# **Ingham Great Start Collaborative**

Our vision: Every child is ready to succeed in school and life.

Ingham GSC Meeting Notes, April 18, 2018, 1:00 – 3:30 pm

# LOCATION: Grace United Methodist Church - 1900 Boston Blvd., Lansing

## I. Welcome and Working Agreements

Chair: Barb Monroe Time Keeper: Regina Traylor

**Present:** Sondos Al-Hachim-Islamic Center, Effie Alofoje-Carr-LLG, Jessica Baker-Parent Liaison, Wendy Boyce-Ingham ISD, Missy Challiss-ICHD, Lisa Chambers-ICHD, Kae Dubay-Parent, Kendra Gibbs-ERESA MIAAP), Debbie Jones-30<sup>th</sup> Judicial Court, Fran Jozefowicz-CMH, Jared Keilen-DHHS, Scott Koenigsknecht-Ingham ISD, Laurie Linscott-MSU CDL, Lucy McClintic-CACS Head Start, Corrie Mervyn-Ingham ISD (GSRP), Barb Monroe-Great Start to Quality CRC, Michelle Nicholson-Ingham ISD (Early On/GPGS), Stephanie Thelen-Ingham ISD, Regina Traylor-ICHD, Cassie Veselovsky-CADL, Kathy Vogel-CMH, Dana Watson-ICHD.

The 4/18/18 Meeting Agenda and 3/21/18 Meeting Notes were approved as stated.

### **Inclusion Activity - Parent Café Question**

Today's Parent Café question aligns with the Strengthening Families Resiliency Protective Factor – "What is one word you would use to describe how work is going for you this week; or your most significant challenge this week?" Members discussed with elbow partners.

# II. Spotlight - Jared Keilen, DHHS

Jared explained how the primary role of the Health Liaison Office is to promote and provide direction for improved health outcomes for all children in foster care. Children in foster care are required to have health and dental screenings within 30 and 90 days of entering foster care. The Health Liaison Office helps to coordinate these services through the child's primary care physician if possible, pending location of foster care placement. The Health Liaison Office also supports foster families with navigating Medicaid and billing issues.

- Question: When working with foster parents, how does one access medical records?
   There is generally a "release" required—Jared will confirm the process. All medical appointments/exams are entered/logged to help build the child's medical record. A medical passport that provides a synopsis of a child's medical appointments over the last 18 months is created.
- Question: What is the involvement of biological parents in this process? Certain
  medications (psychotropic) cannot be prescribed to children without the biological
  parent's permission. In some cases, the doctor will obtain consent from the biological
  parent by phone. Biological parents are encouraged to become involved in their child's
  doctor appointments. If the biological parent does not want their child to be
  immunized, that parent must participate in immunization education.

- Question: Approximately, how many children are on the caseload at one time? Ingham Health Liaison officers support eight supervisors who have four to five caseworker each—with fifteen cases per caseworker.
- Question: What is the process when children come out of foster care? When a case is fully closed, the foster care Medicaid should be closed. The process works in half months, and is initiated by the courts. If bio parents reapply for Medicaid for the child, that child will be covered during the transition.
- Questions: *In general, where do the glitches happen?* There are not enough hours in the day, at times; and nothing happens without a court order.
- Question: What are some of the bigger issues foster parents have with medical appointments? It's difficult for foster families to get appointments, especially if the child is placed in another county. Transportation to appointments can also be an issue with foster parents.
- Other Information:
  - If child has Medicaid and receives food benefits, and is cared for by unlicensed family member, those benefits will continue.
  - Family members can possibly receive cash assistance if they obtain a foster care license.
  - If child is not receiving DHHS services and is cared for by an unlicensed family member, court documentation is needed to receive DHHS services.

#### **Kids Count Data**

The Kid's Count Data was released yesterday and shared with GSC members today. Talking points were also shared (and are attached) to help with common messaging when talking with the public. On a positive note, the rate of teen births is below the state average. More information can be found regarding the Kids Count data, recommendations and trends at Michigan Leagues for Public Policy.

### **III. Outcome Groups**

Feedback from the March GSC meeting indicated it was difficult when all four Outcome groups met in the fellowship hall; thus, two outcome groups met in other locations to address this difficulty.

Outcome group work consisted of discussion the questions below. Members were encouraged to use the pink half sheet of paper to record actions they committed to take between now and the May GSC meeting. Outcome Group notes can be found on the GSC website at <a href="http://inghamgreatstart.org/gsc-birth-to-five-meeting-agendas-and-minutes/">http://inghamgreatstart.org/gsc-birth-to-five-meeting-agendas-and-minutes/</a>. Members discussed the following items in Outcome Groups:

- A. How does the Spotlight and Kids Count data align with the Outcome group's activities?
- B. Report on the actions you committed to take at the February GSC meeting.
- C. What other progress has occurred since the February GSC meeting?
- D. Record new actions you are committing to work on between now and the April GSC meeting on your half sheet (also record on flip chart paper).

## IV. Outcome Group Share-Out

Members rotated from group to group to hear progress made and next steps.

## V. General Updates/Meeting Evaluation

- 4/19/18 Stepping Up Together Steering Committee Meeting. Contact <u>Kendra Gibbs</u> if you are interested in being a part of the Steering Committee.
- 4/19/18 Capital Area Network for the Early Years is offering a brown-bag meeting, 11:30am-1:00pm, 838 Louisa Street with Hiram Fitzgerald presenting on the importance of fathers.
- 4/22/18 Greater Lansing Baby Fair will be held at the Lansing Center from 11am-4pm. A variety of demonstrations and exhibit booths will be available. Great Start Family Coalition will be in attendance, and plans to host a Parent Café.
- **4/26/18 Family Coalition Meeting,** Family Growth Center, from 6:00-8:00pm. Resources on summer opportunities for children will be the theme.
- 4/27/18 YouTHRIVE Teen Parent Summit will be held at <u>Lansing Community</u>
   <u>College West Campus</u> from 9:30am 3:00pm. Free, statewide conference for teen
   parents. Transportation is available. Register at <u>BIT.LY/YOUTHRIVE2018</u>. Contact
   <u>Kendra Gibbs</u> for more information. As of today, there are 106 teens registered to
   attend the event. Jamie Yeomans will present the Ingham Early Learning Calendars
   and literacy information at this event.
- 5/10/18 Community Mental Health Awareness Day is scheduled from 2:00-6:00pm. This free event includes activities, light refreshments, screenings, and staff to answer questions regarding services. More information will be shared via GSC website.
- The Great Start to Quality Central Resource Center is no longer subcontracting with Ingham County Health Department; thus Office for Young Children has closed. However, the important quality work through the Central Resource Center is still happening at their new location 3425 Belle Chase Way in Lansing.

The next GSC meeting is scheduled for 5/16/18 from 1:00 – 3:30 pm at Grace United Methodist Church.

Visit the Ingham GSC website at <a href="www.InghamGreatStart.org">www.InghamGreatStart.org</a> for Agendas, Minutes, Meeting Calendars, Ingham Early Childhood Action Agenda, and more.

Check out our Facebook Page at <a href="http://www.facebook.com/InghamGreatStart">http://www.facebook.com/InghamGreatStart</a>

# Ingham County Kids Count 2018 Talking Points

Looking at Ingham County's local profile, the following areas highlight challenges and trends that connect to our Great Start Collaborative work:

- Economic security indicators are headed in the right direction, but the child poverty rate is over 23% in Ingham County coming down only 4.1% from 2010 (the state's rate declined by 11.5%) and is still higher than the state's rate.
- While unemployment rates were lower in Ingham County than the state level and a higher share of young children have all parents in the workforce, the median household income is less (\$49,387 compared to \$52,436) and the cost of full-time child care is higher (\$630 compared to \$575). In fact, child care consumed over 40% of full-time minimum wage earnings.
- Plus, the rate of children living in high poverty neighborhoods where the poverty level is 30% or higher is over 30% compared to the state's 17%--neither of which are good for kids, because of the impact that living in concentrated poverty can have on development and opportunity.
- The County also seems to be struggling with a few factors related to maternal and child health with high rates of births to mothers who received less than adequate prenatal care and increasing infant mortality rates.
- On the positive side, Ingham County's best ranking (no. 17) was in the rate of births to teen mothers ages 15-19. It improved by 32.5% from 2010 to 2015 and is well below the state rate (15.7 per 1,000 compared to 21.4 per 1,000).
- The county also improved in the rate of young children ages 3 and 4 in preschool--although there is still work to be done with over 54% not in preschool.
- In education, generally as a state, we have are struggling. In Ingham County, it isn't much different with many high school students not graduating on time and not college ready. Although better than the state average, more than half of third-graders are not proficient in reading, which is an important benchmark for long-term educational outcomes.
- Across the state, the rate of confirmed victims of child abuse or neglect is rising--it went up by about 30% from 2010. In Ingham County, the rate of victims increased by over 22% and the rate stands at almost double the state rate (31.1 per 1,000 compared to 16.8 per 1,000). Additionally, Ingham County's out-of-home care placement due to abuse and neglect rose slightly--the state's rate declined--and it is higher than the state average.