

## FY20 Early Childhood Action Agenda – Ingham Great Start Collaborative (Outcome 1)

<p><b>Targeted Problem: Not all children are born healthy</b></p> <p><b>Key indicators:</b></p> <ul style="list-style-type: none"> <li>• 7.1 Per 1000 Infant Mortality Rate             <ul style="list-style-type: none"> <li>○ 9.8 Per 1000 Infant Mortality Rate for African American</li> <li>○ 9.7 Per 1000 Infant Mortality Rate for Hispanic</li> <li>○ 8.5 Per 1000 Infant Mortality Rate for families at or below 100% FPL</li> </ul> </li> <li>• 6.8% of live births to women with late or not prenatal care</li> </ul> <p>34.9% of live births to women with less than adequate prenatal care</p>														
<p><b>Goal: Prenatal health care services are easy for families to access.</b></p>														
<p><b>Objective #1:</b> Barriers (transportation, childcare, parents’ work schedules and doctors’ office hours) to accessing prenatal health care services are identified and reduced.</p>														
<p><b>Strategy 1:</b> Educate providers about barriers to accessing prenatal healthcare and engage them in discussions around changing practices to address barriers. (Could we change to perinatal (to age 1)?</p> <p><b>Prioritized Root Causes related to the Objective and addressed by this strategy:</b></p> <ul style="list-style-type: none"> <li>• There is a disconnect between parents and Drs. perceptions of options that increase accessibility. (Mindset)</li> <li>• Some families lack supports (social, concrete, relationship) to be able to access prenatal health care services (Regulation)</li> </ul>			<p><b>Performance Measures (results from Strategy 1):</b></p> <ul style="list-style-type: none"> <li>• Three providers who are given information about barriers indicate an interest in making changes in their practice.</li> <li>• Reduction in number of families missing prenatal health care appointments at Cristo Rey Health Clinic</li> </ul>											
<table border="1"> <thead> <tr> <th>Activities</th> <th>Persons or Groups Responsible</th> <th>Target Dates</th> <th>Resources</th> <th>Progress Measures (outputs of Activities):</th> </tr> </thead> <tbody> <tr> <td> <p>1.) Now that families have been surveyed about prenatal health care preferences and services, identify community organizations and prenatal programs that provide prenatal and pregnancy care (including health providers) and share prenatal health care survey data and information collected from families with identified community organization(s) or health provider.</p> <ul style="list-style-type: none"> <li>• Develop a list of community organizations and prenatal programs in the community</li> <li>• Identify which voices are not represented at the GSC and invite representative to participate in Outcome 1 Group work (at GSC meeting or at the organization’s meeting)</li> <li>• Decide which community organization(s) or health care provider(s) to engage in the work of Outcome 1 Group (and the GSC)</li> <li>• Share pre-natal health care survey data and information with identified community organizations or health providers</li> </ul> </td> <td> <p>Ingham County Health Department, Ingham Local Leadership Group, Outcome 1 group</p> </td> <td> <p>Dec 2019</p> </td> <td> <p>Access to multiple pre-pregnancy and pre-natal community organizations.</p> </td> <td> <p>List of community organizations developed.</p> <p>Outcome 1 prenatal healthcare survey data is shared with organization or providers.</p> <p>Information collected from the prenatal healthcare survey and importance of pre-natal care is included in community organizations pre-pregnancy and pre-natal education</p> </td> </tr> </tbody> </table>					Activities	Persons or Groups Responsible	Target Dates	Resources	Progress Measures (outputs of Activities):	<p>1.) Now that families have been surveyed about prenatal health care preferences and services, identify community organizations and prenatal programs that provide prenatal and pregnancy care (including health providers) and share prenatal health care survey data and information collected from families with identified community organization(s) or health provider.</p> <ul style="list-style-type: none"> <li>• Develop a list of community organizations and prenatal programs in the community</li> <li>• Identify which voices are not represented at the GSC and invite representative to participate in Outcome 1 Group work (at GSC meeting or at the organization’s meeting)</li> <li>• Decide which community organization(s) or health care provider(s) to engage in the work of Outcome 1 Group (and the GSC)</li> <li>• Share pre-natal health care survey data and information with identified community organizations or health providers</li> </ul>	<p>Ingham County Health Department, Ingham Local Leadership Group, Outcome 1 group</p>	<p>Dec 2019</p>	<p>Access to multiple pre-pregnancy and pre-natal community organizations.</p>	<p>List of community organizations developed.</p> <p>Outcome 1 prenatal healthcare survey data is shared with organization or providers.</p> <p>Information collected from the prenatal healthcare survey and importance of pre-natal care is included in community organizations pre-pregnancy and pre-natal education</p>
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<p><b>11/20/19 Progress and Next Steps:</b></p> <ul style="list-style-type: none"> <li>• New progress date – March 2020</li> <li>• <b>Jessica:</b> SUT invite to Outcome 1 – interest</li> <li>• <b>Lisa:</b> IMC, FIMR– What work is currently going on; meetings</li> <li>• <b>Lisa:</b> Women’s Health Providers – list</li> <li>• Messaging – what to ask?</li> </ul> <p><b>12/18/19 Progress and Next Steps:</b></p> <ul style="list-style-type: none"> <li>• One (1) nurse will be the FIMR Coordinator.</li> </ul>														

- Next IMC Meeting scheduled for 1/24/20 at 8:30 a.m.
- **Lisa:** Review documents to determine transportation list
- **Jessica:** Review/providers lists, TBD which provider to engage
- **Theresa:** Ask health practice if they service pregnant moms.

**02/19/20 Progress and Next Steps:**

- OB/GYN provider list updated with hours and types of Medicaid accepted.
- **Jessica** – Invite Pregnancy Services and Shared Pregnancy to meeting and GSC orientation for Outcome 1.

**07/15/20 Progress and Next Steps:**

- **RE: System Racism Discussion:** Review some of the data again and focus on activities that relate; get in touch with health providers/doctors to see what they are doing regarding this issue rather than re-invent the wheel; and figure out the why.

2.) Identify person with a connection to Cristo Rey Health Clinic and work towards tracking prenatal health care appointment data of women going to prenatal appoints (including first prenatal appointment and subsequent prenatal appointments).

- Work with Cristo Rey Health Clinic to collect prenatal health care appointment data on a monthly basis
- Review data collected during Outcome 1 Group worktime at GSC meetings

Cristo Rey Health Clinic, Outcome 1 Group

Oct 2019  
Dec 2019 / ongoing while program exists

Cristo Rey Health Clinic data

Cristo Rey Health Clinic staff person identified  
Data collection process identified

**09/18/19 Progress and Next Steps:**

- Theresa (Cristo Rey) started tracking data and working with families.
- Theresa (Cristo Rey) brought registration forms today.
  - Info/other data to track:
    - Parent Nurturing Intake Form: age, gender, income
    - Initial Assessment for Aces Grant: age, gender, race, # of children, education, employment/school status, income
    - Other data to track/add to Aces grant intake form: zip code, # of missed appts., age, gender, race, income level, which pregnancy, language, marital status, aces score

Families Served: pregnant moms; infants (0-6 mos); toddlers, preschoolers

**11/20/19 Progress and Next Steps:**

- ACES assessments for current families underway
- 12 families (10 moms and 2 dads) currently enrolled, ages 3 and under for kids can come w/ parents
- AM/PM classes offered for 10 weeks; start date 12/5/19; “rotating” & can start at any point during the weeks; parents are engaged/excited about classes.

**12/18/19 Progress and Next Steps:**

- Parent Nurturing Classes – New start date of Jan 2, 2020.
  - Instructor (Theresa Pittington) for classes is recently an ACES Community Champion.
  - Up to 20 families registered now (+8)
  - Put in grant extension for program up to September instead of March

**01/22/20 Progress and Next Steps:**

- ACES/Nurturing Parent classes have started. Additional updates at February meeting.
- A medical provider’s list was given to Outcome 1 work group members.
  - **Sage** – Update list with doctor’s office hours.
- **Lisa** – Links/info for the Medicaid/insurance sites regarding transportation and also child care.
- **Jessica** - Brainstorm what website could look like with GSC webmaster.

**02/19/20 Progress and Next Steps:**

- “Book library” for clients
- Parent Nurturing classes have started—moms and dads have been attending; 1-on-1 appointments in the mornings, majority of classes in pm.

- Cristo Rey currently looking for a physician who can provide prenatal care to clients.
- Contacted GSC webmaster re doctors' lists; hours; transportation; childcare.
- Information re childcare and transportation "covered" by insurance provided.

**05/27/20 Progress and Next Steps:**

- **Jessica** - Will contact Theresa from Cristo Rey to get an update on ACES/Nurturing Parenting classes that began in December.

**09/16/20 Progress and Next Steps:**

- Made phone calls, talked with class participants to check in regarding parenting classes at Cristo Rey.
- Teresa reported ACES and other parenting classes will be held in-person at Cristo Rey beginning the first week of October with limited participants due to Covid-19 safety mandates and room size.

3.) Collect, review and compare disaggregated prenatal data collected now (to date) to 1 year from now (based on FY20 calendar).	Outcome 1 Group	Dec 2019 / ongoing	MLPP, Outcome 1 Prenatal Health data Cristo Rey Health Clinic data	Data is collected and reviewed on a quarterly basis
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**11/20/19 Progress and Next Steps:**

- **Theresa** - Data review prenatal care...

**12/18/19 Progress and Next Steps:**

- Updated the data collection tool (i.e. birth outcomes).
- Classes will start 1/2/20.

**02/19/20 Progress and Next Steps:**

- **Theresa** - Bring data from Cristo Rey to next meeting for Outcome 1 to review.

**05/27/20 Progress and Next Steps:**

- **Jessica** - Will contact Theresa from Cristo Rey regarding data collected from prenatal care.

**Objective #2: Increase knowledge and use of health care benefits and other supportive services for prenatal care.**

<p><b>Strategy 1:</b> Outreach to families about health care benefits in new and non-traditional ways.</p> <p><b>Prioritized Root Causes related to the Objective and addressed by this strategy:</b></p> <ul style="list-style-type: none"> <li>• The 211 dilemma – lack of coordination amongst various resources - "gateway" to resources (Connections)</li> <li>• Many people don't know about resources at the Health Department (Connections)</li> <li>• There are negative perceptions about accessing resources at the Health Department (Mindset)</li> <li>• Reading and language proficiency makes it difficult for some parents to complete applications (Component)</li> <li>• There is a lack of knowledge and understanding of how to navigate using health care insurance benefits. (Resource)</li> <li>• Lack of Cultural competence (Mindset)</li> </ul>	<p><b>Performance Measures (results from Strategy 1):</b></p> <ul style="list-style-type: none"> <li>• Over the next three years, increase in use of health care insurance benefits</li> <li>• At least one health insurance plan is aware that its clients have questions about their health insurance benefits.</li> </ul>
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<b>Activities (small wins promoting the strategy and addresses Root Causes)</b>	<b>Persons or Groups Responsible</b>	<b>Target Dates</b>	<b>Resources Needed</b>	<b>Progress Measures (outputs of Activities):</b>
<p>4.) Promote cultural competency/empathy among GSC member organizations, community partners, health care providers and Medicaid plans, and frontline workers so that insurance benefit information can be shared with families in ways that resonate with them</p> <p>Co-sponsor at least one cultural competency/ empathy training (June 2019) and a follow-up (Oct 2019) training.</p>	<p>Ingham GSC and partners, ISAP, Staff of Insurance Plans (send out in US)</p>	<p>Dec 2020</p>	<p>Cultural competency information/ training</p>	<p>One cultural competency/empathy training offered locally</p>

**Progress and Next Steps:**

<p>5.) Communicate and share information about health care benefits (including supports services for prenatal health care and resources) in natural traffic areas, like grocery stores, mass media outlets (Facebook, advertisements) for families.</p> <ul style="list-style-type: none"> <li>• Craft “Questions to ask” about your health insurance plan in multiple languages that families can understand and resonate with</li> </ul>	<p>Ingham Local Leadership Group, Ingham GSC Family Coalition, Ingham County Health Department, Outcome 1 Group</p>	<p>Mar 2020 / ongoing</p>	<p>General information about health insurance benefits from Medicaid plans</p> <p>Information about the new MI Bridges Health insurance navigators</p> <p>Knowledge of predominant language(s) in community</p>	<p>“Questions to ask” sheet(s) created</p> <p>“Questions to ask” sheet(s) available at 5 natural traffic areas</p>
<p><b>05/27/20 Progress and Next Steps:</b></p> <ul style="list-style-type: none"> <li>• Communicating information about health care plans and support services, including prenatal health care (Objective 1), has shifted from paper to virtual. The content of information gathered since the January and February GSC meetings includes information about childcare, transportation provided by the different Medicaid plans, and a modified OB/GYN provider list with hours and Medicaid plans accepted.</li> <li>• Members discussed where to place this information on the Ingham Great Start website. Possible areas include the Resource Tab and links to the GSFC and LLG pages. <b>Jessica</b> will contact webmaster, Jodi Spicer.</li> </ul> <p><b>09/16/20 Progress and Next Steps:</b></p> <ul style="list-style-type: none"> <li>• <b>Jessica</b> will connect with Jodi/Michelle regarding foot traffic on the GSC website (analytics).</li> </ul>				
<p>6.) Engage with one Medicaid Health Insurance plan to share information about families’ lack of knowledge of health insurance benefits and gain an understanding of the benefits offered.</p> <ul style="list-style-type: none"> <li>• Decide which Medicaid Health Insurance plan to engage</li> <li>• Contact at least one Medicaid Health Insurance plan in the community and obtain information such as what insurance information is available to families, how it is available to families.</li> </ul>	<p>Ingham County Health Department, Ingham County Department of Health Human Services, Outgroup 1 Group Members, GSC members</p>	<p>Mar 2020 / ongoing</p>	<p>Access to alternate modes of communication (interpreters, TDP)</p> <p>Information about health insurance benefits from at least one Medicaid plan.</p>	<p>Primary Medicaid Health Insurance plan contacted to see if there is staff who speaks languages other than English</p> <p>Connection with Medicaid Health Insurance plan occurs</p>
<p><b>Progress and Next Steps:</b></p>				
<p>7.) Now that a list of local “health fair” events (Cristo Rey, Juneteenth, Baby Fair, CMH Children’s Mental Health Fair) has been developed and shared with Outcome 1 Group members, work toward having representation at these events on a consistent basis and to distribute “Questions to Ask”.</p>	<p>Ingham GSC Family Coalition, GSC members</p>	<p>Ongoing</p>	<p>“Questions to ask” Staff time</p>	<p>List of health fairs created.</p> <p>“Questions to Ask” distributed.</p> <p>“Questions to Ask” sheets available at 5 natural traffic areas.</p>

## Progress and Next Steps:

01-22-20 How to engage other in Outcome group work? Who is missing? Who will reach out?

- How to Start
  - 1 doctor (IChD)/IMC
  - Physician meeting associations
  - Medical Providers list
  - Parent and child service line (Sparrow) – Nurses (Kathy Marble)
- What
  - Receptionists, MAs (frontline workers)
- Strategy
  - Reducing barriers to prenatal care by
- Note: Transportation – CATA Services

### 02/19/20 Data Review Notes

- IM rate has decreased slightly, but the disparity between groups has increase between blacks and whites.
- Smoking while pregnant/tobacco use has decreased.
- A few questions about race and ethnicity, particularly the Hispanic population.

### 02/19/20 Resources for Families

- Monthly bus passes for CADL patrons
- Childcare eligibility info – reimbursement /subsidy.