value
Term length was adequate	4.5
Supporting infrastructure provided opportunities for leadership	4.6
Co-Chair calls provided adequate planning to prepare for monthly CoIIN calls/meetings.	4.5
Info and infrastructure prior to meetings prepared me to facilitate	4.8
Understood the purpose of the CoIIN	4.6

Barriers and Opportunities

As Co-Chair, what barriers did you encounter that affected your participation? (n=10)

- Time and Competing Priorities
- No Barriers

To what degree were you able to benefit from opportunities for leadership, professional growth, and networking are afforded through the CoIIN? (n=10)

- Networking
- Developing Facilitation Skills
- Shared learning

My Co-Chair Experience WAS...

Valuable- personally and professionally

A raising the bar experience

Good, I had a strong, active co-chair and I believe our personalities balanced each other. There was mutual respect and shared program history which made it easy.

The relationship with my co-chair grew into a strengthened partnership/relationship.

What do you think?

Poll:

How well do you agree with the following statement: HS CoIIN implemented activities that have the potential to improve HS program outcomes.

- ❑ Strongly agree

- ❑ Agree

- ❑ Somewhat agree

- ❑ Disagree

- ❑ Strongly disagree

- ❑ Not sure

Reflections and Insights for the Next HS CoIN

Positive Outcomes/Strengths/What Worked

Limitations

Insights

Reflections

Strengths	Limitations

• Group size supported efficiency and productivity
• Intentional about keeping identity of Healthy Start
• Standardization
• Informal networking and learning
• EPIC support / Support of TA group
	• HS CoIIN weighted with level 3 grantees, lacking a structure for ensuring diversity
	• Varying degrees of participation on calls
	• Lack of:
	  • standardized orientation
	  • feedback post-meetings (evaluations)
	  • strategic involvement of NHSA

Insights for Process Improvements

Formalized Orientation:
- HS CoIN members, grantees and DHSPS

Communication:
- Clear Communication Plan between HRSA and HS CoIN that spans the entire 5 years
- Clear communication for every level involved in HS CoIN

Engagement
- Meeting face-to-face enhance group engagement and travel funds enable full participation
- Varied methods of soliciting feedback encourages participation especially for new members.

Insights for Optimizing HS CoIN Selection

- **Application for HS CoIN membership**

  - Diverse representation: geographic, organization size and type

  - Group size – 20-25

  - Maintain % of inaugural HS CoIIN membership

  - Find strategic/formal role for NHSA

Suggested Focus Areas for Next HS CoIN

What specific projects would you like to see the next HS CoIN cohort focus on in the next 1-3 years? (n=17)

- Communication
- Male Involvement
- Sustainability and Transition Planning
- Continue Refinement of Screening Tools
- Improve Data Collection Capacity
- Continue CM/CC Standardization
- Seeking Evidence-Based Status
- Conducting ROI/Cost Benefit Analysis

Questions/Discussion

Wrap Up and Reminders

Webinar Update:

March 28, 2019: 1-2:30pm ET - Conversations with the Division

Note: focus will be on program closeout for current grantees

EPIC Center website: http://www.healthystartepic.org

Includes all recorded webinars, transcripts, and slide presentations